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General Information

Revision Signature Page

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The above mentioned policies and procedures have been reviewed and or revised by the executive director

Signature:

Executive Director

Date

General Information

GI-1 Statement of Purpose

Purpose:

The purpose of JAFCO is as follows:

- 1) To ensure that specialized services and placements exist within the Jewish community for at risk children and families and;
- 2) To offer an entire continuum of privately supported quality services to the entire South Florida community including family preservation, emergency shelter, foster care, adoption, outpatient therapy, group home care, mentoring, independent living and developmental disabilities support services.
- 3) To demonstrate that caring for abused and neglected children and those with developmental disabilities is a community responsibility and when led by a competent child welfare agency, a partnership can be established between the public and private sector, raising the quality of services for the persons served and engaging the entire community in the protection of our most vulnerable assets, our children.

Geographic Area to be Served

JAFCO will provide services to families through South Florida, which incorporates the counties of Miami-Dade, Broward, and Palm Beach Counties. JAFCO's Northeast Program will provide services to families in the Pennsylvania area.

Location of Office

JAFCO has set up its offices a 4200 North University Drive in Sunrise, Florida 33351.

JAFCO Children's Ability Center: 5100 North Nob Hill Road in Sunrise, Florida 33351.

JAFCO Northeast Branch Office: 2345 Bryn Mawr Avenue, Suite 100 in Bryn Mawr, Pennsylvania 19010.

Methods Used to Publicize Availability of Services

JAFCO will advertise its services to the public through the use of the general media, website, public service announcements, dissemination of brochures and written descriptive materials, and presentations to professional and social service agencies.

General Information

GI-2

Service Plan

JAFCO is a licensed child placing and child caring agency that currently provides the following services to children and families in Broward, Dade and Palm Beach Counties.

The JAFCO Children's Village

The JAFCO Children's Village is a 5.6 acre campus that is home to the entire JAFCO operation including our Outpatient and Residential Program. The Mahler Family Complex is home to our social work staff, outpatient treatment program, development and business offices and emergency shelter. Six single family homes are also on the campus and part of our group home program. The Emergency Shelter is a 16 bed shelter for children ages 0-12 with 24 hour awake staff supervision. The group program has a capacity of 36 beds and accepts children ages 6 to 18. Each child has their own bedroom and bathroom for privacy and dignity and the homes are beautifully decorated. Independent living services are provided to older teens until the age of 21 if they remain in school. All college expenses and living needs are provided for the children. Recreational facilities include a basketball court, swimming pool, playground, a bicycle path and many green areas for sports and outdoor play all surrounded by lush tropical landscaping and a beautiful bronze sculpture garden.

The Village is gated and secure, surrounded by a tree lined wall on University Drive and a fence along the canal behind the homes. There is a gatehouse and an electronic gate with cameras and card entry for security. Cameras and monitors are also located throughout the campus. The gatehouse is manned whenever possible by volunteers during the day and the gate will be closed at all times offering the children a sense of safety and security. Access through the gate is controlled at night through the security system via the Emergency Shelter phone using cameras and monitors allowing children to be placed 24 hours a day, seven days a week.

The JAFCO Children's Ability Center

The JAFCO Children's Ability Center is a resource center for family education and support, respite, child enrichment and therapeutic services targeting families that are raising children with developmental disabilities. The center will offer continuous support, individual and family counseling, support groups, parent nights out, education and behavior training and respite. There will be a continuum of coordinated care that will eliminate fragmented services requiring traveling to many locations to receive treatment as well as other services for the entire family. Programs offered will ensure that all children with developmental disabilities can experience the same social and recreational opportunities as their typically developing peers.

Contact information for program/service director:

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Sunrise, Florida 33351
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Cell 954.801.8880

Sarah Franco, Executive Director
4200 N. University Drive
Sunrise, Florida 33351
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sarah@jafco.org
Cell 954.562.0837

General Information

GI-2

Service Plan (continued)

Service Locations:

JAFCO programs are located at:

JAFCO Children's Village

4200 N. University Drive

Sunrise, Florida 33351

(954) 749-7230

JAFCO Children's Ability Center

5100 Nob Hill Road

Sunrise, Florida 33351

JAFCO Northeast Branch Office

2345 Bryn Mawr Avenue, Suite: 100

Bryn Mawr, Pennsylvania 19010

Office hours for administrative offices: Monday-Friday: 8:30 a.m. to 5 p.m.

Group Homes and Shelter are staffed 24 hours per day, 7 days per week.

General Information

GI-3

Strategic Plan

Original Date: 09/01/06
Revision Date: 7/28/2014
Policy Number: GB-3
Department of Origin: Governing Board

Mission:

To care for abused and neglected children and those with developmental disabilities in the Jewish community and to work in partnership with families and the entire community. We believe that the care of children in our community is our responsibility, one we accept with joy, pride and love. ...giving every child a place to belong.

Vision:

- To provide a continuum of high quality child welfare programs including family preservation, foster care, adoption, emergency shelter, group home, independent living, and mentoring to at-risk children and families and to provide family enrichment, support and respite services to families raising children with developmental disabilities.
- JAFCO's long term vision is to create a community funded innovative model that can be replicated by other communities around the country.
- While JAFCO was created to fill an unmet child welfare need in the Jewish community, as a Jewish community, it is our privilege to serve any child or family in need, irrespective of race, religion or ethnicity.

Philosophy and Values:

- We believe that the care of children from our Jewish community is a Jewish community responsibility.
- We believe that communities will respond to the responsibility of identifying and caring for abused and neglected children and those with disabilities when individuals are appropriately educated as to the presence of local children needing their protection and families needing their support, and when an organizational framework is established that provides concerned people with opportunities to participate in meeting the needs of such children and in accordance with national best practices.
- We believe children served by JAFCO should be treated no differently than the way nurturing Jewish parents would act toward their biological children- offering them the best life has to offer in all aspects of their social, emotional, physical, educational, cultural and spiritual development.
- We believe every effort should be made to maintain a child safely within their family and out of home placement should be avoided if at all possible.
- We believe that nothing is more tragic than a family torn apart and that when removal of a child from his family is unavoidable, providing that child with a familiar cultural and religious environment will help maintain and strengthen that child's identity as they heal from the trauma of abuse and neglect.
- We believe caring for children should not be viewed as charity, but should be viewed as a parent caring for a child -- with joy, pride, love and support.

Scope:

- JAFCO offers a comprehensive continuum of services to children and their families in the South Florida Jewish community. Services include Family Preservation, Foster Care, Adoption and Mentoring Services. The JAFCO Jewish Children's Village provides Emergency Shelter, Group Home and Independent Living Services in a residential setting. JAFCO serves over 800 children per year, ages birth through 21. In addition to filling the needs of the Jewish community, JAFCO is honored to care for all children regardless of religion, culture or race. Children can be referred to all of JAFCO's programs through the state child welfare system or privately by family members themselves.
- The JAFCO Children's Ability Center opened in 2014 and offers family enrichment, resources, therapeutic support and respite care to families raising a child with a developmental disability. Services are offered to children birth through 22 in South Florida. Families from around the country are also welcome to use our respite services.
- As part of the vision to disseminate the JAFCO model to other Jewish communities around the country, an expansion effort was established in 2007 to begin to organize the Jewish community in the Northeast and to raise funds and awareness about JAFCO; in 2014, a JAFCO office was opened in Philadelphia to bring the JAFCO model of Family Preservation, Foster Care and Adoption services to families in the Northeast Jewish communities.

General Information

GB-3

Strategic Plan (continued)

History:

- In 1992, JAFCO was established at the request of the Broward Board of Rabbis and licensed the following year by the Florida Department of Children and Families after it was determined that Jewish children in the custody of the State's child welfare system were being placed into non-Jewish foster homes, resulting in the traumatic loss of not only of their families, but of their community, their culture and their Jewish identity.
- To provide private funding for needed services, JAFCO created a network of over a dozen volunteer driven "chapters" in various communities around South Florida with the goal of raising awareness and funds for the agency.
- Initial JAFCO programs included foster care, adoption, family preservation and mentoring.
- During its first ten years, JAFCO received referrals on over 1,000 children including 200 children who needed placement and services that were not then available through JAFCO. Upon further analysis, it was determined that these underserved children fell into three main categories: (1) children in need of emergency shelter often in the middle of the night, (2) adolescents and children who are more difficult to place in foster homes due to their behaviors, and (3) sibling groups of three, four or more children for whom we could not find a suitable foster or adoptive home in which they could remain together. To meet the need of these underserved children, the JAFCO Board created the vision of a residential Jewish Children's Village.
- In 1998, with the support of the local legislative delegation, JAFCO received a \$1 million government seed grant from the State of Florida Department of Children and Families to begin planning and construction of the Children's Village
- JAFCO successfully completed the \$6 million capital campaign for the construction of Jewish Children's Village.
- JAFCO has built a solid and unique reputation for providing quality services, for our ability to raise private funds, seek partial government support for these services where available and for our ability to leverage a wealth of in-kind goods and services as well as the support of thousands of volunteers and donors to meet the needs of our children.
- In 2002, JAFCO successfully requested its first funding from a quasi-governmental source receiving a \$350,000 annual contract from the Children's Services Council of Broward County after responding to a county-wide RFP to provide in home therapeutic services to families with the empirically based MST (Multi-Systemic Therapy) Model. The program intensive in-home program retrains parents on how to manage and monitor challenging teen behaviors to prevent out of home placement and has grown to a \$500,000 annual contract, has received national awards and continues to this date.
- In 2003, JAFCO opened the JAFCO Jewish Children's Village, a 5.6-acre campus which added six group homes and an emergency shelter to the services already provided. The JAFCO Children's Village is the only facility of its kind in the Jewish community in the nation.
- In 2004, JAFCO received a grant from the Department of Elder Affairs to create a Senior Caregiver Program offering case management, in home support services, support groups, and funding for community based respite care (daycare, after school care, spring and winter break camp and summer camp).
- In 2004, JAFCO was approved as a Medicaid Provider by the State of Florida.
- While JAFCO has been successful in obtaining some government funding for our services, 80% of our funding continues to come from private donations and fundraising efforts within the Jewish community allowing us to maintain our core philosophies and values.
- In 2006, given the alarming increase in the numbers of children diagnosed with developmental disabilities and the tremendous stress this places upon these families in our community, the JAFCO Board of Trustees decided to expand our mission to include children with developmental disabilities and their families by approving the creation of a respite and resource center to provide family enrichment, resources, therapeutic support and extended respite care all within one beautiful, world-class innovative center.
- In 2006, with the support of the local legislative delegation and the donor community JAFCO received a \$975,000 seed grant for the construction of the Children's Ability Center from the State of Florida Agency for Children with Disabilities. The land for the Center was donated by two agencies within the Jewish community (Jewish Federation of Broward County and the Daniel D. Cantor Senior Center).
- In 2007, JAFCO began raising funds and awareness about the issue of child abuse within the Northeast Jewish community in Philadelphia, NJ and Long Island with one Development staff member working out of a home-based office with the assistance of three volunteer chapters in PA, NJ and NY.
- In 2008, JAFCO was accredited by CARF (the Council of Residential Facilities), an international accrediting body. JAFCO has maintained that accreditation status without interruption since that time.
- In 2014, JAFCO opened its first office in Philadelphia and hired our first clinical social worker.
- In 2014 JAFCO completed Phase 1 of construction of the Children's Ability Center having reached \$10.5 million in our initial capital campaign efforts. A remaining capital and endowment campaign of \$19.5 million is ongoing.

General Information

GB-3

Strategic Plan (continued)

The JAFCO Model:

The success of the JAFCO Model is attributable to the combination of four factors:

1. an improved sense of security, belonging, continuity and permanency that comes when children and families feel they are being served by an extended family in their own community;
2. the presence of an experienced professional organization that is capable of providing the highest quality care for abused, neglected and abandoned children and those with disabilities;
3. an educated and caring community that takes ownership of the problem and provides a solution that includes financial and volunteer support;
4. a public-private partnership which integrates and combines diversified governmental and community support and funding.

The ability of a community to act as an extended family to help children in need is crucial to the success of the JAFCO mission – it is what makes us unique and it is the first component of the JAFCO model. Caring for children whose lives include abuse, neglect, abandonment or a developmental disability is a community responsibility. In JAFCO's case we represent the Jewish community, but this model can be applied to any community. JAFCO feels that the most effective method for assisting children and families in need should be at the community "grass roots" level. Communities that serve their populations have a critical advantage in that they can act as "extended families" to the children being served. The feeling of being part of an extended family is vitally important to the health and well-being of the children and families being served. When JAFCO is viewed as an extended family it provides children with a sense of security, belonging, continuity and permanence that augments the family structure. This is particularly true for children who are in need of foster care and adoptive placements and for children whose disabilities will continue beyond the lifespan of their parents. Working together as an extended family is a core value found in all JAFCO programs. This value is held by those who provide resources and support and is passed along to those who receive services through JAFCO.

The second step of the JAFCO Model is to provide empowerment and leadership to the community with the presence of a professional organization that is experienced and capable of providing assistance to these "at risk" children and their families at the highest professional level. The creation of a passionate, influential and generous Board of Trustees to provide governance, fiduciary oversight and funding to work in partnership with dedicated and talented clinical and development professional staff leadership are the key elements of this next step.

In the third step of the JAFCO model the community is then educated (by the board and staff) as to the presence of children who have critical needs. Initially, most people in the Jewish community believe abused, neglected and homeless children exist only in other segments of the general population. When people in the Jewish community are educated that such problems are currently present in their own communities, they almost immediately take ownership of this problem by viewing such children as "their children" and "their responsibility" to reach out and assist. The community is initially organized with the use of community town hall meetings, synagogue presentations and private parlor meetings. As a result of these efforts, referrals for services are made from community members who begin to take on the role of watching out for the safety of children in their community. Community volunteer groups or "chapters" are created by professional staff, with the goal of raising awareness about the JAFCO mission and 100% of the funding needed.

The final step is for JAFCO to create a private-public partnership which includes state licensing and certification and the formation of relationships with the judiciary, other social services agencies and professionals and key political leaders who care deeply about the needs of children. Limited government funding is combined with extensive community charitable giving and the use of professional and lay volunteers to provide a level of support that far exceeds what other social service programs can provide. Diversification of private funding sources is key and includes special events, private donations, exclusive giving circles, special purpose funds, foundation grants, endowments and planned giving.

General Information

GB-3

Strategic Plan (continued)

Goals and Objectives

GOAL 1: To create an organizational structure and succession plan that incorporates the new Children's Ability Center, the JAFCO Children's Village and the Northeast Communities

- Conduct analysis of agency staffing needs and overall organizational structure for South Florida and expansion efforts (by 12-15)
- Identify needed positions and budgetary requirements (by 12-15)
- Review current staffing pattern to identify duplication and unneeded positions and update job descriptions for all existing staff (by 12-14)
- Present updated organizational chart for approval to Board of Trustees (by 1-15)
- Create succession plan for all mid management and executive leadership positions (by 12-15)
- Identify and recruit needed staff for succession planning objectives (12-15)
- Begin training process of identified staff (1-16)

GOAL 2: To enhance governance structure to support current growth and future development

- Create Board(s) to support NE efforts in PA, NJ and NY (by 6-15)
- Update bi-laws to maximize cohesive relationships amongst all boards with adherence to the JAFCO mission (by 12-15)
- Create an annual meeting of all JAFCO Boards (by 12-15)

GOAL 3: To fully operationalize the JAFCO Children's Ability Center (by 12-16)

- Provide a full continuum of quality supportive services to families who are raising children with developmental disabilities as funding permits including but not limited to:
 - Family assessment and planning
 - Intensive case management and referral
 - Support groups for mothers and fathers
 - ABA assessments and in home ABA therapy
 - Informal parent support opportunities in Parent Café
 - Take out dinners in Parent Café
 - Yoga, massage and wellness activities in Parent Café
 - Support Groups for extended family members
 - Educational seminars for parents on life planning topics
 - Monthly Parents' Night Out activities
 - Half or full day respite care program
 - Overnight and weekend respite care program
 - Scheduled extended respite care for up to two weeks per year per child
 - Emergency respite care for family emergencies
 - Behavior training for parents
 - Education and behavior training workshops for parents and extended family
 - Social Skills training for children and teens
 - Life Skills training for teens
 - Sibshops groups for typical siblings
 - Creation of an OT, PT, Speech therapy clinic
 - Specialized after-school Clubs for socialization, fun and friendship
 - Family weekends in Respite Home
 - Temporary shelter placement for a child with developmental disability who has experienced abuse or neglect
 - Community workshops and trainings related to developmental disabilities
 - Parent to Parent mentoring program

GOAL 4: Operate and improve an entire continuum of care for abused, neglected and at-risk children in South Florida and the Northeast

- Children's Village objectives (South Florida):
 - Maintain and strengthen existing programs, referral sources, quality and outcomes based upon CARF and licensing standards
 - Complete CARF re-accreditation in September of 2014

General Information

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Strategic Plan (continued)

- Maintain licensure and contracts and achieve outcomes with lead agency in Broward; maintain and strengthen relationships in Dade and Palm Beach Counties
- Maintain quality of physical appearance of JAFCO Village
- Maintain private funding to allow continued acceptance of community children in shelter and group homes without state stipends
- Expand enrichment programs for swimming, fine arts and music, computers, sports and other extracurricular activities
- Strengthen educational support to ensure every child has the skills and opportunity to attend college or vocational school
- Maintain/strengthen Jewish heritage program for group home children (Hebrew School, Jewish Holidays, Bar/Bat Mitzvah Program, March of the Living, Birthright)
- Create JAFCO Alumni Circle to involve successful graduates of JAFCO programs who can mentor other JAFCO youth.
- Recruit mentor for every child at the Children's Village who are ready to participate in program
- Ensure all children over the age of 13 are actively involved in independent living skills training
- Provide a life coach for all children beginning in their senior year of high school and continuing through college
- Foster Care and Adoption Program objectives:
 - Maintain licensed foster care capacity at a minimum of 10 foster care beds
 - Enhance recruitment efforts of foster/adoptive families focusing on Hebrew Day Schools and Synagogues.
 - Assist infertile couples in successful and timely infant adoption while providing care and support to birth mothers who make the decision to voluntarily place their newborn for adoption
 - Maintain and strengthen support group for adoptive parents
 - Provide ongoing support and clinical services (case management, therapy, psychiatric care and 24 hour on call emergency support) to JAFCO adoptive families
 - Create adoption support groups for adopted children
 - Offer specialized support and training for parents of older adopted children who are exhibiting externalizing behaviors and mental health symptoms.
- Family Preservation objectives:
 - Ensure that family preservation and family strengthening is our first goal in each and every JAFCO case
 - Maintain an ability to provide these services at no charge to the family and continue to seek additional funding sources through appropriate RFP responses to government sources and to available grants from private foundations

GOAL 5: To build a self-sustaining fully endowed organization with a comprehensive development plan

- Annual Fund Objectives: Broaden annual funding sources to provide income for all programs, build an endowment of \$50m to ensure ongoing funding in perpetuity with the following Annual Fund Development Strategy components/strategies:
 - Private Contributions
 - Tributes and Brick Program
 - Special Events which include fundraising ask and pledge cards
 - Social media, website, on-line giving
 - Donor management in updated donor database
 - Chapter Events and Chapter Membership
 - Direct Mail Program (Hanukkah, Summer Camp, Membership as well as specific designated email requests and on-line giving)
 - Government Contracts and Funding, Legislative initiatives
 - Grant writing, maintenance and research
 - Identification of family foundations
 - Fees for service, Medicaid and 3rd party insurance billing
 - Donor Stewardship, Recognition and Appreciation
 - Parlor Meetings
 - Godparent Circle, Godparent Recommitment
 - Village Tours
 - JAFCO Videos

General Information

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Strategic Plan (continued)

- Endowment Fund Objectives: To have an endowment fund containing \$50m that will support and eventually sustain the needs of JAFCO for generations to come. Funding strategies include:
 - Continue donor stewardship, recognition and appreciation
 - Recognize Legacy Circle in annual report, on website, on wall in Development Wing and at annual donor thank you reception
 - Recognize Founders Circle in annual report, on website, on wall in Development Wing, Gala Lifetime Achievement Award and annual donor thank you reception
 - Complete Capital Campaign for Children's Ability Center to include a \$16 million endowment (by 2020)
 - Major Gifts, Donor Advised Special Purpose Funds, and Other Named Gifts
 - JAFCO Gift Annuity Program
 - Develop Planned Giving Council to introduce legacy donor to the agency and create annual donor seminars
 - Create Major Gifts and Endowment Guide to list all possible major giving opportunities (by 12-15)
 - Create monthly Board member and donor sponsored Parlor Meetings
 - Maximize use of Investment Income
- Marketing and Communications Objectives: Ensure that the entire Jewish community is aware of the services offered by JAFCO and the JAFCO Model
 - Marketing/P.R. – P.R. company hired by JAFCO to ensure that press releases are sent out for all newsworthy events, stories and accomplishments
 - Special events-friend-raising and fundraising events of all price points in all three counties to introduce and keep people connected to the mission of JAFCO
 - Communications – Branded professional materials will be used to ensure that the mission and activities of JAFCO are frequently communicated to existing and new donors via newsletter (print copy and email), invitations to events, social media, and brochures and other printed information, presentation boards, video productions, website, emails and direct mail.
 - Community relations with temples and other organizations-communication through newsletters, speaking engagements, tours, community recognition events and community service opportunities. Bi-annual letters and phone contact with pre-schools and religious schools for group collections and mitzvah projects, tzedakah donations and bar and bat mitzvah projects.
 - Branding – Inclusion of all three JAFCO "branches" in the new JAFCO Brand. Create new and coordinated materials including brochures, stationary, business cards, and website.
- Board Development Objectives:
 - Recruit passionate board members who are committed to the JAFCO mission and who represent the various geographic areas that JAFCO is serving and plans to serve
 - Ensure that board members are committed to doing board work – namely ensuring that the agency has adequate funding to complete its mission
 - Assure that board members are aware and successful in their fiduciary roles and responsibilities according to governance best practices
 - Request that Board Members are committed to supporting the mission of JAFCO with annual meaningful gift, capital campaign gift and event sponsorship
- Volunteer Program Objectives:
 - To attract and maintain a dedicated group of hands-on volunteers who will provide the following donated support for agency programs and fundraising:
 - Chapter Presidents, chapter board, event chairs and event committee members
 - Organizers, Tutors, Cooks
 - Shelter and Group Home Volunteers
 - Administrative/Clerical Help
 - Forever Friends Mentoring Program
 - Ability Center Volunteers
 - Professional Volunteers (lawyers, doctors, teachers, etc.)

General Information

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Strategic Plan (continued)

GOAL 6: To update and implement Northeast Business Plan (by 12-15)

- Create committed and dedicated Board of Trustees
- Create detailed strategic business plan for provision of services in the Northeast, specifically at what level of funding each clinical service would begin and additional offices would open
- Determine identification of NE donations and donors
- Create stand-alone budget for the NE office

GOAL 7: Maintain strong community and political ties

- Maintain strong connections and work in partnership with state office and other local providers to continue to provide care and support to children and families in need
- Meet and advocate with public officials and legislative representatives to obtain support for child protection and children's mental health programs
- Continue to educate local legislators about the JAFCO model and the needs within the child welfare community
- Recognize local politicians / judges in the community for their leadership and child advocacy
- Serve on state-wide or national workgroups where possible to build connections and help solve community issues
- Consider hiring a lobbyist to investigate federal and state funding opportunities while maintaining the JAFCO mission.

General Information

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Program Description

Outpatient Program

Program Philosophy:

It is the philosophy of the JAFCO Outpatient Program to assist persons with developing and maintaining coping skills that facilitate adjustment and integration within their living environments and community. Persons served and family members/guardians when applicable are empowered to make decisions about their care with the expected outcome of an increased quality of life.

Program Description:

The JAFCO Outpatient Program is provided in a therapeutic clinical setting. A wide range of services are organized within a comprehensive therapeutic environment that includes screening and assessment, diagnostic determination, individual and family counseling, psychiatric consultations, medication management, crisis intervention, group counseling, educational programming, person served advocacy, and referral to community resources. Persons served are assigned to clinicians that are supervised by a licensed practitioner(s) of the healing arts who as well participate in individual planning and care.

Program Goals:

The overall goal of JAFCO Outpatient Program is to increase the quality of life through the provision of specialized outpatient mental health services. Specific areas of focus may include:

- **Recovery:** Stress is placed in the concept of recovery by assisting the persons served develop a new meaning and purpose in life. Our goal is for them to live a satisfying, hopeful, and contributing life.
- **Vocation/Education:** Develop a role that gives the persons served a feeling of being worthwhile and have a valuable contribution to make to society.
- **Parenting:** Stress appropriate parenting skills such as care, love, and guidance.
- **Relationships:** Develop a support system where persons served can share with each other and gain peer and community support.
- **Housing:** Provide a safe and healthy environment to the persons served.
- **Spirituality:** Assist persons served develop or strengthen this area of support which is a strong force within the concept of recovery.
- **Coping Skills:** Develop appropriate coping mechanism to address areas of concern.
- **Anger Management:** Provide an understanding of anger, reasons for being angry and appropriate ways to manage it.
- **Grief and Loss:** Provide a safe environment where the persons served can deal with traumatic events in their lives.

Program Objectives:

JAFCO's Outpatient Program seeks to achieve the following specific objectives:

- To improve mood and affect in daily living.
- To provide a safe and nurturing environment.
- To improve social, familial, and social adjustment and integration.
- To reduce the need for a higher level of care.
- To decrease/eliminate feelings of depression
- To decrease/eliminate feelings of anxiety
- To develop or increase knowledge of coping skills in order to deescalate and better manage anger.

Program Services/Continuum of Care:

JAFCO's Outpatient Programs provide a continuum of care that ensures all persons served and family members referred are evaluated and provided services and/or referred to primary and secondary service providers to meet their individual needs. The specific areas that demonstrate a continuum of care are as follows:

- **Screening and Intake Assessment:** A screening and intake process is completed within 14 days of the initial visit. The strengths, needs, abilities, and preferences of each person served are identified explicitly for integration within an individual plan of care.

General Information

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Program Description (continued)

- **Comprehensive Individual Planning:** An individual plan is developed with each person served within the first 30 days of treatment. The person served is a full participant in the process and goals and objectives are based on the individual needs, strengths, abilities and preferences. Problem statements are stated in the person's served own language, which is used to develop treatment goals. The person served has open access to the individual plan upon request.
- **Individual, Group, and Family Therapy:** Each person served is assigned a therapist who is responsible for the coordination of care. Individualized, group, and/or family therapy sessions take place to assist the person served in both individual treatment plan goals and objectives.
- **Medication Management:** Medication management is available to assist with an increase in life functioning. Through the services of qualified physicians, medications are prescribed and their efficacy is evaluated on an ongoing basis. Education is provided to persons served and their guardians regarding the effects, use, and expected outcomes of medication.
- **Psychosocial Education:** Psychosocial education is available to persons served, families, care providers in both individual and group formats and provided to assist with interpersonal relations, role performance, anger management, and communication skills.
- **Progress Reviews and Individual Plan Reformulation:** Regular scheduled meetings are held with each person served to review the progress of their individual goals and update and/or revise the Individual Plan. Staff is additionally available to participate in meetings with the person served and other care providers such as child advocates, guardians ad litem, and physicians.
- **Discharge Planning and Criteria:** Discharge planning occurs throughout all phases of the program. The person served has met discharge criteria when the goals of the individual plan are achieved and referral to support services is completed, when appropriate.

Mechanisms to Address the Needs of Special Populations:

JAFCO's Outpatient Treatment Program may address the special needs of the person served through the development and ongoing monitoring and modification of the individual plan. Through this process, the strengths, abilities, needs, preferences and desired outcomes will be developed based on the unique qualities of the persons served. Specific accommodations to address special needs may include the following amplification devices and writing boards for use with the deaf and hard of hearing, magnification sheets for the visually impaired, and language interpretation for non-English speaking persons.

Support of Adequate Resources to Deliver Programming:

JAFCO's Outpatient Program is supported through multiple processes that ensure adequate resources are available to provide programming consistent with the established goals. The processes are as follows:

- **Annual Budget Process:** In January of each year, the JAFCO Board of Trustees will approve an annual budget of planned revenues and expenditures necessary to provide the services described in its statement of purpose. This budget is prepared by qualified staff based upon budget to actual reports of the previous year, cash flow reports, inflation and cost of living trends and other economic indicators. Prior to seeking approval from the board of trustees, the JAFCO Annual Budget is carefully reviewed and revised with staff assistance by the Finance Committee of the Board.
- **Performance Improvement/Outcome Management:** The outcome management system is utilized by management team and Director of Operations and Clinical Services to review and assess the level in which program goals and objectives are being met. Areas that are not meeting program goals and objectives are reviewed to determine if adjustments in areas such as personnel, facilities, transportation, and other resources are needed to support the program goals. The Director of Operations and Clinical Services utilizes this information to make resource allocation decisions for program support.
- **Strategic Planning:** JAFCO's participates in an ongoing strategic planning process through developing and monitoring its short and long-range strategic plan goals and objectives. Strategies to support the goals of the Outpatient program are included in the plan.
- **Political Advocacy:** Staff participates in local, state, and national advocacy groups throughout service areas. The Executive Director actively involved in relationship development at both the legislative and state level with key players that determine the future of mental health services in the state.

General Information

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Program Description (continued)

Foster Care Program

Program Description:

Children age newborn to 18 years enter the JAFCO foster care program due to abuse, neglect or abandonment by their birth parents or care takers. They are referred to JAFCO through the state foster care system, the courts, or privately by birth parents, grandparents, family members or professionals involved with the child. Children are matched with an appropriate foster family and placed in the family's home. JAFCO closely monitors the child's progress in the home and offers complete support services to the child, foster parents and birth parents.

The primary goal of foster care is to reunite the child with their birth parents. While the child is in foster care, all family members, including birth parents, receive support services from JAFCO as they work towards family reunification. If the court or the birth parent decides that reunification is not appropriate or possible, JAFCO will work towards alternate permanent solutions, such as relative placement, adoption or independent living (in the case of an older child).

Target Population:

Children ages 0 to 17, male or female, referred either by DCF or the lead agency in Broward, Dade or Palm Beach County or privately by the parent themselves due to abuse, neglect abandonment or risk thereof.

Primary Referral Sources:

Children may be referred by the Department of Children and Families or its lead agency or privately by relatives and members of the community.

Geographic Area Served:

The JAFCO foster care program serves children residing in Broward, Palm Beach and Dade counties. JAFCO has licensed family foster homes in all three counties.

Foster Care Licensing Requirements:

Families in the community who wish to become a licensed foster parent must meet the following requirements:

Completion of MAPP training, offered by JAFCO at no cost

Demonstrate an understanding of foster care issues as well as an ability to provide a safe, loving and stable environment

Two family consultations, including one in the prospective parent's home

Adequate space for the child

CPR and Water Safety training

Criminal background clearances and satisfactory personal, employer and neighbor references

Home sanitation inspection conducted by the County Health Department.

Physical and psychological examination

Stable marital and family relationships. Single parents are welcome

Adequate income

Licensed foster parents receive a monthly board payment from the state to reimburse them for the basic cost of caring for each child placed in their home. The children are provided Medicaid health insurance through the state.

Services Provided:

Complete case management services including legal recommendations

Services to birth family to facilitate reunification or continued contact

Permanency planning

24-hour on-call support to the foster parents

Supervised visitation

Therapy services

Discharge planning

Post discharge follow-up and case management

In-service training for foster parents

General Information

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Program Description (continued)

Adoption Services

Program Description:

JAFCO is committed to providing adoptive homes for children who are in need of a permanent family. The members of the adoption team are the birth parents and their extended family, adoptive parents, JAFCO Social Worker, attorney, the child's therapist and other helping professionals. The team works together to ensure that the best interests of the child are met.

Birth parents needing to place their child for adoption are offered the following services free of charge:

Pre and post-adoption counseling and social work support.

Legal representation.

The opportunity to participate in the adoption planning process, including selecting and meeting the adoptive family.

Assistance with medical and living expenses during pregnancy.

Requirements for Adoptive Families:

Adoptive families are willing to make a lifetime, legal commitment to a child, age 0 to 18. Married couples or single individuals interested in adoption must first obtain an adoption home study. This document indicates that the family meets all necessary criteria for adoption according to agency policy and Florida law. Home study fees for private adoptions are based on income and are calculated on a sliding scale (\$600-\$1,200). In order to be approved for a home study through JAFCO, prospective adoptive parents must first:

Complete the MAPP training program, offered by JAFCO at no cost.

Obtain satisfactory local, state and federal criminal background investigations and reference checks, including fingerprinting.

Complete an autobiographical profile.

Undergo a physical and psychological examination.

Demonstrate an understanding of adoption issues as well as an ability to provide a safe, loving and stable environment.

Have adequate income.

Have stable marital and family relationships. Single parents are welcome.

Adoption Services:

After completion of a positive home study, JAFCO will match the adoptive family with an appropriate child in need of a permanent family. JAFCO participates in both state and private adoption work. State adoption implies that the child is in the custody of the State of Florida and, therefore, adoption expenses are covered by the state allowing families to adopt, usually older children, at no cost.

Private adoption implies that the birth parents are making the decision to place their infant for adoption. Private infant adoption fees are based upon a sliding scale and range from \$6,000 to \$12,000 plus living and medical expenses for the birth mother.

JAFCO provides complete post-adoptive services including post-placement supervision, case management, ongoing support and training to the adoptive family and therapeutic/psychiatric services as needed.

Home Study Fees:

The fees for home studies are as follows:

Initial home study-\$1200

To update the study prior to expiration- \$250

After expiration \$500

To update a home study initially competed by another agency-\$950

General Information

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Program Description (continued)

Family Preservation Program

General Program Description:

JAFCO is committed to keeping families together whenever possible. The JAFCO Family Preservation Program assists at-risk families where at least one parent, grandparent or other relative can provide a safe home for the child. Family Preservation services may be ordered by the court or may be accessed by the family on a voluntary basis. All services are provided free or charge to the family. The goal of this program is to strengthen and empower the family and to prevent out-of-home placement for a child whenever possible.

When out-of-home placement is ultimately necessary for the safety of the child, JAFCO will identify an appropriate placement for the child with a relative, in our emergency shelter, foster home, group home or a residential treatment center.

Target Population/Geographic area Served:

This program serves at-risk families with children ages 0-17 residing in Broward, Palm Beach and Dade Counties. JAFCO's Northeast Program will provide services to families in the Pennsylvania area.

Primary Referral Sources:

Referrals are accepted from service providers, schools, courts, the community or the family itself.

Services Provided:

All families in this program shall receive 24-hour on-call crisis support as well as complete case management including regular home visits. Families shall receive assistance with or referrals to/for the following areas: shelter, food, clothing, parenting skills, anger management, child care, after-school care, summer camp, employment/vocational training, religious school, legal issues, youth group/recreational activities, individual and family therapy, educational planning/tutoring and mentoring.

Multi-Systemic Therapy Program

Program Description:

The JAFCO Multi Systemic Therapy (MST) program is an intensive, short term in-home program helping families with adolescents and teens who are demonstrating serious difficulties at home, in school and in the community. The goal of this program is to prevent removal of the child from the home and to empower the family in effort to maintain the family unit. This program is generously funded by a grant from the Broward County Children's Services Council.

Target Population/Geographic area Served:

The MST program shall serve children, ages 11 to 18, residing in Broward County. These adolescents may exhibit physical and/or verbal aggression in the home, substance use, school difficulties, negative interpersonal relationships or psychiatric symptoms.

Referral Sources:

Referrals can be made by other service providers, schools, courts, community members or the family.

Services Provided:

Following an in-home assessment, the MST therapist shall develop a plan with the family that builds upon existing strengths and meets the needs of the family. Families in this program receive intensive, short-term therapy as well as 24-hour on-call support. The following services may also be provided: Family Therapy, Marital therapy, Anger Management, School Involvement, Parenting Skills, Social Skills, and Educational/Vocational Planning.

General Information

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Program Description (continued)

Forever Friends Program

Program Description:

The JAFCO Forever Friends Program is a mentoring program that matches children who have suffered the temporary or permanent loss of one or both parents with a healthy positive role model who will serve both as a friend or mentor. The children in need may be living in a foster home, group home, or a single parent family. All mentors are volunteers and are carefully selected and screened and are asked to make a minimum commitment of monthly visits for a year. The goal of such a relationship is to enhance the self-esteem of the child.

Target Population/Geographic Area Served:

This program shall serve children ages 3 to 18 who live in Broward, Palm Beach and Dade Counties.

Senior Caregiver Program

Program Description:

The JAFCO Senior Caregiver Program shall provide support to seniors who are raising their grandchildren.

Target Population:

This program shall serve seniors over the age of 60 years who are raising their grandchildren, ages 0 to 18. The program shall serve Broward County Residents only.

Services:

The program shall provide assistance with daycare, summer camp, custody issues, birth parent visitation and parenting issues. The JAFCO Senior Caregiver Program support group shall meet bi-weekly to offer training and support to this special group of seniors. JAFCO, Area wide Council on Aging of Broward County Inc., and the state of Florida Department of Elder Affairs shall sponsor this program.

Independent Living Program

Program Description:

The JAFCO Independent Living program services children residing in the JAFCO Group Home Program and in JAFCO foster or adoptive homes, ages 13 to 21. The goal of this program is to assist person served with the development of important skills to prepare them for the transition from foster care to independent living. Each child develops an individualized plan with his or her therapist to address their specific needs and to provide support during the process of becoming self-sufficient in the community. JAFCO also provides financial assistance for college, housing, and automobiles when appropriate and available.

Services Provided:

Children in the care of Child Net will attend the Independent Living Classes provided by Child Net. In addition, JAFCO provides therapeutic services as well classes and assistance to Independent Living person served. Person served practice the skills with their therapist in order to master them prior to living independently. Topics of learning include but are not limited to the following:

- Budgeting/Money Management
- Housekeeping Skills (cooking, cleaning etc.)
- Peer Relationships
- Public Transportation
- Crisis Management
- Hurricane Preparedness
- College/Job Applications
- Housing

General Information

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Program Description (continued)

JAFCO Residential Program

Program Description:

JAFCO's Residential Treatment Program consists of the JAFCO Group Home Program and the JAFCO Children's Emergency Shelter. Both are located at the JAFCO Children's Village, a 5.6 acre site with 7 buildings. JAFCO's Residential Treatment Program serves children from Broward, Dade and Palm Beach Counties. The JAFCO Group Home consists of 6 group homes, each with a capacity of 6 children. This program provides a loving, structured and supportive environment for children ages 6 to 18, who are in need of placement due to abuse, neglect, abandonment, or due to their parents' inability to safely care for them due to their own mental or physical illness. These are children for whom a foster or adoptive home is not available or may not be appropriate; including teen-aged children, sibling groups and children with significant emotional and behavioral problems. Each group home is staffed by live-in house parents or assistants as needed. JAFCO provides all needed medical, educational, recreational and therapeutic services to the children who reside in the group home program.

The JAFCO Emergency Shelter is a 16-bed facility for children ages 0-12 who have been removed from their families due to abuse, neglect or abandonment. Children may be placed by the state due to verified abuse or privately/voluntarily by the family due to high-risk circumstances, such as substance abuse, domestic violence, homelessness or mental illness. The Shelter is operational 24 hours a day, 7 days a week with awake staff to receive a child at any hour of the day or night. A child can remain in the shelter until such time that he/she is reunified with his birth parents or is placed in a foster or adoptive or group home.

The Village is surrounded by a wall on University Drive and a fence along the canal behind the homes. There is a gatehouse and an electronic gate with cameras and card entry for security. Cameras are also located outside the front door of the Crisis Center. The gatehouse may be manned wherever possible by volunteers during the day and the gate will be closed at night. The gate is controlled at night through the Crisis Center. Recreational facilities include a basketball court, swimming pool, playground, a bicycle path and many green areas for sports and outdoor play.

Program Philosophy:

JAFCO feels that quality child welfare services can best be provided by the support of a caring community. We believe that the provision of quality child welfare services is a community responsibility. When a child is removed from his family, he leaves behind what he has known and takes with him his fears, anger, hurt and insecurities. JAFCO believes that we can provide one less obstacle in the healing process by providing a child with a familiar cultural and religious environment. Every child deserves a safe and loving home.

Children served by JAFCO should be treated no differently than the way parents would act toward their biological children. JAFCO is prepared to act in the best interests of children served and to assume the role as substitute parents. JAFCO will provide love and assistance to children in need for as long as necessary, which for some will be a life-long commitment.

Program Goals

The overall goal of the JAFCO Residential Treatment Program is to keep all of the children served free from abuse and neglect throughout their stay while providing for all of their basic, recreational, medical, educational, therapeutic and spiritual needs.

Program Objectives

- 100% of the children placed will be free from incidents of abuse or neglect while residing in the Residential Program.
- 95% of children in the program will receive an intake physical within 24 hours of admission and regular medical and dental care throughout their placement.
- 95% of children will be enrolled in school within 24 hours of placement and will attend school regularly throughout their placement.
- 85% of children will demonstrate improved behavioral functioning as measured by scores on rating tools and behavioral observation.
- 85% of children aged 13 and older will make progress on the Independent Living Goals identified in their treatment plan as evidenced by pre and post-test scores on life skills measures.

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Program Description (continued)

Services Provided

The program provides treatment at least 4 hours a day, seven days a week, including but not limited to:

1. Therapeutic activities, including individual, group and family counseling;
 - Educational activities;
 - Training services;
 - Crisis intervention
 - Development of independent living skills;
 - Family support;
 - Linkage to community resources;
 - Advocacy
 - Education on wellness and recovery
 - Development of a social support network
 - Development of vocational skills
 - Education/training in selection and maintenance of housing that is safe, affordable and accessible
 - Development of recreational and leisure skills.
2. Admission Criteria:
 - Admission is by referral only. The referral process is initiated by telephone with the JAFCO Director of Operations and Clinical Services. Following a review of the referral packet, a clinical interview with the child will be scheduled. All admissions are at the discretion of the JAFCO Director of Operations and Clinical Services.
 - All placements are made based on the needs, strengths, and safety of each child referred and already in placement, as well as the skills of the staff team designated to work with each child.
3. Exclusionary Criteria:
 - Children who are actively psychotic, suicidal or substance addicted.
 - Children whose primary diagnosis is mental retardation or autism.
 - Children with behaviors that could place themselves or other children in danger.
 - Children that need 24 hour one-on-one supervision.
 - Children whose needs could not be best met with placement at the JAFCO Children's Village.
4. Based on the needs of each child, services are provided by a coordinated team, which includes the following professionals:
 - Residential/direct care staff members
 - A qualified behavioral health practitioner (Licensed Clinical Social worker)
 - Providers of appropriate medical support services
5. The program provides staff support 24 hours a day, 7 days a week.
6. The program provides the following community/independent living components:
 - A written daily schedule of activities
 - Regular meetings between the person served and program staff
 - Opportunities to participate in activities that would be found in a home
 - Adequate personal space for privacy
 - Security of property
 - A homelike and comfortable setting
 - Evidence of individual possessions and decorations
 - Daily access to nutritious meals and snacks
 - Separate sleeping areas for person served based on gender, age, individual needs.
7. The program ensures the provision of medical and pharmaceutical services.
8. The program has at least one staff member immediately available at all times who is trained in:
 - First Aid
 - CPR
 - The use of emergency equipment
 - Universal Sanitary Precautions/Preventing Disease Transmission
 - Target Zero Water Safety

General Information

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Program Description (continued)

9. Provisions are made to address the needs for:
 - Cultural/spiritual needs
 - Quiet areas
 - Areas for family or other visits
10. There is at least a quarterly review of each person served
 - Plan of services
 - Goals
 - Progress towards goals
11. Person served are given opportunities to participate in:
 - Community activities
 - Social activities
 - Recreational activities
 - Spiritual activities

Mechanisms to Address the Needs of Special Populations:

JAFCO's Residential Treatment Program may address the special needs of the persons served through the development and ongoing monitoring and modification of the individual plan. Through this process, the strengths, abilities, needs, preferences and desired outcomes will be developed based on the unique qualities of the person served. Specific accommodations to address special needs may include the amplification and communication devices for use with the deaf and hard of hearing person served, magnification sheets for the visually impaired, and language interpretation of non-English speaking person served.

Support of Adequate Resources to Deliver Programming:

JAFCO's Residential Treatment Program is supported through multiple fiscal processes that ensure adequate funding and resources are available to provide programming consistent with the established goals. The processes are as follows:

- Annual Budget Process: In January of each year, the JAFCO Board of Trustees will approve an annual budget of planned revenues and expenditures necessary to provide the services described in its statement of purpose. This budget is prepared by qualified staff based upon budget to actual reports of the previous year, cash flow reports, inflation and cost of living trends and other economic indicators. Prior to seeking approval from the board of trustees, the JAFCO Annual Budget is carefully reviewed and revised with staff assistance by the Finance Committee of the Board.
- Performance Improvement/Outcome Management: The outcome management system is utilized by the management team and Director of Operations and Clinical Services to review and assess the level in which program goals and objectives are being met. Areas that are not meeting program goals and objectives are reviewed to determine if adjustments in areas such as personnel, facilities, transportation, and other resources are needed to support the program goals. The Director of Operations and Clinical Services utilizes this information to make resource allocation requests for program support to the Executive Director who approves whatever resources are available within the current budget year and plans for future needs in the subsequent budget period. Emergency needs not included in the budget may be approved by the board mid-year.
- Strategic Planning: JAFCO's Board of Directors participates in an ongoing strategic planning process through developing and monitoring its short and long-range strategic plan goals and objectives. The strategic plan is reviewed annually.
- Political Advocacy: The JAFCO Board of Directors and Executive Director are actively involved in relationship development at both the house and senate state level and have long standing relationships with key legislators that are known to have major influence on child welfare and mental health services in the state of Florida. On two occasions JAFCO has been the person served of State dollars directly from the governor's budget and has participated in the state budget process resulting in two one million dollar appropriations.

General Information

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Program Description (continued)

JAFCO Children's Ability Center

Program Description:

The JAFCO Children's Ability Center is a resource center for family education and support, respite, child enrichment and therapeutic services targeting families that are raising children with developmental disabilities. The center will offer continuous support, individual and family counseling, support groups, parent nights out, education and behavior training and respite. There will be a continuum of coordinated care that will eliminate fragmented services requiring traveling to many locations to receive treatment as well as other services for the entire family. Programs offered will ensure that all children with developmental disabilities can experience the same social and recreational opportunities as their typically developing peers. The following services will be offered:

Respite Program

The Respite Program will take place in a group home located on the campus of the Ability Center. This program will provide relief for parents raising children with developmental disabilities. Respite can be for a half day, full day, evening, overnight, weekend or a complete week at a time (up to 2 weeks annually). Respite services will be provided 24 hours, 7 days a week to families in need. While it is preferred for respite services to be scheduled in advance whenever possible, emergency respite will also be permitted.

The Respite home has a capacity for 6 children. The staff will be awake and available to the children twenty-four hours per day. There will be a staff- to-child ratio of a 1 staff member to 3 children. Children will be provided 1-on-1 care when it is determine to be necessary.

Child Enrichment Services

Activities have been developed that promote friendships and develop skills along all developmental domains. Children are placed in age appropriate groups that incorporate their interests and need for assistance. Programs include the following:

- **Social skills groups:** Age appropriate social skills groups with a focus on specific needed skills will be provided offering opportunities through structured activities to reinforce social language, appropriate play and appropriate social interactions with peers
- **Clubs:** A variety of age-appropriate clubs will be formed based on the interests of your child who may include, gaming clubs, building/construction, music/dance and technology clubs. Activities will be designed to be entertaining but also promote appropriate socialization and other skills such as functional communication and motor abilities.
- **Life-Skills:** This program will address the skills needed to become independent as your child transitions from childhood to adulthood. A mock home setting will be used to teach basic daily-living skills including cooking and basic home maintenance. Other skills that will be addressed may include vocational skills, independent-living skills and basic money skills.
- **Indoor Activities:** Computer lab, Fitness and fun gym, cooking, Lego club, art, music, drama, independent life skills, Shopping experience at the JAFCO General Store, Academic tutoring, Dance experience, Birthday club, Yoga
- **Outdoor Activities:** Playground, Basketball, Splash Zone, Organic gardening, Nature walks, Bird and butterfly watching, Photography, Petting zoo

Therapeutic Services

JAFCO will provide a full range of therapeutic services with conveniently scheduled appointments to meet the needs of children with a wide range of developmental disabilities.

- **Speech-language, occupational, and physical therapies** will be available through licensed therapists, who will develop an individual plan of intervention based on current evaluation information.
- **Behavior therapy** will be provided at the center by clinicians under the supervision of a Board Certified Behavior Analyst. If a child has challenging behaviors or behaviors that interfere with learning, a functional behavior assessment will be conducted to understand why the behaviors are occurring. A behavior intervention plan will be developed and strategies implemented to reduce these behaviors. For other children who require specialized techniques to acquire skills, the behavior therapist may perform a curriculum-based assessment to determine what skills the child needs to learn and provide therapy to teach these skills using interventions based upon the principles of applied behavior analysis.

General Information

GI-4 Program Description (continued)

- **Clinical psychologists** will be available to perform a variety of evaluations including psycho-educational evaluations. These evaluations may provide a diagnosis of a developmental disability, document a pattern of strengths and weaknesses, assist in developing an educational plan including goals and objectives and teaching methods, provide recommendations about community resources or needed services

Family Support Services

The goal of these services is to build connections within our community between parents and existing service providers and identify and develop services to address unmet needs. Our goal is to ensure that each family in our community is connected to an array of quality services that are responsive to their unique and evolving needs.

Services will be individualized based on an assessment of the needs of each child and family. An appointment will be made within 24 hours of a referral. A support service coordinator will complete an assessment and develop an individual plan based on need and family readiness to access services. The following Family Support Services will be offered:

- Support Service Coordinator: Each family will be connected to one individual who will be responsible for assessing and finding resources to meet the needs of the families.
- Individualized Service Plan
- Counseling (in home or on site)
- Support groups (caregivers, siblings, grandparents, couples, single parents, friends)
- Referrals for evaluation, therapeutic services, concrete services, socialization, recreation for children
- Accessing government financial assistance programs
- Emergency on-call/crisis support
- Education/training for parents and children
- Mentor family
- Socialization opportunities for parents

The following applies to all programs being offered at the Children's Ability Center

Referral Sources:

Children may be referred by the Department of Children and Families or its lead agency or privately by parents, relatives, teachers, or members of the community.

Geographic Area Served:

Children and families from Broward, Dade or Palm Beach Counties will be served.

Target Population/Admission Criteria:

JAFCO seeks to serve children and young adults from birth through their 22nd birthday who have a chronic disability. Developmental disabilities include disabilities attributable to intellectual disabilities, autism, cerebral palsy, epilepsy, spina bifida and neurological impairments. They may also include special medical conditions or medically complex issues related to the disabilities where these criteria are met. Additionally we seek to serve high risk children who require services beyond that required by children generally. These would include those with developmental delays in cognition, language or physical development. All families regardless of ethnicity or race are eligible for services.

Children with developmental disabilities experience a range of delays and challenges with cognition, receptive and expressive language, and mobility, fine and gross motor skills, social skills, self-regulation, self-care, and unique learning needs. Their need for assistance and care exceeds that of their typically developing peers in activities of daily life. Children with physical or medical conditions will be provided assistance with specialized feeding, equipment and adaptive devices.

General Information

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On Site Visits and Complaint Investigations

- 1) On-Site Visits and Complaint Investigations
- 2) Licensing staff of the department may make scheduled or unannounced visits to a licensed home, facility or agency at any reasonable time to investigate and evaluate compliance with the licensing requirements. All agencies shall be inspected at least annually.
- 3) The department shall investigate complaints to determine if the agency is meeting the licensure requirements.
- 4) The department shall advise the owner and operator with authority over the licensed agency that there is a licensing complaint when initiating an investigation and shall advise the agency of the results of the investigation when concluded.
- 5) Whenever the department receives a report questioning the certification status or compliance of a child-placing agency with requirements of the state adoption law or alleging violations of this chapter by the agency, the department shall investigate the allegation within 20 working days to determine whether the complaint is substantiated.
- 6) The department shall notify the complainant and JAFCO in writing of the results of the complaint investigation within 15 working days after the report of the department's investigation has been finalized.
- 7) JAFCO shall fully cooperate with the department whenever such complaint investigations are conducted.

General Information

GI-6 Business Associate Agreement

This agreement is made effective the _____ of _____, 20__, by and between JAFCO Inc., hereinafter referred to as "covered Entity", and _____, hereinafter referred to as "Business Associate".

Witnesseth:

Whereas, Sections 261 through 264 of the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, known as the "Administrative Simplification provisions," direct the Department of Health and Human Services to develop standards to protect the security, confidentiality and integrity of health information; and

Whereas, pursuant to the Administrative Simplification provisions, the Secretary of Health and Human Services had issued regulations modifying 45 CFR Parts 160 and 164 (HIPAA Privacy Rule"); and

Whereas, the Parties wish to enter into or have entered into an arrangement whereby Business Associate will provide certain services to Covered Entity, and, pursuant to such arrangement, Business Associate may be considered a "business associate" of Covered Entity as defined in the HIPAA Privacy Rule (identify specific services provided by Business Associate); and

Whereas Business Associate may have access to Protected Health Information (as defined below) in fulfilling its responsibilities under such arrangement;

Therefore, in consideration of the Parties' continuing obligations under the Arrangement Agreement, compliance with the HIPAA Privacy Rule, the Parties agree to the provisions of this Agreement in order to address the requirements of the HIPAA Privacy Rule and to protect the interest of both Parties.

I. DEFINITIONS

Except as otherwise defined herein, any and all capitalized terms in this section shall have the definitions set forth in the HIPAA Privacy Rule. In the event of an inconsistency between the provisions of this Agreement and mandatory provisions of the HIPAA Privacy Rule, as amended, the HIPAA Privacy Rule shall control. Where provisions of this Agreement are different than those mandated in the HIPAA Privacy Rule, but are nonetheless permitted by the HIPAA Privacy Rule, the provisions of this Agreement shall control.

The term "Protected Health Information" means individually identifiable health information including, without limitation, all information, data, documentation, and materials, and including without limitation demographic, medical and financial information, that relates to the past present or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual.

Business Associate acknowledges and agrees that all Protected health Information that is created or received by Covered Entity and disclosed or made available in any form, including paper record, oral communication, audio recording and electronic display by Business Associate on Covered Entity's behalf shall be subject to this Agreement.

II. CONFIDENTIALITY REQUIREMENTS

- a. Business Associate agrees:
 - (i) to use or disclose any Protected Health Information (PHI) solely: 1) for meeting its obligations as set forth in any agreements between the Parties evidencing their business relationship or 2) as required by applicable law, rule or regulation, or by accrediting or credentialing organization to whom Covered Entity is required to disclose such information or as otherwise permitted under this Agreement, the Arrangement Agreement (if consistent with this Agreement and the HIPAA Privacy Rule), or the HIPAA Privacy Rule, and 3) as would be permitted by the HIPAA Privacy Rule if such use or disclosure were made by the Covered Entity;

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Business Associate Agreement (continued)

- (ii) at termination of this Agreement, the Arrangement Agreement (or any similar documentation of the business relationship of the Parties), or upon request of Covered Entity, whichever occurs first, if feasible, Business Associate will return or destroy all PHI received from or created or received by Business Associate on behalf of Covered Entity that Business Associate still maintains in any form and retain no copies of such information, or if such return or destruction is not feasible, Business Associate will extend the protections of this Agreement to the information and limit further uses and disclosures to those purposes that make the return or destruction of the information not feasible; and
 - (iii) to ensure that its agents, including a subcontractor, to whom it provides PHI received from or created by Business Associate on behalf of Covered Entity, agrees to the same restrictions and conditions that apply to Business Associate with respect to such information. In addition, Business Associate agrees to take reasonable steps to ensure that its employees' actions or omissions do not cause Business Associate to breach the terms of this Agreement.
- b. Notwithstanding the prohibitions set forth in this Agreement, Business Associate may use and disclose PHI as follows:
- (i) if necessary, for the proper management and administration of business Associate or to carry out the legal responsibilities of Business Associate, provided that as to any such disclosure, the following requirements are met:
 - A. the disclosure is required by law; or
 - B. Business Associate obtains reasonable assurances from the person to whom the information is disclosed that it will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the person, and the person notifies Business Associate of any instances of which it is aware in which the confidentiality of the information has been breached;
 - (ii) for data aggregation services, if to be provided by Business Associate for the health care operations of Covered Entity pursuant to any agreements between the Parties evidencing their business relationship. For purposes of this Agreement, data aggregation services means the combining of PHI by Business Associate with the PHI received by Business Associate in its capacity as a business associate of another covered entity, to permit data analyses that relate to the health care operations of the respective covered entities.
- c. Business Associate will implement appropriate safeguards to prevent use or disclosure of PHI other than as permitted in this Agreement. The Secretary of Health and Human Services shall have the right to audit Business Associate's records and practices related to use and disclosure of PHI to ensure Covered Entity's compliance with the terms of the HIPAA Privacy Rule. Business Associate shall report to Covered Entity any use or disclosure of PHI which is not in compliance with the terms of this Agreement of which it becomes aware. In addition, Business Associate agrees to mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a use or disclosure of PHI by Business Associate in violation of the requirements of this Agreement.

III. AVAILABILITY OF PHI

Business Associate agrees to make available PHI to the extent and in the manner required by Section 164.524 of the HIPAA Privacy Rule. Business Associate agrees to make PHI available for amendment and incorporate any amendments to PHI in accordance with the requirements of Section 164.526 of the HIPAA Privacy Rule. In addition, Business Associate agrees to make PHI available for purposes of accounting of disclosures, as required by Section 164.528 of the HIPAA Privacy Rule.

IV. TERMINATION

Notwithstanding anything in this Agreement to the contrary, Covered Entity shall have the right to terminate this Agreement and Arrangement Agreement immediately if covered Entity determines that Business Associate had violated any material of this Agreement. If Covered Entity reasonably believes that Business Associate will violate a material term of this Agreement and, where practicable, Covered Entity gives written notice to Business Associate of such belief within a reasonable time after forming such belief, and Business Associate fails to provide adequate written assurances to Covered Entity that it will not breach the cited term of this Agreement within a reasonable period of time given the specific circumstances, but in any event, before the threatened breach is to occur, then Covered Entity shall have the right to terminate this Agreement and the Arrangement Agreement immediately.

General Information

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Business Associate Agreement (continued)

V. MISCELLANEOUS

Except as expressly stated herein or the HIPAA Privacy Rule, the parties to this Agreement do not intend to create any rights in any third parties. The obligations of Business Associate under this Section shall survive the expiration, termination, or cancellation of this Agreement, the Arrangement Agreement and/or the business relationship of the parties, and shall continue to bind Business Associate, its agents, employees, contractors, successors, ad assigns set forth herein.

This Agreement may be amended or modified only in writing signed by the Parties. No Party may assign its respective rights and obligations under this Agreement without the prior written consent of the other Party. None of the provisions of this Agreement are intended to create, nor will they be deemed to create any relationship between the Parties other than that if independent parties contracting with each other solely for the purposes of effecting the provisions of this Agreement and any other agreements between the Parties evidencing their business relationship. This Agreement will be governed by the laws of Florida. No change, waiver or discharge if any liability or obligation hereunder on any one or more occasions shall be deemed a waiver of performance of any continuing or other obligation, or shall prohibit enforcement of any obligation, on any other occasion.

The parties agree that, in the event that any documentation of the arrangement pursuant to which Business Associate provides services to Covered Entity contains provisions relating to the use or disclosure of PHI which are more restrictive than the provisions of this Agreement, the provisions of the more restrictive documentation will control. The provisions of this Agreement are intended to establish the minimum requirements regarding Business Associate's use and disclosure of PHI.

In the event that any provision of this agreement is held by a court of competent jurisdiction to be invalid or unenforceable, the remainder of the provisions of this Agreement will remain in full force and effect. In addition, in the event that a party believes in good faith that any provision of this Agreement fails to comply with the then-current requirements of the HIPAA Privacy Rule, such party shall notify the other party in writing. For a period up to 30 days, the parties shall address in good faith such concern and amend the terms of this Agreement, if necessary to bring it into compliance. If, after such 30-day period, the Agreement fails to comply with the HIPAA Privacy Rule, then either party has the right to terminate upon written notice to the other party.

IN WITNESS WHEREOF, the Parties have executed this Agreement as of the day and year written above.

COVERED ENTITY:

BUSINESS ASSOCIATE:

By _____

By _____

Title: _____

Title: _____

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Revision Signature Page

- GB-1 By Laws
- GB-2 Governing Body
- GB-3 Conflict of Interest
- GB-4 Disclosure
- GB-5 Changes in Agency Function or Purpose
- GB-6 Agency Closure
- GB-7 Media Response
- GB-8 Donor Centered Philosophy
- GB-9 Office Equipment and Transportation
- GB-10 Board Records and Availability
- GB-11 Strategic Planning
- GB-12 JAFCO Children's Ability Center By Laws

The above mentioned policies and plans have been reviewed and or revised by the executive director

Signature:

Executive Director

Date

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By Laws

ARTICLE I - NAME

Section 1. Name: The name or title by which this corporation is to be known as:
JAFCO, Inc.

ARTICLE II - MISSION AND PURPOSE

Section 1. Mission and Purpose:

Purpose: JAFCO has been established to develop a model demonstration program for the care of abused, neglected and abandoned children in the South Florida Jewish community -- and in doing such, to work in partnership with the entire child welfare community. This purpose and mission is accomplished by the following:

1. To assist abused, neglected or abandoned Jewish children in finding Jewish foster and adoptive homes through the JAFCO Foster Care and Adoption Program.
2. To help recruit Jewish foster and adoptive parents and help facilitate their licensing and placement.
3. To provide physical, emotional, educational and religious support services to Jewish children in need of foster and adoptive placements.
4. To provide an enriched environment for abused and neglected Jewish children consisting of, but not limited to, experiences which will promote their physical, social and spiritual growth, and which go beyond simply meeting their basic needs.
5. To provide and assist abused, neglected or abandoned Jewish children in the development of career goals, skills and training through the JAFCO Independent Living Program.
6. To provide supportive wraparound services to at-risk families in order to preserve the family unit through the JAFCO Family Preservation Program.
7. To provide 24-hour emergency shelter for abused and neglected children between the ages birth-12 through the JAFCO Children's Emergency Shelter.
8. To provide residential group home care for abused and neglected children ages 6-18 for whom a suitable foster home, adoptive home or relative placement is not available through the JAFCO Group Home Program.
9. To provide abused, neglected or abandoned Jewish children with mentors through the JAFCO Forever Friends Program.
10. To provide training and consultation to other agencies and organizations.
11. To facilitate the development of social service research related to Jewish foster care and adoption.
12. To raise funds for the promotion of the above objectives.
13. Doing any other act which is lawful for a Florida corporation not for profit to do.
14. To provide post-adoption and reunification services.

Vision: JAFCO's vision is to provide a model child welfare program which can be replicated by other communities around the country- a continuum of high quality family preservation, foster care, adoption, emergency shelter, group home and mentoring services to at-risk children and families in the community.

1. JAFCO is committed to providing an entire continuum of child welfare services to children and their families in the South Florida Jewish community (incorporating the counties of Miami-Dade, Broward and Palm Beach).
2. JAFCO's long-range vision is to help promote the development of comprehensive services to abused, neglected and homeless children in other Jewish communities -- whether those services are provided by local autonomous agencies or by Affiliate Organizations of the JAFCO Children's Foundation, Inc.

Philosophy: JAFCO believes that providing quality child welfare services is a community responsibility.

1. We believe that nothing is more tragic than a family torn apart and that providing a child with a familiar cultural and religious environment will assist that child as they heal from the trauma of abuse and neglect.

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By Laws (continued)

2. We believe that communities will respond to the responsibility of caring for abused and neglected children when appropriately educated as to presence of local children needing their support, and when an organizational framework is established that provides concerned people with opportunities to participate in meeting the needs of such children.
3. We believe that children served by JAFCO should be treated no differently than the way "Jewish Parents" would act toward their biological children- offering them the best life has to offer in all aspects of their social, emotional, physical, educational, cultural and spiritual development.
4. We believe that caring for dependent children should not be viewed as charity, but should be viewed as a parent caring for a child -- with joy, pride, love and support.
5. JAFCO will provide love and assistance to children in need for as long as necessary - which for some will be a life-long commitment.

ARTICLE III - OFFICES

Section 1. Offices: The principle office of the corporation shall be established and maintained at 4200 N. University Drive, 1st Floor, Sunrise, Florida 33351. The corporation may also have offices at such places within or without the State of Florida as the board may from time to time establish.

ARTICLE IV - BOARD OF TRUSTEES

Section 1. Management of Affairs: The Board of Trustees shall have the operational management and control of the property and affairs of the organization.

Section 2. Number: The exact number of Trustees shall be determined by the Board of Trustees prior to each Annual Meeting for the ensuing year which number shall not exceed twenty-five (25) Trustees, unless otherwise determined at such Annual Meeting by a two-thirds (2/3) vote of those Board members actually present. The number Trustees shall never be less than ten (10). At least three (3) Trustees must be currently serving as Trustees of JAFCO Children's Foundation, Inc.

Section 3. Qualifications: Members of the Board of Trustee should be composed of individuals with have exhibited a commitment to the mission and purpose of this organization and have demonstrated the highest ethical standards of personal and professional conduct. As volunteers, all board members are subject by Florida Statute to annual criminal background checks.

Section 4. Responsibilities and Expectations: The continued success of JAFCO depends upon the personal commitment and active involvement of the Board of Trustees. All Trustees are expected: to embrace the privilege to serve and the responsibility to lead, to be advocates on behalf of the corporation, to be enthusiastic communicators of our mission and vision, to play an integral role in our leadership development, stewardship and fundraising activities and to make an annual gift and/or planned gift to the organization at a level that is considered "meaningful" on an individual basis.

Section 5. Term: The Trustees shall serve three (3) year terms; however, one-third (1/3) of the initial Trustees shall serve a one (1) year term, one-third (1/3) of the initial Trustees shall serve a two (2) year term and one-third (1/3) of the initial Trustees shall serve a three (3) year term, as shall be designated for each at the time of their appointment. Thereafter all Trustees shall serve three (3) year terms.

Section 6. Election: All Trustees shall be approved by the Board of Trustees of the JAFCO Children's Foundation, Inc. The process for electing the Board of Trustees for JAFCO, Inc. shall be as follows:

1. The Nominating Committee of JAFCO, Inc. shall prepare a slate of proposed members to fill any Trustee seat which is to become vacant at the next annual meeting (approximately 1/3 of the Trustee seats will expire each year).
2. The slate prepared by the Nominating Committee of JAFCO, Inc. will be presented to the Board of Trustees of JAFCO. at or prior to their annual meeting for consideration. The Board of Trustees of JAFCO, Inc. may accept the slate, or amend the slate by a majority vote of the Board present. The accepted/amended slate will then be approved by a majority vote present of the Board of Trustees of JAFCO, at a meeting of the Board either at or prior to the Annual Meeting.
3. The approved slate will then be submitted to the Board of Trustees of the JAFCO Children's Foundation, Inc. to be considered at the Foundation's Annual Meeting. Members of the Board of Trustees of the Jewish Children's Foundation, Inc. may accept the slate, or amend the slate by a majority vote of the Board present.

4. The accepted slate will then be approved by a majority vote present of the Board of Trustees of the JAFCO Children's Foundation, Inc. which shall result in the election of new Board of Trustee Members of JAFCO, Inc. Once the newly elected JAFCO Trustees have been approved by the Foundation, the JAFCO newly elected JAFCO Board of Trustees shall thereupon elect Officers for the ensuing year.

Section 7. Vacancies: Vacancies of the Board of Trustees occurring during the year shall be filled by the majority vote of the Board of Trustees of the JAFCO Children's Foundation, Inc. after consultation with the Executive Committee of JAFCO, Inc.

Section 8. Removal: Any Trustee of JAFCO, Inc. may be removed by a two-third (2/3) vote of the Trustees of the JAFCO Children's Foundation, Inc.

Section 9. Meetings of Trustees: Regular and/or special meetings of the Board of Trustees shall be held at such times and at such places as the President may determine. At least thirty (30) days' notice shall be given to all Trustees, via regular US mail, certified mail, fax or email. The President shall be the presiding officer at all Board meetings, except in his absence, the Vice President shall preside. Each Trustee shall regularly attend every Board meeting, and attendance of less than two-thirds (2/3) of the meetings within twelve (12) consecutive months shall be grounds for removal. The Board may authorize the use of telephone and/or video conferencing during Board of Trustee Meetings. Trustees who participate in Board Meetings through telephone and/or video conferencing shall be considered present in the meeting and shall have the right to vote on all matters that are voted upon during the meeting.

Section 10. Quorum: At all meetings of the Board of Trustees a quorum shall be required which shall consist of a majority of the entire Board. A vote of a majority of Trustees shall decide any proper question that may come before the meeting.

Section 11. Procedure: The order of business and all other matters of procedure at every meeting of the Board of Trustees shall be determined by the Officer presiding at the meeting.

Section 12. Action without a Meeting: Any action to be taken by the Board may be authorized by a majority of all Trustees by telephone, fax or email. The Board of Trustees may authorize the Executive Committee and/or Executive Director (if any) to make day to day decisions that are in the normal course of business. Such authorization should be in the form of a formal resolution approved by the Board of Trustees, which clearly specifies the powers authorized, limitations and procedures for informing the Board of actions taken. Such a resolution should be periodically reviewed by the Board of Trustee and amended or revoked at the discretion of the Board.

Section 13. Conflict of Interest. Board Members must avoid placing themselves in a position of conflict of interest, or even giving the appearance of a conflict of interest. A conflict of interest is defined as any of the following situations:

Conflict of Interest Related to Personal Gain: Board Members are expected to donate their time, energies and expertise to JAFCO without compensation or financial gain. Board Members are therefore not to receive any compensation from JAFCO. Employment by JAFCO of Board Members or immediate relatives (spouse, children and parents) is not permitted.

Contracting for services directly with Board Members is discouraged and generally not allowed. A permitted exception to this rule is when a pre-existing contractual relationship is in effect when a new Board Member is elected to the Board. In such cases, full disclosure of such a relationship must be given to the Board prior to voting on the admittance of the new member. Furthermore, any future contracts must be reviewed and approved by a majority vote of the Board.

Conflict of Interest Related to JAFCO Case Management and Clinical Direction: JAFCO encourages participants in the child welfare system (i.e., foster parents, adoptive parents, guardians, and volunteers) to become members of the Board of Trustees. Board Members who are involved in child welfare cases affecting a JAFCO child ("a person served of JAFCO") should adhere to the following guidelines to avoid a conflict of interest:

1. JAFCO's decisions related to case management and clinical determinations are the sole and exclusive responsibility of the JAFCO professional staff that operate under the direct control and supervision of the JAFCO Executive Director.
2. Board Members who disagree with JAFCO's position (as determined by the JAFCO Executive Director in regard to the case management or clinical judgment of a specific case) the Board Member must take one or more of the following actions to avoid a conflict of interest:
 - a. Agree to accept and support the JAFCO case management and clinical direction.

- b. Remove him/her from the community side of the JAFCO case (step-down as guardian ad litem, volunteer, foster parent) and cease continued involvement in the case.
- c. Remove him/her from the JAFCO side of the case by resigning as a JAFCO Board Member.
- d. Remain involved in the case and as a member of the JAFCO Board - but refrain from either publicly opposing the views, policies and actions of JAFCO (i.e., in statements to media or court); or take any step(s) that would interfere with or disrupt the implementation of the JAFCO case management plan.

The Executive Committee will review any Conflict of Interest issues and will present a resolution to the problem. If the matter cannot be resolved between the Executive Committee and the Board Member, it will be brought to the Board of Trustees for resolution.

ARTICLE V - OFFICERS

Section 1. Officers: At each annual meeting of the Trustees, the Trustees shall elect a President, Vice President, Secretary, and Treasurer, and said Officers to hold their offices until the next annual meeting. Any Officer may be removed during the year by a two-thirds (2/3) vote of the remaining Board of Trustees. If the office of any Officer becomes vacant for any reason, the vacancy shall be filled by a majority vote of the remaining Board. Each officer shall be elected from the Board of Trustees.

Section 2. President: The President shall be the Chief Executive Officer of the organization and shall preside at all meetings of the Board of Trustees. The President shall have the general powers and duties of supervision and management of the organization which usually pertains to such office, and shall perform all such other duties as are properly required by the Board, including but not limited to, appointing committees.

Section 3. Vice President: There shall be a Vice President who shall, in the absence or at the request of the President, perform the duties and exercise the powers of the President. The Vice President shall also have such powers and perform such duties as usually pertain to his/her office or as are properly required by the Board of Trustees. The Vice President shall also perform the duties of any other absent officer who may be unavailable from time to time.

Section 4. Secretary: The Secretary shall attend all meetings of Members and of the Board if possible and keep the minutes thereof or appoint a member of the Board as a substitute. The Secretary shall perform such other duties as usually pertain to said office or as are properly required by the Board of Trustees. Copies of all correspondence should be given to the Secretary for the files.

Section 5. Treasurer: The Treasurer shall have the care and custody of all monies of the organization. The Treasurer shall keep the financial records of the organization with a full and accurate account of all monies received by him or her and paid by him or her on account of the organization. The Treasurer shall make such statements as are required by the Board and shall perform such duties as usually pertain to said office or as are properly required of him or her by the Board.

ARTICLE VI - TRUSTEE MEETINGS

Section 1. Annual Meeting: The Annual meeting of the Trustees shall be held at such place as shall be designated by the Board during the 1st week in March or such other date and order as shall be determined by the Board. By or at the Annual Meetings the Board of Trustees shall approve a slate of new Trustees to be submitted to the Board of Trustees of the JAFCO Children's Foundation. After approval by the JAFCO Children's Foundation Board, the newly constituted JAFCO Board shall thereupon elect Officers for the ensuing year. Any other business may be transacted at such meetings. When possible, the annual meeting of the JAFCO Children's Foundation Board can be coordinated to occur on the same day as the annual meeting of the JAFCO Board, and/or other Affiliate Organizations. Should such coordination occur, then it may be possible for the JAFCO Board (or other Affiliate Organizations) to approve a new slate of Trustee and immediately submit such slate for consideration to the JAFCO Children's Foundation Board that would be in session. Such a slate could then be approved or amended by the Foundation Board. Upon such approval, the JAFCO Board could reconvene and the newly constituted Board of Trustees could then proceed to elect Officers for the coming year.

Section 2. Special Meetings: Special meetings of the Board of Trustees may be called by the President, his or her designee or five (5) or more members of the Board of Trustees with written notice to the Secretary, at such time and place as shall be designated in the Notice of Meeting mailed to members at least seven (7) days prior to such meetings.

Section 3. Procedure: The order of business and all other matters of procedure shall be determined by the presiding officer.

Section 4. Quorum: At all official Board meetings, there shall be present in person (or via telephone or video conference) a majority of the Board of Trustees which shall be necessary to transact any business on behalf of the Board of Trustees.

Section 5. Vote Required: All matters that come before the Board shall be determined by a majority vote of Members (including those present via telephone or video conference) unless otherwise specified herein. Proxies shall not be permitted.

ARTICLE VII - JAFCO HONORARY BOARD

Section 1. Honorary Board: The JAFCO Honorary Board shall serve in an advisory capacity to the Board of Trustees. This Honorary Board shall:

1. Continually be apprised of organizational activities, programs and initiatives;
2. Offer ideas and suggestions to the Board of Trustees;
3. Be a source of collective wisdom, advice and support for the organization

Section 2. Qualifications: The Honorary Board shall consist of individuals who are recognized for past service to the organization, standing in the community, and/or ongoing financial support of JAFCO.

Section 3. Election: Individuals meeting the qualifications in Section 2 above may be recommended to the Nominating Committee by any member of the Board of Trustees. Upon the recommendation of the Nominating Committee, an individual can be elected to the Board of Council by a majority vote of the Board of Trustees.

Section 4. Removal: A member of the Council of Trustees may be removed from the Council by a 2/3 vote of the Board of Trustees.

ARTICLE VIII - JAFCO CHAPTERS

Section 1. Definition. JAFCO Chapters are volunteer groups located in communities throughout South Florida with the sole purpose of raising awareness and funds for JAFCO. All chapters work cooperatively for the benefit of the agency and the children we serve. The JAFCO Development Office is dedicated to support and guide the chapters in accordance with the development plan of the agency.

Section 2. Governance. JAFCO Chapters operate under the governance of JAFCO. They must accept the mission, vision and philosophy of JAFCO as outlined in the chapter guidelines document, which may be amended by the Board of Trustees. The Chapter leaders will review and sign this document on an annual basis. All Chapter leadership, members and event chairs are subject to removal by the Executive Director, in consultation with the Executive Committee of the Board of Trustees. It is the expectation of the JAFCO Board of Trustees that all chapter leaders, members and event chairs represent the organization in an ethical manner, understanding that all of their actions must benefit JAFCO and its mission.

Section 3. Finances. All donations collected by JAFCO Chapters are deposited into the bank account of JAFCO with appropriate records, bookkeeping and fiscal controls. As chapters grow in size, they may make a request to the JAFCO Board of Trustees for a separate chapter checking account.

Section 4. Formation of new chapters. With a minimum of 25 members, new chapters may be established, subject to final approval by the JAFCO Board of Trustees. Chapters will be renewed annually and must sign the chapter guidelines document every year. Such approval will be considered by the JAFCO Board of Trustees when referred to the Board for action after approval of the JAFCO Director of Southeast Development, Community Relations Coordinator and/or Executive Director. All chapters will identify themselves only as [The Area Name] Chapter of JAFCO.

Section 5. Fund Raising and Special Events. While each chapter is able to plan its own events and create its own identity, the following guidelines have been created based upon the mission and objective of the JAFCO organization:

1. The purpose of each event shall be to raise both awareness and funds for JAFCO.
2. All events should be carefully planned with reasonable expenses relative to the projected net income of the event. A budget should be prepared for each event and approved by the Chapter President. A copy of the budget for each major event should be filed with the Development Director. Upon completion of the event a final analysis of expenses and income will be prepared by the bookkeeper and the Development Director and will be shared with the chapter presidents.
3. As an organization, JAFCO has committed to have events that are inclusive of members of the entire Jewish community. JAFCO is a faith-based organization and we ask that no events be held on the Sabbath (Friday night or Saturday before sundown) or on Jewish Holy Days. Shellfish and pork products are not to be served at events, and vegetarian and kosher meals are to be available upon request.
4. Dates, time and location of all planned events should be forwarded to the JAFCO office to be placed in the Agency Calendar and in the JAFCO newsletter.
5. Each chapter must plan and hold its own fund raising events, however the agency expects all chapters to support JAFCO's two main fundraising events: The Jacob's Ladder Black Tie Gala and the Annual Women's Luncheon. We ask that no major events (over 100 guests) be planned within one month of these two events.
6. To ensure a spirit of cooperation between Chapters, written or emailed invitations to chapter events will only be sent to the actual members of the chapter hosting the event, although many events may be open (if space is available) to all JAFCO supporters. Publicity about the event will be limited to the chapter area, although it is understood that on occasion press releases will be printed outside of the chapter region. Also if space is available, additional chapter presidents can be notified of the event and they in turn can make the decision to invite their members. This agreement will respect the efforts of everyone involved and will ensure the success and individuality of each event, thereby avoiding any false sense of competition amongst the chapters or the events.
7. When soliciting major sponsors, chapter presidents shall notify the development director in order that the same sponsor is not solicited more than once.
8. Chapters shall deliver to the Director of Southeast Development for approval, copies of all written and promotional materials (including press releases, newsletters, t-shirts and similar items) at least five (5) days before the planned dissemination.
9. The JAFCO name, logo and mission statement may not be changed and should be clearly visible on all invitations and materials.
10. Checks made payable to JAFCO should be forwarded to the JAFCO office as soon as possible. Cash should be counted by two chapter members and hand delivered. Chapter members replacing cash with a personal check cannot be offered a tax receipt from the agency. All petty cash expenses must be accompanied by a receipt. Tips or other expenses paid from cash received during an event should be documented by the Chapter president or event chair.

ARTICLE IX - STANDING COMMITTEES

Executive Committee

Section 1. Membership: The Membership of the Executive Committee shall consist of the President, Vice President, Secretary and Treasurer of the corporation.

Section 2. Responsibilities: The Executive Committee shall be charged with the responsibility of making decisions on day-to-day matters that cannot be deferred to the next meeting of the Board of Trustees. The Executive Committee is authorized to make such decisions prior to the next Board of Trustees meeting provided that such decisions relate to the implementation of projects or policies already approved by the Board of Trustees. Major decisions, or decisions related to new policy not yet approved by the Board of Trustees should either be deferred to the next Board Meeting, or the Board should be polled by telephone, fax or email as specified in Article IV, Section 12. The Executive Committee is also authorized to study policy and planning questions and to provide recommendation for action to the Board of Trustees.

Nominating Committee

Section 1. Membership: The Nominating Committee Chairperson shall be chosen by the President. The Board of Trustees will select the remaining members from the Board of Trustees.

Fiscal

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By Laws (continued)

Section 2. Responsibilities: The Nominating Committee will present a slate of recommended new Board Members for consideration by the Board of Trustees prior to the Annual Meeting. Board of Trustee Members who wish to submit a candidate for consideration will complete the Nomination Form and submit said form to the Chairperson or other designated Committee Member. The Committee will interview all prospective candidates and discuss with each prospective member the responsibilities and expectations of all Board Members. The Nominating Committee will also prepare a JAFCO Board Member Handbook which will be periodically revised and provided to all Board Members.

Facilities Maintenance Committee

Oversight of general maintenance, repair and upkeep of the village and approval of bids related to these items
Make budgetary recommendations for cash reserves necessary

Risk Management & Security

- Risk Management and Insurance issues
- Human Resources
- Village Security planning

Godparent Circle

To ensure long term commitment of donors, with minimum annual gifts of \$1,800.

ARTICLE X - AMENDMENTS

These By-Laws may be added to, amended, altered, or repealed by vote of a two-thirds (2/3) of the Board of Trustees at any Special or Annual Meeting.

Board Membership

JAFCO has a governing body with overall responsibility for the organization's operation, consisting of at least five members. (CPA A.2)

The Board of Trustees for JAFCO, Inc. consists of the following:

1. Dr. Ronald Simon, President
2. Delsie Lipton, Secretary
3. Mara Gober, Vice-President
4. Alan Levy, Treasurer
5. Richard L. Allen, Trustee
6. Allen Chelminsky, Trustee
7. Dr. Carolyn Cohen, Trustee
8. Dr. Hyman Eisenstein
9. Vicki Freed, Trustee
10. Dorinne Gerstin, Trustee
11. Paul Goldner, Trustee
12. Abbey Kaplan, Trustee
13. Alfred J. Katzin, Trustee
14. Glenda Krongold, Trustee
15. Jerry Manowitz, Trustee
16. Maurice D. Plough, Jr., Trustee
17. Dr. Lisa Sirota Weiner, Trustee
18. Denise Simon, Trustee
19. Dr. Lisa Sirota-Weiner, Trustee
20. David Sommer, Trustee
21. Helene Weicholz, Trustee
22. Steve Weicholz, Trustee

The Board of Directors for the JAFCO Children's Ability Center consists of the following:

1. Louise Jacowitz, President
2. Margie Plough, Secretary
3. Alfred J. Katzin, Treasurer
4. Debbie Abramowitz, Trustee
5. Rebecca Fischer, Trustee
6. Cindy Niad Hannah, Trustee
7. Dr. Susan Kabot, Trustee
8. Craig Konhauzer, Trustee
9. Laurie Rich Levinson, Trustee
10. Alan Levy, Trustee
11. Stacey Marguiles, Trustee
12. Jim Orleans, Trustee
13. Jeremy Ring, Trustee
14. Rachel Sapoznik, Trustee
15. Ronal Simon, Trustee
16. Sharon Wender, Trustee
17. Gary Zimmerman, Trustee

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GB-2 Governing Body (continued)

The Board of Directors for the JAFCO Children's Foundation consists of the following:

1. Stephen Weicholz, President
2. Stuart Rader, Vice President
3. Alan Levy, Secretary
4. Jerry Manowitz, Treasurer
5. Mara Gober, Trustee
6. Paul Goldner, Trustee
7. Stewart Greenberg, Trustee
8. Leslie Kaminoff, Trustee
9. Alfred J. Katzin, Trustee
10. Marcia Langley, Trustee
11. Jeremy Schneider, Trustee
12. Dr. Ronald D. Simon, Trustee

In accordance with 65C-15.008 F.S., the JAFCO Governing Board serves without compensation.

The JAFCO Board of Trustees has voted to open membership in the organization to the general public. By Board resolution, membership has been opened to all individuals from the general public who will seek membership, sign a membership application which indicates their agreement with the purpose of the organization as expressed in Article I of the By-Laws, and pays the appropriate membership dues as determined by resolution of the Board of Trustees. The Board of Trustees is still in the process of determining membership fee, rights, and responsibilities.

Corporate Membership:

JAFCO is a legally constituted non-profit corporation in the state of Florida. In Florida, the non-profit corporation is incorporated in accordance with Chapter 618, Florida Statutes.

JAFCO was incorporated as a non-profit corporation in the state of Florida on April 3, 1992. Its corporation identification number is N48228.

Professional Personnel:

Executive Director. Effective October 1, 1992, Sarah Franco, M.S. was hired as the agency's Executive Director. Ms. Franco will report directly to the Board of Trustees and will be responsible for the administration of all JAFCO programs. Prior to this point, Ms. Franco worked on a volunteer capacity on the JAFCO Board of Trustees as Vice-President. Ms. Franco resigned this position prior to accepting the JAFCO appointment as Executive Director.

Sarah Franco has a master's degree in counseling and over 30 years' experience in child welfare and working with emotionally disturbed children. Among her relevant experiences include the development and operation of a therapeutic foster care program at Nova University's Institute for Social Services to Families. Ms. Franco is also experienced in foster parent training and licensing, counseling emotionally disturbed children, and in the operation of a children's group home.

Dr. Simon has over 35 years' experience in the administration and development of clinical and social work programs, and has been instrumental in the development of numerous child welfare programs in South Florida through his capacity as former Associate Dean of the Nova University's School of Social Science, former Director of Nova University's Institute for Social Services to Families, and President of Alternate Care Management, Inc. Dr. Simon has been responsible for the development and/or administration of the following clinical and child welfare programs:

- The Nova Foster Parent Project,
- The Nova Therapeutic Foster Care Program,
- The Nova Homebuilders Program,
- The Short-Term Intensive Counseling Program,
- The Intensive Crisis Counseling Program,
- The Nova Independent Living Program,
- The Broward Residential Respite Care Program,
- The Elaine Gordon Treatment Center for Youthful Sex Offenders,

Fiscal**GB-2 Governing Body (continued)**

- The Nova University School of Systemic Therapy,
- The Children's Intensive Residential Treatment Program in DCF, District X, IX and VII,
- The Family Therapy Institute of South Florida, Inc.

Board Committees:

The JAFCO governing board may establish a committee structure to fulfill its responsibilities and to assess the results of the governing body's activities. Board of Trustees has voted to establish several working committees. These include the following:

1. Executive Committee
2. Board Development
 - Examine and review by-laws
 - Nominating Committee
3. Facilities Maintenance Committee
 - Oversight of general maintenance, repair and upkeep of the village and approval of bids related to these items
 - Make budgetary recommendations for cash reserves necessary
4. Risk Management & Security
 - Risk Management and Insurance issues
 - Human Resources
 - Village Security planning
5. Godparent Circle
 - Identify and cultivate donors with interest and ability to fund larger annual gifts

Responsibilities of the Governing Body

The authority and responsibility of any person designated to function as the governing body are specified in writing. Board members are elected by the supporting membership or representative body for specified terms in accordance with the by-laws of the corporation.

1) The JAFCO Board of Trustees will have the following responsibilities:

- The Board of Trustees shall assure the employment of a director which meets the requirements set forth in 65C-15.009 and may delegate to that person authority for the administrative operation of the child-placing agency.
- The Board of Trustees or the Executive Director's immediate supervisor shall annually prepare a written evaluation of the Executive Director's performance.
- The Board of Trustees shall approve annually a written budget of anticipated income and planned expenditures necessary to provide the services described in its statement of purpose. The Board of Trustees shall also review and approve or disapprove in writing the annual financial report of the agency's revenues and expenditures.
- The Board of Trustees shall establish written personnel policies and practices for selection and retention of staff.
- The Board of Trustees shall ensure that staff members are sufficient to continue the operation of the agency.
- The Board of Trustees shall establish and utilize policies and procedures for periodic evaluation of the agency's services.
- The Board of Trustees shall meet at regular intervals, at least quarterly. The full governing body may meet only annually if an Executive Committee, with authority under the by-laws to act on behalf of the Board, meets at least quarterly. The governing body and Executive Committee shall keep a written record of policy and administrative decisions made and include these in the official records of the corporation and they shall be available for inspection by the department at all times. These records shall be maintained at the licensed location of the agency.
- The Board of Trustees shall develop a written plan for the storage of all person served files and assure continued security and preservation of these records even if the agency ceases to operate. Person served shall not be charged storage fees for the storage of their records.
- The Board of Trustees shall ensure the agency's compliance with all applicable state laws and regulations.
- The Board of Trustees shall ensure that the agency keeps statistical information or data that reflects the agency's activities.

The responsibilities of the governing body are stated in writing and include the functions listed in writing.

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Governing Body (continued)

2) The Governing Body is responsible for the following:

- Adopting a written plan for professional services
- The governing body, through the chief executive officer, develops policies and makes sufficient resources available (Lg., funds, staff, equipment, supplies, and facilities) to assure that the program is capable of providing appropriate and adequate services to person served. (CPA B.2) (CPA B.5) (CPA B.5.3)
- Overseeing the system of financial management and accountability. (CPA B.5)
- The Governing Body, with the executive, is responsible for the safe and judicious use of funds received by the organization. (CPA B.5.4)
- The Governing Body, with the executive, is responsible for insuring that complete detailed records of receipts from all sources are maintained; including donations, all disbursements and financial transactions). (CPA B.5.4.1)
- If required by licensing, the Governing Body will open for inspection the organizations books and records. (CPA B.5.4.2)
- The Governing Body will obtain the services of a Certified Public Accountant and cause an annual certified audit of the organization to be held. A copy of the annual certified audit will be forwarded to governmental funding agencies, if required by contract or licensing agreement. (CPA B.5.4.3). JAFCO has obtained the services of Arie A. Taykan and Co., 7880 N. University Drive #201. Tamarac, Florida 33321 to provide a yearly audit.
- Prior to the beginning of the fiscal year, approve an itemized budget or statement of anticipated income and expenses. (A copy of the approved budget must be filed with any governmental funding source if required by licensing agreements) (CPA B.5.2)
- Assuring that the organization's physical and financial resources are adequately insured. (CPA B.5)
- Assuring that members of the governing body and appropriate administrative and professional staff have adequate comprehensive liability insurance. (CPA B.5)
- Participating in accreditation processes.
- Adopting a program to monitor and evaluate the quality of all care provided and to appropriately address identified problems in care. (CPA B.3)
- Electing, appointing, or employing officers and/ or administrators to direct the clinical and administrative activities of the organization. The Governing Body is responsible for the employment of a qualified executive director. (CPA B.1)
- The qualifications for an authority, responsibility, and function of such positions are clearly and specifically documented.
- Establishing an organization table and establishing bylaws or rules and regulations or policies and procedures to guide the relationships between itself, the administrative staff, the professional staff, and the community.
- The bylaws or rules and regulations or policies and procedures define the means by which the administrative and professional staffs cooperatively function, participate in the development of policies concerning program management and patient care, and report to the governing body. (CPA B.3)
- The bylaws or rules and regulations or policies and procedures are reviewed at least every two years and revised as necessary.
- Making appointments to the professional staff and granting or revising clinical privileges upon the documented recommendations from the appropriate professional staff.
- Establishing a system designed to assure that individuals without clinical privileges who provide patient care services are competent.
- Interpret the agency work to the community and coordinate services of the organization with other community agencies. (CPA BA)

Fiscal

GB-3 Conflict of Interest

Original Date: 09/01/06
 Revision Date: 07/13/07
 Policy Number: GB-3
 Department of Origin: Governing Board

Purpose:

When a business relationship exists between a governing body member(s) and the organization, there is a conflict-of-interest policy that governs the member's participation in decisions influenced by the business interest. Board members serve without pay or financial benefit from connection with the agency (CPA A.2.1). Board Members may be reimbursed for direct approved expenditures made on behalf of the organization.

There are no business relationships between the governing body member(s) and the organization. It is the policy of JAFCO to forbid any compensation (other than reimbursement for actual expenses) to be given to Board of Trustee members.

Conflict of Interest:

Board Members must avoid placing themselves in a position of conflict of interest, or even giving the appearance of a conflict of interest. A conflict of interest is defined as any of the following situations:

Conflict of Interest Related to Personal Gain:

Board Members are expected to donate their time, energies and expertise to JAFCO without compensation or financial gain. Board Members are therefore not to receive any compensation from JAFCO. Employment by JAFCO of Board Members or immediate relatives (spouse, children and parents) is not permitted. Contracting for services directly with Board Members is discouraged and generally not allowed. A permitted exception to this rule is when a pre-existing contractual relationship is in effect when a new Board Member is elected to the Board. In such cases, full disclosure of such a relationship must be given to the Board prior to voting on the admittance of the new member. Furthermore, any future contracts must be reviewed and approved by a majority vote of the Board.

Conflict of Interest Related to JAFCO Case Management and Clinical Direction:

JAFCO encourages participants in the child welfare system (i.e., foster parents, adoptive parents, guardians, and volunteers) to become members of the Board of Trustees. Board Members who are involved in child welfare cases affecting a JAFCO child ("a person served of JAFCO") should adhere to the following guidelines to avoid a conflict of interest:

1. JAFCO's decisions related to case management and clinical determinations are the sole and exclusive responsibility of the JAFCO professional staff who operate under the direct control and supervision of the JAFCO Executive Director.
2. Board Members who disagree with JAFCO's position (as determined by the JAFCO Executive Director in regard to the case management or clinical judgment of a specific case) the Board Member must take one or more of the following actions to avoid a conflict of interest:
 - a. Agree to accept and support the JAFCO case management and clinical direction.
 - b. Remove him/her from the community side of the JAFCO case (step-down as guardian ad litem, volunteer, foster parent) and cease continued involvement in the case.
 - c. Remove him/her from the JAFCO side of the case by resigning as a JAFCO Board Member.
 - d. Remain involved in the case and as a member of the JAFCO Board - but refrain from either publicly opposing the views, policies and actions of JAFCO (i.e., in statements to media or court); or take any step(s) that would interfere with or disrupt the implementation of the JAFCO case management plan.

The Executive Committee will review any Conflict of Interest issues and will present a resolution to the problem. If the matter cannot be resolved between the Executive Committee and the Board Member, it will be brought to the Board of Trustees for resolution.

Signature:



07/13/07

Executive Director

Date

Fiscal

GB-4

Disclosure

Original Date: 09/01/06
Revision Date: NA
Policy Number: GB-4
Department of Origin: Governing Board

Policy:

The JAFCO Board of Trustees shall notify the local licensing office of the Department of Children and Families, in writing, within seven days if:

- 1) Any civil or criminal action that is commenced in any jurisdiction against any director, officer, employee or agent of the agency, where the civil or criminal action relates to or affects the licensed child-placing activity of the agency; or
- 2) Any action is commenced in any jurisdiction to revoke or suspend a license held by JAFCO.

Signature:



Executive Director

09/01/06

Date

Fiscal

GB-5

Changes in Agency Function or Purpose

Original Date: 09/01/06

Revision Date: NA

Policy Number: GB-5

Department of Origin: Governing Board

Purpose:

It is the intent of JAFCO, Inc. to maintain clear communication with the " Department" therefore the Agency shall adopt the following steps to ensure that notification concerning any changes in agency function or purpose are correctly communicated:

Procedure:

1. The JAFCO Board of Trustees shall provide written notification within 30 days after implementation to the Department of Children and Families of changes in the JAFCO's director, statement of purpose, services to be provided, person to be served, intake procedures or admission criteria.
2. If the changes in JAFCO's policies and procedures represent a major departure from the original policies, JAFCO's Board of Trustees will submit to the Department their new operating policies and procedures 10 days prior to implementation.

Signature:



Executive Director

09/01/06

Date

Fiscal

GB-6

Agency Closure

Original Date: 09/01/06
Revision Date: NA
Policy Number: GB-6
Department of Origin: Governing Board

Policy:

It is the intent of the Agency to maintain clear communication with the Department therefore if JAFCO ceases operation, for any reason, it shall notify the Department in writing at least 30 days prior to closing and shall provide the following information to the department:

1. Legal transfer of surrender and releases of any children in its custody to another licensed child-placing agency or to the department;
2. Appropriate transfer of responsibility for children in temporary placement to another licensed child-placing agency or to the department. Deposit all open and closed records to the department or another licensed child-placing agency.
3. Appropriate transfer or termination of services to all other person served.

Signature:



Executive Director

09/01/06

Date

Fiscal

GB-7

Media Response

Original Date: 09/01/06

Revision Date: 03/08/11

Policy Number: GB-7

Department of Origin: Governing Board

Policy:

JAFCO is dedicated to ensuring the health and safety of our children, staff and volunteers. All possible efforts are made to comply with policies and procedures which are in place to prevent harm or injury to all parties. Despite all of these efforts it is possible that an unfortunate incident may occur at some time.

Possible incidents can include:

- auto accidents
- abuse allegation or staff misconduct
- child on child abuse
- runaway/missing child
- parent or stranger abduction
- injury, illness or accidental death of a child
- drowning
- complaint or suit by a person served

If any of these incidents come to the attention of the media it is likely that JAFCO will be portrayed in a negative light. It is important that the Board of Directors is consistent in their support of the agency and its commitment to the safety of the children and the staff. All questions and inquiries from the media are directed to the Executive Director (or the Director of Operations and Clinical Services in his or her absence). Board members must decline to comment to the media, and should ask the media to contact the JAFCO office and its Executive Director.

In the event that any of the above incidents are reported to the media, the Executive Director (or the Director of Operations and Clinical Services in his or her absence) will immediately notify the Board President (or Vice-President in his or her absence). An Emergency Executive Committee Meeting will be convened to review the incident report and ensuing internal investigation. The JAFCO Board President will be available to answer questions from Board Members and also inform the board as to how they can be of help.

Signature:



Executive Director

03/08/11

Date

Fiscal

GB-8

Donor Centered Philosophy

Original Date: 09/01/06
Revision Date: 03/08/11
Policy Number: GB-8
Department of Origin: Governing Board

Policy:

JAFCO recognizes that a philanthropic spirit is the common characteristic of all our donors. We recognize that a philanthropic gift is one whose worth is relative to means and that only the donor can define generosity. It is the act of giving and not the size of any donation that underlies our donor recognition and communication philosophy and our actions.

JAFCO recognizes that our organization and its volunteer leaders and professional staff play an important role in introducing people to the privilege and opportunity of giving. JAFCO practices an approach to all of our communications and recognition that is donor-centered, placing the interests and sensibilities of our donors into the design and delivery of all communications and recognition, whether written or in-person. JAFCO welcomes feedback from our donors and encourages an open door policy which invites donors to be part of the JAFCO family. Donors are welcomed to tour the Children’s Village and request agency information.

Signature:



Executive Director

03/08/11

Date

Fiscal

GB-9

Office Equipment and Transportation

Original Date: 09/01/06
Revision Date: NA
Policy Number: GB-9
Department of Origin: Governing Board

Policy:

1. JAFCO shall maintain furnishings and equipment in good working condition for the operation of the office.
2. JAFCO shall assist person served in arranging transportation necessary for implementing the child's case plan. Vehicles used by staff to transport children shall be maintained and operated in safe condition, and in conformity with appropriate motor vehicle laws.
3. The number of persons in a vehicle used to transport children shall not exceed the number of available seats; children shall be restrained by a safety belt or by a child restraint device when being transported in motor vehicles in accordance with Sections 316.613 and 316.2004, F.S.
4. JAFCO shall make its services accessible to the population it has designated it will serve. JAFCO shall comply with Chapter 553, Section 553.45 through 553.495, F.S., for accessibility of their service to handicapped persons.

Signature:



Executive Director

09/01/06

Date

Fiscal

GB-10

Board Records and Availability

Original Date: 09/01/06
Revision Date: 03/08/11
Policy Number: GB-10
Department of Origin: Governing Board

Policy:

The governing body shall meet as a whole at least quarterly and shall keep records that demonstrate the ongoing discharge of its responsibilities. Board records shall be available to any governmental or accrediting agency if provided for contractually or as a requirement for licensing.

JAFCO's Board of Trustees shall meet, at a minimum, on a quarterly basis. Board resolutions shall be documented and filed at the agency's offices to provide a record of Board decisions.

Procedure:

Board minutes will be disseminated via email prior to each meeting and will be approved at the beginning of each meeting. Minutes will be stored both digitally and in hard copy.

Signature:



Executive Director

03/08/11

Date

Fiscal

GB-11 Strategic Planning

Original Date: 09/01/06
Revision Date: 03/08/11
Policy Number: GB-11
Department of Origin: Governing Board

Policy:

It is the policy of JAFCO to maintain a strategic plan that is approved by the Board of Trustees. The process in developing this plan will consider input from stakeholders, financial threats and opportunities, organizational strengths and needs, service area needs, regulatory and legislative issues and demographics of persons served.

This plan will be updated at a minimum of once every three years. Information that is gathered from stakeholders is brought to the planning meeting by staff, board members and volunteers. All board members are invited to the strategic planning meeting with senior management staff including the executive director, Director of Operations and Clinical Services, QI director, comptroller and development director. The final draft is approved by the board. It is shared with any stakeholder by request.

Signature:



Executive Director

03/08/11

Date

Fiscal

By Laws of JAFCO Children's Ability Center, Inc.

ARTICLE I - NAME

This institution shall be known as the JAFCO Children's Ability Center, INC., (hereinafter the "Corporation").

ARTICLE II - PURPOSE

Section 1. The Corporation is established exclusively to engage directly in charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

Section 2. In addition the Corporation shall provide assistance to special needs children and their families providing respite care, state-of-the-art treatment, support, research and education for parents, siblings and professionals in the Jewish community relating to the care of children with developmental disabilities. Including, temporary shelter or foster care placement for a child with a developmental disability who is at-risk in the South Florida Counties of Miami Dade, Broward and Palm Beach. While the Corporation was created to meet an unmet need in the Jewish community, the Corporation shall serve any child or family in need.

Section 3. In the event the Corporation should cease to exist for any purpose or no longer be a qualified organization under Section 501 (c)(3) of the Internal Revenue Code of 1986, as amended, then the Corporation shall be organized and shall be operated exclusively for the benefit of any other organization qualified under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, which is operated for similar purposes and conducts or supports similar activities as the Corporation.

Section 4. The Corporation, through its Board of Trustees and professional staff, shall offer and maintain service levels at least equal in extent to the standards prescribed by any regulations of the Federal, State or local governments or agencies having authority to regulate the operation of the Corporation. The Corporation shall be maintained in accordance with State and Federal and without discrimination based upon race, creed, color, national origin, religion, sex, or sponsorship.

Section 5. The Corporation shall derive its income and revenue from donations, legacies, social and religious functions, fees and any other sources which will not endanger the status of its non-profit 501(c)(3) status, under the Internal Revenue Code of 1986, as amended, and approved by the Board of Trustees.

ARTICLE III - OFFICES

The principle office and mailing address of the corporation shall be established and maintained at 4200 North University Drive, Sunrise, the County of Broward, Florida. The corporation may also have offices at such places within or without the State of Florida as the board may from time to time establish.

ARTICLE IV - MEMBERS

The corporation will not have any members.

ARTICLE V - BOARD OF TRUSTEES

Section 1. Management of Affairs: The Board of Trustees shall have the management and control of the property and affairs of the organization.

Section 2. Number and Qualifications: The Board of Trustees shall initially be composed of three (3) Trustees, but no more than twenty-five (25) Trustees. At least three Trustees must also be currently serving as Trustees of JAFCO Children's Foundation, Inc. Each Trustee shall be entitled to one (1) vote upon any matter properly submitted to the Trustees for their vote.

Fiscal

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JAFCO Children's Ability Center By Laws (continued)

Section 3. Term: All Trustees shall be selected by JAFCO Children's Foundation, Inc. The Trustees shall serve three (3)-year terms; however, one-third (1/3) of the initial Trustees shall serve a one (1)-year term, one-third (1/3) of the initial Trustees shall serve a two (2)-year term and one-third (1/3) of the initial Trustees shall serve a three (3)-year term, as shall be designated for each at the time of their appointment. Thereafter all Trustees shall serve three (3)-year terms. A vacancy among any Trustee shall be filled by a majority vote of the then Board of Trustees of JAFCO Children's Foundation, Inc.

Section 4. Vacancies: Vacancies of the Board of Trustees occurring during the year shall be filled by the majority vote of the remaining Trustees.

Section 5. Removal: Any Trustee may be removed by a two-third (2/3) vote of the Trustees excluding the Trustee who is the subject of Removal.

Section 6. Meeting of Trustees: Regular and/or special meetings of the Board of Trustees shall be held at such times and at such places as the President may determine. These meetings may also be called by any three (3) Trustees requesting same by written notice to the Secretary. At least three (3) days' notice shall be given to all Trustees. The President shall be the presiding officer at all Board meetings, except in his absence, the Vice President shall preside. Each Trustee shall regularly attend every Board meeting, and attendance of less than two-thirds (2/3) of the meetings within twelve (12) consecutive months shall be grounds for removal.

Section 7. Quorum: At all meetings of the Board of Trustees a quorum shall be required which shall consist of an affirmative two-thirds (2/3) vote of the entire Board. A vote of a majority of Trustees present shall decide any proper question that may come before the meeting.

Section 8. Procedure: The order of business and all other matters of procedure at every meeting of the Board of Trustees shall be determined by the Officer presiding at the meeting.

Section 9. Action Without a Meeting: Any action to be taken by the Board may be authorized by an affirmative vote of two-thirds of all the Trustees by telephone or by unanimity of Trustees in writing in cases where it is impractical to convene a meeting of the Board and certain actions need to be authorized.

Section 10: Disclosure Statement/Conflict of Interest: The Board of Trustees, shall exercise the utmost of good faith in all transactions with and on behalf of the Corporation, Such persons shall be held to a strict rule of honesty and fairness and shall not accept gifts, favors, emoluments or hospitality that might interfere with their decision making or actions affecting the Corporation. 3 Trustees shall disclose the possible existence of conflict of interest to which he or she is subject. The report shall be submitted to the President. Full disclosure of all facts pertaining to any transaction where a conflict of interest may arise shall be made before executing the transaction. The Disclosure Policy will be reviewed with the Board of Trustees on an annual basis.

Section 11. Indemnification: The Corporation shall indemnify every member of the Board of Trustees and officers of the Corporation to the full extent permitted by law against any and all reasonable expenses, including attorneys' fees, actual and necessarily incurred by him or her in connection with the defense of any action brought against a member of the Board of Trustees and/or Officer of the Corporation, except in relation to matters as to which it shall be adjudged that such Trustee or Officer has breached his or her duty to the Corporation. In addition, the Corporation shall have the power to indemnify any person who is serving at the request of the Corporation as a member, officer, Trustee or agent of another corporation, partnership, joint venture, trust or other enterprise to the full extent permitted by law against any and all reasonable expenses. These expenses shall include attorneys' fees, actual and necessarily incurred in connection with any action brought against him or her except in relation to matters as to which it shall be adjudged that such person has breached his or her duty to the Corporation.

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JAFCO Children's Ability Center By Laws (continued)

Section 12: Order of Business: The Order of Business in the conduct to the meetings of the Board of Trustees of the Corporation shall be as follows:

1. Approval of Minutes
2. Reports of Committees and/or Officers
3. Communications
4. Report of Auxiliaries
5. Unfinished Business
6. New Business
7. Adjournment

However, the President or a majority of the Board of Trustees, by vote, may alter the order of business. Any order of business adopted at any meeting and not objected to by a majority of the Board of Trustees present shall constitute the regular order of business.

ARTICLE VI - TRUSTEE'S MEETINGS

Section 1. Annual Meeting: The Annual Meeting of the Trustees shall be held at such place as shall be designated by the Board during the 1st week in January or such other date and order as shall be determined by the Board. At such Annual Meetings, Trustees shall be appointed or re-elected, as the case may be, for the ensuing year, and the Trustees thus elected shall thereupon elect Officers for the ensuing year from the Trustees thus elected. Any other business may be transacted at such meetings.

Section 2. Special Meetings: Special Meetings of the Trustees may be called by the President or a majority of the Board at such time and place as shall be designated in the Notice of meeting mailed to Members at least three (3) days prior to such meetings.

Section 3. Procedure: The order of business and all other matters of procedure shall be determined by the presiding officer.

Section 4. Quorum: At all trustee meetings, there shall be present in person a majority of the Board of Trustees which shall be necessary to transact any business on behalf of Trustees.

Section 5. Vote Required: All matters that come before the trustee meeting shall be determined by a majority vote of those trustees actually present unless otherwise specified herein. Proxies shall not be permitted.

ARTICLE VII - OFFICERS AND DUTIES OF OFFICERS

Section 1. Officers: At each annual meeting of the Board of Trustees, the Trustees shall elect a President, a Vice President, Secretary and Treasurer, and any such Officers to hold their offices until the next annual meeting. Any Officer may be removed during the year by a two-thirds (2/3) vote of the reaming Board of Trustees. If the office of any Officer becomes vacant for any reason, the vacancy shall be filled by a majority vote of the remaining Board. Each officer shall be elected from the Board of Trustees.

Section 2. President: The President shall be the Chief Executive Officer of the organization and shall preside at all meetings of the Board. The President shall have the general powers and duties of supervision and management of the organization which usually pertains to such office, and shall perform all such other duties as are property acquired by the Board, including but not limited to appointing committees.

Section 3. Vice President: There shall be a Vice President who shall, in the absence or at the request of the President, perform the duties and exercise the powers of the President. The Vice President shall also have such powers and perform such duties as usually pertain to his/her office or as are properly required by the Board of Trustees. The Vice President shall also perform the duties of any other absent officer who may be unavailable from time to time.

Section 4. Treasurer: The Treasurer shall be the custodian of all funds of the Corporation, maintaining and keeping full and complete records and books of account thereof. He or she shall cause to be deposited all funds of the Corporation and withdraw same from such depositories, as may be designated by the Board of Trustees. He or she shall make a full report of his or her conduct of office and account of the Corporation's funds at each meeting of the Board of Trustees, and also at the Annual Meeting following his or her election.

Fiscal

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JAFCO Children's Ability Center By Laws (continued)

Section 5. Secretary: The Secretary shall attend all meetings of the Board, if possible, and keep the minutes thereof or appoint a member of the Board as a substitute. The Secretary shall perform such other duties as usually pertain to said office or as are properly required by the Board of Trustees. Copies of all correspondence should be given to the Secretary for the files.

ARTICLE VIII - AMENDMENTS

These Bylaws may be amended at any regular or special meeting of the Board of Trustees by an affirmative two-thirds vote of the entire Board of Trustees, and at least ten (10) days prior to the said regular or special meeting at which such amendment to the Bylaws shall be voted upon, a notice shall be sent to each and every member of the Board of Trustees setting forth said proposed amendment.

ARTICLE IX. PARLIAMENTARY LAW

The rules contained in Roberts "Parliamentary Law and Rules of Procedure," unless as otherwise provided for within these Bylaws, shall be the guide in questions of parliamentary practice.

ARTICLE X. DISSOLUTION

Section 1. This Corporation is not for profit and, therefore, there shall never be distributed any gains, profits or dividends to any officer, trustee or member, if any, of the Corporation, and no part of the net earnings shall inure to any individual. It is a further express provision of these Articles that the assets and proceeds of every nature and description of the Corporation are, and shall forever be, irrevocably dedicated to the benevolent purposes stated in Article II hereof. In the event of liquidation or dissolution of the Corporation, the Board of Trustees shall, after paying or making provision for the payment of all liabilities of the Corporation, dispose of all assets of the Corporation to any exempt organization(s) under Section 501(c)(3) as the Board of Trustees shall determine.

Section 2. The affirmative vote of two-thirds of all of the Trustees shall be required to adopt or approve the following actions:

1. Liquidation or dissolution of the Corporation
2. Merger, consolidation or transfer of substantially all of the assets of the Corporation; or
3. Repeal, modification, amendment, restatement in whole or part, or addition to the Articles of Incorporation or Bylaws of the Corporation.

ARTICLE XI - FISCAL YEAR

The fiscal year of the Corporation shall be determined by the Board of Trustees. Until changed by the Board of Trustees, the fiscal year end shall be December 31.

JAFCO Children's Ability Center, Inc., a Florida not-for-profit corporation.

By: Louise Allen, President

By: Randi Winter, Secretary

Fiscal

Revision Signature Page

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The Fiscal Policies for JAFCO have been in effect since JAFCO's opening in October, 1992. Not all policies were in written format and it has been an ongoing process to document all Fiscal Policies.

The above mentioned policies have been reviewed and/or revised by the Executive Director.

Signature:

Executive Director

Date

Fiscal

FIS-1

Fiscal Management of the Agency

Original Date: 10/01/92
 Revision Date: 1/10/05
 Policy Number: FIS-1
 Department of Origin:Fiscal

Purpose:

JAFCO shall be fiscally managed in accordance with policies approved by the Board of Directors

Procedure:

It is the policy of the JAFCO Board of Directors that JAFCO, a 501c3 nonprofit charitable organization, shall be fiscally managed in accordance with policies which are approved by the Board of Directors, and implemented through procedures and directives issued by the Executive Director or designee. Furthermore, approved fiscal policies are to be contained in a Fiscal Policy Manual, used as a reference for compliance with policy and the consistency of management decisions.

Process:

Fiscal policies shall be developed in accordance with General Policy which may be summarized as follows:

The need for policy can be identified by many sources; it may be worded by staff or board member; it must be studied and approved by the applicable committee; it must be approved by the full Board of Directors; it is implemented by the Executive Director.

Responsibilities:

1. Implementation: Executive Director (or designee)
2. Upkeep of Manual: Comptroller

Signature:



01/10/05

Executive Director

Date

Fiscal

FIS-2

Annual Budget Process

Original Date: 10/01/92
 Revision Date: 08/08/14
 Policy Number: FIS-2
 Department of Origin:Fiscal

Policy:

1. It is the policy of JAFCO to develop an annual budget that ensures resources are being appropriately allocated for the mission, goals, and objectives of the organization to be met. In addition, the budget process will assist with monitoring the fiscal performance of the organization.
2. The budget preparation, approval and monitoring process require the involvement of program and administrative personnel as well as members of the governing authority, with each area providing specialized assistance to the process.
3. The budget process will be influenced by the requirements of Federal, State and local revenue sources; however, internal procedures will govern the process.
4. It is the policy of JAFCO that the budget will be approved annually by the Board of Directors and any subsequent revisions that entail a significant change to the budget will be approved by the Board of Directors.
5. Budget revisions not deemed to be significant to the overall budget will be approved by the Executive Director.
6. It is the policy of JAFCO to monitor the budget to ensure compliance through management meetings and written management reports.

Procedure:

1. Budget Preparation
 - a. Budget preparation begins prior to the start of the fiscal year end.
 - b. The responsibilities for providing budget figures are as follows:
 - (i) Program Services: The Executive Director and the Comptroller will meet with the Director of Operations and Clinical Services to provide budget figures for salaries and expenditures related to the operation of each clinical program.
 - (ii) Administrative Services: The Executive Director and the Comptroller will meet to provide figures for salaries and expenditures related to the operation of each administrative service including HR and Development.
 - (iii) All expected revenues will be projected according to the specific line item and/or program/service area through collaboration of both administrative and program personnel involved in those specific areas. Revenues based on federal, state, and local government sources will be projected conservatively, due to the lack of certainty of year-to-year government allocations.
 - c. The budget will consist of the general areas of:
 - (i) Revenue Schedules
 - (ii) Personnel "Expenditure" Expense Schedules
 - (iii) Operating "Expenditure" Expense Schedules
 - (iv) Capital Expenditures
 - d. The overall budget process is as follows:
 - (i) The fiscal department shall use the previous years' experience with adjustments for current conditions in determining expenditures. A detail listing of all staffing patterns will include: salaries and wages for current employees with merit raises calculated for the budget year; new positions projected; position description and date of hire for each current employee; and a breakdown of each position assigned to specific programs. The expected costs of fringe benefits will be set. Expenditures are grouped into categories and each category details line by line the budgeted expense. Capital requests and other foreseeable necessities are included as well as program specific operating expenses. An overall agency budget is prepared as well as individual budgets for each program.
 - (ii) Total revenues are projected, also based on previous years' experience with adjustments for current conditions. The revenue sources will be influenced by the requirements of Federal, State and local revenues, as well as grants and foundation gifts. Fundraising and special events revenues will be influenced by the Development Plan. Consideration of external environment information is also taken into account to determine patterns of donations, financial trends, challenges and opportunities.

Fiscal

FIS-2

Annual Budget Process (continued)

- (iii) Budget "expenditures" expenses are then totaled and compared to revenues; and adjustments are made to balance revenues and "expenditures" expenses.
 - (iv) A budget draft will be prepared at least 30 days prior to the commencement of each fiscal year. JAFCO's fiscal year is January 1 to December 31. The fiscal department will submit the budget draft for review and revision to the Finance Committee. The fiscal department will then make any changes and submit the final budget to the Board of Directors for approval. Final approval of the annual budget will be made at the first meeting of the year of the Board of Directors.
 - (v) Following final approval, the approved budget for the fiscal year will be distributed to funding sources as needed.
2. Budget Management and Revision:
- a. Budget revisions may be necessary when a specific line item is overspent or projected to be overspent.
 - b. If a budget revision appears to cause a significant change in the operation of a program or department, the revision must be approved by the Board of Directors.
3. Budget Monitoring:
- a. All programs/department will be responsible for operating within the approved allocated budget.
 - b. Revenues connected to federal, state and local sources that have historically been interrupted or lacked consistency will be monitored closely.
 - c. All purchasing and hiring will be monitored closely.
 - d. Many funds require spending in specific areas and to be monitored through specific methods.
 - e. The Comptroller will be responsible for ensuring that the special requirements of funding are completed as specified by the funding source.
 - f. The line item budget of the organization will be updated monthly. This report will be compared to the annual budget and distributed to the Executive Director, Director of Southeast Development (or designee) and the agency accountant for review.
 - g. The Board of Directors will receive the Budget Report on a monthly basis.

Signature:



Executive Director

08/8/14

Date

Fiscal

FIS-3

Cash Flow Forecasting

Original Date: 09/01/06
Revision Date: 08/08/14
Policy Number: FIS-3
Department of Origin:Fiscal

Purpose:

To manage cash flow effectively and efficiently.

Procedure:

Cash flows reflect the actual sources and uses of funds as received and disbursed; although the operating budget is balanced, the timing of the projected activities can cause great fluctuations in the agency's cash position.

1. On a monthly basis, the comptroller determines cash flow needs using the Cash Flow Reports in the QuickBooks Accounting System. This report is used to compare trends and forecast revenues throughout the year; and it is used in conjunction with the annual budget.
2. The monthly cash flow report takes into account the following activities: cash on hand, accounts payable, payroll, accounts receivable, any line of credit balances and any other miscellaneous activities that may affect the cash flow. Revenues for the month are predicted based on the annual budget and projected fund raising activities. Expenses are either fixed or estimated on current trends and trends over the past few years.
3. When cash flow is determined to be insufficient for the monthly activities, a written request is made to the Executive Director and the Board Treasurer to request a pre-approved fund transfer from the JAFCO children's Foundation. Each year upon approval of the annual budget the board also approves an amount that may be transferred from the JAFCO Children's Foundation into the JAFCO Operations Account as needed using the above procedure.
4. Being able to plan periods of cash deficits is one of the primary purposes of the report and it is a critical function in cash management. At these times short term borrowing may be appropriate. In addition expenditure plans can be altered when cash deficit periods are anticipated.

Signature:



08/08/2014

Executive Director

Date

Fiscal

FIS-4

Working Capital and Contingency Funds

Original Date: 11/01/04
Revision Date: NA
Policy Number: FIS-4
Department of Origin:Fiscal

Policy:

It is the policy of JAFCO to maintain adequate working capital and contingency funds through specific fiscal mechanisms and practices that will ensure the continuation of services without interruption.

Procedure:

1. The Executive Director is responsible for the fiscal planning functions that ensure services are provided without interruption.
2. The comptroller with the approval of the Executive Director shall create cash flow projections monthly to ensure that adequate funds are being received and that lines of credit are not being exceeded.
3. The executive director shall utilize the cash flow projections information to adjust payments as required to ensure cash is available for operations.
4. The Executive Director can request funds from the JAFCO Children’s Foundation in an amount which is decided annually based on the annual budget and approved by the Finance Committee. These funds are available on demand to assist with cash flow as needed.
5. The organization will utilize the financial planning process, which includes an annual budget to ensure minimal reliance on lines of credit.
6. Financial planning of expenditures is done on a monthly basis with long-range cash flow projection to maximize funds.

Signature:



Executive Director

11/01/04

Date

Fiscal

FIS-5

Method of Accounting

Original Date: 10/01/92

Revision Date: 01/10/05

Policy Number: FIS-5

Department of Origin:Fiscal

Purpose:

It is the policy of the Board of Directors that the books, records and accounts of the agencies be maintained on the accrual method of accounting.

Procedure:

1. The accrual method of accounting requires that expenses be recorded when incurred and that revenue be recognized when earned. In a like manner, assets will be recorded when earned or obtained, and liabilities will be recorded when incurred.
2. A general ledger shall be maintained as a book of final entry to record the financial transactions of the agency under the accrual method of accounting.
3. Balance sheet accounts will be established and maintained on an agency wide basis.
4. Revenue accounts will be established in sufficient detail to reflect sources of funds earned, and whenever practical, to reflect the reporting unit that generated the revenue.
5. Expense accounts are assigned on a cost center basis, with each Reporting Unit assigned a complete set of expense accounts.

Responsibilities:

1. The Comptroller or his designee is responsible for overseeing the maintenance of and the entries into the general ledger, and for establishing and maintaining the chart of accounts and cost center assignments.
2. The Executive Director supervises the Comptroller and is ultimately responsible for the integrity of the accounting system.

Signature:



01/10/05

Executive Director

Date

Fiscal

FIS-6

Net Assets Policy

Original Date: 10/01/92
 Revision Date: NA
 Policy Number: FIS-6
 Department of Origin:Fiscal

Purpose:

Net assets classifications and requirements

Procedure:

Net Assets may be reported in three groups: Permanently Restricted Net Assets, Temporarily Restricted Net Assets and Unrestricted Net Assets.

1. Permanently restricted net assets. The part of the net assets resulting (a) from contributions and other inflows of assets whose use by the organizations is limited by donor-imposed stipulations that neither expire by passage of time nor can be fulfilled or otherwise removed by actions of the organization, (b) from other asset enhancements and diminishments subject to the same kinds of stipulations and (c) from reclassifications from (or to) other classes of net assets as a consequence of donor-imposed stipulations.
2. Temporarily restricted net assets. The part of the nets assets resulting (a) from contributions and other inflows of assets whose use by the organization is limited by donor-imposed stipulations that either expire by passage of time or can be fulfilled and removed by actions of the organization pursuant to those stipulations, (b) from other asset enhancements and diminishments subject to the same kinds of stipulations, and (c) from reclassifications to (or-from) other classes of net assets as a consequence of donor-imposed stipulations, their expiration by passage of time, or their fulfillment and removal by actions of the organization pursuant to those stipulations.
3. Unrestricted Net Assets. The part of net assets that is neither permanently restricted nor temporarily restricted by donor-imposed stipulations.

Signature:



Executive Director

10/01/92

Date

Fiscal

FIS-7

Cash Control Process

Original Date: 10/01/92
Revision Date: 08/08/14
Policy Number: FIS-7
Department of Origin:Fiscal

Policy:

It is the policy of JAFCO to maintain active controls on the receipt of revenues and to ensure that revenues are deposited to appropriate budget cost center accounts.

Procedures:

1. The executive director is responsible for maintaining procedures for the security of revenues generated by JAFCO.
2. JAFCO shall maintain the security of revenues through the following methods:
 - a. Mail: All incoming mail to the organization is opened by an independent party. This person cannot be responsible for the preparation or signing of checks or reconciliation of bank accounts.
 - b. Checks: All incoming revenue by mail from third parties (such as funding sources, grants, donations and special events) is logged into the accounting data system by accounting personnel. The checks are retrieved from the mailbox each day; they are date stamped by the Database Specialist and are kept with any special instructions or forms that designate how the donation or grant will be applied. The Database Specialist collects the checks into a daily batch and they are then given to the Comptroller or designee to be counted and tallied. The batch is then returned to the Database Specialist who copies the checks with any enclosures. The checks are then removed from the enclosures and placed in an envelope; to ensure that all information is secure; all attachments are discarded in a designated receptacle for shredding. The copied information is used by the Database Specialist for processing into the donor database by specific account. The checks are then deposited into the Bank by the bookkeeping assistant or designee via the scanner directly into the bank. When the batch is complete, a Transmittal Report is generated which summarizes the gifts by account. The Database Specialist posts the gifts and prints out acknowledgement letters to the donors. A separate report is prepared for the Comptroller which categorizes the gifts by accounts; and this report along with the checks are then given to the Comptroller for processing. The Comptroller enters the information from the report into the accounting system (QuickBooks), checking for the accuracy of each cost center account. "The checks are then added again to check the total against the report and the original tape for accuracy. When the report and the totals balance, the checks are processed for deposit." When a check is personally delivered by a donor, the same procedure is followed.
 - c. Charge Cards: JAFCO accepts donations by MasterCard, VISA, American Express and Discover. These donations are processed into the donor system and the accounting system in the same manner as the checks; however, the charges are deposited into the bank on a timely basis via the electronic charge machine processor.
 - d. Wire Transfer of Stocks: Occasionally a donor will want to make a donation of stocks. A form is emailed or faxed to the donor with the stock transfer information. When the stock is received into the designated bank account, it is immediately sold and the gift is processed into the proper cost center account. In this case, the Database Specialist is given the report from the Comptroller and the donation is entered into the donor database.
 - e. Electronic Deposits: Certain funders/contracting agencies (Medicaid, ChildNet, Children's Services Council, United Way) deposit funds or donations electronically. JAFCO is notified by email or regular mail when a deposit of this nature is made. The Comptroller checks with the bank to verify that the funds have been received; then the funds are processed into the proper cost center account. The Database Specialist also processes the funds into the donor database.
 - f. Cash Donations: When cash is received, the money is counted by the Comptroller or designee and a Cash Form is completed. The information on the form is entered into the donor database system by the Database specialist. When cash is received, that donation is added to the daily Transmittal Report for processing into the accounting system. Cash is kept in a locked drawer until it can be deposited. All cash donations are taken to the bank for deposit usually on a weekly basis.
 - g. All incoming checks or cash obtained by clinicians are receipted and logged by accounting personnel, delivered to accounts receivable, copies of checks are made, entered, and deposited daily.
 - h. The Comptroller or designee deposits any revenues received into the organization's bank account on a daily basis.

Fiscal

FIS-7

Cash Control Process (continued)

- i. The Corporate Compliance Policy, specifically the procedures on monitoring and auditing will serve as the organization's oversight in the area of fraud. Procedures will ensure that monitoring and auditing practices are being conducted on an ongoing basis in critical areas of the organization's operation to maintain compliance with all laws and guidelines governing the organization. Internal self-audits will include, but not be limited to, fiscal services (billing and coding), marketing, contractual services, health and safety practices, use of agency resources, confidentiality, dual relationships, and medical necessity.

Signature:



Executive Director

08/08/2014

Date

Fiscal

FIS-8

Donation of Goods and Services

Original Date: 10/01/92
Revision Date: 03/08/11
Policy Number: FIS-8
Department of Origin:Fiscal

Purpose:

To establish proper accounting practices for in-kind donations.

Procedure:

In-Kind donations are goods and services contributed or donated to the program. All donors are acknowledged for their gifts with a letter that describes their donation. JAFCO does not determine a fair market value of the goods and services received as these must be determined by the donor via a professional appraisal process.

JAFCO reserves the right to sell donations of cars, boats, and real estate. The monies received from the sale of these items will be used to support JAFCO programming. Donor will receive a donation receipt at the time of donation as well as notification of sale with amount listed. It is the responsibility of the donor to follow all IRS guidelines when using these donations as a tax deduction. The only exception to this procedure is a car in excellent working condition may be given to a JAFCO client at the discretion of the agency. In such cases the donor should consult their tax preparer to determine the maximum tax deduction allowable by law.

Signature:



Executive Director

03/08/11

Date

Fiscal

FIS-9

Revenues

Original Date: 10/01/92
 Revision Date: 03/10/05
 Policy Number: FIS-9
 Department of Origin:Fiscal

Purpose:

To describe JAFCO funding operations according to the various revenue classifications.

Procedures:

JAFCO's funding sources are as follows:

1. Government Contracts (Federal, State and Local) and Grants. Under contractual agreements with local, State and Federal government agencies, the program renders services to person served. These contracts/grants are based on a projected census of qualified person served to be served on a budgeted basis. The contracts/grants vary in length, fiscal period and format. The specific reimbursement policies and per unit payments are detailed on the various grants.
2. Medicaid. These contracts are established for the person served that qualify under their requirements.
3. Self-pay person served. It is JAFCO's policy to never deny services due to inability to pay. As a private, not-for-profit organization partially funded by the local, State and Federal governments, JAFCO generates additional revenue from person served when it is determined that they are financially able to contribute toward operating costs and expenses.
4. Cash and Property Contributions from individuals, corporations, foundations, etc. These are donations of cash, property and charitable contributions from the community. This revenue must be generated in order to assist JAFCO in funding its operation.
5. Dividends, Interest and earnings from investments. Revenue of these kinds are generated by investing excess cash in interest-bearing money market accounts, stocks and bonds, and re-purchase agreements.
6. Special events and Fund raising activities. Activities and direct mail appeals are organized to raise funds for various purposes.
7. Other miscellaneous revenue. Any other type of revenue that originates thru the sale of fixed assets or any miscellaneous income not identified as part of the other categories is classified as Other Miscellaneous Revenue.

Signature:



Executive Director

03/10/05

Date

Fiscal

FIS-10

Investment of Funds

Original Date: 10/01/92
Revision Date: NA
Policy Number: FIS-10
Department of Origin:Fiscal

Policy:

It is the policy of JAFCO to receive maximum benefit from a surplus of operating funds in a manner that will strengthen the stability of the organization. Surplus operating funds are defined as excess funds that are available after liquidation of available lines of credit.

Procedure:

1. The Executive Director is responsible for determining the existence of surplus funds and to inform the Finance Committee about the prompt investment of those funds into safe interest bearing accounts.
2. The Executive Director utilizes current bank balances and projections of cash flow to determine the availability of investment funds.
3. The Executive Director determines the cash flow needs for 30 days. The Finance Committee determines the length of investment of excess funds.
4. The Executive Director oversees the deposits of funds in an interest bearing checking account or other interest bearing accounts.
5. Long-term investments such as endowment funds or targeted gifts are overseen and directed by the Board of Directors.

Signature:



Executive Director

10/01/92

Date

Fiscal

FIS-11

Expenditures

Original Date: 10/01/92
 Revision Date: NA
 Policy Number: FIS-11
 Department of Origin:Fiscal

Purpose:

To describe the need and type of expenditures needed to provide quality service to the JAFCO's person served.

Procedure:

Expenditures represent the necessary uses of resources in order to provide a quality service to JAFCO'S person served. These comprise of two categories: budgeted (regular transactions) and unbudgeted (emergency or unusual disbursements). In addition, there are two different types of expenditures: cash disbursements and in-kind expenses.

Expenditures follow a cycle: budget, procurement/purchases, recording and settlement. The expenditure cycle must be carefully monitored due to the agencies' status as not-for-profit organizations. JAFCO depends on government funding as well as generated funding; JAFCO is subject to governmental scrutiny by major contractor/grantors. Most of the governmental revenue results from disbursements of a previously determined percentage of the expenditures.

Expenses are regulated by contract/grant clauses; questionable expenses may jeopardize the ability to obtain governmental funds in those types of contracts.

JAFCO is also responsible for the non-reimbursable portion of their expenses: the matching portion of expenses related to contracts/grants and for those that are not covered under contracts/grants.

As a result, proper judgment and management of the use of available resources is essential in order for the agencies to continue providing services to the community. In addition, grants that pay based on per unit charged are further complex. The fiscal department monitors and captures all applicable direct and indirect expenses in order to properly negotiate these unit notes.

Signature:



10/01/92

Executive Director

Date

Fiscal

FIS-12

Fiscal Purchasing

Original Date: 03/10/95

Revision Date: 01/10/99

Policy Number: FIS-12

Department of Origin:Fiscal

Purpose:

To provide quality service to JAFCO's person served.

Procedures:

1. Purchases for person served represent necessary expenditures in order to provide optimal care for JAFCO person served.
2. When the person served(s) are in need of a clinical service such as, but not limited to, dentist, pediatrician, daycare, tutoring and after school activities the clinical staff will determine the urgency of the need. The clinical staff will proceed to fill out Request for Payment Form and attach appropriate invoices and payment information and submit it to the Director of Operations and Clinical Services. According to the urgency, the Director of Operations and Clinical Services will respond within twenty-four hours. The Director of Operations and Clinical Services will either deny or approve. If the Request for Payment Form is approved the form and accompanying documents are then sent to the accounting department and the comptroller will issue a check in accordance with accounting policy. The Executive Director will further review the request and make final approval with signage on the check.
3. The use of a written purchasing request is not limited to clinical services and it can be used for entertainment as a form of positive reinforcement for person served in the attempt to modify behaviors. This sub-category is left to the discretion of the Executive Director.
4. When an emergency situation arises, such as eviction or medical need, there may not be time to make a Request for Payment Form. In that case, the verbal approval by either the Director of Operations and Clinical Services or the Executive Director will suffice. The Executive Director's signature on the check will be evidence of final approval of an emergency payment.

Signature:



Executive Director

01/10/99

Date

Fiscal

FIS-13 Accounts Payable

Original Date: 10/01/92
Revision Date: 01/03/08
Policy Number: FIS-13
Department of Origin:Fiscal

Purpose:

The accounting department receives, processes, and records all vendors and suppliers invoices. As a compatible element of the Accrual Method of Accounting, expenses are to be recorded when incurred. For this to be accomplished, invoices for goods and services are to be recorded in the benefiting month. In addition, the liability incurred when goods are services are obtained, must be reflected in the general ledger of the Agency.

Procedure:

1. Processing Invoices: Invoices enter the accounting department for processing. All additional invoices that are reoccurring such as employee reimbursement are processed exclusively through accounting. Reoccurring payments are utilities, insurance payments, loan payments or any monthly expense that is ongoing.
 - a. The comptroller or the designee will have the following responsibilities when processing invoices.
 - (i) Stamp all invoices with the date-received stamp.
 - (ii) Match receiving documents and invoice to determine that they agree, this includes verification that the appropriate purchasing policies and limits were followed. In the case of reoccurring invoices or employee reimbursement the comptroller will verify original receipt and authoring signature.
 - (iii) Verify mathematical accuracy of invoices, check for original invoice or possible duplicate invoice in the system.
 - (iv) Ensure that the state sales tax has not been included on the invoice.
 - (v) Code invoice to appropriate program/cost center.
 - (vi) Forward all processed invoices to executive director for approval.
2. Cash Disbursements:
 - a. For ease of processing, invoices are processed for payment on a weekly basis allowing enough time for the payment to reach its destination on or before the due date. The Comptroller will determine which invoices will be authorized for payment and verify that sufficient cash reserves are in place to cover the total amount disbursements.
 - b. The Comptroller will generate the checks and attach the corresponding backup documentation to the checks. The Executive Director or authorized signatory will then sign the checks.
 - c. After the checks are signed, the Comptroller or the designee will route the checks to the appropriate locations and or venders and file the check stubs with their documentation in the vendor file.
3. Month End Closing: The stub ledger shall be reconciled to the general ledger account every month by the Comptroller. The accountant or designee shall periodically do an unannounced reconciliation. The Comptroller will report any discrepancies to the Executive Director. The Executive Director will review each month's reconciliation and verify by signature. The Executive Director will approve all adjustments and the accountant shall enter them. The accountant will make final approval by signature.
 - a. The Comptroller (or designee) must do the following prior to closing.
 - b. Code and verify all invoices
 - c. Enter all manual checks
 - d. All checks should be used in sequential order
 - e. All void checks should be defaced and filed.

Signature:



Executive Director

01/03/08

Date

Fiscal

FIS-14

Inventory of Capital Equipment

Original Date: 09/06/01
 Revision Date: NA
 Policy Number: FIS-14
 Department of Origin:Fiscal

Policy:

It is the policy of JAFCO to ensure that the assets of the organization are accounted for and are available for use through minimizing risks of misuse, damage, theft, or loss. An inventory of assets will be maintained for the purposes of calculating depreciation, tracking and security, and loss reporting for insurance.

Procedure:

1. **A capitalized asset** will be defined as a product purchased having a useful life of greater than one year and having a cost of greater than \$1,500.
2. **Accountability** will be required of those individuals empowered with the authority to decide as to the acquisition, employment, and disposition of the asset. Should documentation be absent regarding the assignment of accountability of an asset to a specific individual, accountability shall rest with the program or unit supervisor whose budget account paid for the asset, or program or unit supervisor who received equipment through donations or transfer.
3. **Schedule of Fixed Assets:** The organization will maintain a schedule of fixed assets for the purposes of tracking and security, calculating depreciation, and loss reporting for insurance. All items valued at over \$1,500 will be given a Unit Number and will be recorded in the Fixed Asset Schedule and charged as "equipment" in the general ledger. All equipment items must be purchased through the Comptroller, and the JAFCO Accountant will be responsible to record all appropriate purchases in the inventory on a timely basis. Programs or service sites receiving equipment are responsible for notifying the Comptroller when the equipment arrives.
4. **Cash Sales and Transfer of Assets:** Programs or departments are not authorized to make cash sales of JAFCO property. An asset may be sold for cash only after all attempts have been made to redistribute the asset. Cash sales will be conducted by the Executive Director and the proceeds deposited in a fund designated by accounting.
5. **Trade-in:** Whenever an asset is traded in with the purchase of a like-asset and with additional payment involved, or one-for-one exchange, the inventory number, serial number model and description of the asset traded in must appear on the related purchase order.
6. **Disposition:** Assets are to be disposed of in a manner that will maximize benefits of the organization. The Executive Director will approve the disposition.
7. **Disposal of Worthless Assets:** JAFCO assets which are excess of need and cannot be sold, transferred, or otherwise disposed of for the benefit of the organization can be taken to the public dump, recycling center, or put into the trash at the site where they are located. This action can only be through the approval of the business office. Items determined to have no value must be transferred to the Comptroller, with the approval of the Executive Director with supporting documentation of previous action to otherwise dispose of the asset. After the business office has authorized the request the item will be removed from the property and removed from the property record.

Signature:



Executive Director

09/06/01

Date

Fiscal

FIS-15

Accounting and Financial Records Retention and Access

Original Date: 10/01/92
Revision Date: NA
Policy Number: FIS-15
Department of Origin:Fiscal

Purpose:

To establish guidelines and procedures for the retention and access of accounting and financial records.

Procedure:

1. Financial records and all records necessary to document expenditures, income, liabilities, and assets must be kept for four years.
2. If any litigation, claim, or audit is started before the expiration of the required retention period, the records shall be retained until resolutions of all issues arising are resolved and final action is taken place.
3. Upon demand from our grantors and at no additional cost to them, the fiscal department will facilitate the duplication and transfer of any records or documents during the required retention period.
4. The fiscal department will assure that our records shall be subject to inspection, review, copying, or audit by Federal, State, and other personnel duly authorized by the grantor.
5. Records for the current fiscal year will be retained on-site in locked file drawers in comptroller's office. Records for other periods may be retained in storage area; placed in labeled file drawers or storage boxes which clearly depict contents and fiscal year.

Signature:



Executive Director

10/01/92

Date

Fiscal

FIS-16

Month-End Closing Procedures

Original Date: 10/01/92
Revision Date: 01/03/99
Policy Number: FIS-16
Department of Origin:Fiscal

Purpose:

To outline specific processes and procedures in place regarding the month end closing.

Procedure:

1. Prepare journal entries. There are two types of entries, Standard and General. Standard journal entries are prepared on a monthly basis to record in the general ledger those entries which are recurrent entries while General (non-standard) journal entries are prepared to record unusual transactions. All journal entries shall be adequately explained and supported by appropriate documentation which substantiates the data. Journal entries are compiled on a general journal and posted to the general ledger at the end of the month.
2. Reconcile Accounts.
3. Prepare Financial Statements explaining any significant variances. Variance Analysis should be done on a monthly basis concerning current year-to-date activities to prior year-to-date activities for both the Statement of Financial Position and the Statement of Activities. These financial statements and analysis assist management in making decisions as well as serve as internal controls. Significant variance analyses are also done comparing current year-to-date activities to budgeted activities.
4. Monthly Reports and Financial Statements are distributed to the Board of Directors on an as need basis. Monthly reports and financial statements are always distributed to the Board of Directors prior to their scheduled meetings which are generally on a bi-monthly basis.

Signature:



Executive Director

01/03/99

Date

Fiscal

FIS-17

Bank Account Reconciliations

Original Date: 10/01/92
 Revision Date: 08/16/11
 Policy Number: FIS-17
 Department of Origin:Fiscal

Purpose:

To utilize best practices for preparation of bank reconciliations.

Procedure:

1. All banks, in which the agency maintains accounts, must be instructed to issue account statements on a monthly basis.
2. A person other than the Comptroller who prepares the checks or the Executive Director who signs the checks must be responsible for reconciliation of the bank statements.
3. The person who distributes the mail will personally hand the unopened bank statements to the person who reconciles the statements.
4. At no time may the comptroller or the executive director handle the bank statements prior to reconciliation.
5. All such statements will be reconciled to the Agency's records within ten business days of receipt.
6. Bank account reconciliations are to be prepared with sufficient detail to show bank balance, outstanding checks, deposits in transit, and other reconciling items to arrive at book balance.
7. Any unusual or concerning discrepancies will immediately be reported to the Board Treasurer directly by the person who is reconciling the statements.
8. Completed reconciliations reports will be stored in the Fiscal Binder.
9. Reconciled bank statements will be filed in the comptroller's office until needed for the annual audit and then retained for four years.
10. At the end of the fiscal year, all "stale" checks outstanding for a year should be written off or put into an unclaimed property account and reported to proper authorities
11. Anonymous reporting of ethical or policy violations is also available to all JAFCO staff via the corporate compliance reporting system.
12. The King's Point Chapter account may be reconciled by the comptroller since she does not prepare or sign the checks.

Signature:



Executive Director

08/16/11

Date

Fiscal

FIS-18

Billing and Coding

Original Date: 01/10/99
Revision Date: 11/01/06
Policy Number: FIS-18
Department of Origin:Fiscal

Purpose:

To develop a policy on billing and coding procedures for payer sources and to identify personnel responsible for billing and coding.

Procedure:

Billing occurs according to procedures developed by the particular payer sources. Procedure Manuals and Contracts are maintained by the Billing Department.

Fiscal staff is oriented to billing and coding procedures upon hire. Retraining occurs as necessary. Clinical staff are oriented and retrained as to their clinical medical records duties as per the Policies and Procedures manual.

Timing and process of determining enrollment, eligibility and benefits is determined by the Policies and Procedures delineated in the relevant payer manual.

1. Medicaid:

- Medicaid billing occurs according to the procedures outlined in the Medicaid Procedure Manual. Billing for services in the Medicaid program occurs according to the receipt of authorizations and reauthorization for services. Initial authorizations for services are obtained prior to services being rendered depending on the prepaid plan. Obtaining these authorizations is at present the responsibility of the Quality Improvement Director or designee. The program supervisor shall inform the Quality Improvement Director of authorizations required for persons served. At that time, medical necessity shall be discussed. Reauthorizations are obtained in accordance with Medicaid rules.
- Covered services and limits, as well as frequency of services are determined by clinical judgment. This clinical judgment is guided by Medicaid rules and other contract regulations. In residential (group homes) programs, frequency of services is also determined by Medicaid rules and Mental Health guidelines.
- Determination of whether the person served has met benefit limits is determined by each program's Utilization Review Protocols. (Since the utilization review team is not functioning this should be determined by the billing department staff).
- The Medicaid Provider Manual clearly states rules pertaining to concurrent multiple services for the same or different providers, either ongoing or on day of transfer. JAFCO follows all applicable billing practices relating to billing for different services on the same day.
- The coding system for charges is also predetermined by Medicaid Use of the DSM IV diagnostic codes.

2. Contract with the Area wide Council on Aging of Broward County:

- The Older Americans Act (OAA) Program is a federal program that provides assistance to older persons and caregivers. JAFCO contracts with the Area wide Council on Aging of Broward County to provide financial services for grandparents who have legal custody of their grandchildren and are in need of such financial assistance. The method of payment is based on a fixed unit rate and cost reimbursement. This contract is requested annually and the rate determinations are based on the budget that is submitted for this program. The budget must be approved each year by the Area wide Council on Aging of Broward County. Their budget year is January 1 through December 31. Billing is done on a monthly cycle.
- The process of determining enrollment and eligibility into the program is defined in the contract. JAFCO will be reimbursed for services based on the parameters of the coding system that is outlined in the contract.

Fiscal**FIS-18****Billing and Coding (continued)**

- After eligibility has been established, the fiscal department is responsible for billing each month. The clinician completes on a monthly basis a JAFCO Contact Log for each person served which includes the person served name, date of contact, length of contact and type of contact to ensure that it meets with the contract guidelines. A unit of service for the purposes of this contract is defined as one hour. The Contact Log must be approved by the Director of Operations and Clinical Services. When this is completed, the logs are sent to the fiscal department for billing. Child care services are also reimbursed as part of the contract. Units of child care services are billed in 1 hour increments and vary according to need of the family. Invoices and check stubs to the child care providers are used to determine number of units billed. In addition, Caregiver Training Support Groups are offered to the grandparents and are conducted by the JAFCO clinician. For billing purposes, a unit of group training is one hour.
- Invoices to the Area wide Council on Aging of Broward County are due by the tenth of the month for the previous month's services. The invoices must be approved in writing by the Executive Director. Any additional reports required by the contract are produced by the appropriate staff and approved by the designee executive.

3. ChildNet Contracts:

- JAFCO contracts with ChildNet to provide services to the eligible Emergency Shelter and Group Home residents. Eligibility is determined by the contracts. ChildNet contracts must be renewed each year; their fiscal year is July through June of the following year. A unit is defined as one bed day per child.
- Billing occurs once a month and is due on the 10th of the month for the previous month. A monthly census of the residents is required each month. All billing forms are provided by ChildNet. The fiscal department contacts each program supervisor each month to determine that the census is correct. Services provided follow the requirements determined in the contract. The invoices are then prepared and approved by the Executive Director. Any additional reports required by the contract are produced by the appropriate staff and approved by the designee executive.

4. Children's Services Council of Broward County:

- JAFCO contracts with Children's Services Council of Broward County to provide services under a specific program entitled Multi Systemic Therapy (MST). A budget is prepared each year to ensure continuity of this contract. Children's Services Council of Broward County's fiscal year for the MST Program is October thru September of the following year. A person served eligibility is determined by the parameters of the MST program. A billing unit is defined as one hour of service and is defined in the contract. In addition, the MST contract presently allows for certain services to be reimbursed under the heading Flex Funds and is solely determined by the contract each year. The process of determining enrollment and eligibility into the program is defined in the contract. JAFCO will be reimbursed for services based on the parameters of the coding system that is outlined in the contract.
- After eligibility has been established, the fiscal department is responsible for billing each month. The clinician completes on a monthly basis a JAFCO Contact Log for each person served which includes the person served name, date of contact, length of contact and type of contact to ensure that it meets with the contract guidelines. A unit of service for the purposes of this contract is defined as one hour. The Contact Log must be approved by the Director of Operations and Clinical Services. Billing occurs once a month and is due on the 10th of the month for the previous month. Invoices are done electronically in accordance with Children's Services Council of Broward County guidelines. Invoices must be approved by the Executive Director and must be delivered to the Children's Services Council with all receipts and documentation.
- Any additional reports required by the contract are produced by the appropriate staff and approved by the designee executive.

5. Letter of Agreement

- When a governmental, local or private entity wishes to enter into a Letter of Agreement for Services from JAFCO, the terms and conditions will be outlined by that entity. JAFCO will then be responsible for billing and coding according to that entity's guidelines.
- There will never be financial incentives to patients who receive our services.

Fiscal

FIS-18

Billing and Coding (continued)

- Written policies relative to conducting audits of the required charge sheets are found in the continuous quality improvement plan. The Quality Improvement Director or designee conducts audits using the billing forms and the actual clinical record to ensure that the documentation is filed in a timely manner and that the services rendered are medically needed. In the event that documentation is missing or that it is deemed not appropriate for the service rendered a billing correction sheet shall be completed and the funds shall be returned to the payer. In the event that the billed date and the date of service do not match, the billing correction form shall be used to return funds to payer and a new billing form shall be submitted with the correct date. All programs shall submit billing directly to the Fiscal department at the beginning of each month. The clinicians submit their billing form at the end of the month. The supervisor checks a random sample of clinical records against the billing to ensure that the documentation is in the file. In the event that the documentation is not found, the responsible clinician is given a warning with one work day to produce the documentation. In the event that the documentation is not found the service is deleted from the billing form.
- Services are not refused due to inability to pay. Medicaid rules and Mental Health regulations prohibit such a practice so long as the program is able to maintain fiscal viability. The agency has a sliding fee scale available for those who are not eligible for Medicaid, or other insurance. The persons served fact sheet shows the benefits he/she receives and is used to determine their fee when using the sliding fee scale. Financial assistance is uniformly enforced.
- Procedures for processing all denied and pended claims are delineated in the Agency's Finance Procedure Manual. This includes review of charges, verification of documentation, correction protocols and appeals process.
- Procedures for identifying and refunding overpayments are delineated in the Agency's Finance Procedure Manual. This includes the audit procedures utilized to verify the agency's billing for services rendered.

Signature:



Executive Director

11/01/06

Date

Fiscal

FIS-19

Approval of Funding Contracts

Original Date: 10/01/92
Revision Date: NA
Policy Number: FIS-19
Department of Origin:Fiscal

Purpose:

Determine guidelines in the approval of funding contracts

Procedure:

1. Funding contracts are defined as contracts in which an outside entity and JAFCO enter into an agreement whereby JAFCO provides services in consideration for receiving funds. All of JAFCO's funding sources are included in this definition.
2. The Executive Director is authorized to execute all funding agreements on behalf of the Agency.
3. Amendments to contracts may be made by the Executive Director who is thereby acting on behalf of the Board of Directors.
4. Amendments are reported to the Board of Directors at the next scheduled board meeting.
5. Significant changes in the language or scope of the contract shall be reported to the Executive Committee at the next scheduled board meeting.

Signature:



Executive Director

10/01/92

Date

Fiscal

FIS-20

Unit of Service Contacts

Original Date: 09/01/03
Revision Date: NA
Policy Number: FIS-20
Department of Origin:Fiscal

Purpose:

Establish a procedure for invoicing contracts paid by units of service.

Procedure:

1. The report including the total units produced during the period being requested will be provided by the director of the program. Such report should include information in compliance with the contract requirements.
2. When the total of units served is received in the contract billing department, the invoice is generated according to the specifications required for the funding source.
3. Invoice should be signed by the Executive Director or other designee in the contract.
4. Services provided should follow the requirements determined in the budget.
5. Invoice and cover letter, if required, should be delivered or mailed to the funder before the due date established in the contract.
6. Any additional reports required by the contract should be produced by the appropriate staff and approved by the designee executive.

Signature:



Executive Director

09/01/03

Date

Fiscal

FIS-21

Cost Reports

Original Date: 09/01/03
Revision Date: NA
Policy Number: FIS-21
Department of Origin:Fiscal

Purpose:

Establish a procedure for cost reporting.

Procedure:

1. JAFCO will ensure that all preparation and cost reports submitted to governmental and private organizations are properly prepared and documented according to all applicable federal and state laws.
2. All cost reports will be submitted and prepared with all costs properly classified, allocated to the correct cost centers and supported by verifiable and auditable cost data.
3. All cost reports preparation or submission errors will be corrected in a timely manner and, if necessary, clarify procedures and educate employees to prevent or minimize recurrence of those errors.

Signature:



Executive Director

09/01/03

Date

Fiscal

FIS-22

Fees for Services Rendered

Original Date: 01/10/99
 Revision Date: 07/24/2014
 Policy Number: FIS-22
 Department of Origin:Fiscal

Policy:

JAFCO uses the TANF Eligibility Determination Scale as a guideline to access whether or not a family is at or above the poverty level. This determination takes into consideration the size of the family and the annual or monthly income. If the family is below poverty level, charges for services rendered will slide to \$1 per unit of service.

If a family is above poverty level, services will refer to the JAFCO sliding scale of fees. If there are no extenuating circumstances present, a family will be asked to pay for services rendered. This procedure will be explained and they will receive an invoice for services on a monthly basis. An assessment will be done at intake and reviewed annually. JAFCO may offer services free of charge depending upon the program.

Fees:

1. Volunteer Initial Screening Fees:
 FBI Fingerprinting and Local Law Enforcement Background Checks \$36/person

2. Foster Care and Adoption Pre-Service Training Fee:
 MAPP Training Supply/Book Fee \$15/family

3. Adoption Home Study:
 Sliding Scale Factor: 1.5% of combined family annual gross income
 Minimum Fee: \$600
 Maximum Fee: \$1200
 Method of Payment:
 - ½ fee due upon initiation of home study process.
 - ½ fee within 30 days after completion of Adoptive Home Study.

4. Private Adoption Placement*:
 Sliding Scale Factor: 10% of combined family annual gross
 Minimum Fee: \$6,000
 Maximum Fee: \$12,000
 Method of Payment:
 - 1/3 due upon receipt of letter of Acceptance for Placement (non-refundable)
 - 1/3 due one month after placement
 - 1/3 due three months after placement

5. Administrative Fee for Adoption Agencies using JAFCO for foster care placement:
 \$500.00 annual fee
 \$100 per night that placement is provided

Fiscal

FIS-22

Fees for Services Rendered (continued)

6. Therapeutic Services (based upon TANF Eligibility Guidelines):

Annual Gross Family Income	MST Services/week	Therapy/session	Psychiatric Services/hr.
below \$30,000	\$1	\$1	\$1
\$30,000-\$39,999	\$5	\$5	\$10
\$40,000-\$49,999	\$10	\$10	\$15
\$50,000-\$59,999	\$15	\$15	\$20
\$60,000-\$69,999	\$20	\$20	\$25
\$70,000-\$79,999	\$25	\$25	\$30
\$80,000-\$100,000	\$30	\$30	\$40
Over \$150,000	\$50	\$50	\$100

7. Residential Services (based upon State of Florida child support guidelines):

Monthly Net Family Income	Private Shelter or Group Home Placement/child/day
below \$650	\$.10-\$1.00
\$651-\$1000	\$1.01-\$5.00
\$1,001-\$1,500	\$5.01-\$9.00
\$1,501-\$2,000	\$9.01-\$12.00
\$2,001-\$2,500	\$12.01-\$15.00
\$2,501-\$3,000	\$15.01-\$18.00
\$3,001-\$3,500	\$18.01-\$22.00
\$3,501-\$4,000	\$22.01-\$25.00
\$4,001-\$4,500	\$25.01-\$28.00
\$4,501-\$5,000	\$28.01-\$32.00
\$5,001-\$6,000	\$32.01-\$35.00
\$6,001-\$7,000	\$35.01-\$38.00
\$7,001-\$8,000	\$38.01-\$40.00
\$8,001-\$9,000	\$40.01-\$43.00
\$9,001-\$10,000	\$43.01-\$46.00
Over \$10,001	\$46.01-\$80.00

Parents who place their children privately at JAFCO are responsible to provide private medical insurance or Medicaid and all co-pays for doctor's visits and medication.

- 8. Agency/Attorney Fees for Private Shelter Placement:
\$100.00 per day plus reimbursement of any medical expenses incurred
- 9. Respite Program(based on 2013 HHS Poverty Guidelines)

Fiscal

FIS-22

Fees for Services Rendered (continued)

Based on 2014 HHS Poverty Guidelines

	Co-pay Amount	\$0	\$2	\$4
2014 HHS Poverty Guidelines		For Annual Household Income Up To:		
	Persons in Household	185%	300%	400%
\$15,730	(2)	\$29,101	\$47,190	\$62,920
\$19,790	(3)	\$36,612	\$59,370	\$79,160
\$23,850	(4)	\$44,123	\$71,550	\$95,400
\$27,910	(5)	\$51,634	\$83,730	\$111,640
\$31,970	(6)	\$59,145	\$95,910	\$127,880
\$36,030	(7)	\$66,656	\$108,090	\$144,120
\$40,090	(8)	\$74,167	\$120,270	\$160,360
For each additional person, add 4,060.		\$7,511	\$12,180	\$16,240

Pregnant women count as two people for the purpose of this chart.

"FPL" = Federal Poverty Level

Waivers/Scholarships

Waiver of co-pay can be granted through scholarships under special circumstances (examples are indicated below). All funds collected from co-pays must be utilized to fund the scholarships for families who may fit income criteria and are unable to pay due to extenuating circumstance once eligibility is documented.

- a. Children are receiving free/reduced lunch
- b. Family has multiple children with Special Needs
- c. Family member in the home is terminally ill
- d. Military deployment: A parent is currently deployed by armed forces/reserves

Signature:



07/24/2014

Executive Director

Date

Fiscal

FIS-23

Funds of Person Served

Original Date: 07/01/03
 Revision Date: 12/21/10
 Policy Number: FIS-23
 Department of Origin:Fiscal

Purpose:

To safeguard the funds of children placed in JAFCO's care.

Procedure:

1. Occasionally a minor child will receive funds most likely a monetary gift from a relative or friend for a special occasion such as a birthday or Bar/Bat Mitzvah. If that gift is greater than \$25 it is placed in a sealed envelope and locked securely each evening in the business office. The funds are place under 2 locks at the end of each business day, in a locked drawer and in a locked office. The child's name is placed on the envelope and a log is created with the total of the funds. A child may verbally request money from his or her fund. A supervisor must approve the request. If the request is approved, an entry is made in the log with the date, the reason for the request and the amount; and the money is released to the child in a sealed envelope usually via a group home supervisor. A signature from the child or the supervisor is recorded on the log. A new balance is calculated each time a withdrawal is made; and likewise, if another gift is added to the fund. When there are several children who have funds, each is kept separated from the others in their own sealed envelope. These accounts are non-interest-bearing accounts.
2. The person's served funds are reconciled on a monthly basis and the amount is reviewed with the person served. A meeting each month is set up between the business office and either the person served or a clinical or group home supervisor. The funds are reviewed and discussed; and the log is signed when reconciled. The meetings shall take place no later than the 15th of the following month for the month that is being reviewed.
3. Each group home child is given a weekly allowance from the funding source. The amount of the allowance is based on the child's age, not to exceed \$15 per week. The group home assistant house parent on staff that day is responsible to distribute the allowances for their home. An envelope with an allowance log is kept for each child in a locked box in a locked room of each house. When the allowances are distributed, they are kept there until a child requests some money. The log is used to add and subtract entries. A child is allowed to spend his allowance for incidentals or weekend activities, or he or she may wish to save his allowance for something special. If their savings accumulate to over \$50, the excess is brought to the business office and kept for the child as explained above.
4. Children 18 years and older handle their own accounts with the assistance of JAFCO's Independent Living Coach. Children under the age of 18 have their accounts monitored by the business office.

Signature:



12/21/10

Executive Director

Date

Fiscal

FIS-24

Payroll Policy

Original Date: 10/01/92
 Revision Date: 08/08/14
 Policy Number: FIS-24
 Department of Origin:Fiscal

Policy:

It is the policy of JAFCO to pay employees on a semi-monthly payroll period cycle and to establish procedures to assure that hours worked are recorded and reported properly.

Procedure:

1. Pay Periods: JAFCO has 24 pay periods per year. Semi-monthly occurs on the 15th day and the last day of the month. In the event that a pay date occurs on a legal holiday or weekend, payment will be made on the last work day prior to the holiday or weekend.
2. Time Cards: All hourly non-exempt employees are required to sign in and out on an electronic time clock on a weekly basis. Monday is the first day of the week and Sunday is the last day of the week. Appointed Supervisors are responsible for reviewing, signing and turning the time cards in to the HR office at the beginning of the week for the previous week. Hourly employees are paid on a cycle that is posted in the HR Handbook each year; (Sec 403 Paydays). The pay day chart is also distributed to all employees in December of each year for the following year's schedule or upon hire date. There is no requirement that salaried exempt employees turn in a time card. However, if an exempt employee performs another job function that is normally paid on an hourly basis; they will be required to complete a time card under the same procedures as mentioned-above.
3. Distribution of Checks: JAFCO uses the services of ADP for payroll processing; and the JAFCO Comptroller oversees this process. Employees are paid twice each month on a schedule that is set up annually. The Comptroller utilizes the ADP website to maintain the payroll system. All issues pertinent to employee benefits are managed on this website. These functions include but are not limited to employee tax deductions and benefits, paid time off, salary updates and updates to employee's personal information. The payroll processing is started approximately one week before the actual pay date. After the Comptroller has completed and reviewed the pay check entries, the report is forwarded to JAFCO's Executive Director for final approval. When payroll is approved, a transfer of funds from the JAFCO Operational Bank Account to the JAFCO Payroll Account is made in the exact amount needed to pay employees and subsequent payroll taxes. This transfer is also approved by the Executive Director. ADP then generates the payroll for the appropriate pay date. A pay stub is printed for those employees with direct deposit and a paper check is printed for all other employees. These pay stubs and pay checks are delivered via ADP courier to the JAFCO Comptroller and then are distributed to JAFCO employees.
4. Refer to the JAFCO Employee Handbook for specific details regarding payroll policies.
5. After payroll is processed, all payroll taxes and deductions are paid to the appropriate vendors.

Signature:



08/08/2014

Executive Director

Date

Fiscal

FIS-25

Subcontracted Services

Original Date: 11/01/02
 Revision Date: 01/01/06
 Policy Number: FIS-25
 Department of Origin:Fiscal

Purpose:

Documentation and Agreement for Subcontracted Services.

Procedure:

Subcontracted Services shall be defined as services which are part of JAFCO's required functions, but for which JAFCO contracts outsiders to perform these functions.

1. Contracts to perform services on behalf of the Agency shall be documented in such a way that all of the following elements must be indicated.
 - a. Names of Parties
 - b. Type of Service Contracted
 - c. Quantity of Service
 - d. Invoice/Payment Procedure
 - e. Duration of Agreement
2. All Subcontracted individuals must be screened, fill out form W-9 and receive form 1099 at the end of each calendar year if amounts paid exceed \$600.00. Corporations are excluded from Forms W-9 and 1099. Any subcontracted clinical staff must be screened by procedures set by our licensing agency.

Signature:



Executive Director

01/01/06

Date

Fiscal

FIS-26

Travel Policy

Original Date: 03/10/95
Revision Date: 01/10/99
Policy Number: FIS-26
Department of Origin:Fiscal

Purpose:

To reimburse employees for authorized business travel expenses, including the cost of transportation, meals, lodging, tolls and other related expenses provided such travel is approved and performed in the course of conducting JAFCO business.

Procedure:

Activities which normally justify the reimbursement of travel expenses include attendance at conferences, trainings, attendance at business meetings and seminars, or other selected educational or business functions related to the employee's job. However, all employees must obtain approval from either the Executive Director or the Director of Operations and Clinical Services before embarking on such travel.

Common carrier transportation shall be approved by either the Executive Director or the Director of Operations and Clinical Services, and will be dependent upon distance of the destination and provided suitable scheduling is available. In most cases, travel arrangements will be made by administrative staff. Employees are expected to use prudence in their selection of local transportation at their destination. Costs for meals, lodging and other necessary travel expenses are outlined in the Travel Reimbursement Voucher and employees are required to spend within these guidelines. Transportation to and from business destinations will be by the most economic method. If employees wish to use their own car, the amount to be reimbursed is not to exceed the amount that trip would cost if air transportation were used.

All expenses incurred on authorized business for JAFCO should be submitted to the business office for reimbursement upon return of the trip. The Travel Reimbursement Voucher should be completed by the employee, and then approved by either the Executive Director or the Director of Operations and Clinical Services and all receipts should be included for reimbursement. Employees will not be reimbursed for the expenses of entertainment or alcoholic beverages while on a business trip. Time spent in traveling away from home on business during normal working hours shall be considered hours worked for pay purposes.

Signature:



Executive Director

01/10/99

Date

Fiscal

FIS-27

Mileage Policy

Original Date: 10/01/92
Revision Date: 2/26/2013
Policy Number: FIS-27
Department of Origin:Fiscal

Purpose:

To reimburse employees who use their personal vehicles for authorized JAFCO business.

Procedure:

Employees who use their personal vehicles for business purposes will receive reimbursement for each mile that is driven. Reimbursement cannot be given for the employee's first trip from home to the JAFCO office and their last trip home from the JAFCO office each day. The rate per mile may vary due to fluctuations in gas prices and will be printed on the mileage voucher. Employees driving for JAFCO related business may request reimbursement for parking fees and tolls if proper receipts are provided. All mileage vouchers must be accompanied by a Map Quest or similar driving record form indicating the miles traveled for each destination. All submissions must be on the Mileage Voucher Form and must be approved by either the Director of Operations and Clinical Services or the Executive Director. All forms and documentation must be submitted to the business office not later than the tenth day of the following month after the expense was incurred, unless there is an extenuating circumstance.

In an effort to reduce paper as part of the agency's green initiative, the Executive Director has consented to the following revision to this policy:

All employees seeking reimbursement shall complete a Mileage Voucher Form and obtain a signature approval from the Director of Operations and Clinical Services. The employee shall submit the signed form to the comptroller and scan the supporting documents and e-mail them to the Comptroller within the time frame described above. The Comptroller shall maintain an electronic file for each employee. The employee shall maintain their copy of the voucher and supporting materials for one year.

Signature:



Executive Director

02/26/2013

Date

Fiscal

FIS-28

Credit Card

Original Date: 01/10/04
Revision Date: 03/01/08
Policy Number: FIS-28
Department of Origin:Fiscal

Purpose:

To set up rules and restrictions for use of company credit cards for authorized purchases.

Procedure:

1. Only the Executive Director has the authority to approve issuance of a company credit card(s) and the authority to assign to appropriate staff use of the credit card(s). The card(s) should be kept in an accessible, but secure location. The account number on the card(s) should not be posted or left in a conspicuous place. If a card(s) is lost or stolen, the cardholder must immediately notify the accounting department.
2. Cardholders must remind vendors that JAFCO is exempt from sales tax and cardholders should request from the accounting department the appropriate state exemption certificate so as to avoid paying unnecessary tax on purchases of goods or services. Cardholders cannot obtain a cash advance.
3. Cardholders must retain all documentation pertaining to their purchases, such as a sales receipt. Cardholders must also continue to follow procedures when making purchases for goods and must turn their receipts into the accounting department immediately after purchase is made. All documentation must be kept on file for reconciliation to the monthly statement(s).

Signature:



Executive Director

03/01/08

Date

Fiscal

FIS-29

Petty Cash Funds

Original Date: 11/01/01
 Revision Date: 01/10/05
 Policy Number: FIS-29
 Department of Origin:Fiscal

Purpose:

To set up procedure for the establishment of a Petty Cash Fund.

Procedures

1. The establishment of a petty cash fund requires the prior written approval of the Executive Director. This approval can be evidenced on the check request that establishes the fund.
2. The custodian of the petty cash fund must be a different person from the one who approves the fund reimbursement. It should not be used for any routine or recurring expenses.
3. The comptroller or designee is responsible for care, custody, and control of the petty cash fund and to maintain the funds in a secure place especially after hours.
4. All disbursements from the petty cash fund must be evidenced which identify the items purchased, the amount, and the date of purchase.
5. The petty cash fund cannot be used to make personal loans or to cash personal checks.
6. Reimbursement of the petty cash fund shall be submitted with the disbursement form and subsequent receipts.
7. It is the responsibility of the staff member requesting petty cash to plan ahead and to request reimbursements with sufficient lead time to prevent cash deficiencies.
8. Monies from the petty cash fund are distributed on an as need basis to authorized staff. The custodian of the petty cash fund uses a Cash Disbursement Form to record the following information: date of disbursement, assigned staff, and reason for disbursement and amount.
 - On a recurring basis, a Petty Cash envelope is signed out to each Group Home and The Emergency Shelter each weekend to be used for recreational activities for the children. The Director of Operations and Clinical Services or designee ensures that these funds are spent in a responsible manner. An employee entrusted with the Petty Cash envelope must list the purchases on the envelope and keep all receipts together. These weekly envelopes should be turned in to the Comptroller at the beginning of the following week after they are signed out.
 - Money from the Petty Cash Fund can also be signed out to other authorized staff. It is then the responsibility of the assigned staff to record their purchases and return the corresponding receipts within a reasonable time.
 - When any Petty Cash envelope is returned to the custodian, the return date is recorded on the Disbursement Form. It is then ready to be processed for reimbursement.
9. Reimbursements to the Petty Cash Fund are generally made on a weekly basis. The custodian is responsible for reconciling petty cash. Each time a reimbursement is requested, a Petty Cash Expense Report will be completed and the report and all supporting documents will be sent to the Executive Director for approval. A check will be than be generated by the Comptroller.
10. The custodian of the petty cash fund is responsible for the fund and to document losses. When extenuating circumstances occur such as a burglary of secured funds, written statement of the facts, police reports and or other documentation must be approved by the Executive Director before reimbursement is allowed from agency funds.
11. Whenever a change of custodian is to be made, petty cash reconciliation is to be completed. A statement should also be included indicating that the new custodian accepts the fund as reconciled. Both prior and new custodian should sign; and the signed statement should be filed in the business office.
12. Controls: The accounting office must maintain a file of current petty cash custodians, with signed evidence of responsibility.
13. On an unannounced basis, at least once a year, the accounting office must conduct a petty cash count and reconciliation to the General Ledger.

Signature:



01/10/05

Executive Director

Date

Fiscal

FIS-30

Policy on Debt

Original Date: 11/01/98
Revision Date: NA
Policy Number: FIS-30
Department of Origin:Fiscal

Purpose:

Standard Procedures for Incurrence on Debt

Procedure:

From time to time the financial needs of the agency may require funds through loans, notes, lines of credit and/or other encumbrances.

1. When such circumstances occur, the Executive Director or designee shall present the request for such funding to the Board of Directors.
2. The Board of Directors shall approve the establishment on loans, notes, lines of credits, and/or other encumbrances.
3. The President of the Board and one other officer of the Board, usually the Treasurer or Secretary are authorized to sign such documents of indebtedness.
4. The Director of Accounting or designee shall ascertain that all official documents and/or notes payable are properly executed (payee, address, date, terms, amount borrowed, maturity date, interest rate, collateral, etc.) and recording is correctly achieved.
5. All official documentation will be placed in a secure area. Custody is assigned to the Fiscal Department.
6. The Board of Directors shall authorize the early retirement of any long-term debt; the president will authorize full payment on short-term borrowing.
7. Paid notes and/or loans shall be canceled, effectively defaced and permanently filed.

Signature:



Executive Director

11/01/98

Date

Fiscal

FIS-31

Annual Audit Process

Original Date: 10/01/92
Revision Date: NA
Policy Number: FIS-31
Department of Origin:Fiscal

Policy:

1. It is the policy of JAFCO to complete an annual audit by an independent CPA firm to ensure that our organization is utilizing resources efficiently, economically, and effectively to achieve the purpose for which the resources were furnished, and to use the results of the audit to improve the financial condition of our organization.
2. It is additionally the policy of JAFCO to complete an independent annual audit to achieve the following goals:
 - a. To ensure that JAFCO is responsible in complying with applicable laws and regulations.
 - b. To ensure to all stakeholders that the legal governance authority of JAFCO is accountable in that resources are safeguarded, laws and regulations are followed, and that reliable data is obtained and disclosed.
 - c. To objectively acquire and evaluate auditing information through the use of a qualified external entity practicing under the standards issued by the American Institute of Certified Public Accountants (AICPA).
 - d. To make audit reports available to appropriate stakeholders.

Procedures:

1. Overall Standards of External Audits:
 - a. JAFCO shall ensure the organization conducting the audit meets the following conditions:
 - (i) The audit is conducted by personnel who have the necessary skills.
 - (ii) Applicable standards are followed in planning and conducting the audit and reporting the results.
 - (iii) The auditing organization maintains a system of internal quality control.
 - (iv) The auditing organization maintains independence throughout the auditing process.
2. Parameters of a Financial Audit:
 - a. All external audits will include financial statement audits, and may include other financial related audits.
 - b. The organization's executive director and the board of directors shall determine the type and depth of the audit that is conducted based on the needs of the organization.
 - c. Financial statement audits will determine the following:
 - (i) Whether the financial statements present a fair representation of the financial position of the organization.
 - (ii) The results of operations.
 - (iii) Cash flow in conformity with accepted accounting principles.
 - d. Financial related audits will determine the following:
 - (i) Whether financial information is presented in accordance with established criteria.
 - (ii) The organization has adhered to specific financial compliance requirements.
 - (iii) The organization's internal control structure over financial reporting and safeguarding assets is designed and implemented to achieve the control objectives.
 - e. Financial related audits may include, but not be limited to, audits of the following items:
 - (i) Segments of financial statements, general financial information including statement of financial position, statement of cash flows and statement of revenue and expenses.
 - (ii) Internal controls over compliance with laws and regulations such as bidding, accounting and reporting on grants and contracts (proposals, amounts billed, etc.).
 - (iii) Internal controls over financial reporting and safeguarding assets, including controls using computer-based systems.
 - (iv) Compliance with laws and regulations, and allegations of fraud.
3. JAFCO shall ensure the external audit and subsequent report are conducted with professional care by persons known to possess adequate professional proficiency for the tasks required. This will entail using sound judgment in establishing the scope, selecting the methodology, and choosing the procedures for the audit.
4. The auditing organization will ensure that the work is properly planned and exercise careful consideration of the materials necessary to complete an appropriate audit. With an audit of financial statements, the auditors may set lower standards for materials necessary than when conducting a more comprehensive audit that would require materials necessary to conduct a full quantitative and qualitative examination.

Fiscal

FIS-31

Annual Audit Process (continued)

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5. When conducting financial statement audits, the auditing organization will adhere to the AICPA standards, which are as follows:
 - a. The work is adequately planned and assistants, if any, are to be properly supervised.
 - b. A sufficient understanding of the organization's internal control mechanisms is obtained to plan the audit and to determine the nature, timing, and extent of the tests to be performed.
 - c. Sufficient, competent information is to be obtained through inspection, observation, inquiries, and confirmations, to afford a reasonable basis for an opinion regarding the financial statements being audited.
 6. The auditing firm shall agree to maintain a record of the auditor's work in working papers so that sufficient information will enable an experienced auditor having no previous connection with the audit to ascertain from the papers the evidence that supports the auditors' conclusions and judgments.
 7. The auditing firm shall agree to communicate information to JAFCO regarding the nature and extent of planned testing and reporting on compliance with laws and regulations prior to the initiation of the audit.
 8. The auditing firm shall agree to design the audit in a manner that will provide reasonable assurance of detecting fraud that is material to the financial statements. The primary factor that will be used to distinguish fraud from error is whether the underlying action that results in the misstatement in the financial statements is intentional or unintentional.
 9. If the auditors become aware of the possibility that indirect illegal acts may have occurred within the organization, and that the possible illegal acts could have an effect on financial statements of the provisions of contracts or grant agreements, the auditors should apply procedures specifically directed to ascertain whether an illegal act has occurred.
 10. JAFCO exercises internal controls over safeguarding the assets of the organization. The audit may include plans and processes to obtain a sufficient understanding of the internal controls the organization has in place. The areas include, but are not limited to, expenditures or investments, liabilities incurred and assets. Understanding and reviewing internal controls within the organization will also assess the risk that financial statements might be materially misstated.
 11. The auditing firm will agree to report any discovered fraud or illegal acts directly to the executive director and board of directors, and will only report discovered fraud or illegal acts to authorities outside the organization if the following two conditions are met:
 - a. If the auditors have communicated fraud or illegal acts to the executive director and it has not been reported to the Board of Directors within a reasonable time, the auditors will report the acts directly to the external party specified in law or regulation.
 - b. When the fraud or illegal act involves revenue or assistance from a government body, the auditors will report it to an external party if the organization does not take remedial steps to correct the problem.
 - c. In both of the above instances, the auditor will obtain sufficient, competent, and relevant evidence to corroborate assertions by the organization that it has reported the fraud or illegal acts.
 12. Written audit reports will be submitted to the Board of Directors who shall determine how additional reports are disseminated. Typical organizations who will receive copies of the report will be external funding sources and accreditation organizations that may require such information as a condition of their relationship with the organization.
 13. The organization's external audit policy and procedures will be made available to the auditing firm prior to the initiation of an audit to ensure the firm is acutely aware of the parameters and obligations in conducting an audit.
 14. Audit Process/Persons Responsible:
 - a. The Executive Director is responsible for ensuring that an annual audit is arranged completed, and the results are received and provided to the Board of Directors.
 - b. The Board of Directors shall contract with a local accounting firm annually to conduct an audit of the organization's fiscal practices, books, and records.
 - c. The comptroller shall facilitate the onsite review and organization of records needed to ensure a successful audit.
 - d. The comptroller shall receive a written report from the accounting firm, will review the report and present the findings to the Executive Director.

Fiscal

FIS-31

Annual Audit Process (continued)

- e. The Executive Director shall act on any recommendations to correct and/or enhance business practices.
- f. The Executive Director shall additionally report recommendations of the audit to the Quality Improvement Council. Feedback and suggestions shall be sought from the council to assist in the enhancement of business practices.
- g. The actions taken to enhance business practices and the results of those actions will be documented and reported in the Board of Directors meeting minutes and Quality Improvement Council meeting minutes.

Signature:



Executive Director

10/01/92

Date

Fiscal

FIS-32 Allocating Indirect Cost

Original Date: 04/01/08
Revision Date: NA
Policy Number: FIS-32
Department of Origin:Fiscal

Purpose:

It is the intent of JAFCO to allocate costs to each Person served Program on a yearly basis.

Policy:

JAFCO shall allocate indirect costs to each Person served Program on a yearly basis. JAFCO's fiscal budget is January 1st through December 31st each year. The method for allocating indirect costs shall be based upon the percentage of each individual Person served Program to the entire agency budget for the year. These percentages can vary from year to year based on the size and quantity of the Person served Programs for that year. Indirect costs can include but are not limited to Administrative Costs, Fundraising Costs and costs relating to the general maintenance of the facility.

Signature:



Executive Director

04/01/08

Date

Fiscal

FIS-33

Fiscal Risk Management

Original Date: 01/04/10
Revision Date: NA
Policy Number: FIS-33
Department of Origin:Fiscal

Purpose:

To review, monitor and analyze the financial position of JAFCO at all times.

Procedure:

- 1 The Executive Director and the Comptroller will meet monthly to review the following:
 - Revenues and Expenses
 - Internal and external financial trends
- 2 During the quarterly risk management meetings of the JAFCO CQI Committee, the following items are discussed and analyzed: (see Risk Management meetings)
 - Financial trends
 - Financial challenges
 - Financial opportunities
 - Industry trends
 - Management information
 - Financial solvency, with the development of remediation plans, if appropriate (see development plan)

Signature:



Executive Director

01/04/10

Date

Fiscal

FIS-34

Wire Transfers

Original Date: 7/31/11
 Revision Date: NA
 Policy Number: FIS-34
 Department of Origin:Fiscal

Purpose:

To insure proper procedures for wire transfers:

1. Transfers from to and from outside investment accounts (at SEI, Comerica and Goldman Sachs) and JAFCO Banking accounts
2. Payment to an outside vendor via a wire transfer from a JAFCO Bank account

Procedure:

1. Wire transfer of funds from outside investment entities to JAFCO bank accounts.
 When it is necessary to make a purchase or move money via wire transfer of funds, the following procedure is instituted:
 - a. Upon completion of the monthly cash flow report, the Comptroller will notify the Executive Director that funds are needed for operational expenses.
 - b. With permission of the Executive Director, the comptroller will prepare a fax request to the Treasurer of the JAFCO Foundation Board of Trustees with the request amount to be transferred and his signature.
 - c. Upon receipt of written approval of the Treasurer via fax, the comptroller sends a fax to the investment entity signed by the Executive Director requesting the wire transfer.
 - d. The Comptroller will include the amount to be transferred, the respective bank account information and the date needed for completion.
 - e. The JAFCO CPA or designee will receive confirmation from the JAFCO Investment Account via U.S. mail when the wire transfer is completed.
 - f. The Comptroller will immediately enter the transfer in the respective JAFCO accounts via Quickbooks, our accounting system.
 - g. The JAFCO Children’s Foundation Board is notified by the comptroller and Executive Director via email each time a wire transfer has been made.
 - h. There are always a minimum of two people (one staff and one board member) involved in each wire transfer
 - i. Total maximum annual amount that may be transferred from either the JAFCO Children’s Foundation or an Investment Account (owned by the Foundation) is approved annually as part of the board approval of budget. The maximum amount of money that can be (wire) transferred per month is 250,000 (until this amount is reached) unless otherwise approved by the treasurer of the Children’s Foundation Board of Trustees. Approval of transfers beyond the annual board approved amount may only be made by a resolution of the JAFCO Children’s Foundation Board of Trustees.
2. Wire transfer for payment to an outside vendor
 - a. The Comptroller will notify the Executive Director or in her absence, Treasurer of the Board of Trustees in writing with a request from the vendor for the transfer of necessary funds.
 - b. When the request is approved and signed, the Comptroller will send a written request to JAFCO’s Bank or the Investment Entity of the amount to transferred, the vendor bank information and the date needed for transfer.
 - c. The Comptroller will set up the transfer information with JAFCO’s Bank and the Executive Director will approve of the funds transfer.
 - d. The Comptroller will receive confirmation from the JAFCO Bank and the receiving bank when the transfer is completed.
 - e. The Comptroller will enter the transfer in the respective JAFCO account.
 - f. There are always a minimum of two people (one staff and one board member) involved in each wire transfer

Signature:



07/31/11

Executive Director

Date

Fiscal

FIS-35

Internal Transfer of Funds

Original Date: 7/31/11
Revision Date: NA
Policy Number: FIS-35
Department of Origin:Fiscal

Purpose:

To insure proper procedures for internal transfer of funds between accounts:

1. Internal transfer of funds within JAFCO Bank accounts
2. Internal transfers between accounts in Goldman Sachs Portfolio

Procedure:

1. Transfer of funds internally between JAFCO bank accounts

When it is necessary to transfer funds internally between JAFCO bank accounts, the following procedure is instituted:

- a. The Comptroller will notify the Executive Director (and in her absence the Treasurer of the JAFCO Board of Trustees) in writing (via email) with a request for the transfer of necessary funds from one account to the other.
- b. Upon approval, the Comptroller will create the transfer with the on-line banking system and notify the Executive Director via email that approval of the transfer is pending.
- c. The Executive Director will approve of the transfer.
- d. The Comptroller will verify that the transfer has been made during her daily review of our account balances on-line.
- e. The Comptroller will make the transfer adjustments in Quickbooks, our accounting system.

2. Transfer of funds between accounts in Goldman Sachs portfolio

- a. The Comptroller will notify the Executive Director in writing and in her absence the Treasurer of the JAFCO Children's Foundation of the need to move funds between Investment Accounts, amount of transfer and which funds are involved.
- b. Upon approval a fax is sent by the comptroller to Goldman Sachs with the details of the transfer request.
- c. Confirmation is received via US mail of the transfer
- d. Comptroller makes appropriate entries in Quickbooks.

Signature:



07/31/11

Executive Director

Fiscal

FIS-36 Disadvantaged Business Enterprise (DBE)

Original Date: 05/14/2014
Revision Date: NA
Policy Number: FIS-36
Department of Origin:Fiscal

Purpose:

To ensure nondiscrimination in the award and administration of funding.

Procedure:

Disadvantaged Business Enterprise (DBE) Policy Statement

It is the policy of the Jewish Adoption & Foster Care Options (JAFCO) that disadvantaged business enterprises shall have the opportunity to participate in the performance of contracts financed in whole or in part with Federal funds. Consistent with its overall policy for Affirmative Action, it is hereby declared that the JAFCO is committed to the utilization of Disadvantaged Business Enterprises as vendors, suppliers, and contractors in aspects of procurement and contracting to the extent feasible.

It is the objective of the JAFCO to utilize disadvantaged business enterprises to the intent feasible. JAFCO Contractors or any subcontractor shall not discriminate on the basis of race, color, national origin, or sex in the performance.

Signature:



05/14/2014

Executive Director

Date

Human Resources

Revision Signature Page

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HR-2	Hiring and Processing of New Employees
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HR-4	Verification of Credentials and Background Checks
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HR-45	Job Descriptions
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HR-45-21	Job Description – Evening Receptionist – Part Time
HR-45-22	Job Description – Secretary
HR-45-23	Job Description – Forever Friends Coordinator
HR-45-24	Job Description – Facilities Manager
HR-45-25	Job Description – Maintenance Staff
HR-45-26	Job Description – Housekeeping Staff
HR-45-27	Job Description – Residential Director
HR-45-28	Job Description – Group Home Social Worker
HR-45-29	Job Description – Group Home Program Coordinator
HR-45-30	Job Description – Educational Coordinator
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HR-45-36	Job Description – Hebrew and Music School Teacher
HR-45-37	Job Description – MST Therapist Supervisor
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HR-45-45	Job Description – Children’s Ability Center Developmental Services Coordinator
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HR-45-48	Job Description – Children’s Ability Center Social Worker
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HR-45-50	Job Description – Children’s Ability Center Behavior Tech
HR-45-51	Job Description – Children’s Ability Center Recreation Therapist
HR-45-52	Job Description – Children’s Ability Center L.P.N.
HR-45-53	Job Description – Children’s Ability Center Direct Care Staff
HR-45-54	Job Description – Children’s Ability Center Site Director
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HR-45-56	Job Description – Children’s Ability Center Facility Manager

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HR-45-57 Job Description – Children’s Ability Center Family Enrichment Program Coordinator
HR-45-58 Job Description – Children’s Ability Center Family Resource Program Coordinator
HR-46 Social Media & Networking Recommendations

The above mentioned policies and plans have been reviewed and/or revised by the Executive Director.

Signature:

Executive Director

Date

Human Resources

HR-1

Personnel Policies and Procedures

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-1
Department of Origin: Human Resources

Policy:

It is the policy of JAFCO, Inc. to develop and publish written personnel policies and procedures to promote and facilitate the objectives and practices of JAFCO, Inc. and its programs to all staff, funding sources and licensing bodies.

A copy of all personnel policies shall be available to all staff for study, review and reference. All staff members are expected to be thoroughly familiar with all personnel policies and adhere to same.

Policies may be reviewed and changed through staff input, administrative action or funding mandates as benefits the corporation and its purposes.

All policy and policy manuals are the property of JAFCO, Inc.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-2

Hiring and Processing of New Employees

Original Date: 09/01/06
Revision Date: 07/11/11
Policy Number: HR-2
Department of Origin: Human Resources

Procedure:

1. The Board of Trustees of JAFCO, Inc. shall elect all corporate officers (including President, Vice-President, Secretary and Treasurer) in accordance with the By-Laws.
2. The Board of Trustees of JAFCO, Inc. shall hire the Executive Director of JAFCO, Inc., and with consultation of the President, the Executive Director will hire all Program Directors. All other personnel will be hired by Program Directors or their appropriate supervisors as approved by the Executive Director.
3. JAFCO remains committed to recruiting from within the existing pool of personnel whenever possible and utilizes the best methods of recruiting and retaining qualified staff, while striving to ensure diversity within the workforce. It is the policy of JAFCO to be an equal opportunity employer and to hire individuals solely on the basis of their qualifications for the job for which they have applied. Every effort is made to hire new employees for positions which make the best use of their abilities and in which they will be able to achieve personal satisfaction. In no event shall the hiring of an employee be considered as creating a contractual relationship between the employee and JAFCO. Unless otherwise provided in writing, employment shall be at will, so that either party may terminate the relationship at any time and for any lawful reason.
4. Position vacancies are announced at monthly staff meetings and posted in the monthly Human Resources Newsletter. Student services job sites of local universities, online employee search websites and staffing agencies are utilized for recruitment of new personnel.
5. All applicants for full-time, part-time, volunteer and practicum/intern student positions must complete an application form and supply references who will attest to the applicant's character and ability. Three references are required including character and business references. Additional references may be required in certain circumstances. Applicants will be asked to submit proof of their legal right to work in the United States (Immigration Form I-9) and verification of employment eligibility will be received within three business days after hire using E-Verify, the Department of Homeland Security's website.
6. After applications are received, interviews may be offered to those who appear to be a good match for the agency and its needs. The interviewer will assess the applicant's motivation, character, ability and qualifications. Discussed will be job responsibilities, personnel practices, policies, current staffing needs, employee benefits and compensation practices, along with the needs of the applicant. To aid in the process of selecting applicants most qualified for the job, JAFCO may use job-related employment tests as a part of the normal hiring process for certain positions.
7. Where qualified applicants are available internally, JAFCO may give preference to them in filling available positions by promoting or transferring from within. When applicants for employment are recruited from outside the organization any practical source of qualified personnel will be utilized, and no preferences other than bona-fide occupational qualifications for the position will be stated in the advertisements or other recruiting efforts.
8. Former employees who left JAFCO in good standing may be considered for re-employment and will be considered a new employee from the date of re-employment unless the break is 30 days or less.
9. Reimbursement of an applicant's interviewing expenses may be considered under exceptional circumstances and offered on an individual basis as approved by the Executive Director.
10. Upon being hired, new employees will be given a written offer of employment and a copy of the job description for the position being filled. These should include, at a minimum: job title, pay grade, exempt status, reporting date, statement of probationary period, summary description of the job, specific functions/duties of the job and qualifications required. Employees must sign the copy of the Job Description and Offer Letter as evidence that they understood, accept the job functions required, and as evidence that they received a copy of the Job Description.
11. New employee orientation is prepared, organized and scheduled by the Human Resources Department and the supervisor/director. New employees will be given the balance of routine employment papers to fill out and an Employee Handbook. All background checks and fingerprinting will be completed, references checked, and new employees will be responsible for providing all necessary information for employment.

Human Resources

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Hiring and Processing of New Employees (continued)

12. All employees will be screened in accordance with the requirements of Chapter 65C-14 concerning Background Screening and Fingerprinting. Such requirements include:
 - a. Completion of Affidavit of Good Moral Character
 - b. Applicant Finger Prints submitted to DCF for state and federal criminal records check
 - c. Abuse Registry and Delinquency Records Checks
 - d. Local Criminal Records Check
 - e. Employment History Check
 - f. Character Reference Check
 - g. Drug Screening
 - h. TB TestJAFCO will comply with all DCF regulations and rules related to Background Screening and fingerprinting, and will maintain a current description of such DCF rules on file.
13. A copy of diploma or degree will be kept in all personnel files.
14. All staff members, volunteers and students shall be issued a copy of the applicable statutes and policies in regard to abuse and neglect and shall require each staff member, volunteers and students to acknowledge in writing that they have received and read the material, that they understand it and will abide by the requirements to report all suspected incidents of abuse and neglect to the Florida Protective Services System Abuse Registry as required in Chapter 39. A signed statement acknowledging the above will be kept in the personnel file of all staff members, volunteers and students.

Signature:



Executive Director

07/11/11

Date

Human Resources

HR-3

Interviewing Candidates for Positions

Original Date: 03/06/08

Revision Date: NA

Policy Number: HR-3

Department of Origin: Human Resources

Policy:

An interview is the opportunity for the supervisor or interviewer to determine if the applicant is a viable candidate for the open position by learning more about the applicant’s skills, work style, personality and interests.

Procedure:

1. All persons who express interest in being considered for a position which has been advertised, announced or posted shall be instructed to send a resume or fill out an application as applicable.
2. When candidates who have submitted a resume in application for a position are disqualified based on the information contained in the resume/application, the reasons for such disqualification shall be briefly noted and attached to the resume itself and signed by the person who reviewed the resume and made the decision to disqualify the candidate.
3. Persons who interview candidates for a position that is open shall maintain proper documentation of persons interviewed and the results of the interview.
4. A pre-determined interview script is used as part of the interview process and contains questions pertaining to the interviewee’s work experience, skills and education.
5. Persons interviewing shall review the job description, paying particular attention to the required education and work experience, physical demands and work environment.
6. Persons interviewing shall review and compare received applications and resumes with the job description, paying special attention to the applicant’s employment history, types of jobs held, length of time in each position, reasons for leaving jobs, etc.
7. Persons interviewing shall conduct the interview in a manner that is not in violation of any federal and/or state laws, and shall be trained to be knowledgeable of such laws.

Supervisors/Directors shall send all rejected applications/resumes to the HR Department for proper file storage.

Signature:



Executive Director

03/06/08

Date

Human Resources

HR-4

Verification of Credentials and Background Checks

Original Date..... 03/06/08
Revision Date: 08/08/14
Policy Number HR-4
Department of Origin: Human Resources

Policy:

It is the policy of JAFCO to verify the credentials of personnel hired and employed by the organization with the primary source of the credentials. In addition, the backgrounds of personnel will also be verified. The verification process will be done in a manner that ensures the organization's requirements for employment are met, and the integrity of our service and the persons served are not compromised. The Human Resources Department is responsible for ensuring that the procedures in this policy are followed and met before hire and at intervals throughout employment.

Procedures:

1. **Verification of Credentials:** All credentials required of potential employees to hold specific positions in the organization will be verified with the primary source prior to employment. Initial verification will occur in the areas noted below as follows:
 - a. **Professional License and/or Certification:** The potential employee will provide a copy of the required license and/or certificate to the Human Resources Department as part of the pre-employment process. Human resource personnel will determine the appropriate agency to contact based on the type of license and/or certificate. The appropriate licensing board and/or agency will be contacted by web site, phone call or fax to determine if the license and/or certification is current and in good standing. Human resource personnel will note the outcome of the action by completing the verification form/checklist and placing it in the employee's personnel file. Any additional documentation sent for verification will also be placed in the personnel file. If the potential employee is in good standing, final hiring procedures will be completed. If the potential employee does not have a current license and/or certification or is not in good standing with the licensing board or agency, employment will not occur. If the employment is offered and accepted, the employee will provide human resources with a copy of professional license within 30 days of each annual renewal.
 - b. **Education:** Verification of education prior to active employment requires a copy of the required degree. If the degree has not been issued, a certified copy of the person's official transcript or a letter from the university is acceptable until they receive the degree. For all licensed personnel the Human resource personnel shall verify credentials on an ongoing basis. The human resource staff shall maintain a yearly checklist for each coarse work that each licensee requires in order to maintain their license.
 - c. **Training:** If a position requires the completion of a specific training to be eligible for employment, the training will be verified prior to the start of employment in the following manner:
 - (i) The potential employee will provide the Human Resources Department with the original training certificate.
 - (ii) If the original training certificate is not available, the employee will contact the training organization or educational institution and request that verification of training be sent to the employer.
 - (iii) A copy of the training certificate or verification materials received from an outside source will be placed in the employee's personnel file.
2. **Criminal Background Checks:** A standard criminal background check will be done on all employees prior to employment, using a data search from state and county law enforcement agencies. In addition to the standard background check, there is a comprehensive national database criminal background check. Under no circumstances will an employee be hired without a background check if working with persons served in an unsupervised role or working with children and adolescents. The human resource personnel shall conduct background checks on a yearly basis.
3. **Fingerprinting:** Prior to employment, all employees will be fingerprinted through a licensed agency using Live Scan equipment for a Level II background screening which includes federal and state background checks, resulting in reports from the State of Florida Department of Children and Families. Under no circumstances will any employee be hired without a report from the State of Florida Department of Children and Families qualifying the employee for hire. The human resource personnel shall be charged with conducting a fingerprint check on all employees every five years.

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Verification of Credentials and Background Checks (continued)

4. Driving Record Check: Prior to employment, all employees who will be driving a vehicle owned by the agency or who will be driving children as a part of their job requirement will be screened through the Department of Motor Vehicles. Employment will be determined after review of the report. The Human resource personnel shall be charged with screening drivers licenses at a minimum of one time per year.
5. Drug Testing: Following a conditional offer of employment, a basic drug screen will be completed. The agency will pay for the screening process and refer the conditional employee to a contracted drug screening service. A positive screen will result in the conditional offer of employment being withdrawn by the agency. Human resource personnel will maintain all testing results confidential. For all existing employees the agencies administrative management shall conduct random drug testing at their discretion.
6. TB (Tuberculosis) Testing: Following a conditional offer of employment, a basic TB test will be administered at a contracted health service, and will be paid for by the agency. A positive TB test will result in the employee being referred to a medical professional for an x-ray and diagnosis, which will be paid for by the agency.
7. Immunizations: JAFCO does not require employees to relinquish immunization records.

Signature:



Executive Director

08/08/14

Date

Human Resources

HR-5 Employee Orientation & Training

Original Date: 09/01/2006
Revision Date: 01/31/2014
Policy Number: HR-5
Department of Origin: Human Resources

Policy:

Getting new employees off to a great start on their first day of work sets the tone for creating a productive and successful relationship between an organization and its employees. Orientation is the planned introduction of employees to their jobs, their co-workers and their organization. The orientation process has several important purposes, including:

- Creating a favorable impression of the organization and its work
- Easing the employee's entry into the work group
- Reducing turnover

Orientation programs, like other employment procedures and processes, are administered in a nondiscriminatory fashion. All employees hired for the same types of positions have access to and participate in the same kind of orientation program.

Procedures:

- 1) Orientation responsibilities generally are shared between the new employee's supervisor and the human resources coordinator. The human resources coordinator's primary responsibilities are:
 - To plan, coordinate, oversee and evaluate orientation program activities designed to introduce the new employee to the organization.
 - To serve as part of the official welcoming team, ensuring that new employees complete all required forms, communicating benefits information, and acquainting employees with company policies and procedures.
- 2) All new JAFCO Employees shall complete the following Orientation Training Program:
 - Signing of offer letter and job description
 - Signing of Employment Agreement
 - Receipt of Employee Handbook
 - Benefits package explanation
 - Child Abuse Reporting Guidelines
 - Affidavit of Good Moral Conduct
 - I-9 Form
 - Workers Compensation Form
 - Vehicle Use and Driving Policy
 - Drug Free Workplace Policy
 - Schedule Trainings
 - i) Computer Security
 - ii) CPR, First Aid, Target 0, Blood borne Pathogens, Driver Safety
 - iii) Confidentiality, Cultural Competency, Rights & Responsibilities, Workplace Violence Prevention, Person Centered Planning, Personal Conduct
 - Mission and Purpose of the Agency
 - Program Descriptions
 - Introduction to Staff
 - Phone, Computer and Photocopier Orientation
 - Security System Orientation
 - Facility Tour
 - Questions
- 3) Throughout the orientation process, new employees are encouraged to ask questions and seek guidance on any procedures, subjects or issues affecting their job or employment relationship.
- 4) Evaluation of the orientation process is made on a regular basis. Program effectiveness is gauged by the following:

Human Resources

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Employee Orientation & Training (continued)

- Feedback sought directly from supervisors and employees participating in orientation activities to determine the effectiveness of the orientation effort, and to make changes necessary to ensure that the outcomes of that effort remain successful.
 - Comments made during exit interviews that reveal dissatisfaction stemming from employee's first days on the job.
 - High early turnover, which may be attributed to feelings of alienation and isolation, or to disappointment that a job was not all that it was portrayed to be.
 - The number of calls received by human resources staff about benefits coverage.
 - High incidence of disciplinary actions resulting from a poor understanding of company policies or departmental practices.
- 5) All JAFCO employees working directly with children shall complete 40 hours of in-service training per each full year of employment. JAFCO's training curriculum shall follow required topics as outlined in Chapter 65c-14.056. In-service training shall include but not be limited to: indicators of child abuse, neglect and abandonment, substance abuse and medication management. In addition, JAFCO shall ensure that employees receive training in behavior support and management in order to prompt healthier behaviors from the persons served (see the policy regarding positive approaches). JAFCO also provides ongoing training in the area of cultural competency. The Human Recourse Manager shall maintain a tracking system to ensure that all employees maintain compliance with the training requirements.

Signature:



Executive Director

01/31/2014

Date

Human Resources

HR-6 Introductory Period

Original Date: 09/01/06
Revision Date: 03/06/08
Policy Number: HR-6
Department of Origin: Human Resources

Policy:

All new and rehired employees work on an introductory basis for the first 90 calendar days after their date of hire. The introductory period is intended to give new employees the opportunity to demonstrate their ability to achieve a satisfactory level of performance and to determine whether the new position meets their expectations. JAFCO uses this period to evaluate employee capabilities, work habits, and overall performance.

Procedures:

1. During the introductory period, new employees are eligible for those benefits that are required by law, such as workers' compensation insurance and Social Security. After becoming regular employees, they may also be eligible for other JAFCO-provided benefits, subject to the terms and conditions of each benefits program. Employees should read the information for each specific benefits program for the details on eligibility requirements.
2. Either the employee or JAFCO may end the employment relationship at will at any time during or after the introductory period, with or without cause or advance notice.
3. Upon satisfactory completion of the introductory period, the employee may be reclassified as a regular full-time or part-time employee.
4. At the end of the 90-day period a written evaluation will be completed and become a part of the employee's personnel file. Should the employee receive a positive evaluation, employment will be continued. In the case of an employee not meeting minimum standards the employer reserves the right to terminate employment any time during the introductory period. The employee also has the right to terminate employment during the introductory period at his/her discretion.
5. Those employees who successfully complete the introductory period will receive an annual evaluation to occur no later than their anniversary date of employment. It is the responsibility of the employee's immediate supervisor to complete such evaluation and forward it to the Human Resources Department. The employee evaluation will be accomplished using standard JAFCO formats. All employees will have an opportunity to respond to their evaluation prior to it becoming a permanent part of their personnel file. All staff members will receive an evaluation at least annually.
6. Any significant absence will automatically extend an introductory period by the length of the absence. If it is determined that a satisfactory evaluation cannot be made during the 90-day introductory period, it may be extended at the discretion of the supervisor.

Signature:



Executive Director

03/06/08

Date

Human Resources

HR-7

Employment at Will

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-7
Department of Origin: Human Resources

Policy:

Employment with JAFCO is voluntarily entered into, and the employee is free to resign at will at any time, with or without cause, unless an individual employment contract containing a specified term has been executed. Similarly, JAFCO may terminate the employment relationship at will at any time, with or without notice or cause, so long as there is no violation of applicable federal or state law.

Procedure:

1. No representative of JAFCO is authorized to modify this policy for any employee. Supervisors and management personnel shall not make any representations to employees or applicants concerning the terms of conditions of employment with JAFCO which are not consistent with JAFCO's policies.
2. This policy shall not be modified by any statements contained in employee handbooks, employee applications, memorandums or other materials provided to employees in connection with their employment. None of those documents shall create an expressed or implied contract of employment for a definite period nor an expressed or implied contract concerning any terms or conditions of employment.
3. Employees may be asked at the time of hiring to acknowledge this policy.
4. Completion of a probationary period shall not change an employee's status as an employee-at-will or in any way restrict the agency's right to terminate the employee.
5. Nothing contained in this manual, employee handbooks, employee applications, memorandum or other materials provided to employees in connection with their employment shall require the agency to have "just cause" to terminate the employee or restrict the agency's right to terminate an employee at any time or for any reason.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-8 Affirmative Action

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-8
Department of Origin: Human Resources

Policy:

In order to provide equal employment and advancement opportunities to all individuals, employment decisions at JAFCO will be based on merit, qualifications and abilities. JAFCO does not discriminate in employment opportunities or practices on the basis of race, color, religion, sex, national origin, age, disability or any other characteristic protected by law.

JAFCO will make reasonable accommodations for qualified individuals with known disabilities unless doing so would result in undue hardship. This policy governs all aspects of employment, including selection, job assignment, compensation, discipline, termination, and access to benefits and training.

Any employees with questions or concerns about any type of discrimination in the workplace are encouraged to bring these issues to the attention of their immediate supervisor or the Executive Director. Employees can raise concerns and make reports without fear of reprisal. Anyone found to be engaging in any type of unlawful discrimination will be subject to disciplinary action, up to and including termination of employment.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-9

Disability Accommodation

Original Date: 09/01/06
Revision Date: 01/05/09
Policy Number: HR-9
Department of Origin: Human Resources

Policy:

JAFCO is committed to complying fully with the Americans with Disabilities Act (ADA) and ensuring equal opportunity in employment for qualified persons with disabilities.

All employment practices and activities are conducted on a non-discriminatory basis. Our hiring procedures have been reviewed and provide persons with disabilities meaningful employment opportunities. When requested, we will make job applications available in alternative, accessible formats, as well as provide assistance in completing the application. Pre-employment inquiries are made only regarding an applicant's ability to perform the duties of the position.

Reasonable accommodation is available to an employee with a disability if the disability affects the performance of job functions. Disabilities are covered under the ADA and may include hearing and visual impairment, physical handicaps, and language impairment. We make all employment decisions based on the merits of the situation in accordance with defined criteria, not the disability of the individual.

Qualified individuals with disabilities are entitled to equal pay and other forms of compensation (or changes in compensation) as well as job assignments, classifications, organizational structures, position descriptions, lines of progression, and seniority lists. We make leaves of all types available to all employees on an equal basis.

JAFCO is also committed to not discriminating against any qualified employee or applicant because the person is related to or associated with a person with a disability. JAFCO will follow any state or local law that provides individuals with disabilities greater protection than the ADA.

This policy is neither exhaustive nor exclusive. JAFCO is committed to taking all other actions necessary to ensure equal employment opportunity for persons with disabilities in accordance with the ADA and all other applicable federal, state, and local laws.

Signature:



Executive Director

01/05/09

Date

Human Resources

HR-10

Nepotism

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-10
Department of Origin: Human Resources

Purpose:

It is the intent of JAFCO to define its policy regarding the standards for relatives working within the agency in the same or different departments.

Policy:

Individuals who are related by blood, marriage, or reside in the same household are permitted to work in the same program provided no direct reporting or supervisor to subordinate relationship exists. JAFCO shall not permit employees to work within "the chain of command" when one relative's work responsibilities, salary, hours, career progress, benefits, or other terms and conditions of employment could be influenced by the other relative.

Employees who marry while employed, or become part of the same household are treated in accordance with these guidelines.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-11

Personnel

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-11
Department of Origin: Human Resources

Policy:

1. It is JAFCO's policy that the Executive Director shall be responsible for the general management and administration of the agency in accordance with the licensing requirements and the policies of the governing body. The director shall have a master's degree in social work or a related area of study from an accredited college or university and at least two years' experience in human services or child welfare programs. A bachelor's degree in social work or related area of study from an accredited college or university and four years of experience in human services or child welfare programs may be substituted.
2. JAFCO staff responsible for supervision shall have a master's degree in social work or a related area of study from an accredited college or university and at least two years of experience in human services or child welfare programs. A bachelor's degree in social work from an accredited college or university or related area of study and four years of experience in human services or child welfare programs may be substituted. A doctorate in social work or a related area of study may be substituted for one year of the required experience.
3. JAFCO staff responsible for performing casework services shall have a bachelor's degree in social work or related area of study or a master's degree in social work or a related area of study from an accredited college or university.
4. Staff members may be exempted from the above educational requirements if they met the educational requirements of Chapter 65C-15, F.A.C., at the time of employment and their initial date of employment predates the effective date of this rule.
5. No person who has served as a board member, executive director or other officer of an agency that has failed to secure a license to operate as a child-placing agency shall be employed by or associated with a licensed child-placing agency for a period of two years after termination or cessation of that illegal operation. No person, executive director, or other officer of an agency that continued in operation after having knowledge of the revocation or suspension of the agency's license shall be employed by or associated with a licensed agency for a period of two years from cessation of the illegal operation. The department will waive this provision if it is shown that the person had no knowledge or had no reason to know the operation was illegal. Such a waiver must take place before the employee is hired or a request or a waiver shall be submitted to the department within 30 days after it is discovered that an ineligible person has been employed.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-12 Employee Categories

Original Date: 09/01/06
Revision Date: 04/20/08
Policy Number: HR-12
Department of Origin: Human Resources

Purpose:

It is the intent of JAFCO to clarify the definitions of employment classifications so that employees understand their employment status and benefit eligibility. These classifications do not guarantee employment for any specified period of time. Accordingly, the right to terminate the employment relationship at will at any time is retained by both the employee and JAFCO.

Each employee is designated as either NONEXEMPT or EXEMPT from federal and state wage and hour laws. NONEXEMPT employees are entitled to overtime pay under the specific provisions of federal and state laws. EXEMPT employees are excluded from specific provisions of federal and state wage and hour laws. An employee's EXEMPT or NONEXEMPT classification may be changed only upon written notification by JAFCO management.

Definitions:

In addition to the above categories, each employee will belong to one other employment category:

Regular Full-Time employees are those who are not in a temporary or introductory status and who are regularly scheduled to work JAFCO's full-time schedule. Generally, they are eligible for JAFCO's benefit package, subject to the terms, conditions, and limitations of each benefit program.

Live-In Full Time employees are those who work as Group Home House Parents and actually reside full time in the Group Home. They are generally eligible for JAFCO's benefit package, subject to the terms, conditions and limitations of each benefit program. Due to the live-in nature of this position, the benefit package is different than other positions and is described in detail in the Group Home Job Description.

Live Out Full Time Child Care employees are hourly employees who are regularly scheduled to work 40 hours per week as house parent assistants in the group home or direct care staff in the emergency shelter. Upon hire, they are eligible for health insurance benefits only. As of 4/1/05, JAFCO has added an additional benefit for employees in this classification who have been employed for 18 months. With their 18 month anniversary, these employees will begin to accrue paid vacation and sick time benefits, based upon the schedules outlined in Sections 303B and 307B. Employees in this classification are not eligible for paid holidays but will be compensated at the holiday rate when working on a recognized holiday.

Part-Time employees are those who are not assigned to a temporary or introductory status and who are regularly scheduled to work less than 40 hours per week or their weekly hours are based on business volume or seasonal demand. While they do receive all legally mandated benefits (such as Social Security and workers' compensation insurance), they are not eligible for any of JAFCO's other benefit programs, except health insurance with the requirement that the employee work at least 30 hours consistently every week.

Regular Full-Time Paid Interns are college students doing their field placement experience as employees who are regularly scheduled to work JAFCO's full-time schedule, and who are not in a temporary or introductory status. While they do receive all legally mandated benefits (such as Social Security and workers' compensation insurance), they are not eligible for any of JAFCO's other benefit programs.

Human Resources

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Employee Categories (continued)

On-Call Per Diem employees are those who are not assigned to a temporary or introductory status and who are regularly scheduled to work less than 40 hours per week on an as-needed basis. While they do receive all legally mandated benefits (such as Social Security and workers' compensation insurance), they are not eligible for any of JAFCO's other benefit programs.

Signature:



04/20/08

Executive Director Date

Human Resources

HR-13

Personnel Records

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-13
Department of Origin: Human Resources

Policy:

It is the intent of JAFCO to maintain current and valid information on all persons that serve the agency.

1. A confidential personnel record shall be maintained for each employee and volunteer/intern. The record shall contain all of the following information:
 - Identifying information.
 - Verification and qualifications for positions held (including resume or completed application form).
 - Work history (including employee references as required by state screening rules).
 - Record of all required law enforcement checks, finger printing and child abuse registry checks (including personal references).
 - Drug screening results
 - Completion of Affidavit of Good Moral Character
 - Statements of at least three references either by letter or documentation of phone conversation.
 - Documentation that written personnel policies have been reviewed by the employee and that employee has received a copy.
 - Performance evaluations (including Probationary review and Annual Review)
 - Personnel file face sheets; which in addition to the above will contain:
 - Positions held at JAFCO.
 - Employment date.
 - Termination date, reason.
 - Salary progression.
 - Pertinent medical information.
 - Record of emergency contact.
 - Dates and subjects of in service training and attendance at conferences, workshops, etc.
 - Forwarding address of separated employee.
2. All personnel records will be held for the minimum period of time that is required by applicable law.
3. All personnel records will be kept in a centralized secure location. Personnel records are to be treated as confidential information. Record cabinets will be locked when not in use.
4. Access to personnel record files is limited to the Executive staff, department heads, supervisor and designated administrative staff. A department head/supervisor may have access only to the records of those individuals for who they are responsible.
5. Each employee's file shall be open and available to the employee and contain no material or information that cannot be shared with the employee. An employee may obtain his/her file by requesting it from his/her supervisor. The file may never leave the office building and copies can be made only with supervisory approval.
6. Information contained in an employee's file shall not be released to anyone (other than the aforementioned JAFCO staff (without the employee's written consent)). The only exception to this policy is that of court order for release of information.

Human Resources

HR-13

Personnel Records (Continued)

7. Request for references regarding an employee's work performance while employed at JAFCO will be honored provided the employee has offered written consent. When following items will be disclosed:
- Position(s) held.
 - Employment dates.
 - Statements regarding an employee's performance or reason for termination can be allowed only when an employee has given written consent for same. No information may be shared that is other than that included in an employee's personnel file. Only information that the employee is aware of in the file may be disclosed.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-14

Work Hours and Paid Vacation Leave

Original Date: 09/01/06
 Revision Date: 04/20/08
 Policy Number: HR-14
 Department of Origin: Human Resources

Policy:

This policy does not apply to the position of Executive Director. Discretionary, Unpaid, and Compensatory leave provisions will be negotiated with the Executive Director and stipulated within the employment letter. JAFCO expects most employees to work within a 42.5-hour week, however, job requirements may occasionally necessitate extra working hours. For some job classifications the 42.5-hour week is not applicable and will be stated in respective job descriptions.

Vacation time off with pay is available to eligible employees to provide opportunities for rest, relaxation, and personal pursuits. Regular full-time employees are eligible to earn and use vacation time as described in this policy:

Procedures for Paid Vacation Leave:

1. Paid vacation leave days are earned by full-time employees and may be taken when scheduled in advance and with supervisor approval.
2. The amount of paid vacation time employees in this classification receive each year increases with the length of their employment as shown in the following schedule:
 - Upon initial eligibility the employee is entitled to 10 vacation days each year, accrued monthly at the rate of 0.833 days.
 - After 5 years of eligible service the employee is entitled to 15 vacation days each year, accrued monthly at the rate of 1.25 days.
 - After 10 years of eligible service the employee is entitled to 20 vacation days each year, accrued monthly at the rate of 1.667 days.
3. The length of eligible service is calculated on the basis of a "benefit year." This is the 12-month period that begins when the employee starts to earn vacation time. An employee's benefit year may be extended for any significant leave of absence except military leave of absence. Military leave has no effect on this calculation.
4. Once employees enter an eligible employment classification, they begin to earn paid vacation time according to the schedule. However, before vacation time/floating holidays can be used, a waiting period of 180 calendar days must be completed. After that time, employees can request use of earned vacation time including that accrued during the waiting period. Time off for floating holidays cannot be accrued.
5. Paid vacation time can be used in minimum increments of one day. To take vacation, employees should request advance approval from their supervisors. Requests will be reviewed based on a number of factors, including business needs and staffing requirements.
6. Vacation time off is paid at the employee's base pay rate at the time of vacation. It does not include overtime or any special forms of compensation such as incentives, commissions, bonuses, or shift differentials.
7. As stated above, employees are encouraged to use available paid vacation time for rest, relaxation, and personal pursuits. In the event that available vacation is not used by the end of the benefit year, employees will forfeit the unused time. Any exceptions to this policy must be approved by the Executive Director.

Signature:



04/20/08

Executive Director

Date

Human Resources

HR-15

Paid Sick Leave

Original Date: 09/01/06
Revision Date: 04/20/08
Policy Number: HR-15
Department of Origin: Human Resources

Policy:

JAFCO provides paid sick leave benefits to all eligible employees for periods of temporary absence due to illnesses or injuries.

Procedures:

1. Employees who are unable to report to work due to sickness are required to notify their supervisor prior to the start of their work day. The supervisor must also be contacted on each additional day of absence. When it is known in advance, paid sick leave is to be requested and approved by the supervisor. During an illness, keep your supervisor informed of your progress.
2. Employees will accrue sick leave benefits at the rate of six (6) days per year (.50 of a day for every full month of service). Sick leave benefits are calculated on the basis of a "benefit year," the 12-month period that begins when the employee starts to earn sick leave benefits.
3. Employees can request use of paid sick leave after completing a waiting period of 30 calendar days from the date they become eligible to accrue sick leave benefits.
4. Paid sick leave can be used in minimum increments of one-half day. An eligible employee may use sick leave benefits for an absence due to his or own illness or injury, or that of a child, parent or spouse of the employee.
5. Before returning to work from a sick leave absence, an employee may be required to provide a physician's verification that he or she may safely return to work.
6. Unused sick leave benefits will be allowed to accumulate indefinitely during employment; however, employees will not be paid for any unused sick time upon termination of employment.
7. Sick leave benefits are intended solely to provide income protection in the event of illness or injury, and may not be used for any other absence. Unused sick leave benefits will not be paid to employees while they are employed or upon termination of employment.

Signature:



Executive Director

04/20/08

Date

Human Resources

HR-16

Unpaid Leave

Original Date: 09/01/06
Revision Date: 03/06/08
Policy Number: HR-16
Department of Origin: Human Resources

Policy:

JAFCO provides leaves of absence without pay to eligible employees who wish to take time off from work duties to fulfill personal obligations.

Eligible employees may request personal leave only after having completed 365 calendar days of service. As soon as eligible employees become aware of the need for a personal leave of absence, they should request a leave from their supervisor.

Personal leave may be granted for a period of up to 14 calendar days every year. If this initial period of absence proves insufficient, consideration will be given to a written request for a single extension. An employee must take any available sick leave or vacation leave as part of the approved leave.

Requests for personal leave will be evaluated based on a number of factors, including anticipated workload requirements and staffing considerations during the proposed period of absence.

Subject to the terms, conditions, and limitations of the applicable plans, health insurance benefits will be provided by JAFCO for the first 30 calendar days after the approved personal leave begins. At that time, employees will become responsible for the full costs of these benefits if they wish coverage to continue. When the employee returns from personal leave, benefits will again be provided by JAFCO according to the applicable plans.

Benefit accruals, such as vacation, sick leave, or holiday benefits, will be suspended during the leave and will resume upon return to active employment.

When a personal leave ends, every reasonable effort will be made to return the employee to the same position, if it is available, or to a similar available position for which the employee is qualified. However, JAFCO cannot guarantee reinstatement in all cases.

If an employee fails to report to work promptly at the expiration of the approved leave period, JAFCO will assume the employee has resigned.

Signature:



Executive Director

03/06/08

Date

Human Resources

HR-17 Holidays

Original Date: 09/01/06
Revision Date: 04/20/10
Policy Number: HR-17
Department of Origin: Human Resources

Policy:

It is the policy of JAFCO to observe holidays each year as may be determined by the Board of Directors. Eligible employees will be given a day off with pay for each holiday observed. The schedule of paid holidays is distributed at the beginning of every calendar year.

Eligible employees may also take 5 paid floating holidays each year to be selected from a list that is distributed at the beginning of every calendar year.

Procedures:

1. All time off for holidays must have prior approval by a supervisor to ensure coverage of the department.
2. Eligible employees will receive their regular rate of pay for each holiday.
3. If a holiday occurs during an employee's regular paid vacation leave time, the employee will be paid as a holiday and will not lose the equivalent paid vacation leave time.
4. Floating holidays may not be taken more than two days in a week or two days consecutively unless it is needed for religious reasons.
5. Unused floating holidays will be forfeited at the end of each benefit year and/or upon termination.

Signature:



Executive Director

04/20/10

Date

Human Resources

HR-18 Short Term Absence

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-18
Department of Origin: Human Resources

Policy:

It is the policy of JAFCO to permit eligible employees to be absent from work on a short-term basis under certain circumstances. The following are authorized as paid short-term absences:

- Bereavement leave for the death or funeral of "immediate family" (spouse, parent, child, sibling; spouse's parent, child or sibling; grandparents or grandchildren). Special consideration will also be given to any other person whose association with the employee was similar to any of the above relationships. Eligible employees will receive up to 5 days of paid bereavement leave per year. Exceptions may be approved by the Executive Director if a death or funeral of "immediate family" occurs within the same year.
- Jury duty and witness duty if required. Eligible employees may request up to one week of paid jury duty leave over any one-year period. If employees are required to serve jury duty beyond the period of paid jury duty leave, they may use any available paid time off (i.e., vacation benefits) or may request an unpaid jury duty leave of absence.
- An authorized emergency closing of the agency due to conditions which present a danger to employees and person served (severe weather, fires or power failures). If an emergency closing is not authorized by the Executive Director, employees who fail to report for work will not be paid for the time off.
- A military leave of absence will be granted to employees who are absent from work because of service in the U.S. uniformed services. Employees will receive partial pay for two-week training assignments and shorter absences. Any portion of any military leaves of absence in excess of two weeks will be unpaid. However, employees may use any available paid time off for the absence.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-19

FMLA Leave of Absence

Original Date: 09/01/06
Revision Date: 04/20/10
Policy Number: HR-19
Department of Origin: Human Resources

Policy:

If a request for leave of absence is being made under the Family Medical Leave Act of 1993, the request for such a leave and its authorization shall be evaluated in light of the legal requirements and following the guidelines of the FMLA of 1993.

Procedure:

1. Eligible employees may apply for FMLA leave using the appropriate form available in the Human Resources office. For assistance in determining eligibility for an FMLA leave of absence, employees may call the Human Resources Office.
2. FMLA leave is unpaid, but it is required that any available paid vacation leave time must be used as part of the FMLA leave.
3. FMLA leave does not cause employees to lose any previously accrued employment benefits. Benefits will be continued if the employee is using paid sick or vacation time, but will be suspended during any unpaid leave, and will resume upon return to active paid employment. Employees on FMLA leave will continue to be covered by JAFCO's group health insurance benefits that are applicable for active employees and subject to the terms, conditions, and limitations of applicable plans.
4. Employees who do not resume employment following FMLA may be requested to reimburse JAFCO for the health premium that was paid during their unpaid FMLA leave.

Signature:



Executive Director

04/20/10

Date

Human Resources

HR-20

Employee Disciplinary Action

Original Date: 09/01/06
 Revision Date: NA
 Policy Number: HR-20
 Department of Origin: Human Resources

Policy:

JAFCO in its sole and unrestricted discretion through its authorized agents may invoke disciplinary action toward an employee who has violated or breached a rule, regulation and/or policy of the agency/corporation or has committed other acts, which interfere with the ability of the program to meet its objectives. Disciplinary action may take the form of verbal reprimands, written reprimands, probation, suspension or termination. These disciplinary actions may be invoked in any order or degree as deemed necessary by supervisory or executive staff.

Employees are valued by the agency and all efforts will be made to work fairly with each employee when problems arise. The emotional and physical safety of the children and the other employees is paramount. Any non-safety related employee problems might first be addressed verbally with the employee by his or her supervisor. If the problem re-occurs it will be explained in writing with a suggested plan for corrective action and placed in the employee file. If the problem persists beyond this intervention it is possible that the employee will be terminated.

Verbal reprimand: A verbal reprimand is a statement of censure for violations of a rule, regulation, policy, practice or standard pointing out the nature of a violation, the corrective actions that must be taken, the time table for corrective action and the possible consequences for future violations. Documentation of verbal reprimands should be made by the appropriate supervisor and held in the employee's file pending resolution.

Written reprimand: A written reprimand is a statement of official censure in a formal letter to the employee for a serious violation of a rule, regulation, policy, practice or standard pointing out the nature of the violation, the corrective action that must be taken, time table for corrective action and the possible consequences of future violation. A copy of this letter is placed in the employee's personnel file.

Suspension: JAFCO may suspend an employee at any time for the good of the agency for disciplinary purposes or for other just cause. Suspension without pay should not exceed 30 working days nor should any employee be penalized for suspension more than once in any annual period. Employees who require suspension more than once are subject to termination. All suspensions shall be immediately reported to the Executive Director who may investigate the circumstances surrounding the suspension. All suspensions shall be formally documented and will become a permanent part of the employee's personnel file. Employees suspended from work will not receive or accrue any employee benefits during the suspension.

Termination: Serious misconduct or gross negligence or violations of a continuing nature that have not or cannot be resolved by lesser disciplinary action is cause for immediate termination of the employee from the agency.

The following safety related issues will result in the following disciplinary actions:

- Use of Physical discipline Immediate dismissal, call to the abuse hotline
- Physical abuse Immediate dismissal, abuse report and police report
- Emotional Abuse or threat Immediate dismissal, abuse report
- Medical neglect Possible dismissal, disciplinary warning, development plan

All terminations are subject to the discretion of the Human Resources Department with the approval of the Executive Director or designee.

Nothing in this policy should be construed to signify a departure from the At-Will employment policy.

Signature:



09/01/06

Executive Director

Date

Human Resources

HR-21

Employee Grievance Procedure

Original Date: 09/01/06

Revision Date: 03/06/08

Policy Number: HR-21

Department of Origin: Human Resources

Policy:

JAFCO, Inc. encourages staff who have encountered differences of opinion to attempt to problem solve those differences among themselves. It is hoped that all differences can be resolved between staff in an honest, caring and open manner. When situations arise which require more than problem solving among individuals, the grievance procedure shall be used.

Purpose:

The purpose of the grievance procedure shall be to provide an orderly system resolving employee grievances in an equitable and timely manner, without fear of reprisal. Every effort will be made to reach a clear understanding of the nature of the grievance, the relief requested and to explore sound resolution of the grievance. Necessary and reasonable absence from work for meetings with the supervisor, agency administrator or other agency staff will be allowed the employee for the resolution of the grievance.

Procedure:

An employee with a grievance shall attempt to resolve it by oral discussion with the staff member involved or immediate supervisor within 10 working days of becoming aware of the complaint. Within 2 working days of the oral discussion, the immediate supervisor shall inform the employee of the resolution. The effected immediate supervisor may request the assistance of his/her immediate supervisor to join in oral discussion in an attempt to resolve the grievance.

If the resolution is not satisfactory to the employee or supervisor, the employee shall write out the complaint on a Grievance Form and present it to the supervisor. The supervisor shall attach the proposed resolution and submit it with the employee's grievance to the Executive Director within 5 working days. It is to be here noted that both staff and supervisors will follow the order of the chain of command from immediate supervisor to Executive Director and finally President. The Executive Director shall schedule a conference with the employee and supervisor within 5 working days and a reasonable solution of the grievance shall be attempted.

If after the conference with the Executive Director the grievance is not resolved the written grievance with the conference material shall be submitted to the President for final determination. All decisions of the President or his designee are final.

Signature:



03/06/08

Executive Director

Date

Human Resources

HR-22 Code of Conduct/Ethics

Original Date: 03/06/08
Revision Date: NA
Policy Number: HR-22
Department of Origin: Human Resources

Policy:

It is the policy of JAFCO that all full and part-time employees, contractors, students, volunteers (collectively referred to as “staff”), and members of the governing authority are expected to perform their designated functions in a manner that reflects the highest standards of ethical behavior. The ethical standards contained in this policy shape the culture and norms of JAFCO’s administrative operations and clinical practices, and both staff and members of the governing authority will be held fully accountable to these standards. In addition to the specific guidelines contained in the policy, professionals are expected to follow the ethical standards required by their specific licensing and certification boards. The Code of Conduct Policy is to ensure that all employees’ actions reflect a competent, respectful, and professional approach when serving our consumers, their families and/or representatives, working with other providers of services, and interacting within the communities we serve. It is expected that staff and members of the governing authority will perform their duties in compliance with all federal, state, and local regulations in accordance with guidelines set forth in this policy. Violation of guidelines within the Code of Conduct Policy can lead to disciplinary actions, including termination of employment.

Professional Conduct:

Staff shall respect the rights of our consumers by demonstrating full integration of the guidelines contained in the Rights and Responsibility Policy. This includes the right of the consumer to make autonomous decisions and fully participate in every aspect of the service delivery process. JAFCO employees shall provide services in a manner that fully respects the confidentiality of consumers, by demonstrating a functional knowledge of confidentiality policies and guidelines. JAFCO employees will be fair and honest in their work. They will not exploit or mislead, and will be faithful to their contractual obligations and their word. To prevent and avoid unethical conduct, JAFCO employees will consult with, refer to, and cooperate with other professionals. JAFCO employees shall be clear in their professional roles and obligations and be accountable for upholding professional standards of practice.

Personal/Professional Conduct:

All prior personal relationships between staff and persons entering the organization’s programs shall be disclosed by the staff member and subject to review by the appropriate supervisor. Staff will limit relationships with persons served to their defined professional roles. Staff will not establish ongoing personal or business relationships with consumers receiving services. Staff will conduct themselves in a professional, ethical, and moral manner. Sexual relationships between staff and persons served are never appropriate. Sexual relationships include, but are not limited to the following: engaging in any type of sexual activity, flirting, advances and/or propositions of a sexual nature, comments of a sexual nature about an individual’s body, clothing, or lewd sexually suggestive comments. Staff shall not accept gifts of value from a consumer, family member, or stakeholder, and cannot accept personal favors or benefits that may reasonably be construed as influencing their conduct.

Business Practices:

JAFCO shall utilize the Corporate Compliance Officer to ensure that it conducts business in an ethical manner and ensure that any business practices that are questionable are thoroughly investigated following the ethical investigation procedures that follow in this policy. All financial, purchasing, personnel, facility development and information technology practices shall comply with local, state, and federal law and guidelines. All employees shall adhere to JAFCO’s Human Resource Policies and Procedures.

Clinical Practices:

Staff will adhere to all professional codes of conduct and ethical standards for his/her specified professional discipline. As part of new employee orientation, staff will read the organization’s Code of Conduct and demonstrate knowledge of the guidelines.

Human Resources

HR-22

Code of Conduct/Ethics (continued)

Marketing Practices:

JAFCO shall conduct marketing practices in an honest and factual manner. Marketing materials and practices will in no way mislead the public or misrepresent JAFCO's abilities to provide services. JAFCO will not claim any service outcomes unless represented by valid and reliable outcome data and/or research studies. JAFCO will utilize clear and consistent methods of communicating information to consumers, family members, third-party entities, referral sources, funding sources, and community members, and will exhibit sensitivity to the educational and reading levels of all persons when distributing information. JAFCO will not utilize monetary rewards or gifts to any potential consumer of services in an attempt to entice them to enter programs.

Potential Conflicts of Interest:

No person served will be hired or placed in an employee/employer relationship with JAFCO while being an active participant in programs. Any programming that involves a work task, and remuneration for the task, will be therapeutic in nature and will be documented as such by programming guidelines based on theoretical constructs. JAFCO employees will not engage in outside professional mental health services that are incompatible or in conflict with job duties within the organization. Private practice must be done on the staff's own time and outside the organization, as long as such activities are not adverse to the interests and goals of JAFCO and have met the organization's guidelines on conducting a private practice. Staff will not recruit person served for their private practice within their professional roles as JAFCO staff members. If an employee leaves JAFCO and enters private practice, the consumer may choose to continue their therapy with the former employee. However, the therapy must be offered at the same cost with equal accessibility to therapy. All arrangements of this kind must have prior authorization by the Director of Operations and Clinical Services or executive director. No staff shall engage in any other employment or activity on the organization's premises or to an extent that affects, or is likely to affect, his or her usefulness as an employee of the organization.

Quality of Care:

JAFCO will provide quality behavioral health care in a manner that is appropriate, determined to be medically necessary, efficient, and effective. Health care professionals will follow current ethical standards regarding communication with consumers and their representatives regarding services provided. JAFCO shall inform consumers about alternatives and risks associated with the care they are seeking and obtain informed consent prior to any clinical interventions. JAFCO recognizes the right of consumers to make choices about their own care, including the right to do without recommended care or to refuse care.

Necessity of Care:

JAFCO shall submit claims for payment to governmental, private, or individual payers for those services or items that are clinically necessary and appropriate. When providing services, JAFCO employees shall only provide those services that are consistent with generally accepted standards for treatment and are determined by the professional to be clinically necessary and appropriate. Service providers may determine that services are clinically necessary or appropriate; however, the consumers funding source may not cover or approve those services. In such a case, the consumer may request the submission of a claim for the services to protect his/her rights with respect to those services or to determine the extent of coverage provided by the payer. Coding and documentation will be consistent with the standards and practices defined by the organization in its policy, procedures, and guidelines.

Coding, Billing, and Accounting:

JAFCO employees involved in coding, billing, documentation and accounting for consumer care services for the purpose of governmental, private or individual payers will comply with all applicable state and federal regulations and organizational policies and procedures. JAFCO will only bill for services rendered and shall seek the amount to which it is entitled. Supporting clinical documentation will be prepared for all services rendered. If the appropriate and required documentation has not been provided, then the service has not been rendered. All services must be accurately and completely coded and submitted to the appropriate payer in accordance with applicable regulations, laws, contracts, and organizational policies and procedures. Federal and state regulations take precedence, and organizational policies and procedures must reflect those regulations. Consumers shall be consistently and uniformly charged. Government payers shall not be charged in excess of the provider's usual charges. Billing and collections will be recorded in the appropriated accounts. An accurate and timely billing structure and medical records system will ensure that JAFCO effectively implements and complies with required policies and procedures.

Human Resources

HR-22

Code of Conduct/Ethics (continued)

Cost Reports:

JAFCO shall ensure that all preparation and cost reports submitted to governmental and private organizations are properly prepared and documented according to all applicable federal and state laws. All cost reports will be submitted and prepared with all costs properly classified, allocated to the correct cost centers, and supported by verifiable and auditable cost data. All cost report preparation or submission errors and mistakes will be corrected in a timely manner and, if necessary, clarify procedures and educate employees to prevent or minimize recurrence of those errors.

Personal and Confidential Information:

JAFCO will protect personal and confidential information concerning the organization's system, employees, and persons served. JAFCO personnel shall not disclose confidential person served information unless at the client's request and/or when authorized by law. Appropriate use of consumer information for research purposes must be obtained with the full informed consent of participants in the research. Confidential information will only be discussed with or disclosed to persons and entities outside the organization through the request of the consumer. Persons outside the organization include the family, business, or social acquaintances of the consumer. Consumers can request, and are entitled to receive copies or summaries of their records with the exception of minors (refer to policy record of the person served). JAFCO personnel will be familiar with all organizational policy and procedures regarding confidentiality.

Creation and Retention of Person Served and Institutional Records:

Records are the property of the organization. Personnel responsible for the preparation and retention of records shall ensure that those records are accurately prepared and maintained in a manner and location as prescribed by law and organizational policy. Employees will not knowingly create records that contain any false, fraudulent, fictitious, deceptive, or misleading information. Employees will not delete any entry from a record. Records can be amended and material added to ensure the accuracy of a record in accordance with policy and procedures. If a record is amended, it must indicate that the notation is an addition or correction and record the actual date that the additional entry was made. Employees will not sign someone else's signature or initials on a record. Records shall be maintained according to specific organizational policy and procedure. Employees shall not destroy or remove any record from the organization's premises. The organization will maintain record retention and record destruction policies and procedures consistent with federal and state requirements regarding the appropriate time periods for maintenance and location of records. Premature destruction of records could be misinterpreted as an effort to destroy evidence or hide information (as per JAFCO policy records are not destroyed).

Government Investigation:

JAFCO employees shall cooperate fully with appropriately authorized governmental investigations and audits. JAFCO shall respond in an orderly fashion to the government's request for information through employee interviews and documentation review. The organization will respond to the government's request for information in a manner that enables the organization to protect both the organization and consumer's interests, while cooperating fully with the investigation. When a representative from a federal or state agency contacts a JAFCO employee at home or at their office for information regarding the organization or any other entity with which the organization does business, the individual will contact the Executive Director immediately. If the Executive Director is not available, the individual will contact the Director of Operations and Clinical Services or designee. JAFCO employees will ask to see the government representative's identification and business card, if the government representative presents in person. Otherwise, the employee should ask for the persons' name, office, address, phone number, and identification number and then contact the person's office to confirm his/her identity.

Prevention of Improper Referrals or Payments:

JAFCO employees will not accept, for themselves or for the organization, anything of value in exchange for referrals of business or the referral of consumers. Employees must not offer or receive any item or service of value as an inducement for the referral of business or consumers. Federal law prohibits anyone from offering anything of value to a Medicare or Medicaid consumer that is likely to influence that person's decision to select or receive care from a particular behavioral health care provider. The organization shall establish procedures for the review of all pricing and discounting decisions to ensure that appropriate factors have been considered and that the basis for such arrangements is documented. Development or initiation of joint ventures, partnerships, and corporations within the organization must be reviewed and approved by the organization's management to ensure compliance with organizational policy and federal regulations.

Human Resources

HR-22

Code of Conduct/Ethics (continued)

Antitrust Regulations:

JAFCO will comply with all applicable federal and state antitrust laws. Employees should not agree or attempt to agree with a competitor to artificially set prices or salaries, divide markets, restrict output, or block new competitors from the market, share pricing information that is not normally available to the public, deny staff privileges to qualified practitioners, or agree to or participate with competitors in a boycott of government programs, insurance companies, or particular drugs or products.

Avoiding Conflicts of Interest:

All JAFCO employees shall conduct clinical and personal business in a manner that avoids potential or actual conflicts of interests. Employees shall not use their official positions to influence an organizational decision in which they know, or have reason to know, that they have a financial interest. Employees must be knowledgeable about activities that may be an actual or potential conflict of interest. Examples of such activities may include, but are not limited to the following: Giving or receiving gifts, gratuities, loans, or other special treatment of value from third parties doing business with or wishing to do business with the organization. Third parties may include, but are not limited to, consumers, vendors, suppliers, competitors, payers, carriers, and fiscal intermediaries. Using JAFCO facilities or resources for other than organization sanctioned activities. Using JAFCO's name to promote or sell products or personal services. Contracting for goods or services with family members of the organization directly involved in the purchasing decision.

External Relations:

JAFCO employees shall adhere to fair business practices and accurately and honestly represent themselves and the organization's services. JAFCO employees will be honest and truthful in all marketing and advertising practices pertaining to the business practices of the organizations service delivery system. Vendors who contract to provide goods and services to the organization will be selected on the basis of quality, cost-effectiveness and appropriateness for the identified task or need, in accordance with organization policy.

Personal Property:

JAFCO employees shall maintain their personal belongings in private designated areas where persons served do not have access. Under no circumstances shall an employee share prescription and/or over the counter medication (s) with other employees, persons served or any visitor at the agency. JAFCO employees shall not bring any type of weapon to the JAFCO campus (see policy on violence free work place). Any employee found with a weapon shall be immediately terminated. JAFCO is a smoke free campus (see tobacco policy). Employees that smoke must drive off the premises to do so.

Personal Fund raising:

JAFCO employees are permitted to engage in solicitations or distributions of literature for any group or organization only with permission from the Executive Director. Employee may engage in sales associated to a personal cause such as; school candy for a child during break times.

Witnessing of Documents:

JAFCO has three employees certified that are certified to notarize documents. In addition, to their daily job description, they may be asked to notarize any official document pertaining to the agency. Designated JAFCO employees shall be witness to documents such as; powers of attorney, guardianship, and advanced directives. When an employee is first hired the HR manager reviews the employment package with the employee, the employee signs that they have received the package and the HR manager shall co-sign as a witness. All forms given to persons served and/or guardian are co-signed by the assigned employee as a witness.

Setting Boundaries:

Staff shall maintain professional boundaries at all times (see training schedule). JAFCO does not encourage dating amongst employees. A supervisory level staff is prohibited from dating a subordinate reprimand shall be left to the discretion of the Executive Director. Dating or having a sexual relationship with a person served shall not be tolerated. Employees or interns doing so shall be immediately terminated.

Human Resources**HR-22****Code of Conduct/Ethics (continued)**

Human Resources:

JAFCO prohibits discrimination in any work related decision on the basis of race, color, national origin, religion, sex, physical or mental disability, ancestry, marital status, age, sexual orientation, citizenship, or status as a covered veteran. The organization is committed to providing equal employment opportunity in a work environment where each employee is treated with fairness, dignity, and respect. JAFCO will make reasonable accommodations to the known physical and mental limitations of otherwise qualified individuals with disabilities. JAFCO does not tolerate harassment or discrimination by anyone based on the diverse characteristics or cultural backgrounds of those who work for the organization pursuant to the organization's affirmative action policy. Any form of sexual harassment is prohibited. Any form of workplace violence is prohibited.

Procedures:

All employees, students, volunteers and governing authority members, as part of the organization's initial orientation, will review the Code of Conduct, including the procedures for investigating and acting on conduct violations. All staff will receive a copy of the Code of Conduct, sign a form acknowledging their review and full understanding of the code, and return the form to be filed in the employee's personnel file. To assure an awareness of ethical practices, reviews of the Code of Conduct and continued training will be conducted on an annual basis.

Procedures for Investigating and Acting on Violations of The Code of Conduct:

When any consumer, family member, authorized representative, advocate or other person believes that an ethical violation has occurred within the operations of the organization, they may report such suspicion directly to any employee, or management staff. When employees believe a violation of the Code of Conduct has occurred they are obligated to report the violation in one of the following ways:

- Immediate notification of the incident or violation through the organization's corporate compliance program and reporting mechanisms.
- Immediate reporting to their supervisor or to corporate compliance officer if the suspected violation involves their supervisor.

Supervisors who have been informed of a suspected violation are required to immediately inform the corporate compliance officer of the suspected violation. If the violation involves a direct and immediate threat to the safety of a patient, staff member, or JAFCO visitor, employees are obligated to report the alleged violation immediately to their supervisor. Staff is required to report any suspected violation of the Code of Conduct; however, they are not required to investigate or know for certain that a violation has occurred.

Once the questionable behavior has been brought to the attention of the supervisor or reported through the corporate compliance procedures, staff reporting the situation will no longer have a responsibility for being involved with the investigation other than providing additional information through a requested interview by the investigator. Staff must report each suspected violation of the Code of Conduct separately, should a violation that has been reported occur again.

When any suspected violation of the Code of Conduct is reported to a supervisor, program sponsor or the corporate compliance officer, the corporate compliance officer will begin an investigation of the matter immediately. While investigating the complaint, the following issues should be considered and action taken depending on the situation:

- Is any person served in any harm or potential harm because of this behavior?
- Does the complaint require immediate action to remove the employee from contact with a person served?
- Does the complaint put JAFCO or its employee in a potentially liable situation that needs legal consultation?

Code of Conduct investigations will follow the guidelines outlined in the JAFCO's Corporate Compliance Policy and Procedure.

Human Resources**HR-22****Code of Conduct/Ethics (continued)**

General Ethical Guidelines and Considerations:

The Code of Conduct is shared with persons served during person served orientation and is posted throughout public areas in all owned, leased, or rented facilities. JAFCO believes in the importance of ethical practices within the organization. Any employee who reports waste, fraud, abuse or any other questionable practices will not be subject to reprisal by management of the organization. To assure that reprisal is not used, the organization's governance authority will serve as advocates for any employee who reports questionable practices. The Corporate Compliance Officer will provide assurance and oversight that there are no adverse actions toward the employee.

The following violations of the Code of Conduct will result in termination of employment: Theft of funds, and/or physical, emotional, or sexual abuse of a person served or employee.

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Code of Conduct/Ethics (continued)

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Signature:



Executive Director

03/06/08

Date

Human Resources

HR-23

Attendance and Punctuality

Original Date: 09/01/06
 Revision Date: NA
 Policy Number: HR-23
 Department of Origin: Human Resources

Policy:

It is the policy of JAFCO to require good attendance and punctuality on the part of its employees. Unauthorized or excessive absences or tardiness will not be tolerated and may result in disciplinary action, up to and including termination.

Failure to notify the appropriate JAFCO staff of any absence or delay may be grounds for disciplinary action.

Procedure:

1. Employees are expected to report for work whenever scheduled and to be at their work station at the starting time and at the prescribed time after rest and meal breaks.
2. Employees should notify their supervisor as far in advance as possible whenever they are unable to report for work or know they will be late. If the supervisor is unavailable, the employee should contact the Human Resources Department or another member of management.
3. In cases where the employee may need to leave early or be away from their station, the employee must notify the supervisor as soon as possible.
4. An employee who is absent without official leave notice and approval for two or more days shall be considered as having abandoned the job and voluntarily resigned.

Signature:



Executive Director

09/01/06

Date

JAFCO Policy and Procedure Manual
Human Resources
HR-24 Workplace Violence

Original Date: 09/01/06
Revision Date: 03/28/08
Policy Number: HR-24
Department of Origin: Human Resources

Policy:

JAFCO has a strong commitment to its employees to provide a safe, health and secure work environment. JAFCO also expects its employees to maintain a high level of productivity and efficiency. The presence of weapons and the occurrence of violence in the workplace are inconsistent with these objectives. JAFCO does not tolerate acts of workplace violence committed by or against employees and prohibits employees from making threats or engaging in violent acts. This is a zero-tolerance policy, meaning that JAFCO disciplines or terminates every employee found to have violated this policy. This policy applies to visible and concealed weapons, regardless of whether the owner has the necessary permits. Weapons include, but are not limited to: firearms, knives with a blade longer than 4 inches, any explosive materials, and any other objects that could be used to harass, intimidate or injure another individual.

Prohibited Conduct:

Prohibited conduct includes, but is not limited to:

- Injuring another person physically
- Engaging in behavior that creates a reasonable fear of injury in another person
- Engaging in behavior that subjects another individual to extreme emotional distress
- Possessing, brandishing or using a weapon while on JAFCO's premises or engaged in the agency's business
- Damaging property intentionally
- Threatening to injure an individual or damage property
- Committing injurious acts motivated by, or related to, domestic violence or sexual harassment

Identifying and Responding to Risks:

1. The Human Resources Department maintains records of all threats and incidents of violence committed against employees. Access to such records is on a need-to-know basis.
2. Some employees are known to be at risk for violence because of the nature of their jobs. Other employees can be at risk because they are subject to violence, threats or harassment from a current or former spouse or partner or other non-employee. Human Resources may work with at-risk employees and their supervisors to develop safety plans that address the specific risks the employees face while at work.
3. The Human Resources Department must take reasonable steps to review job candidates' backgrounds to determine if they have a history of committing violent acts or making threats.

Guidelines for Handling Violent Situations:

1. Reporting:
 - An employee who witnesses an incident of violence or threatening language or conduct must report the incident to his or her supervisor promptly. An employee who is threatened by someone in their personal life must consider notifying their supervisor promptly.
 - No employee who reports an incident of violence or threatening conduct or participates in an investigation of such an incident shall be subject to retaliation.
2. Enforcement:
 - Human Resources personnel must immediately any reported violence, harassment or threats committed on company premises.
 - All employees who commit violent acts or who otherwise violate this policy are subject to corrective action or discipline, up to and including termination of employment.
 - JAFCO will seek the prosecution of all of those who engage in violence on its premises or against its employees while they are engaged in agency business.

Human Resources

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Workplace Violence (continued)

Support for Victims of Violence:

Victims of violent incidents in the workplace might have to contend with a variety of medical, psychological and legal consequences. JAFCO accommodates victims of workplace violence by:

1. Referring victims to appropriate community resources, such as medical centers, counseling services, victim advocacy groups, legal aid and domestic violence shelters.
2. Cooperating with law enforcement personnel in the investigation of the crime and the prosecution of the offender.
3. Providing a debriefing for employees 24 to 48 hours after a serious violent occurrence to explain what happened and what steps are being taken by the agency to support affected employees.

JAFCO retains the right to search any areas and items on the agency's premises for weapons, including but not limited to: lockers, furniture, containers, drawers, equipment or other facilities, and agency vehicles. If an employee is injured while participating in a fight or after instigating a fight, then entitlement to workers' compensation benefits may be denied.

Signature:



Executive Director

03/28/08

Date

Human Resources

HR-25

Productive Work Environment – Harassment Free

Original Date: 04/20/08
Revision Date: NA
Policy Number: HR-25
Department of Origin: Human Resources

Policy:

JAFCO is committed to providing a work environment that is free from all forms of discrimination and conduct that can be considered harassing, coercive, or disruptive, including sexual harassment. Actions, words, jokes or comments based on an individual's sex, race, color, national origin, age, religion, disability, sexual orientation, or any other legally protected characteristic are not allowed in the work environment.

Sexual harassment includes any sexual advances, or visual, verbal, or physical conduct of a sexual nature. This definition includes many forms of offensive behavior and includes gender-based harassment of a person of the same sex as the harasser. The following is a partial list of sexual harassment examples:

- Sexual advances.
- Offering employment benefits in exchange for sexual favors.
- Making or threatening reprisals after a negative response to sexual advances.
- Visual conduct that includes leering, making sexual gestures, or displaying of sexual materials, etc.
- Verbal conduct making or using derogatory comments, epithets, slurs or jokes.
- Verbal sexual advances or propositions.
- Verbal abuse of a sexual nature, graphic, verbal commentaries about an individual's body, sexually degrading words used to describe an individual, or suggestive or obscene letters, notes or invitations.
- Physical conduct that includes touching, assaulting, or impeding or blocking movements.

Sexual advances (either verbal or physical), requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when:

- Submission to such conduct is made either explicitly a term or condition of employment.
- Submission or rejection of the conduct is used as a basis for making employment decisions.
- The conduct has the purpose or effect of interfering with work performance or creating an intimidating, hostile or offensive work environment.

If an employee experiences or witnesses sexual or other unlawful harassment in the workplace, it must immediately be reported to their supervisor. If the supervisor is unavailable or if the employee believes it would be inappropriate or uncomfortable to contact the supervisor, the employee should immediately contact someone else in senior management. The employee can raise concerns and make reports without fear of reprisal or retaliation.

All allegations of sexual harassment will be quickly and discreetly investigated. To the extent possible, the employee's confidentiality and that of any witnesses and the alleged harasser will be protected against unnecessary disclosure. When the investigation is completed, the employee who made the complaint will be informed of the outcome of the investigation.

Anyone engaging in sexual or other unlawful harassment will be subject to disciplinary action, up to and including termination of employment.

JAFCO management will endeavor to ensure that no one is subjected to sexual harassment or a hostile work environment as it is legally delineated.

Complaint Procedure:

1. Any employee who feels he or she has been the victim of sexual discrimination should submit to the supervisor/director within ten (10) working days of the incident, a written or oral report detailing the complaint. The employee's supervisor/director will be expected to respond, in writing, within 10 working days.

Human Resources

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Productive Work Environment – Harassment Free (continued)

2. Upon receipt of the complaint, the supervisor/director, in consultation with the HR Director, will contact the person who allegedly initiated the sexual harassment, and inform the person of the basis of the complaint and the opportunity to respond to the complaint in writing.
3. Upon receipt of the response by the accused, the supervisor/director will conduct a thorough investigation in consultation with the HR Director, and will submit in writing a confidential summary of the complaint, which will be submitted to the Executive Director for review. The Executive Director, after conducting a thorough review of the facts of the investigation, including possible interview with all parties involved, will determine whether sexual harassment has occurred. The supervisor/director, in consultation with the HR Director, will notify both parties of the Executive Director
4. If management (Executive Director, supervisor/director, and the HR Director) have determined that sexual harassment has occurred, appropriate disciplinary action up to and including termination will be taken. The severity of the discipline will be determined by the severity and frequency of the offense, or other conditions surrounding the incident.
5. We encourage the employee to come forward immediately. If the person against whom the complaint of sexual harassment is filed fails to respond to the complaint, the complaint may be deemed as true, and the appropriate disciplinary measure will be taken if circumstances warrant.

JAFCO strongly disapproves of any form of sexual harassment at the workplace, including acts of non-employees. Disciplinary action will be taken promptly against any employee, supervisor, director or any person engaging in sexual harassment.

Signature:



Executive Director

04/20/08

Date

Human Resources

HR-26

Drug Free Workplace

Original Date: 06/03/07
Revision Date: NA
Policy Number: HR-26
Department of Origin: Human Resources

Policy:

JAFCO recognizes that drug and alcohol abuse in the workplace leads to decreased productivity, increased risk of accidents, high turnover and decreased morale. Because JAFCO is committed to a safe and healthy workplace, we hereby announce our intention to establish a Drug Free Workplace Program and adopt the following policy on drug and alcohol abuse. This Policy conforms to Florida Statutes 440.102 and Florida Administrative Code Chapters 38 F-9 and 59A-24.

Therefore, JAFCO will test, at its own expense, all job applicants for drug use as outlined in this Policy. Further, JAFCO may test, at its own expense, any current employees for drug and alcohol use, if reasonable suspicion exists that the employee is in violation of this Policy, after a work-related injury, and as a follow-up procedure to any drug treatment program. A positive drug test can lead to withdrawal of any offer of employment, or termination, as appropriate. All drug testing will conform to the requirements of this Policy and to State and Federal law.

Possession of Drugs or Alcohol on Premises: Drugs and alcohol will not be permitted in the workplace or during work hours. Any employee in possession of or using alcohol or illegal drugs on JAFCO’s premises during work hours will be subject to immediate dismissal and reported, if appropriate, to law enforcement agencies. JAFCO’s premises include parking lots and other outlying areas. Use or possession of alcohol or illegal drugs on JAFCO’s premises will be reported to a supervisor who will verify the report and report the incident to the person responsible for terminating employees.

Visible Impairment: Any employee who reports to work visibly impaired or becomes visibly impaired while at work will not be allowed to continue to work. The supervisor of the visibly impaired employee should consult privately with the employee in order to determine the basis for the impairment. If, in the opinion of two supervisors, or a supervisor and an additional competent co-worker, the employee’s visible impairment is the result of alcohol or illegal drugs, the employee will be required to submit to testing. In addition, the employee will be sent home immediately by taxi or other safe transportation, including transportation by spouse, family, friend or other employee, if necessary.

Any employee who refuses to submit to drug or alcohol testing when required, or who alters, adulterates or otherwise interferes with drug or alcohol testing collection, samples or analysis, will immediately be terminated and may forfeit any medical or indemnity benefits available under the Florida Worker’s Compensation Law.

Pre-Employment Drug Testing: If JAFCO chooses to extend an offer of employment to a job applicant who otherwise satisfactorily meets JAFCO’s standards for employment, the offer will be conditioned upon the job applicant submitting to a drug test to determine the presence of illegal drugs. This test will be administered in compliance with both State and Federal law and will be conducted only by a testing laboratory approved by the Florida Agency for Health Care Administration.

Any person receiving a conditional offer of employment who refuses to submit to drug testing, or who alters, adulterates or otherwise interferes with drug testing collection, testing, samples or analysis, is immediately disqualified from employment by JAFCO.

Medication Disclosure Procedure: Employees and job applicants will have an opportunity to confidentially report the use of prescription or non-prescription medication after being testing, if there is a problem with the test results, to the Medical Review Officer (MRO). Such reports will not become a part of the employee’s or applicant’s personnel file. Employees and job applicants will also receive a list of common medications which may alter or affect a drug test.

Human Resources

HR-26

Drug Free Workplace (continued)

All employees and job applicants may consult with the testing laboratory or MRO for technical information regarding the effects of prescription and non-prescription medications on drug testing. Any consultation by an employee or job applicant with the testing laboratory or MRO for the purpose of gaining technical information shall be confidential. An MRO must supply technical information to any employee or job applicant who fails a drug test.

Notification to Employee or Job Applicant of Positive Results: Within five (5) working days after receipt of a positive confirmed test result from the MRO, JAFCO shall inform an employee or job applicant in writing of such positive test result, the consequences of such results, and the options available to the employee or job applicant including the right to file an administrative or legal challenge. JAFCO shall provide to the employee or job applicant, upon request, a copy of the test results.

Signature:



Executive Director

06/03/07

Date

Human Resources

HR-27.1 Confidentiality

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-27.1
Department of Origin: Human Resources

Policy:

To establish, maintain and protect confidentiality and to comply with legal and regulatory compliance requirements. The general internal business affairs of the organization must not be discussed with anyone outside the organization except as may be required in the normal course of business on a "need to know" or legal basis and only discussed within the organization with the employee's supervisor and corresponding managerial levels above including respective managers of staff departments. Privacy rights, confidentiality expectations and security of the mechanisms in place are to be observed.

Communication of confidential information to coworkers, legally recognized interested parties, including other care givers, the family of patients, other patients, or the media must adhere to the ethical requirements and considerations of the profession.

Failure to comply with this policy, rules and regulations will result in disciplinary action, up to and including termination.

Definition/Eligibility:

Confidential information so deemed by legal requirements and ethical practice is private and personal information related to:

- Persons served- client conditions, medical treatments and records, (current or former)
- Financial and operating records (e.g. marketing plans, mailing lists, or fundraising activity, research) of the organization.

Confidential information has the following characteristics:

- Privacy and secrecy: the information supplied is done in the expectation that anything done or revealed will be kept private.
- Information is for a select group: it is generally not available to the public because it is commercially or industrially sensitive or concerns national security.
- Deals with private affairs: the information is entrusted with somebody's personal or private matters.
- Suggests a close relationship: the breaking of confidentiality may suggest a breach of familiarity or intimacy.

For further clarification see "Exhibits – Confidentiality Guidelines New Employee Orientation", and "Confidentiality employee agreement" subsequent to this policy as well as the organization's policies regarding Ethics and Conflicts of Interest.)

Eligibility/Applicability:

This policy applies to all employees, interns, student, trainees, and volunteers. This policy also applies to contracted vendors performing outsourced work.

Procedure:

Presented chronological sequence. Bold job titles indicate who is responsible for the action in the sequence of events.)

1. Management is responsible for coordinating the security and control of confidential information and for approving any exceptions to this policy. Employees should refer all media inquiries and other inquiries of a general nature to the Executive Director, who must approve all press releases, publications, speeches or official declarations in advance.
2. All parties receiving inquiries concerning applicants for employment, current employees, or former employees must refer same to the Human Resources Department.
3. All parties receiving inquiries concerning applicants for employment, current employees, or former employees must refer same to the Human Resources Department.

Human Resources

HR-27.1 Confidentiality (continued)

4. Employees and other individuals as noted in the "Eligibility and Applicability" section that have access to confidential information are responsible for its security and may be required to sign special nondisclosure agreements.
5. All employees and other individuals noted have a responsibility to avoid unnecessary disclosure of non-confidential internal information about the JAFCO, its clients in general, and its suppliers. This responsibility is not intended to impede normal business communications and relationships, but is intended to alert employees to their obligation to use discretion to safeguard internal JAFCO affairs.
6. Employees and other individuals noted are not to discuss with the officers, directors or employees of competing companies any topic, which might give the impression of an illegal agreement in restraint of trade without proper involvement by authorizing managers. Such topics include pricing agreements, Person Served allocation and division of service territories.
7. In all cases when information about a specific client is sought, by any source whatsoever, including the media, the laws of confidentiality, of person served information are to be strictly adhered to. The repository of policies and procedures regarding disclosure of person served information is the Supervisor, who consults with the Director of Operations and Clinical Services or designee. The Director of Operations and Clinical Services or designee in cases may seek legal counsel where it is thought to be necessary.

For further procedural details see "Maintaining Confidentiality" below and "General Rules, Limits and Exceptions."

Confidentiality Guidelines – New Employees Orientation

Company Privacy Protection:

Client Privacy Protection will be observed in accordance with those rules set forth in federal regulations:

1. Confidentiality of Alcohol and Drug Abuse Person Served Records; 42 Code of Federal Regulations, Part 2, all persons served information is confidential and cannot be released or discussed without prior authorization from the appropriate Director of designee.
2. Health Insurance Portability and Accountability Act (HIPAA).

Maintaining Confidentiality Recommendations (Discussed in new employee orientation):

Steps to maintaining confidentiality include:

1. Clearly advising persons served at the outset of services, preferably in writing, of the nature of the confidential privilege, and of the relevant exclusions, such as reporting suspicion of neglect or abuse children, or reporting probably danger to self or others.
2. Clarifying how confidential information will be managed within a professional agency, or organization, within supervisory or consultative relationships, and with colleagues who may provide coverage in your absence.
3. Clarifying how information will be handled with legally dependent persons served when seeing legally dependent persons served (e.g., minors) or more than one persons served together (e.g., family or group services).
4. Securing authorized consent, preferably in writing, before sharing identifiable facts.

General Rules Limits of Confidentiality and Exceptions:

1. No disclosure permitted without the persons served/guardian consent. In most circumstances, the federal confidentiality regulations prohibit the disclosure of any information to anyone concerning or identifying confidentiality regulations prohibits the disclosure of any information to anyone concerning or identifying a persons served or former client unless the person served has consented in writing. Even the simple fact that a person served is being or has been treated may not be disclosed without proper consent. In addition, removal of the persons served files from the agency premises is absolutely forbidden without supervisory authorization.
2. Where the person served is a child and the information acquired indicates that the person served has been the victim or subject of a crime be the child or elder.

Human Resources

HR-27.1 Confidentiality (continued)

3. A requirement exists to testify fully in relation there upon any examinations trial or other proceeding in which the commission of such crime is a subject of inquiry. A subpoena is not a court order. It is not sufficient to release any information. A signed release or court order must be evident. Also, if law enforcement appears at the agency with a search or arrest warrant, neither document is sufficient to release any information all subpoenas and court order are immediately to be reported to the executive director.
4. Information reveals the contemplation of a crime or harmful act
5. When the person served waives the privilege of bringing charges against the employee or authorized others and charges involve confidential communication between the person served and the employee.

Additionally:

1. Internal communication require a within agency "Need to Know".
2. A Medical Emergency necessitates the flow of information to treat the person served.

Valid Persons Served Consent: The federal regulations list a number of specific items that must be included in the consent form in order for it to be valid. (The usual medical consent is not valid. The usual medical consent form does not meet these requirements).

A person served or a guardian or appointed personnel representative must sign a valid consent form each time he or she wishes the program to make a disclosure to anew person or agency.

Even after obtaining a consent form from the person served or guardian, before treatment program may release any information whatsoever, it must make an independent determination that the proposed disclosure is in the persons served interest.

The requirements of a written consent in the proper form and of an independent determination by the programs apply to disclosures to virtually anyone a persons served relatives, friends, employer, physician, third party payer or funding source (such as SSI, Medicaid or insurance agencies). They even apply to disclosures of information to the person served themselves. Thus, the program may release information to the person served if it is decided that such a disclosure would not be harmful to the person served.

Special rules governing criminal justice system referrals: Even when an individual is officially referred to treatment by a court as a condition of probation or parole, the federal confidentiality regulations must be followed. Therefore, a treatment program my not ordinarily release information to the court, probation or parole officers, unless the person served referred by the criminal justice system has signed a consent form

Abuse Reporting Procedure: Chapter of the Florida Statutes mandates that any person who knows or has reasonable cause to suspect, that a person served is abused either in the persons served home or in /out of treatment must be reported to the central abuse hotline of the Department of Children and Families. This special incident abuse procedure will be reviewed in New Staff Orientation as well as ongoing

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-27.2 Abuse Reporting

Original Date: 09/01/06
 Revision Date: 12/3/2013
 Policy Number: HR-27.2
 Department of Origin: Human Resources

Policy:

Florida Statutes (39.201) mandate that any person who knows or has reasonable cause to suspect that a person served is being abused, abandoned or neglected by a parent, legal guardian, caregiver, or other must report the suspected abuse to the Florida Abuse Hotline of the Department of Children and Families. The abuse reporting procedure shall be reviewed during the "New Staff Orientation Training" as well as on an ongoing basis for all direct care and professional staff. The abuse training shall be mandatory for all employees, volunteers and student interns. Reports to the Florida Abuse Hotline Number may be made via telephone to 1-800- 96-ABUSE (1-800-962-2873) or via fax to 1-800-914-0004.

Definitions of what needs to be reported:

"Abuse"-means any willful act or threatened act which results in any physical, mental or sexual injury or harm that causes or is likely to cause the child's physical, mental or emotional health to be significantly impaired. Corporal discipline of a child by a parent or legal custodian for disciplinary purposes does not in itself constitute abuse when it does not result in harm to the child.

"Abandoned"- means a situation in which the parent, legal guardian or caretaker responsible for the child's welfare, while being able, makes no provision for the child's support and makes no effort to communicate with the child, demonstrating a willful rejection of the parental obligations.

"Harm"- to a child's health or welfare can occur when any person inflicts or allows to be inflicted upon the child physical, mental, or emotional injury. In determining whether harm has occurred the following factors must be considered in evaluating:

1. The age of the child
2. Prior history of injuries to the child
3. The location of the injury on the body of the child
4. The multiplicity of the injury
5. The type of trauma inflicted

"Neglect" occurs when a child is deprived of, or is allowed to be deprived of, necessary food, clothing, shelter, or medical treatment or a child is permitted to live in an environment when such deprivation or environment causes the child's physical, mental, or emotional health to be significantly impaired or be in danger of being significantly impaired.

"Institutional neglect" means situations of known or suspected child abuse or neglect in which the person allegedly perpetrating the child abuse or neglect is an employee of a private school, public or private daycare center, residential home, institution, facility, or agency or any person at such institution responsible for the child's care.

Human Resources

HR-27.2 Abuse Reporting (continued)

Procedure:

All JAFCO employees, volunteers and student interns shall:

1. Be issued a copy of the applicable statutes and policies in regards to abuse and neglect.
2. Acknowledge in writing that they have received and read the material, that they understand it and will abide by the requirements to report all suspected incidents of abuse and neglect to the Florida Abuse Hotline as required in Chapter 39. A copy of this signed acknowledgement will be maintained in the their personnel file.
3. Report/discuss any suspicions of abuse or neglect with the Director of Operations and Clinical Services or designee prior to making a report to the Florida Abuse Hotline.
4. Document the incident of reporting within 24 hours of making the report. In the event that the report is made via fax, a copy of the faxed report shall be placed in the file of the person served immediately.

Signature:



Executive Director

12/3/2013

Date

Human Resources

HR-28

Cultural Competency Plan

Original Date: 03/06/08
 Revision Date: 04/11/14
 Policy Number: HR-28
 Department of Origin: Human Resources

Policy:

1. Jewish Adoption and Foster Care Options adopts and practices individualized culturally appropriate care planning by assessing the child's and family's cultural background, practices, needs and concerns at the time of admission. Their treatment plan is designed to meet all of their needs. JAFCO works with the person served without discrimination based on race, national origin, gender, sexual orientation, ethnicity, culture, religion, socio-economic status, educational level, and physical and intellectual abilities. JAFCO's original mission was focused on maintaining the cultural identify of children when they are removed from the family due to abuse by placing them whenever possible in a culturally familiar environment. That mission continues to this day and is applied to all children we serve.
2. We begin with a brief description of JAFCO in terms of services offered.
3. JAFCO is a licensed child placing and child caring agency that currently provides the following services to children and families in Broward, Dade and Palm Beach Counties:
 - a. **The JAFCO Children's Village:**
 The JAFCO Children's Village is a 5.6 acre site with 7 buildings including six group homes and a main operations center known at the Mahler Family Complex. The Grand Opening was held on November 24, 2002, which included the opening of our main operations building which includes: The Simon Family Center and The Marsh Family Children's Center. The Simon Family Center houses all JAFCO social workers, therapists, development and administrative staff. The Marsh Children's Center is a 16 bed emergency shelter for children ages 0-12. Recreational facilities on the campus include a basketball court, swimming pool, playground, a bicycle path and many green areas for sports and outdoor play. The Village is completely secure and gated on all sides
 Other JAFCO Programs include:
 - Foster Care Program
 - Adoption Services Program
 - Family Preservation Program
 - MST Program
 - Out Patient Program
 - Residential Program
 - Senior Caregiver Program
 - Forever Friends Mentoring Program
 See policy and procedures for descriptions
 - b. **JAFCO Family Support Program (Currently serving Greater Philadelphia & Southern New Jersey)**
 JAFCO is proud to be bringing our 21 years of expertise in the area of foster care, adoption and family preservation and strengthening services to the Northeast. Our goal is to work in collaboration with existing local agencies to strengthen families in the Jewish community while creating an additional safety net and assess the needs for Jewish children who may be at risk of abuse, neglect, abandonment or developmental disabilities. The JAFCO Family Support Program serves families in crisis by creating a comprehensive Family Strengthening Plan addressing the following family needs: safety, shelter, food and clothing, in-home parenting skills training, after-school, summer camp and daycare referrals, supervised visitation, in-home family counseling, family safety plans, access to residential treatment, and mentoring.
 - c. **JAFCO Children's Ability Center**
 JAFCO is committed to serving all children, from birth to age 22, who have been diagnosed with a developmental disability including Autism, Intellectual Disabilities, Cerebral Palsy, Spina Bifida or Prader Willi. Our new Children's Abilities Center Grand Opening is September 21st, 2014. The Children's Ability Center is a beautifully designed, warm and inviting place the entire family.

Human Resources

HR-28

Cultural Competency Plan (continued)

The Children's Lodge includes an art studio, fun and fitness gym, computer lab, pet therapy environment, general store, daily living skills environment, music and drama studio for the children and a second story parent café where parents can relax while their children are receiving therapy or having fun with their friends. For overnight stays in our six bedroom respite guest house, the children will enjoy their own private bedroom and bathroom for an overnight stay ranging from one night up to two weeks per year per child.

Children will have an individualized program that focuses on their many strengths and abilities. Working together to develop their cognitive, verbal, fine and gross motor and social skills, we hope to also enhance their performance and independence at home, in school and in the community. Parents and family members are offered the information, training and support to better understand and manage their child's diagnosis

Cultural Competency:

1. JAFCO adheres to numerous policies that are in accordance with national accreditation standards, contract requirements and best practice literature regarding cultural competence. Our staff is knowledgeable about the persons served population and is continuously trained to be culturally sensitive. The staff mirrors the cultural diversity of the population served. JAFCO also encourages team building and staff development to include issues of ethnicity and background to better empower JAFCO employees to meet the needs of the community we serve.
2. JAFCO consistently strives to hire professional staff members from a wide variety of cultures and ethnicities. Employment opportunities are posted in a variety of resources to reach a diverse population.
3. The ethnicity of the JAFCO staff is representative of the persons served population. Fifty percent of our staff is comprised of minorities. All of our staff are trained in cultural sensitivity and practice strength-based family-driven treatment planning. We employ staff who are fluent in English, Spanish, and Hebrew and we have the ability and resources to secure translators as needed to meet the language diversity of our persons served including Sign Language interpreters for deaf and hard of hearing persons served.
4. JAFCO relies on our board for fiduciary oversight, strategic planning and fundraising. Day to day operations are performed by staff. JAFCO is a faith based organization with an expertise in the Jewish community although we proudly serve children of all backgrounds. Our donor base however is primarily from the Jewish community (95%). We are open to members from various cultures and ethnicities to join our board according to our bi-laws. From its inception, our board has been is mostly representative of our donor base rather than our client base, comprised of members of the Jewish community who are willing to use their personal funds as well as their connections within the community to fund JAFCO programs that serve children of all cultures, religions, ethnicities and backgrounds.
5. JAFCO offers training on cultural competency at regular intervals to all employees. The trainings focus on the multicultural aspects of the children and families we serve The various cultures, values, ethnicities are discussed and examples of respectful treatment are practiced. In addition, awareness is created in best practices for providing services to those clients who are physically and/or emotionally challenged. During this training views of giving and receiving help/services are explored. Family systems, discipline practices and parenting styles are also approached, as a family's culture and habits are of utmost importance. We utilize an online training service as well as provide group trainings for residential staff which are facilitated by either the clinical director or program supervisor. The purpose of the training is to share information regarding the different ethnicities and cultures within our own setting. JAFCO also teaches employees about the numerous hardships faced by many of our persons served who may be new immigrants, have language barriers, different views of authority, legal issues, have financial difficulties, be in need of financial assistance and have different attitudes toward parenting.
6. JAFCO's goals are as follows:
 - Preserving the cultural and religious identity of the child in an effort to maintain what is often the only part of the child's identity that remains following abuse and removal from their family
 - Expanding our knowledge about culture and diversity
 - Include culture in our service delivery approach
 - Create a supportive environment for staff of diverse cultures
 - Be active in our local diverse community
 - Be a role model for other communities
 - Be an advocate for cultural competency
 - Proactively speak out against intolerance
 - Provide technical support to ensure that the persons served needs are met in a timely manner

Human Resources

HR-28

Cultural Competency Plan (continued)

JAFCO Cultural Competency Action Plan 2011-2014

Goal # 1: Ensure that staff members across all levels receive ongoing training and education regarding cultural competence					
Objectives	Steps to Achieve Goal	Person/s Responsible	Time frame	Expected Outcome	Strategies for Measuring Progress
<p>1. Create annual plans for staff cultural competency training across all levels</p> <p>a.*Focus 2014 on Deaf and Hard of Hearing training</p> <p>b.*Focus 2014 on training staff to serve persons with disabilities.</p>	<p>1. Identify training needs by surveying staff about their training interests.</p> <p>2. Review cultural competency and related trainings available throughout the state.</p> <p>3. Identify potential trainers, their areas of training expertise and costs. Plan for at least two trainings/workshops per year.</p>	<p>Human Resources Department/ HR committee/ QI Committee Cultural Competency Committee</p>	<p>2014-2017 ongoing</p>	<p>1. Staff across all levels will participate in two formal trainings per year.</p> <p>2. Increased knowledge, skills and awareness of all staff.</p> <p>3. Cultural beliefs, values and world view of person served is respected and incorporated into the treatment process.</p>	<p>1. Percentage of staff who receive trainings are tracked.</p> <p>2. Staff report increased knowledge as measured by survey.</p> <p>3. Persons Served reports of their cultural beliefs & values being incorporated in treatment as measured by person served satisfaction surveys & consumer measure of provider's cultural competence.</p>
<p>1. Increase staff moral and connectedness by combining monthly staff meetings with culturally themed potluck lunches cultural competency mini-trainings provided by staff in conjunction with community speakers.</p>	<p>1. Create annual monthly lunch theme and cultural competency presentation.</p> <p>2. Identify and schedule JAFCO staff as speakers to train on their culture of origin or assigned month</p> <p>3. Distribute list of speakers and topics to staff via email</p> <p>4. Send monthly reminders to staff</p> <p>5. Include annual plan in HR newsletter</p> <p>6. Provide incentive prize with monthly contest for best cultural dish</p>	<p>Human Resources Department / HR committee/Cultural Competency CQI Committee</p>	<p>2014-2017 Ongoing</p>	<p>1. Increased staff awareness and discussion of JAFCO's own cultural diversity as well as cultural issues.</p> <p>2. Increased connection and relationship building with community members and natural supports.</p>	<p>1. Staff self reports of increased cultural awareness as measured by survey</p> <p>2. The number of ongoing relationships with community members established as a result of trainings/lunches.</p>

Human Resources

HR-28

Cultural Competency Plan (continued)

Goal # 2: Ensure service quality and equity for all individuals seeking care					
Objectives	Steps to Achieve Goal	Person/s Responsible	Time frame	Expected Outcome	Strategies for Measuring Progress
1. Develop and implement a Quality Monitoring and Improvement Initiative in which service utilization data is assessed on an ongoing basis for equity in access, retention and engagement service quality and outcomes	<p>1. The QI committee shall design and implement the Initiative.</p> <p>2. In addition to individuals from the information systems department, include person served, family members and providers on the subcommittee.</p> <p>3. Initiative design features are likely to include such activities as: Develop a list of access, retention and engagement, service quality and outcomes questions of interest. Review existing agency data systems to determine if the necessary data points are being collected to be able to conduct the analyses of interest. Offer recommendations for additional data points that may need to be collected to conduct the analyses of interest. Conduct annual analyses of questions of interest. Develop recommendations for eliminating any identified disparities. Develop and implement interventions designed to eliminate disparities. Conduct analyses of agency service utilization and outcome data on an ongoing basis to assess for equity.</p>	Information Systems Department Quality Monitoring and Improvement Subcommittee Human Resources Department	2014-2017	<p>1. Refinement of the JAFCO data systems such that needed demographic and other variables are collected to be able to assess for service equity in access, retention and engagement, service quality and outcomes.</p> <p>2. Increased service equity and quality as a result of implemented interventions.</p>	<p>1. Presence of a data system that includes variables that can be used to assess for equity in access, retention and engagement, service quality and outcomes.</p> <p>2. The presence of annual reports summarizing service utilization patterns.</p> <p>3. The development and implementation of specific interventions designed to eliminate any identified disparities.</p> <p>4. Decrease in any identified disparities.</p> <p>5. Increased reports of person served satisfaction with services as measured by person served satisfaction surveys.</p> <p>6. Increase in persons served access, retention and engagement and service quality</p>

Signature:



Executive Director

04/11/14

Date

Human Resources

HR-29

Transportation Safety Standards

Original Date: 02/06/07
 Revision Date:04/20/08
 Policy Number: HR-29
 Department of Origin: Human Resources

Purpose:

It is the intent of JAFCO to provide safe and secure transportation to all children served.

Policy:

JAFCO is committed to providing safe transportation to our person served as it relates to our vehicles, insurance coverage and staff. Only personnel authorized by the Executive Director shall transport person served.

JAFCO-owned vehicles shall be readily available for scheduled person served oriented appointments. All vehicles shall be maintained under the supervision of a licensed mechanic with all recommendations followed.

The agency has obtained and shall maintain appropriate insurance coverage. The agency vehicles shall remain insured in the following amounts: liability \$1,000,000, uninsured motorist \$500,000, basic personal injury \$10,000 and medical payment for each person \$2,000.

Prior to being hired each JAFCO employee's driver licenses shall be checked for validity and a thorough DMV driving history background check shall be conducted. A copy of the new hires license, insurance card and background check shall be placed in the personnel file and the same information shall be entered in the HR database in order to track expiration. A hired employee that is assigned the duty of transportation shall be added to the JAFCO insurance policy prior to operating a JAFCO vehicle.

All employees who drive children as part of their regular work day are required to take and pass a driver safety course when they begin employment. Proof of completion will be in the employee's personnel file.

Staff is permitted to drive children in their own vehicles as long as they meet the standards set out in JAFCO Vehicle Use Policy Staff Policy (attached) which is signed by all staff members upon hire.

Staff must report to the supervisor/director any accident, no matter how minor, regardless of the extent of damage or the lack of injuries, involving JAFCO vehicles or a personal vehicle used on JAFCO business. Such reports must be made to the Human Resources Department from the scene of the accident. Employees are expected to cooperate fully in the event of an investigation of an accident.

Signature:



04/20/08

Executive Director

Date

Human Resources

HR-30

Employee Safety

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-30
Department of Origin: Human Resources

Policy:

It is the policy of JAFCO to provide a work environment that is pleasant, clean and free as feasible from recognized hazards. Employees are expected to comply with all safety and health requirements established by either the agency and/or federal, state or local law. Employees shall report to supervisor/director and/or the Human Resources Department all observed safety and health violations and any accidents resulting in injuries to employees or person served.

If an employee is injured in connection with employment, regardless of the severity of the injury:

- The employee must immediately notify the supervisor and the Human Resources Department.
- The HR Department will take the necessary steps to obtain necessary medical attention and complete required reports for Workman's Compensation.

Procedures:

JAFCO management will do the following:

1. Monitor compliance with safety rules and regulations, and the applicable safety and health standards, and any other applicable federal, state or local employee safety laws or regulations.
2. Investigate, correct and eliminate recognized unsafe conditions or potential hazards.
3. Conduct periodic informal safety inspections of work areas, grounds and any other recognized potentially hazardous conditions at JAFCO facilities.
4. Organize the training and retraining of employees regarding safety issues as required by licensing agencies.
5. Post notices and keep records as may be required by the state or other regulating agencies, and insurance carriers.
6. Investigate all accidents and fires involving JAFCO employees, or which occur on JAFCO premises, and prepare the required reports.
7. Represent JAFCO during monitoring or investigations by all governmental safety and health agencies, and insurance carrier personnel.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-31 Identification Badges

Original Date: 04/20/08
Revision Date: NA
Policy Number: HR-31
Department of Origin: Human Resources

Policy:

An identification badge is issued to all employees by the Human Resources Department upon employment. The Human Resources Department will prepare badges and ensure delivery to employees.

Purpose:

To assist in providing a safe environment for persons served and employees on premises owned by agency.

Procedure:

1. A photo I.D. badge is made and distributed to every employee upon being hired.
2. I.D. badges are marked with the year of issue and must be reissued every year to all employees.
3. Employees are not allowed to trade badges with other employees, give their badge to anyone not employed at JAFCO, or alter their badge in any way.
4. Upon resignation or termination of employment, the I.D. badge must be returned to the Human Resources Office.

Signature:



Executive Director

04/20/08

Date

Human Resources

HR-32

Salary & Wages

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-32
Department of Origin: Human Resources

Policy:

1. A review of individual salaries, the salary scale and increase guidelines will occur at least on an annual basis by management.
2. Salary increases will be considered on the principle of equal performance for equal pay (within the same job classification). Merit increases will be approved by management on the basis of merit and increased responsibility with the exception of the Executive Director's salary, which must be approved by the Board of Directors. Merit increases will be granted on the recommendation of supervisory personnel at any time during the calendar year with the approval of the Executive Director.
3. Performance reviews will be the determining factor in considering merit increases within the same job classification.
4. All full-time staff have the option of requesting that their current salary be decreased in order to defer the cost of additional employee requested benefits (e.g., dependent health care coverage, life insurance -- when available, tax sheltered annuities, etc.). Such requests must be made in writing, will continue in force until the employee requests changes or amendments in writing and will be held in the employees personnel file.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-33

Fringe Benefits

Original Date: 09/01/06
Revision Date: 09/01/08
Policy Number: HR-33
Department of Origin: Human Resources

Policy:

1. JAFCO shall provide the following benefits:
 - a. Group Health and Dental Insurance
 - b. Life and Accidental Death or Dismemberment Insurance (\$15,000)
 - c. Short-term Disability Insurance
 - d. 403B Retirement Plan with match from JAFCO
 - e. Paid holidays and paid floating holidays
 - f. Paid vacation and sick leave
 - g. Mileage reimbursement for agency related trips
 - h. Cell phones for selected positions

2. All full-time, paid employees are entitled to all of the above, unless otherwise stipulated in the employment letter.

Signature:



Executive Director

09/01/08

Date

Human Resources

HR-34

Performance Evaluation & Merit Increase

Original Date: 09/01/06
Revision Date 04/20/08
Policy Number: HR-34
Department of Origin: Human Resources

Policy:

The performance evaluation is a written evaluation of the employee’s job performance. It may include: the supervisor’s comments and recommendations, action plans for both employee and supervisor, and performance goals for the next evaluation period. Information derived from the performance appraisal may be considered when making decisions affecting an employee including, but not limited to, decisions concerning training needs and opportunities, merit pay increases, promotions, transfer or continued employment.

Procedures:

1. All JAFCO employees will receive an annual evaluation to occur no later than their anniversary date of employment. It is the responsibility of the employee's immediate supervisor to complete such evaluation and forward it to the Human Resources Department. The employee evaluation will be accomplished using standard JAFCO formats.
2. Evaluations will aid the employee in improving performance, prescribing the means and methods of correcting deficiencies to a required level of performance. Supervisors and employees should meet and discuss the evaluation, assess the employee’s strengths and weaknesses in a constructive manner, and set objectives and goals for the period ahead. The employee is given an opportunity to examine the written evaluation and make written comments about any aspect of it. The employee and supervisor sign and date the evaluation and forward it to the Human Resources Department for inclusion in the employee’s personnel file.
3. When commenting on an employee’s overall performance during the evaluation period, supervisors may consider additional factors such as: experience and training of the employee, the job description and the employee’s attainment of previously set objectives and goals. Other factors that normally should be considered in the performance appraisal include, but are not limited to, knowledge of the job, quantity and quality of work, promptness in completing assignments, cooperation, initiative, reliability, attendance, judgment and acceptance of responsibility. A written development plan will be presented to the employee as part of the evaluation.
4. If the written evaluation contains an unfavorable comment or rating which the employee believes is unfair or unjustified, and the matter has not been resolved to the employee’s satisfaction during the discussion with the supervisor, the employee may take further action by using the regular grievance procedure. If an employee refuses to sign the evaluation, a third party who is not privy to the contents of the evaluation shall witness the fact that the employee refused to sign.
5. Performance evaluations may occur at any time during a given year when they are required other than the standard annual evaluation. Nothing contained in this policy should be construed to prohibit or discourage supervisors from discussing an employee’s job performance with the employee on an informal basis whenever the need to do so arises.
6. Performance evaluations will be the objective basis for merit increases and promotions within the organization.

Signature:



04/20/08

Executive Director

Date

Human Resources

HR-35

Employee Recognition

Original Date: 09/01/08
Revision Date: NA
Policy Number: HR-35
Department of Origin: Human Resources

Policy:

It is the policy of JAFCO to recognize extended service to the organization by presenting service awards to all employees upon the anniversary of their hire date. In addition, anniversary dates are recognized at monthly staff meetings and in the monthly Human Resources Newsletter. The Human Resources Department is responsible for identifying those employees to be honored, preparing and distributing the awards.

Birthdays of employees are recognized with birthday cards, gifts and recognition in the Human Resources Newsletter. Each department is responsible for planning birthday celebrations for their staff. In addition, employee celebrations are planned for important life events, such as baby and wedding showers, going away parties, etc. Management provides an annual holiday party for all employees and gifts may be distributed at that time.

Signature:



Executive Director

09/01/08

Date

Human Resources

HR-36

Reimbursement of Expenses

Original Date: 09/01/06
Revision Date: 04/20/08
Policy Number: HR-36
Department of Origin: Human Resources

Policy:

1. The following guidelines will be observed regarding reimbursements for travel expenses which are work related:

Mileage (per mile)	\$0.44
Breakfast	\$8.00
Lunch:	\$15.00
Dinner:	\$25.00
Lodging:	\$150.00
2. Actual expenses for meals will be allowed up to the specified amount for travel outside of home work area, for overnight conferences and/or staff trainings.
3. When special luncheon, dinner or lodging rates are a part of the conference expense, conference rates will be paid (there will be no reimbursement for alcoholic beverages). Further, when costs in specific areas are greater than specified rates (e.g. large cities), higher rates can be approved.
4. Expenses for conference meals, lodging travel and registration, may be submitted prior to the event on the Request for Advance Payment form when funds are required in advance.
5. All requests for reimbursement prior to or following expenditures will be submitted and approved by the appropriate supervisor prior to processing and payment by the accounting office.
6. All expenses incurred during official travel will be listed on the Travel Reimbursement form and receipts for expenditures will be attached to the same form and submitted for payment.
7. All other requests for unusual expenses beyond these rates must be approved by the appropriate supervisor.
8. All expenses will be paid for those staff and volunteers who are required to supervise children on any approved off campus residential or foster care outing (e.g., admission fees, meals, travel, etc.).
9. Staff who volunteer to accompany children on outings but are not required for supervision, are not entitled to receive reimbursement for expenses with the exception of free transportation in a JAFCO vehicle on a space available basis.

Signature:



Executive Director

04/20/08

Date

Human Resources

HR-37 Compensation

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-37
Department of Origin: Human Resources

Policy:

It is the intent of JAFCO to adequately compensate its personnel.

Any salaries, wages, together with fringe benefits or other forms of compensation (housing, transportation and other allowances) paid to or provided for JAFCO employees, directors or officers will not exceed a value which is reasonable and commensurate with the duties and working hours associated with such employment and with the compensation ordinarily paid persons with similar positions or duties.

JAFCO policy prohibits the payment of bonuses or other extraordinary compensation to employees or contract providers.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-38

Resignation/Termination

Original Date: 09/01/06
Revision Date: 03/06/08
Policy Number: HR-38
Department of Origin: Human Resources

Policy:

All personnel who voluntarily resign their position are expected to give a minimum of four weeks written notice unless otherwise determined by the Executive Director, with the exception of the nonexempt hourly direct care staff, who are required to provide at least two weeks' notice. The written notice should state the position from which they are resigning, their final date of employment, and any proposed requests for vacation time or payment for said time. All resigning staff are expected to complete all written and other job requirements, as well as participate in an exit interview where they will turn in all keys, I.D. cards, cell phones and/or other property of JAFCO prior to the effective resignation date and prior to receiving his/her final paycheck.

Staff whose position is being terminated by JAFCO may receive prior notice unless disciplinary procedures require immediate termination. Staff will be required to complete all written and other job requirements, as well as participate in an exit interview where they will turn in all keys, I.D. cards, cell phones and/or other property of JAFCO prior to the effective termination date and prior to receiving his/her final paycheck.

Upon termination of employment, employees will be paid for unused vacation time that has been earned through the last day of work. However, if the employee fails to provide at least a two-week notice or, if JAFCO, in its sole discretion, terminates employment for cause, forfeiture of unused vacation time may result.

Signature:



Executive Director

03/06/08

Date

Human Resources

HR-39

Layoff and Recall

Original Date: 09/01/06
Revision Date: 01/20/08
Policy Number: HR-39
Department of Origin: Human Resources

Policy:

It is the policy of JAFCO to attempt to provide regular and continuous employment for its employees. However, in the event it becomes necessary for the agency to reduce employment because of adverse economic situations or other conditions, layoffs and recall from layoffs will be conducted consistent with agency requirements and in accordance with the procedures set forth below. Management reserves the right to alter the layoff procedure in order to assure an adequate level of service.

Definitions:

1. Layoff refers to the process of reducing the workforce as a result of a downturn in the amount of work of the agency or influx of funds into the agency.
2. Recall refers to the process that is used in calling back to work employees who had been initially laid off once the amount of work at the agency increases.

Procedure:

1. Hourly employees are to be selected for layoff in the following order:
 - a. Probationary employees are to be laid off first.
 - b. Temporary and part-time employees are to be laid off next.
 - c. Full-time employees are to be laid off based on their evaluation ratings as a first consideration.
 - d. Length of service may be used as a determining factor when evaluation ratings are the same among two or more employees in the same category and with the same job functions.
2. Salaried employees are to be selected for layoff in the following manner:
 - a. Demonstrated ability based on past and current performance.
 - b. Transferability of skills to other positions within the organization.
 - c. Length of service with the agency.
3. Employees selected for layoff will be given as much notice as is reasonable under the circumstances and as required by law. Employees will be informed of the reason for the layoff, of the estimated length of the layoff and of any right to appeal their selection for layoff to the Executive Director.
4. Employees on layoff will have all benefits discontinued. No paid days of absence (sick and vacation) will be accumulated during layoff. Employees recalled within 30 days will have all benefits including paid vacation and sick leave reinstated that accumulated prior to the layoff.
5. Employees will be recalled according to need, classification or ability to do the job. Notice of recall will delivered by phone or by U.S. mail to the employee's home address by the Human Resources Department. Unless an employee responds to a recall notice within seven days following the day on which the notice was sent, the employee's name will be removed from the recall list.

Signature:



Executive Director

01/20/08

Date

Human Resources

HR-40

Severance Pay

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-40
Department of Origin: Human Resources

Policy:

It is the policy that terminated employees are not entitled to severance pay upon termination of their employment. Management, at its own discretion, reserves the right to grant severance pay in lieu of notice to employees who are terminated provided such termination was not due to gross misconduct.

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-41

Staff Development

Original Date: 09/01/06
Revision Date: NA
Policy Number: HR-41
Department of Origin: Human Resources

Policy:

1. JAFCO shall have a written plan for the orientation, ongoing training and development of all staff.
2. JAFCO shall ensure that the supervisory and social work staff receives at least 15 hours of in-service training during each full year of employment. Activities related to supervision of the staff member's routine tasks shall not be considered training activities for the purpose of this requirement.

Additional in-service training will be scheduled and planned for on the Staff Development Calendar as opportunities present. JAFCO is dedicated to developing each person served's potential to its fullest thus all staff are encouraged to participate in training sponsored by the corporation and other opportunities for professional growth.

Corporation sponsored opportunities include staff orientations, regular planned staff meetings, in-service staff development programs, treatment team rings, resource material and on-going supervision. JAFCO will also sponsor staff attendance at workshops, seminars and conferences for professional development as budget constraints allow.

A staff development file will be maintained in every employee's personnel file which documents attendance at all staff development activities.

All staff are encouraged to pursue professional development outside the work place to include institutes, seminars, as well as, formal education. Whereas no financial support is offered by JAFCO at this time for formal education, time allowances will be offered as is possible while still requiring the employee to perform the requirements of the agencies program.

All new employees of JAFCO, Inc. will receive an orientation to their position by their immediate supervisor. This orientation will include:

- A familiarization with all JAFCO, Inc. policies and procedures;
- Thorough description of job responsibilities;
- Daily schedule for staff and person served
- Familiarization with JAFCO its organizational structure and mission; and
- Familiarization with all required forms and processes.

An orientation checklist will be completed for each employee to ensure that all orientation procedures have been completed.

- Identifying their needs,
- Using their own resources to meet needs,
- Using their strengths to meet needs,
- Actively participating in resolution of problem,
- and Setting time-limited objectives.

The techniques identified within a goal-planning model should be appropriate to meet person served needs and to resolve problems which will be occurring with the variety of cases referred to this program, including cases in which the presenting problems are:

- Physical and emotional neglect.
- Adolescent behavioral problems of truancy, running away, and being beyond the control of parents.
- Family problems such as financial, unemployment, mental or physical illness, estrangement from friends or relatives, and marital discord.

Human Resources

HR-41

Staff Development (continued)

Most families who will need crisis intervention will exhibit some hostility or resistance because of the nature of the crisis and the fact that their lives are out of control. The therapist's ability to take control in a positive way should help overcome this hostility and resistance. .

Signature:



Executive Director

09/01/06

Date

Human Resources

HR-42

Volunteers

Original Date: 09/01/06
Revision Date: 04/18/08
Policy Number: HR-42
Department of Origin: Human Resources

Policy:

Volunteers are an important component of the JAFCO continuum of care and assist the agency without being paid. Schooling interns may qualify as volunteers.

Procedure:

1. A "Volunteer Application Package" is provided to the individual to be completed. This package includes demographic information, volunteer guidelines, release and waiver of liability, Affidavit of Good Moral Character form, confidentiality form, release of information form, child abuse and neglect in Florida guide, medical clearance/health certificate, vehicle use policy, screening checklist and activity log.
2. The individual volunteer must provide a resume and credentials if applicable.
3. Volunteer candidates are not to report to work until the Volunteer Coordinator has received results of the background checks and authorized them to start.
4. It is the responsibility of the Volunteer Coordinator to keep a copy of all pertinent documentation for all volunteers, including performance evaluations, time records and responsibilities.
5. Each volunteer is assigned to a supervisor who closely monitors their work. Staff will informally assess the volunteers on a routine basis. If a problem arises, the issue is discussed with a supervisor. Due to the nature of the agency's business, it is sometimes necessary to terminate a volunteer's relationship with the agency. If at any time it is felt that the volunteer's actions are not in the best interests of the agency's goals and mission, the volunteer will be dismissed.

Signature:



Executive Director

04/18/08

Date

Human Resources

HR-43

Use of Communication Systems

Original Date: 04/20/08
Revision Date: NA
Policy Number: HR-43
Department of Origin: Human Resources

Policy:

It is the policy of JAFCO to provide or contract for the communications services and equipment necessary for the conduct of its business. Communications systems refers to the standard office equipment used for communicating including, but not limited to, telephones, cell phones, beepers, faxing equipment, copying equipment, e-mails, voice mails, in-house software systems, and the Internet.

The agency does not permit the use of any of the above systems for the distribution of lewd, harassing or sexually explicit material or material discriminatory to any grouping of employees of legally protected status.

Employee's personal use of JAFCO's communication services and equipment is allowed in a limited fashion as long as usage does not impede the normal flow of business, incur unnecessary expense, and reduce productivity.

Signature:



Executive Director

04/20/08

Date

Human Resources

HR-44

Solicitation and Distribution

Original Date: 04/20/08
Revision Date: NA
Policy Number: HR-44
Department of Origin: Human Resources

Policy:

It is the policy of JAFCO to prohibit solicitation and distribution on its premises by non-employees, except with the specific authorization of the Executive Director, under certain specifically authorized circumstances.

Procedures:

1. Persons who are not employed by JAFCO are prohibited from soliciting funds or signatures, conducting membership drives, distributing literature or gifts, offering to sell merchandise or services, or engaging in any other solicitation or similar activity on agency property without permission from the Executive Director.
2. Employees are permitted to engage in solicitations or distributions of literature for any group or organization only with permission from the Executive Director.
3. JAFCO authorizes fund drives by a limited number of charitable organizations such as United Way and the Jewish Federation of Broward County. Each employee may decide whether or not to contribute, although 100% employee participation may be encouraged. There will be no discrimination against employees because of their willingness or unwillingness to participate.

Signature:



Executive Director

04/20/08

Date

Human Resources

HR-45

Job Descriptions

Original Date: 09/01/06
Revision Date: 04/17/2014
Policy Number: HR-45
Department of Origin: Human Resources

Policy:

JAFCO, Inc. administrative staff shall prepare and maintain current job descriptions for each position, identifying duties, qualifications, education, training requirements and lines of authority.

A copy of each job description shall be made available to the employee and be on record in the employee's file.

All employees shall endeavor to practice their job description and will be evaluated accordingly.

It is hereby noted and all employees should understand a formal job description can never fully describe all the duties and responsibilities of an employee's position. The job description shall serve as a general guideline for the organization and its employees. All employees may be required to act in positions above or below their stated duty-responsibilities (where not prohibited due to qualifications, experience, policy or licensing requirements) when such action is immediately required and is to the positive advantage of person served and agency alike. All such actions should occur with the prior awareness and support of Supervisory and/or Executive staff.

Signature:



Executive Director

4/17/2014

Date

Human Resources

HR-45-1

Job Description – Executive Director

Scope: This person will serve as the administrative head of JAFCO.

Job Responsibilities:

- The Executive Director will serve as the administrative head of JAFCO.
- The Executive Director will be directly responsible to the JAFCO Board of Trustees.
- As the administrative head, the Executive Director will be required to develop, organize, implement, administrate and evaluate the administration of the agency with regard to:
 - Supervision and maintenance of quality personnel with regard to the following staffing requirements:
 - § Interviewing/hiring/termination of all program staff.
 - § Scheduling of orientation, training and other matters of staff development
 - § Arranging work schedules to allow for continuous coverage of all staffing responsibilities including vacations, workshops, sick leave, personal days, etc.
 - § Insuring the application of all current personnel policies as well as the development of new policies as required
 - § It is to be here noted that the Executive Director responsibilities include the above but such responsibilities may be delegated to other program staff as available due to program design and staffing patterns. Within delegation the Executive Director will hold responsible those staff identified with the above.
- Insuring compliance of all programs and procedures regarding all current federal, state statutes and rules concerning the operation of a child-placing agency.
- All operational systems which ensure the effective, efficient and safe operation of the agency including all mechanical and routine systems, e.g., appropriate use of in house procedures regarding
 - § Meeting all children and staff medical, clothing, dietary and hygienic needs.
 - § Scheduling and maintenance of intake, referral and termination procedures
 - § Accounting systems (e.g., staff/child expense accounts/travel/etc.)
- Responsibility for the effective and efficient use of agency resources, to include cooperation, coordination, and communication with specified program staff.
- Cooperation and ongoing consultation with the JAFCO Board of Trustees to insure the programs ability to provide the best possible treatment for each child and family.
- Performing public relations functions as required
- Maintaining corporate/agency accounting systems (including accounts payable and payroll)
- Fulfilling the responsibilities and duties of the agency privacy officer (See Policy & Procedures Manual for description.)
- Attendance and participation at all required meetings and committee functions.

Qualifications:**Education and Experience:**

- A minimum of two years' experience in an agency setting or equivalent experience which demonstrates both administrative, social work and clinical abilities; or
- A Master's degree in Psychology, Social Work, Counseling or a related field in which the major emphasis has been on Behavioral Sciences, or a Master's degree in Public Administration or Educational Administration. A minimum of three years' experience in an agency or equivalent experience which demonstrates both administrative, social work, and clinical abilities.

Other:

- Ability to use oral and writing skills for effective and efficient administration.
- Demonstrated understanding of social work, clinical and administrative requirements to effectively operate the type of program to be implemented/managed.
- Ability to supervise staff as to provide effective and efficient program operation.
- Ability to work under supervision (direct and minimal as required) and in a group context in planning, developing and coordinating programs within assigned time constraints.
- Knowledge of community agencies and resources.
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.
- Demonstrated ability to communicate programs to community when required.
- Willingness to work extended hours when necessary.
- Understanding of budgets, management practices and reporting requirements.

Human Resources

HR-45-2

Job Description – Director of Operations and Clinical Services

Scope:

This person will oversee and develop JAFCO's Clinical Programs which include Foster Care, Family Preservation, MST, Senior Caregiver, Forever Friends, Residential and Outpatient, Northeast Program and the Ability Center. This person will also oversee the operations of all programs. The Director of Operations and Clinical Services will serve as the Single Point of Contact for Deaf and Hard of Hearing.

Job Responsibilities:

- Monitoring the day-to-day operations of all programs
- Delegating and overseeing work assignments to ensure that service delivery is performed according to the agency's mission, policy and procedures, and service philosophy
- Overseeing all cases and programs served by the agency
- Developing, implementing, supervising, evaluating and reporting on all clinical programs within the agency
- Training employees on topics including but not limited to: best practices, clinical interventions, child development, documentation, case consultation
- Providing ongoing clinical supervision to all clinical staff and interns who provide individual, family and/or group therapy to any child and/or family member in all programs
- Conducting periodic and annual reviews of all clinical staff and interns
- Conducting all intake assessments, treatment planning and interventions, discharge and transition planning and after-care services for all persons served
- Approving all clinical documents prepared by the clinical staff
- Developing and maintaining supervision tracking systems for all clinical programs
- Overseeing maintenance, quality and compliance of all case files and ensuring that all files meet administrative requirements; collecting and analyzing data to improve outcomes; ensuring that documentation is completed by clinical staff according to compliance standards and meeting the agency's quality improvement and evaluation requirements under Medicaid, ChildNet, CARF and State standards
- Supervising all court related activity and recommendations made by the agency
- Providing back up support for the on-call supervisors for all programs

Reporting Relationship: This person reports directly to the Executive Director.

Qualifications:

- Master's Degree in Social Work, Psychology, or Counseling or other degree in a related field in which the emphasis has been on Behavioral Sciences. Licensed Clinician by the Department of Professional Regulations in Florida, Pennsylvania and New Jersey. Certification in the Academy of Certified Social Workers.
- The Director of Operations and Clinical Services shall also have a minimum of five years of experience in an agency or equivalent experience which demonstrates expertise in clinical and supervisory areas.
- The Director of Operations and Clinical Services will maintain Florida Board Certification as a Child Welfare Case Manager Supervisor.
- In addition, the Director of Operations and Clinical Services will complete 16 hour training in the Supervision of Clinical Social Work Practice, 24 hours of MAPP Training for prospective foster and adoptive parents, and maintain certification in Professional Crisis Management as a Practitioner Level 2.
- A demonstrated ability to utilize oral and writing skills (e.g., exemplary proficiency in the use of the English language including: grammar, spelling, punctuation and composition.) The Director of Operations and Clinical Services will be required to have or develop a high degree of proficiency in the use of dictation and recording procedures. The Director of Operations and Clinical Services will also be required to have an ability to implement effective and efficient case management, reporting, recording and correspondence.
- A working knowledge of human development and behavior, current therapeutic techniques (e.g., including individual, group and family counseling fields, behavioral analysis and intervention, systems analysis and intervention).
- An ability to effectively supervise and consult with staff regarding the above, as well as an ability to maintain an open door policy for staff.
- First Aid and CPR certification
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.

Human Resources

HR-45-3

Job Description – Medical Director

Scope: This person will oversee the JAFCO Clinical Program.

Job Responsibilities:

- Psychiatric Evaluations
- Treatment Planning and Review
- Medication Management
- Therapist consultation
- Physician's Certificate Assessment (Baker Act)
- Supervision of Staff Psychiatrist

Reporting Relationship:

This person reports directly to the Director of Operations and Clinical Services, and the Executive Director.

Qualifications:

- Medical practitioner licensed pursuant to Chapter 458 or 459, Florida Statutes.
- Have a specialty in Child/Adolescent Psychiatry.
- Have a minimum of two years' experience working directly with children and families working with children who are victims of physical abuse, sexual abuse, neglect, or youth who have been adjudicated delinquent, committed and are currently emotionally disturbed.
- Current for CME's (within last 2 years) related to child and family treatment issues.

Human Resources

HR-45-4

Job Description – Director of Southeast Development

Scope: This person will oversee the JAFCO Development Program and Development Team.

Job Responsibilities:

- **Fund Development**
 - § Responsible for the coordination and implementation and successful funding outcomes of the agency development plan and strategic plan.
 - § Responsible for the creation and development of Capital and Endowment Campaign to meet the future needs of the agency.
 - § Creation of new fundraising opportunities through existing donors and identify new donors including Corporate Partners
 - § Supervision of planning, organization and implementation of agency special events
 - § Systemic review of current operational funding sources and development of additional private and corporate donors
 - § Identification, solicitation of potential major donors from current agency database and other outside sources
 - § Analysis of database and donors to determine giving trends
 - § Creation of Direct mail pieces
 - § Development and updating of brochures, fact sheets and other written materials
 - § Coordination and distribution of quarterly newsletter
 - § Development of on-going professional fundraising/public relations video presentation on JAFCO.
- **Board Development**
 - § Schedule and Coordinate all Board Meetings and Committee Meetings that pertain to the development of the agency.
 - § Work in partnership with Board Members to identify new potential donors, coordinate tours and follow up on any recommended individuals or corporations
- **Donor Cultivation and Stewardship**
 - § Development and supervision of both existing and future JAFCO Chapters and fundraising auxiliaries to cover the entire Southeast area.
 - § Creation and Implementation of all new chapters and fundraising events
 - § Organize parlor meetings and other informational meetings to raise awareness within the community
- **Supervision of Development Team**
 - § Supervise Development team inclusive of Assistant Director, Director of Communications, Grants writer and Data Base Specialists

Reporting Relationship: This person reports directly to the Executive Director and to the Board of Directors.

Qualifications:

- Master's Degree in Business Administration, Marketing, Communication, or any field that would lend itself to the skills required to complete job responsibilities successfully. A minimum of two years' experience in a non –profit agency or corporate setting which demonstrates organizational, development, public relations and fundraising capabilities.
- Or, Bachelor's Degree in Business Administration, Marketing, Communication or any field that would lend itself to the skills required to complete job responsibilities successfully. A minimum of four years' experience in a non –profit agency or corporate setting which demonstrates organizational, development, public relations and fundraising capabilities.
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.
- Computer proficiency in areas of word processing, desktop publishing and database management.
- Knowledge of community resources and contacts.
- Ability to work as part of a team, under supervision and independently, and supervise volunteers.
- Ability to plan and coordinate special fundraising events.
- Ability to implement Fundraising Campaign.
- Ability and willingness to work flexible hours, including evenings and weekends, to be flexible in handling changing priorities, to work as a part of a team and to be a self-starter.
- Commitment to a 40-50 hour work week.

Human Resources

HR-45-5

Job Description – Director of Southeast Development

Scope:

This person will develop and implement a plan to raise funds and awareness to educate new communities in the Northeast region about child abuse in the Jewish community, JAFCO's role in the protection of children and as a model child welfare program. This person will also work in partnership with the JAFCO Development Team, inclusive of the Director of Southeast Development, Assistant Director, Development Associate, Director of Communications, Grants Writer and Data Base Specialists.

Job Responsibilities:

- **Education and Awareness**
 - § Educate the community about the issue of child abuse within the Jewish community at large.
 - § Promote the JAFCO Model to the Northeast Jewish Community.
 - § Build and strengthen the Northeast community's support for existing programs in South Florida.
 - § Secure regional financial and in-kind support.
 - § Initiate and develop relationships with temples, schools, community organizations.
 - § Participate in community speaking engagements (Chapters, Temples, Resource Fairs, Mitzvah Fairs, Organizations and Schools).
 - § Research what programs exist locally for Jewish children who come through the child welfare system outside of South Florida.
 - § Explore capacity and ability for potential expansion of services in the Northeast.
- **Fund Development**
 - § Responsible for the coordination, implementation and successful funding outcomes of the Northeast development plan.
 - § Creation of new fundraising opportunities through existing donors and identify new donors.
 - § Planning, organization and implementation of agency special events throughout the Northeast region.
 - § Identification and solicitation of potential major donors from current agency database and other outside sources.
 - § Analysis of database and donors to target for Northeast expansion.
 - § Creation of fact sheets and other written materials needed for the Northeast outreach.
 - § Coordination and distribution of quarterly newsletters.
 - § Attendance at annual special events and other events in Florida, as needed.
- **Donor Cultivation and Stewardship**
 - § Development and supervision of future JAFCO Chapters and fundraising auxiliaries ("Friends" of JAFCO) to cover the Northeast region.
 - § Creation and Implementation of any new Chapters and fundraising events within the Northeast.
 - § Creation of Northeast Advisory Board.
 - § Organize parlor meetings and other informational meetings to raise awareness within the community in the Northeast.
 - § Maintain contact and relationships with major Florida donors.
- **Public Relations**
 - § Ensure that all Public Relations efforts support the mission of JAFCO and protect the dignity of the clients served by the agency.
 - § Work collaboratively with PR firm to create news worthy stories.
 - § Contact Northeast PR resources to request assistance in raising awareness for all JAFCO efforts.
 - § Release recent newsletters and fact sheets to pitch story ideas to media outlets.
- **Board Development**
 - § Attend JAFCO board meetings and report on growth and development in the Northeast region.
 - § Work in partnership with Board members to seek out new potential donors within Northeast region.

Human Resources

HR-45-5

Job Description – Director of Northeast Development (Continued)

In the absence of a Director of Southeast Development, below is a summary of additional responsibilities:

- Maintain contact and relationships with major Florida donors.
- Supervision of planning, organization and implementation of agency special events.
- Collaboration and support to development team on existing events and projects.
- Attend JAFCO board meetings and report on Development Program.
- Work in partnership with Board members to identify new potential donors and follow up on any recommended individuals or corporations.
- Ensure that all public relations efforts support the mission of JAFCO and protect the dignity of the clients served by the agency.
- Coordination and distribution of quarterly newsletters.

Reporting Relationship: This person reports directly to the Executive Director and to the Board of Directors.

Qualifications:

- Master's in Business Administration, Marketing, Communication, or any field that would lend itself to the skills required to complete job responsibilities successfully. A minimum of two years' experience in a nonprofit agency or corporate setting which demonstrates organizational, development, public relations and fundraising capabilities.
- Or, Bachelor's Degree in Business Administration, Marketing, Communication or any field that would lend itself to the skills required completing job responsibilities successfully. A minimum of four years' experience in a nonprofit agency or corporate setting which demonstrates organizational, development, public relations and fundraising capabilities.
- Computer proficiency in areas of word processing, desktop publishing and database management.
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.
- Knowledge of community resources and contacts.
- Ability to work as part of a team, under supervision and independently, and supervise volunteers.
- Ability to plan and coordinate special fundraising events.
- Ability to be self-motivated and comfortable in making cold calls, setting appointments.
- Ability and willingness to work flexible hours, including evenings and weekends, to be flexible in handling changing priorities, and to work independently.
- Commitment to a 40-50 hour work week, as needed.

Human Resources

HR-45-6 Job Description – Associate Director of Development

Scope: This person will assist in implementing the JAFCO Development Program by educating the community about child abuse, about JAFCO and its role in the protection of children and as a model child welfare program and to ensure that all public relations efforts support the mission of JAFCO and protect the dignity of clients served by the agency.

Job Responsibilities: This person's job responsibilities include but are not limited to the following:

Special Events:

- Plan, coordinate and manage agency events as agreed upon with supervisor including but not limited to Golf Tournament, Jacob's Ladder Award Gala, Women's Luncheon, and Godparent Reception.
- Oversee coordination and management of in-house events including but not limited to Volunteer Recognition Brunch, Annual Picnic, Chanukah Party, and Bar/Bat Mitzvahs.
- Planning activities include creation and oversight of event committee, meetings, budget, sponsorship opportunities, PR and collateral materials.

JAFCO Chapters:

- Oversee all JAFCO chapter events and attend as needed.
- Work with chapter boards to increase leadership development including facilitation of bi-annual chapter President's meeting, and implementing suggested board structure.
- Development of new and/or inactive chapters and fundraising efforts.
- Work with Chapter Advisory Council to ensure support and guidance is provided to all chapters.

Community and Public Relations:

- Presentations and tours to prospective and existing JAFCO donors to build support throughout tri-county area. Oversee coordination of community speaking engagements (Chapters, Temples, Resource Fairs, Mitzvah Fairs, Organizations and Schools)
- Identify newsworthy stories and work collaboratively with PR company to ensure media coverage throughout the community.
- Assist in creation of the JAFCO newsletter and provide input on design and content of agency Direct Mail pieces.

Development Department Support

- Supervise Development Assistant.
- Manage signage in order to ensure appropriate donor recognition including Godparent Circle, Legacy Circle, Wall of Honor, and Village signage.
- Manage correspondence with JAFCO Board of Trustees and Children's Foundation including meeting reminders, writing/editing board meeting minutes, and keeping accurate and up to date board records.
- Provide support for fundraising operational and capital dollars for the JAFCO Respite & Family Resource Center for Children with Developmental Disabilities.
- Provide support to Development Department staff and assist Director of Development in managing department.

Any other reasonable request made by direct supervisor.

Reporting Relationship: This person reports directly to the Director of Southeast Development

Qualifications:

- Bachelor's Degree in Marketing, Business Administration, Communications or a related field with a minimum two years related experience in sales, marketing, communications and/or event planning. Or Associate's Degree with a minimum of four years related practical experience.
- Written and verbal communications: ability to make formal and informal presentations, lead and participate in meetings, write reports and correspondence, experience with public speaking.
- Computer proficiency in the areas of word processing, database, spreadsheets and light desk-top publishing for basic flyers, etc.
- Knowledge of community resources and contacts.
- Ability to plan and coordinate special fund-raising events.
- Ability to demonstrate organizational and problem-solving skills, set objectives, do all necessary follow-up and provide timely and accurate reports.
- Personal qualities – to have ability and willingness to work flexible hours, including evenings and weekends, to be flexible in handling changing priorities, to work as a part of a team and be a self-starter.

Human Resources

HR-45-7

Job Description – Development Officer

Scope: This person will be part of the development team.

Job Responsibilities:

- **Fund Development**
 - § Responsible for the coordination and implementation and successful funding outcomes of the agency development plan and strategic plan.
 - § Responsible for the creation and development of Capital and Endowment Campaign to meet the future needs of the agency.
 - § Creation of new fundraising opportunities through existing donors and identify new donors including Corporate Partners.
 - § Supervision of planning, organization and implementation of agency special events.
 - § Systemic review of current operational funding sources and development of additional private and corporate donors.
 - § Identification, solicitation of potential major donors from current agency database and other outside sources.
 - § Analysis of database and donors to determine giving trends.
 - § Creation of Direct mail pieces.
 - § Development and updating of brochures, fact sheets and other written materials.
 - § Coordination and distribution of quarterly newsletter.
 - § Development of ongoing professional fundraising/public relations video presentation on JAFCO.
- **Board Development**
 - § Schedule and Coordinate all Board Meetings and Committee Meetings that pertain to the development of the agency.
 - § Work in partnership with Board Members to identify new potential donors, coordinate tours and follow up on any recommended individuals or corporations
- **Donor Cultivation and Stewardship**
 - § Development and supervision of both existing and future JAFCO Chapters and fundraising auxiliaries to cover the entire Southeast area.
 - § Creation and Implementation of all new chapters and fundraising events
 - § Organize parlor meetings and other informational meetings to raise awareness within the community
- **Fundraising and Tours for the JAFCO Children’s Ability Center**

Reporting Relationship: This person reports directly to the Executive Director and to the Board of Directors.

Qualifications:

- Master’s Degree in Business Administration, Marketing, Communication, or any field that would lend itself to the skills required to complete job responsibilities successfully. A minimum of two years’ experience in a non –profit agency or corporate setting which demonstrates organizational, development, public relations and fundraising capabilities.
- Or, Bachelor’s Degree in Business Administration, Marketing, Communication or any field that would lend itself to the skills required to complete job responsibilities successfully. A minimum of four years’ experience in a non –profit agency or corporate setting which demonstrates organizational, development, public relations and fundraising capabilities.
- Computer proficiency in areas of word processing, desktop publishing and database management.
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.
- Knowledge of community resources and contacts.
- Ability to work as part of a team, under supervision and independently, and supervise volunteers.
- Ability to plan and coordinate special fundraising events.
- Ability to implement Fundraising Campaign.
- Ability and willingness to work flexible hours, including evenings and weekends, to be flexible in handling changing priorities, to work as a part of a team and to be a self-starter.
- Commitment to a 40-50 hour work week.

Human Resources

HR-45-8

Job Description – Development Assistant

Scope: Assist with the initiation and development of relationships with temples, schools, community organizations and JAFCO chapters. Assist with the planning and coordination of major special events and solicitation of corporate sponsorships.

Job Responsibilities:

- Public Relations - educating the community about child abuse, about JAFCO and its role in the protection of children and as a model child welfare program.
- Special Events - plan and coordinate major agency events including budgets, marketing and collateral materials and public relations - including but not limited to the annual golf tournament, annual black tie dinner and donor and volunteer recognition events.
- Presentations (and tours) to new and existing JAFCO Chapters and fund raising auxiliaries to build donor base throughout tri-county area. Coordination of private meetings and public speaking engagements with synagogues, charitable organizations and corporations, including all follow up activities.
- Other duties as required to support the development office of the agency.

Reporting Relationship: This person reports directly to the Assistant Director of Development and the Director of Southeast Development (or designee).

Qualifications:

- Bachelor's Degree from a four-year college or university in Marketing, Business Administration, Communications or a related field. A minimum two or more years related experience in sales, marketing, communications and/or event planning.
- Written and verbal communications: ability to make formal and informal presentations, participate in meetings, write reports and correspondence.
- Computer proficiency in the areas of word processing, database, spreadsheets and light desk-top publishing for basic flyers, etc.
- Knowledge of community resources and contacts.
- Ability to plan and coordinate special fundraising events.
- Ability to demonstrate organizational and problem-solving skills, set objectives, do all necessary follow-up and provide timely and accurate reports.
- Personal qualities - ability and willingness to work flexible hours, including evenings and weekends, to be flexible in handling changing priorities and be a self-starter.

Human Resources

HR-45-9

Job Description – Director of Communications and Office Operations

Scope: This person will manage the organization's information technology services & infrastructure, will assist the Development Team in the creation and production of all promotional materials and is responsible for the day to day office operations.

Job Responsibilities:

- Supervision and maintenance of software programs, existing computer and phone systems and supervision of consultants.
- Approval and tracking of employee requests for system access and removing access for terminated employees.
- Troubleshoot daily computer problems and answer user inquiries regarding computer software or hardware operation to resolve problems.
- Assist chapter presidents and donors as needed with technical support.
- Production of JAFCO Newsletter.
- Web Site update and maintenance.
- Creation of all printed materials for agency marketing including but not limited to brochures, pamphlets, invitations and agency events.
- Special event support (reservations, table seating, place cards, signs, tent cards, programs and gala journal)
- Create and run queries for development planning and statistics.
- On site IT support to staff and liaison with IT company for repairs and malfunctions.
- Order and Install hardware and software for optimal performance.
- Perform minor repairs to hardware and software.
- Develop training procedures (Tech Tips) and train users in the proper use of hardware or software.
- Maintain Media and PR Scrapbook.
- Oversee Development Calendar and timeline.
- Participation in any agency development activity at the request of the Director of Southeast Development (or designee).

Reporting Relationship: This person reports directly to the Director of Southeast Development (or designee).

Qualifications:

- High School diploma and two years computer experience or completion of computer certification database management or related field
- Computer proficiency in areas of word processing, desktop publishing, database management, PowerPoint presentations, graphic design and web maintenance.
- Ability to demonstrate organizational and problem-solving skills, set objectives, do all necessary follow-up and provide timely and accurate reports.
- Personal qualities – to have ability and willingness to work flexible hours, including evenings and weekends, extremely organized, task oriented.
- Flexibility in handling changing priorities, to work as a part of a team and be a self-starter.

Human Resources

HR-45-10 Job Description – Development Administrative Assistant

Scope: To assist the Director of Communications and the development team

Job Responsibilities:

- Assist Director of Communication with daily tasks, communication materials and correspondence
- Assist agency managers with scheduling in Outlook.
- Assist the Development Department with processing of donations and entering/updating data into donor database
- Send thank you letters to donors
- E-File database batches
- Run database reports and queries as needed
- Invoicing of outstanding or expected event and tribute donations
- Assist donors with tribute or donation needs
- Assist with event management
- Assist with other clerical duties as needed
- Any other reasonable request made by supervisor

Reporting Relationship: The person reports directly to the Director of Communications

Qualifications:

- High School diploma and two years computer experience or completion of computer certification database management or related field
- High level of experience with Microsoft Word, Excel, PowerPoint and Outlook
- Strong verbal and written communication using the English language
- Good organizational skills

Human Resources

HR-45-11 Job Description – Database Manager

Scope:

Management and maintenance of JAFCO donor database, supervision of the Database Assistant, and provide administrative assistant services as needed.

Job Responsibilities:

- Enter donor data into Results Plus database and run reports as needed.
- Database administration to include setting up pledges, data assignment, data cleansing, closing of fiscal year, adding new codes and merge letters.
- Receive all incoming donations and process in Results Plus.
- Process all credit card donations on terminal and scan checks to bank.
- Prepare monthly invoices for Godparents and Capital Donors.
- Prepare monthly chapter reports and event lists for chapter presidents.
- Supervise and train Database Assistant.
- Maintain and update e-mail lists.
- Proof tribute cards.
- Assist with major fundraising events.
- Answer phone, assisting donors and chapter volunteers.
- Assist with other development, clerical and IT duties as requested by supervisor.

Reporting Relationship: This person reports directly to the Director of Communications with back-up from the Director of Southeast Development (or designee).

Qualifications

- Bachelors' degree and two years computer experience or completion of computer certification database management or related field
- Good verbal and written communication skills
- Good organizational skills

Human Resources

HR-45-12 Job Description – Database Assistant

Scope: To assist with the maintenance of the JAFCO database

Job Responsibilities:

- Open, date stamp, sort and distribute daily incoming mail.
- Enter and/or update data into database.
- Scan checks into bank account.
- Process credit card donations.
- Process donations in database.
- Reconcile database batches with scanned check batch outs and/or credit card batch outs.
- Send thank you letters to donors.
- E-File database batches.
- Run database reports and queries as needed.
- Invoicing of outstanding or expected event and tribute donations.
- Assist donors with tribute or donation needs.
- Assist with event management.
- Assist with other clerical duties as needed.

Reporting Relationship: This person reports directly to the Database Manager and the Director of Communications.

Qualifications:

- High School diploma and two years computer experience or completion of computer certification database management or related field
- Good verbal and written communication skills
- Good organizational skills

Human Resources

HR-45-13 Job Description – Web Master

Scope: To provide support and maintenance of the JAFCO website

Job Responsibilities:

- Support the Development Staff in the regular posting of new or updated content to website, including agency and event information
- Maintain an up-to-date event calendar on the website
- Assist in posting of digital media (video/audio/photo) to website
- Contribute and create graphic elements for all web pages
- Manage an e-mail system (Constant Contact) to employees and donors
- PHP programming to backend of website and CMS queries
- Server IT maintenance
- Maintain positive PCI compliance

Reporting Relationship: This person reports directly to the Director of Communications.

Qualifications:

- Bachelor's degree or technical degree in web design or web programming preferred.
- Proficiency in Microsoft Office, Photoshop, Adobe Creative Suite, HTML
- Knowledge of Java Script, Flash, Constant Contact and other technologies preferred
- Good verbal and written communication skills
- Good organizational skills

Human Resources

HR-45-14

Job Description – Help Desk Representative

Scope: Maintain and monitor end-user workstations and productivity on local area network. Perform a variety of maintenance, software installation, end-user support and training tasks to ensure end-user workstations and network performance meet organization and user requirements. Provide support to staff on all company-supported applications. Troubleshoot computer problems, determine source and advise on appropriate action. Complete application project-based work. Perform responsibilities in accordance with all organization standards, policies and procedures.

Job Responsibilities:

- Administers end-user workstations and supports end-user activities on a primarily Microsoft Windows-based local area network (LAN)
- Investigates user problems and identifies their source; determines possible solutions; tests and implements solutions
- Installs, configures and maintains personal computers, Windows networks, network cabling, and other related equipment, devices and systems; adds or upgrades and configures disk drives, printers, copiers and related equipment including business-related cell phone applications such as email.
- Maintains programming of phone system: adding and deleting new employees, updating holiday schedules and time changes.
- Performs and/or oversees software and application installation and upgrades
- Maintains site licenses for department/organization
- Adding and deleting users
- Troubleshoots networks, systems and applications to identify and correct malfunctions and other operational difficulties
- Develops and conducts various training and instruction for system users on operating systems and other applications; assists users in maximizing use of networks and computing systems
- Maintains confidentiality with regard to the information being processed, stored or accessed by the end-users on the network
- Assists personnel of other departments as a computer resource
- Provides computer orientation to new and existing company staff
- Operational support of in-house donor management software and in-house client management software including day to day operations, creation and maintenance of custom reports, and training users in its operation.
- Document IT related procedures
- Wireless network troubleshooting
- Advanced working knowledge of Microsoft Windows XP through Windows 8.1
- Facilitate CQI Technology meetings
- Responsible for compliance to CARF and other Affiliated Agencies Technology Standards

Reporting Relationship: This person reports directly to the IT Consultant and Director of Communications.

Qualifications

- year degree in related field preferred with 1-2 years of networking experience, or equivalent applicable work experience
- 1-2 years help desk experience
- Ability to communicate technical information to nontechnical personnel
- Ability to install, configure and maintain personal computers and related hardware and software
- Knowledge of computer and/or network security systems, applications, procedures and techniques
- Ability to identify and resolve computer system malfunctions and operations problems
- Skill in organizing resources and establishing priorities
- Excellent verbal and written communication skills
- Ability to learn and support new systems and applications

Human Resources

HR-45-15 Job Description – Quality Improvement Director

Scope: This person will oversee the overall Q.I. needs of the agency including clinical, personnel and licensing functions. He or she will function as a team member training staff and reviewing files to ensure compliance with standards set by various funding and governance entities. The QI Director will operationalize JAFCO's definition of quality as a commitment to always improve.

Job Responsibilities:

- Implementation and annual review of agency Q.I. Plan
- Oversight and preparation for accreditation and license process including file review, staff training, site visit coordination, corrective action plans, updating of necessary policies and procedures
- Ongoing file review for compliance with funding and contract requirements
- Contract, Medicaid and CARF compliance
- Set-up and oversight of Medicaid billing system
- Preparation for annual Agency re-licensing , Program Audits and Licensing of any future JAFCO programs (i.e. Developmental Disabilities Facility in 2007)
- Updating of Policy and Procedure Manual as needed or on an annual basis
- Maintenance of CARF standards and preparation for all reviews
- Assist staff as needed in any of the above or as requested by the Director of Operations & Clinical Services or Executive Director.

Reporting Relationship: This person reports directly to the Executive Director and the Director of Operations & Clinical Services.

Qualifications:

- Master's Degree in Social Work, Public Administration or related field and two years' experience in Medicaid Standards and Practices, CARF accreditation standards and practices, and Q.I.
- Or Bachelor's Degree in Social Work, Public Administration or related field and four years' experience in Medicaid Standards and Practices and Q.I.

Human Resources

HR-45-16 Job Description – Privacy Director

Scope: Assists in the identification, implementation and maintenance of the agency's information privacy policies and procedures in coordination with the Continuous Quality Improvement Council.

Job Responsibilities:

- In the event a complaint has been issued by a person served/guardian or any stakeholder in the community, the Privacy Officer shall:
- Work with legal counsel as needed to ensure that the agency has maintained appropriate privacy and confidentiality consent and authorization forms, information notices and materials reflecting current agency legal practices and requirements.
- Oversee, direct, deliver, and ensure the delivery of privacy training to all employees, volunteers, medical and professional staff.
- Oversee, establish and maintain a mechanism to track access to protected health information within the purview of the agency as required by law to allow qualified individuals to review or receive a report on such activities.
- Oversee and ensure that the rights of the persons served by the agency are respected and that the person served is allowed to amend, inspect and restrict access to protected health information when appropriate.
- Establish and administer a process for receiving, documenting, tracking, investigating and taking action on all complaints concerning the agency's privacy policies and procedures.
- Ensures that complaints are addressed in a timely manner.
- Reviews all security plans.
- Maintains knowledge of applicable federal and state privacy laws and accreditation standards.
- Cooperates with the U.S. Department of Health and Human Service's Office of Civil Rights, other legal entities and organization officers in any compliance reviews or investigations.

Qualifications:

- Position can be held by any management level member of the agency.

Human Resources

HR-45-17 Job Description – Comptroller

Scope: This person will ensure that the JAFCO business office is run efficiently and effectively. This person will also be responsible for all bookkeeping functions including payroll, deposits, bank statement requisition, accounts payable and receivable, filing of all receipts and bank statements, as well as supervising a part-time bookkeeping assistant. This person will also be responsible for budgeting; reconciling budget to actual reports; maintaining and filing government grants and billing.

Job Responsibilities:

- Maintain all checking and investment accounts
- Prepare all checks for signature by Executive Director
- Balance bank statements
- File bills and bank statements
- Organize office
- Prepare payroll, payroll taxes and all related payroll forms
- Work with JAFCO accountant to facilitate monthly reports and annual audit
- Maintain and update JAFCO Fiscal Policies Manual
- Bill and maintain government grants; prepare budget reports as required by granting agencies
- Preparation and oversight of annual budget and prepare monthly budget to actual reports, cash flow reports and projections, monthly budget reports for the Board of Directors
- Pay bills and maintain accounts payable and receivable
- Any other reasonable requests by the Executive Director, Board of Directors and the CPA of JAFCO

Reporting Relationship: This person reports directly to the Executive Director

Qualifications:

- College Diploma in Bookkeeping or Office related field and/or a minimum of four years' experience in business profession.
- Computer experience in word processing and accounting software.
- Good organizational skills.
- Good interpersonal skills.

Human Resources

HR-45-18 Job Description – Bookkeeping Assistant

Scope: This person will be responsible for assisting the Comptroller with bookkeeping duties.

Job Responsibilities:

- Reconcile weekly petty cash
- Assistance with accounts payable and receivable
- Reconcile invoices with packing slips or receipts as needed
- Maintain spreadsheets for clinical programs and fundraising events as needed
- Reconcile daily deposits
- Assist with monthly contract billing
- Filing and organization
- Payroll assistance
- Assist Comptroller with other bookkeeping tasks as needed

Reporting Relationship: This person reports directly to the Comptroller.

Qualifications:

- High School Diploma and a minimum two years' experience in bookkeeping profession
- Computer experience in word processing, excel and accounting software
- Good organizational skills
- Good interpersonal skills

Human Resources

HR-45-19 Job Description – Human Resources Manager

Scope: Oversee all aspects of the HR function, serving as an advisor to all levels of management and staff, ensuring proper internal procedures and protocols, and monitoring compliance with all external entities; requirements.

Job Responsibilities:

- Manage recruitment and selection process
- Coordinate performance appraisal process
- Ensure compliance with all HR-related laws and regulations
- Assist managers with employee disciplinary matters and terminations
- Handle investigations and resolution of employee concerns and complaints, utilizing appropriate management staff or outside experts, and ensure confidential documentation of all issues
- Perform periodic internal HR Audits (e.g., personnel files, I-9's, wage-hour, etc.)
- Conduct periodic skills and training needs assessments of all levels of the organization and identify programs and providers to meet these needs
- Develop and implement comprehensive compensation and benefits plans that are competitive and cost effective
- Assist management with the annual review, preparation, and administration of the agency's wage and salary program
- Contribute to agency's strategic effectiveness by offering information and opinions as a member of the management team
- Other duties as needed

Secondary Functions:

- Develop and implement on boarding process
- Monitor new hire orientation within departments
- Keep abreast of developments and changes in the HR/employment law field
- Advise supervisors and manager regarding interpretation of HR policy and employee relations issues
- Represent agency at workers comp mediations
- Develop and implement an employee wellness program
- Maintain an up-to-date employee handbook
- Conduct and document exit interviews
- Act as primary contact with employment counsel, H/R training consultants, and government agencies (DOL, EEOC, etc.)

Reporting Relationship: Executive Director and the Director of Operations and Clinical Services

Qualifications:

- Minimum Bachelor's Degree (HR, Business, Psychology, or related field). Master's preferred: S/PHR Certification preferred
- Minimum 3-5 years HR Generalist experience
- Computer skills (MS Word, Excel, Outlook, and database)
- NFP experience a plus

Human Resources

HR-45-20 Job Description – Receptionist/Administrative Assistant

Scope: This person will act as the agency's receptionist for incoming phone calls and visitors, and will assist staff with clerical and administrative duties.

Job Responsibilities: This person's job responsibilities include but are not limited to the following:

- Provide a professional first point of contact for the agency offering a competent, friendly and person centered approach
- Answer phones at agency's main phone center and direct calls to proper personnel
- Warmly greet and welcome visitors, vendors, volunteers, donors and clients in lobby and direct them to proper personnel
- Be aware of all events happening both on and off campus to direct and support callers, visitors, staff, clients and volunteers.
- Thank and provide donation receipts to donors who are bringing donated items
- Manage lobby area including traffic flow, court ordered restricted interactions and keep donors and clients separated by using upstairs lobby
- Administrative support for the Executive Director and Development Team, including database entry, scheduling, making simple flyers and certificates, tribute cards
- Process and deliver outgoing mail to post office daily
- Prepare mailings
- Complete other clerical tasks as needed
- Any other reasonable tasks as assigned by supervisor

Reporting Relationship: This person reports directly to the Assistant to the Director of Operations and Clinical Services

Qualifications:

- Minimum High School diploma; Associate's or Bachelor's Degree preferred.
- Proficient in Microsoft Word, Excel, Outlook
- Comfortable with menu driven database
- Good verbal and written communication skills
- Excellent professional appearance and demeanor
- Good judgment and common sense skills
- Clear professional speaking voice
- Accuracy and ability to work independently
- Ability to multi-task and remain calm under pressure

Human Resources

HR-45-21 Job Description – Evening Receptionist – Part Time

Scope: This person will act as the agency's receptionist for incoming phone calls and visitors.

Job Responsibilities: This person's job responsibilities include but are not limited to the following:

- Provide a professional first point of contact for the agency offering a competent, friendly and person centered approach
- Answer phones at agency's main phone center and direct calls to proper personnel
- Warmly greet and welcome visitors, vendors, volunteers, donors and clients in lobby and direct them to proper personnel
- Be aware of all events happening both on and off campus to direct and support callers, visitors, staff, clients and volunteers.
- Thank and provide donation receipts to donors who are bringing donated items
- Any other reasonable tasks as assigned by supervisor

Reporting Relationship: This person reports directly to the Assistant to the Director of Operations and Clinical Services

Qualifications:

- Minimum High School diploma; Associate's or Bachelor's Degree preferred.
- Good verbal and written communication skills
- Excellent professional appearance and demeanor
- Good judgment and common sense skills
- Clear professional speaking voice
- Accuracy and ability to work independently
- Ability to multi-task and remain calm under pressure

Human Resources

HR-45-22 Job Description – Secretary

Scope: This person will be responsible for supporting the organization in a clerical function.

Job Responsibilities:

- Typing/word processing
- Photocopying
- Supply maintenance and ordering
- Assist with coffee and general office hospitality
- Run errands as needed
- Prepare refreshments for guests, staff and clients
- Receptionist backup
- Assist all staff with special projects as needed

Reporting Relationship: This person reports to the Assistant to the Director of Operations and Clinical Services

Qualifications:

- High School diploma
- Typing-55 words per minute
- Independent worker
- Working knowledge of Microsoft Office products
- Strong interpersonal skills
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.

Human Resources

HR-45-23

Job Description – Forever Friends Coordinator

Scope: This person will oversee JAFCO's mentoring program.

Job Responsibilities:

- Recruit, screen and train mentors
- Monitor performance of mentors
- Scheduling of mentors
- Assist with other projects related to the JAFCO Community

Reporting Relationship: This person reports directly to the Executive Director

Qualifications:

- Bachelor's Degree in Social Work, Public Relations or related field
- Good interpersonal skills
- Good organizational skills
- Good public speaking skills

Human Resources

HR-45-24 Job Description – Facilities Manager

Scope: This person will be responsible for overseeing the daily operations of the JAFCO Children's Village including monitoring traffic flow of guests, residents, staff and clients, building and room utilization, maintenance, and repair and safety.

Job Responsibilities:

- Oversight of room reservations and traffic flow
- Operating the security system
- Oversight of maintenance activity
- Supervising the maintenance staff and workers
- Greeting all visitors and ensuring they are assisted promptly
- Greeting donors and completing donation receipts
- Organization of donation closet
- Familiarity with emergency procedures
- Oversight of agency safety program including drills, trainings and inspections
- Any other task as assigned by Executive Director.

Reporting Relationship: This person reports directly to the Executive Director.

Qualifications:

- High school diploma with training in office management or related field, plus two years management or customer service experience
- Computer knowledge of Word and Excel
- Excellent customer service skills
- Excellent organizational skills
- Excellent interpersonal skills
- Experience with building maintenance issues preferred
- CPR and First Aid certification

Human Resources

HR-45-25 Job Description – Maintenance Staff

Scope: To ensure that the JAFCO property and buildings are presentable and well maintained.

Job Responsibilities:

Daily:

A.M.

- Check grounds, doors and perimeter of all houses
- Clean bathrooms (sinks, mop, toilet paper, towels)
- Empty garbage in offices that were not available the night before
- List any repairs for construction punch list
- Keep front storage area clear
- Assist staff with any office needs or moving needs
- Purchase supplies (with approval)
- Vacuum Crisis Center and community room as needed
- Sweep kitchen daily and mop twice per week
- General upkeep of property as needed
- Fills fountains

P.M.

- Empty Garbage in offices
- Vacuum office area and mop lobby
- Close all doors, blinds, lights, etc.
- Empty and clean coffee pots
- Clean kitchen area,
- Set up community room for any morning meetings
- Set alarm

Weekly:

- Dust offices and crisis center furniture
- Clean out refrigerators in kitchen
- Clean Group Homes
- Clean windows

Reporting Relationship: This person reports directly to the Facilities Coordinator.

Physical Job Requirements: To perform the essential functions of this job, the employee must be physically capable of driving an automobile in a safe manner. Must be able to lift up to 50 pounds, stoop, bend, kneel, stand and/or walk continuously and be capable of continuous activity.

Qualifications:

- High School diploma preferred
- Cleaning Experience preferred
- Hard working
- Good common sense
- Self-motivated
- Able to communicate verbally and in writing
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families
- CPR certification
- First Aid certification

Human Resources

HR-45-26 Job Description – Housekeeping Staff

Scope: To ensure that the main building offices, lobby, shelter, kitchen are kept clean and maintained.

Job Responsibilities:

Daily:

- Vacuum staff offices
- Clean bathrooms first and second floors
- Restock paper products
- Clean up community room
- Dust blinds
- Clean floors in lobby and kitchen
- Wipe floors in Crisis Center as needed
- Weekly clean restrooms in Shelter
- Wipe down counters in kitchen
- Clean out coffee pots
- Dust offices, second floor lobby and front lobby
- Clean behind the refrigerators in the kitchen and shelter
- Wipe out the walk-in cooler in the kitchen
- Keep supply closet stocked and clean
- Clean Guard House and cabana bathrooms
- Clean House 4

Reporting Relationship: This person reports directly to the Facilities Manager

Physical Job Requirements: To perform essential functions of this job, the employee must have the ability to stand and/or walk continuously and the ability to lift up to 50 pounds.

Qualifications:

- High School diploma preferred
- Housekeeping experience preferred
- Able to communicate verbally
- CPR & First Aid certification

Human Resources

HR-45-27 Job Description – Residential Director

Scope: The Residential Director will manage the daily operations of the Group Home and Shelter Programs. He or she will ensure that all staff members in these programs are compliant with their job responsibilities and that the program is in compliance with contractual and licensing requirements.

Job Responsibilities:

- Supervise Shelter Manager, Shelter Social Worker, Group Home Social Worker, and Group Home Program Coordinator and ensure that their job duties are completed in a timely and efficient manner
- Oversee all admissions and discharges to Group Home and Shelter Programs
- Identify and address needs of children, staff and programs
- Represent agency at court hearings and professional staffing meetings
- Supervise aftercare contact and therapeutic home visits for discharged children
- Daily back up support for the on-call staff in all programs, with the exception of two weekends per month
- Provide a leadership role in the crisis intervention team
- Supervise clinical interns
- Schedule quarterly child team meetings for clinical team and family members
- Ensure that all records and documentation are complete and up to date according to the JAFCO Policy and Procedure Manual and according to CARF, Medicaid standards and DCF guidelines
- Oversee 90-day evaluations and annual evaluations for direct care staff
- Complete quarterly outcome reports for Group Home and Shelter in accordance with contract requirements
- Facilitate staff meetings and in-service trainings and document staff training hours
- Provide continuous staff training and support including shift transitions
- Complete all other duties as requested by the Director of Operations and Clinical Services or Executive Director.

Reporting Relationship: The Residential Director will report directly to the Director of Operations and Clinical Services.

Qualifications:

- Master's Degree in Social Work, Counseling, Psychology or related field
- Clinical License with 5 years related experience working with children
- Completion of 40 hour annual in-service training
- Completion of 16 CEU's of supervision in Clinical Social Work Practice
- 24 hours of MAPP training for prospective foster and adoptive parents
- PCM Practitioner II Certification
- First Aid certification
- CPR certification
- Water Safety certification
- Universal Precautions certification
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.
- A demonstrated ability to address interpersonal barriers and strengths in personnel, empowering those receiving supervision, offering criticism in a constructive manner and understanding employment and labor laws
- An ability to effectively supervise and consult with staff regarding the above, as well as an ability to maintain an open door policy

Human Resources**HR-45-28****Job Description – Group Home Social Worker**

Scope: The Group Home Social Worker will serve as a team member in coordinating services to children admitted to the JAFCO Group Home Program. The Social Worker will maintain files for children residing in the Group Home and will serve as the child's advocate in attempting to provide and facilitate the best possible care and treatment.

Job Responsibilities:

- Complete all client admissions and discharges
- Conduct initial orientation for all children and families
- Coordinate, schedule and supervise visitation and telephone contact with family members according to the court order and case plan
- Oversee staff schedules
- Maintain communication with individuals involved in child's life including, but not limited to family members, case workers, teachers, GAL's, mentors and doctors
- Attend court hearings related to the child
- Ensure that children's therapists are updated daily on child's behavior and other needs
- Maintain documentation for client files and program compliance including but not limited to:
 - § Intake packets
 - § Care plans and updates
 - § CFARS
 - § Supervised visitation reports
 - § JADE Database
 - § Monthly progress reports
 - § Permanent Register
 - § Medication Logs
 - § Case notes
- Update Resident Placement Information forms, quarterly or more frequently, as needed
- Maintain Child Information Books in the group home
- Maintain CRR books
- Assist in training new direct care staff regarding daily routines
- Create medical logs with correct information and maintain log book
- Prepare case note on any medical related issue
- Apply for medical insurance coverage for all uninsured clients
- On call rotation every other weekend
- Any other reasonable task as requested by Residential Director or Director of Operations and Clinical Services.

Reporting Relationship: The Group Home Social Worker reports directly to the Residential Director and the Director of Operations and Clinical Services.

Qualifications:

- Bachelor's Degree required, Master's Degree preferred
- 2 years' experience working with children
- Completion of annual 40 hours in-service training
- CPR, First Aid and Water Safety certification
- PCM certification for Practitioner 2
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.

Human Resources

HR-45-29

Job Description – Group Home Program Coordinator

Scope: The Group Home Program Coordinator will ensure that the children residing in the JAFCO group home program are offered the opportunity to live in a loving and nurturing environment. He/she will oversee all components of the Group Home Program including supervision of the direct care staff, implementation of a behavior management system and a recreation program, as well as any other needs of the children to promote healthy self-esteem and normalcy.

Job Responsibilities:

- Supervise and support direct care staff in providing for the daily needs of the children
- Supervision of behavior management system and provide behavioral intervention strategies
- Provide leadership to crisis intervention team
- Prepare direct care staff schedule on a weekly basis
- Oversee recreational activities for the children
- Prepare monthly progress reports for each child
- Responsible for filling prescriptions and communication with pharmacy, medical doctors and psychiatrist
- Schedule, attend and follow up on all medical appointments including well and sick appointments, dental, eye, psychiatric appointments, as well as specialists as directed by primary care physician
- Assist in training new direct care staff regarding daily routines
- Create medical logs with correct information and maintain log book
- Responsible for filling prescriptions and communication with pharmacy, medical doctors and psychiatrist
- Schedule, attend and follow up on all medical appointments including well and sick appointments, dental, eye, psychiatric appointments, as well as specialists as directed by primary care physician
- Administer client satisfaction surveys
- Assist in intake and admission procedures
- Assist in orienting children and families to JAFCO
- Supervision of Educational Coordinator
- Attend court hearings and professional staff meetings as needed
- On call rotation every other weekend
- Complete all other duties as requested by the Residential Director or Director of Operations and Clinical Services

Reporting Relationship: The position of Group Home Program Coordinator will report directly to the Residential Director and the Director of Operations and Clinical Services.

Qualifications:

- Bachelor's Degree required, Master's Degree preferred in Social Work, Counseling, Psychology or related field
- 3 years related experience working with children
- Completion of 40 hour annual in-service training
- CPR and First Aid certification
- PCM Instructor Certification
- Water Safety certification
- Universal Safety Precautions certification
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.

Human Resources

HR-45-30

Job Description – Educational Coordinator

Scope: The position of Educational Coordinator will ensure that the educational needs of the JAFCO Group Home children are being met. The Educational Coordinator will work cooperatively with the Group Home Management Team.

Job Responsibilities:

- Assist child with organization and preparation at beginning of school year and on-going throughout the school year
- Train direct care staff on strategies for motivating child academically
- Monitor progress and daily attendance of child
- Schedule and attend meetings with child's teachers throughout school year
- Meet with each child a minimum of once weekly to assist with educational challenges
- Assist student with all projects, reports and assignments
- Provide and monitor tutoring on-site and/or arrange for tutoring off-site as needed
- Create and implement performance incentive program
- Develop individual educational plan for each group home child
- Develop Independent Living Plan for all children over age 12 and implement all recommendations
- Attend all meetings relevant to educational/independent living concerns
- Assist child in Independent Living curriculum, including, but not limited to such skills as budgeting, socialization, personal care, professionalism and home maintenance in an effort to prepare child for independent living
- Assist child with college preparatory tasks, such as researching and accessing financial aid, completion of college application and other necessary paperwork
- Assist child with finding alternative housing when needed
- Documentation of all meetings, concerns, communication, logs, etc.
- All other duties as requested by Executive Director, Director of Operations and Clinical or Group Home Program Coordinator

Reporting Relationship: The Educational Coordinator reports directly to the Group Home Program Coordinator.

Qualifications:

- Bachelor's Degree plus two years' experience working with children
- Completion of 40 hour annual in-service training, MAPP Training, PCM Training,
- First Aid, CPR, Universal Precaution and Water Safety Certification.
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.

Human Resources

HR-45-31

Job Description – Shelter Manager

Scope: This person will oversee the daily operations of the JAFCO Emergency Shelter and will ensure the provision of a safe and structured home-like environment for the children residing in the Shelter. This person will also coordinate the Volunteer Program.

Job Responsibilities:

- Supervise direct child care staff to ensure that their responsibilities are being completed
- Ensure that a safe, nurturing and structured home-like environment is being provided to the children
- Ensure that the physical, medical, emotional, social, recreational and educational needs of the children are being met
- Work in partnership with referral agencies
- Be available (or assign designee) to accept phone referrals 24/7
- Assist in orienting children and families to the Shelter program
- Facilitate staff meetings and trainings
- Ensure program compliance and quality regarding state contract and licensing requirements
- Maintain daily census and submit to required agencies
- Coordinate and implement nutritionist approved menus for Shelter residents
- Administer satisfaction surveys to residents
- Prepare and manage weekly staffing schedule ensuring that all ratios and alerts are being maintained at all times
- Prepare activities schedule for residents for weekdays and weekends
- Coordinate medical appointments and follow up for Shelter residents
- Assist with managing behaviors of residents when needed
- Supervise contact between residents and birth relatives when necessary
- Maintain Medical and medication logs
- Provide on-call support on a rotating schedule (every other week)
- Maintain all CARF standards
- Accept all inquiries regarding volunteer opportunities and process all volunteer applications
- Orient new volunteers to program and assign tasks to approved volunteers
- Complete all other duties as requested by the Residential Director or Director of Operations and Clinical Services

Reporting Relationship: The Shelter Manager will report directly to the Residential Director.

Qualifications:

- Bachelor's Degree
- 3 years related experience
- First Aid certification
- CPR certification
- Water Safety certification
- Physical ability to complete PCM Certification and implement strategies
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.

Human Resources

HR-45-32 Job Description – Shelter Social Worker

Scope: This person will function as a team member in coordinating services for children admitted to the JAFCO Children's Shelter. The social worker will maintain files for children residing in the shelter and will serve as the child's advocate in attempting to provide and facilitate the best possible care and treatment available.

Job Responsibilities:

- Complete all client admissions and discharges
- Conduct an initial intake on all clients admitted to the Shelter
- Maintain files for all Shelter residents
- Maintain written case notes
- Prepare written service plans
- Prepare monthly progress reports
- Attend court hearings related to the child when needed
- Communicate with school, psychiatrist, pediatrician, and other professionals working with the child
- Attend supervision and staff meetings
- Follow Florida Child Abuse Reporting Rules
- Share all concerns with Shelter Manager and the Residential Director
- Prepare children for discharge from the program
- Participate as a member of clinical team
- On call every other week for the Shelter program
- Complete all other duties as requested by the Director of Operations and Clinical Services, Residential Director and/or Shelter Manager.

Reporting Relationship: This person reports directly to the Residential Director.

Qualifications:

- Master's Degree in Social Work, Psychology, Family Therapy
- Licensed or licensed eligible
- CPR and First Aid Certification
- PCM Practitioner Level 2 Certification
- MAPP training
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children.

Human Resources

HR-45-33

Job Description – Shift Team Leader - Shelter

Scope: This person will help provide a safe and structured home-like environment, while ensuring the physical, emotional, educational, social and medical needs of the children residing in the emergency shelter. Additionally the team leader will be responsible to facilitate communications to his/her team regarding the needs of the children and the job duties of the employees.

Job Responsibilities: This person's job responsibilities include, but are not limited to, the following:

- Supervise children
- Oversee Staff members
- Provide for the physical needs of the children
- Prepare, or arrange for, daily meals and snacks
- Maintain a safe and structured home environment
- Coordinate children's transportation to and from school
- Coordinate children's transportation to and from extracurricular activities
- Provides daily recreational time
- Supervise homework
- Supervise proper hygiene routines
- Participate as member of clinical team
- Supervise medication distribution and document appropriately
- Attend staff meetings and in-service as required
- Be available and flexible to accommodate scheduling needs
- Facilitate communications between assigned team and manager
- Assure that team members are following proper shelter procedures
- Oversee team responsibilities
- All other duties as requested by Executive Director, Director of Operations and Clinical Services and Residential Director.

Reporting Relationship: This person reports directly to the Emergency Shelter Manager and Residential Director.

Qualification:

- High School diploma or equivalent
- Completion of annual 40 hours of in-service training
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.
- First Aid Certification
- CPR Certification
- Water Safety Certification
- Food Preparation Training

Human Resources

HR-45-34 Job Description – Assistant House Parent

Scope: This person will provide a safe and structured home environment as well as provide for the physical needs of the children residing in the group home. This person will provide relief to the house parents.

Job Responsibilities:

- Provide for the physical needs of the children
- Prepare, or arrange for, daily meals and snacks
- Maintain a safe and structured home environment
- Clean home on a daily basis, including but not limited to mopping, dusting, laundry, keeping drawers and closets neat
- Coordinate children's transportation to and from school
- Coordinate children's transportation to extracurricular activities
- Provide daily recreational time
- Supervise homework
- Supervise proper hygiene routines
- Participate as member of clinical team
- Supervise medication distribution and document appropriately
- Attend staff meetings and in-services as required
- Provide relief to house parents and perform house parents' responsibilities while working
- Be available and flexible to accommodate scheduling needs, in both the Shelter and Group Home
- All other duties as requested by Executive Director, Clinical and Operations Director or Group Home Director.

Reporting Relationship: This person reports directly to the Group Home Program Coordinator and Residential Director.

Physical Job Requirements: Must be physically capable of driving an automobile in a safe manner. Must be able to lift up to 25 pounds, stoop, bend, kneel, stand/walk up to 4 hours, and be capable of continuous activity with children; must be able to perform housekeeping duties such as mopping and vacuuming large areas; must be physically able to participate in PCM training (Professional Crisis Management).

Qualifications:

- High School Diploma or equivalency and 3 years work-related experience
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families
- Completion of initial 30 hours parenting training
- Completion of annual 40 hours of in-service training
- First Aid certification
- CPR certification
- Water Safety Certification

Human Resources

HR-45-35 Job Description – Direct Care Staff – Emergency Shelter

Scope: This person will provide a safe and structured environment as well as provide for the physical needs of the children receiving services in the Emergency Shelter.

Job Responsibilities:

- Provide for the physical needs of the children.
- Prepare, or arrange for, daily meals and snacks.
- Maintain a safe and structured home environment.
- Coordinate children's activity schedule in the home and at the Respite Center.
- Coordinate children's transportation to extracurricular activities.
- Accompany children to all activities and assist other staff in engaging children in the activities.
- Supervise proper hygiene routines
- Participate as member of clinical team.
- Supervise medication distribution and document appropriately.
- Attend staff meetings and in-services as required.
- Be available and flexible to accommodate scheduling needs, in both the Shelter and Group Homes
- All other duties as requested by the Shelter Manager.

Reporting Relationship: This person reports directly to the Emergency Shelter Manager.

Physical Job Requirements: Must be physically capable of driving an automobile in a safe manner. Must be able to lift up to 25 pounds, stoop, bend, kneel, stand/walk up to 4 hours, and be capable of continuous activity with children; must be able to perform housekeeping duties such as mopping and vacuuming large areas; must be physically able to participate in PCM training (Professional Crisis Management).

Qualifications:

- High School Diploma or Equivalency and 3 years work-related experience.
- Completion of annual 40 hours of in-service training.
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.
- First Aid certification.
- CPR Certification.
- Water Safety Certification.
- Food Preparation Training.

Human Resources

HR-45-36 Job Description – Hebrew and Music School Teacher

Scope: This person will oversee JAFCO's Hebrew and Music Program

Job Responsibilities:

- Teach Sunday school class every Sunday from 10 a.m. to 12 noon
- Lead Friday evening services at least twice per month **
- Prepare children for Bar or Bat Mitzvah ceremony
- Assist Rabbi in leading holiday celebrations at JAFCO village **
- Educate other Bar/Bat Mitzvah students about JAFCO programs
- Motivate children to learn about their culture and heritage

Reporting Relationship: This person reports directly to the Group Home Program Specialist

Qualifications:

- Hebrew School teacher certification and two years' experience

Human Resources

HR-45-37

Job Description – MST Therapist Supervisor

This is a grant funded position which is renewed annually.

Job Responsibilities:

- Conduct weekly group supervision for MST Team.
- Conduct individual supervision as needed.
- Assure appropriate documentation of clinical effort for peer and supervisory input, and to meet all reporting and communication needs of funding and referral sources.
- Provide supportive and corrective feedback to clinicians to promote client outcomes.
- Provide administrative support targeting systemic barriers to treatment success.
- Assure availability of clinical and administrative support to clinicians 24 hours/day, 7 days/week.
- Assure therapist accessibility to clients when needed at times most likely to promote engagement.
- Assure that clinicians achieve engagement with all key participants.
- Provide direct clinical training to assure clinician competency in all clinical areas relating to the implementation on MST interventions.
- Assure that all assessments are comprehensive, multisystemic, and provide adequate information to determine the causes and correlates of referral behaviors to direct effective treatment within the ecological context.
- Understand and be considerate of multi-cultural differences in the community.
- Comply with the highest relevant legal, professional, and ethical standards.
- Complete other duties as assigned by Director of Operations and Clinical Services.

In addition, the MST Supervisor will function as the primary therapist, for some families, in coordinating and carrying out appropriate interventions aimed at reducing out-of-home placements. As primary therapist, the MST Supervisor will:

- Conduct MST assessment including review of referral information and initial intake.
- Engage primary caregiver and other key participants in active change-oriented treatment by identifying and overcoming barriers to engagement.
- Implement a problem conceptualization, treatment planning, intervention implementation, and outcome review and strategy revision procedure using the MST Analytic Process.
- Maintain clear and concise documentation of treatment efforts that promote peer and supervisory review and feedback, and that demonstrate compliance with the nine MST Principles and the MST Analytic Process.
- Collaborate with all relevant systems and key participants within each family to ensure their buy-in cooperation throughout MST treatment.
- Provide direct clinical treatment using methods compatible with MST principles and practices.
- Participate in all MST training, supervision, and consultation activities.

The MST Supervisor will serve as the adolescent and family's advocate in attempting to provide and facilitate the best possible care and treatment available.

Reporting Relationship: This person reports directly to Director of Operations & Clinical Services

Qualifications:

- A Licensed Doctoral Degree in clinical or counseling Psychology, Social Work, Counseling or a related subject area or a Licensed Master's Degree with significant clinical experience in treating serious antisocial behavior in youth and significant supervisory experience.
- An ability to willingly receive and utilize supervision (direct and minimal as required), with a demonstrated ability to carry out all of the assigned responsibilities, within given time constraints.
- An ability to create and work in a treatment team context.
- A willingness to work extended hours when necessary.
- An ability to develop helping relationships and implement intervention plans with adolescents, families, and communities in cooperation with MST Team.
- A demonstrated ability to perform in a professional and ethical manner with the highest regard for adolescents, families, communities, and MST Team.
- Knowledge of community agencies and resources.
- CPR and First Aid certification.

Human Resources

HR-45-37 Job Description – MST Therapist Supervisor (continued)

- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.

The following experiences are preferred:

- Direct use of family therapies.
- Individual therapy using cognitive-behavioral techniques.
- Marital therapy using behaviorally based approaches.
- Behavioral therapy targeting school behavior and academic performance.
- Implementation of interventions within or between systems in the youth's natural ecology that affect or influence the behavior of youth.
- Provision of group and individual clinical supervision.

Human Resources

HR-45-38 Job Description – MST Therapist

This is a grant funded position which is renewed annually.

Job Responsibilities:

- Attend weekly group supervision with the MST Team.
- Attend individual supervision weekly.
- Assure accessibility to clients when needed at times most likely to promote engagement.
- Assure engagement with all key participants.
- Demonstrate competency in all clinical areas relating to the implementation on MST interventions.
- Assure that all assessments are comprehensive, multisystemic, and provide adequate information to determine the causes and correlates of referral behaviors to direct effective treatment within the ecological context.
- Understand and be considerate of multi-cultural differences in the community.
- Comply with the highest relevant legal, professional, and ethical standards.
- Complete other duties as assigned by Director of Operations and Clinical Services and Supervisor.
- Provide intensive in-home therapy to a caseload of 6-8 cases at a time and serve 16-17 client cases per contract year.
- Provide 30-35 hours of direct clinical service (Case Management and Therapy) with clients weekly.
- Provide 24-hour on-call clinical service to all clients one week per month.
- Conduct MST assessment including review of referral information and initial intake.
- Engage primary caregiver and other key participants in active change-oriented treatment by identifying and overcoming barriers to engagement.
- Implement a problem conceptualization, treatment planning, intervention implementation, outcome review and strategy revision procedure using the MST Analytic Process.
- Maintain clear and concise documentation of treatment efforts that promote peer and supervisory review and feedback, and that demonstrate compliance with the 9 MST Principles and the MST Analytic Process.
- Collaborate with all relevant systems and key participants within each family to ensure their buy-in cooperation throughout MST treatment.
- Provide direct clinical treatment using methods compatible with MST principles and practices.
- Participate in all MST training, supervision, and consultation activities.
- CPR and First Aid certification.
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients and their children.

The MST Therapist will serve as the adolescent and family's advocate in attempting to provide and facilitate the best possible care and treatment available.

Reporting Relationship: This person reports directly to the MST Therapist Supervisor

Qualifications:

- A Master's Degree in Social Work, Counseling, Marriage & Family Therapy or a related subject area with experience in treating serious antisocial behavior in youth.
- An ability to work in a treatment team context.
- A willingness to work extended hours when necessary.
- An ability to develop helping relationships and implement intervention plans with adolescents, families, and communities in cooperation with MST Team.
- A demonstrated ability to perform in a professional and ethical manner with the highest regard for adolescents, families, communities, and MST Team.
- Knowledge of community agencies and resources.
- 75% or better score on MST Training in South Carolina

Preferred Experience:

- Direct use of family therapies.
- Individual therapy using cognitive-behavioral techniques.
- Marital therapy using behaviorally based approaches.
- Behavioral therapy targeting school behavior and academic performance.
- Implementation of interventions within or between systems in the youth's natural ecology that affect or influence the behavior of youth.
- Case management.

Human Resources

HR-45-39 Job Description – Operations Specialist

Scope: This person will be responsible for ensuring compliance of all agency programs and will work with program directors to assess the need for implementing systemic and procedural improvements.

Job Responsibilities:

Foster Care and Adoption Tasks:

- Oversee application process and determine suitability of prospective foster and adoptive parents
- Present monthly orientation sessions, teach Model Approach to Partnerships in Parenting (MAPP pre-service training program, conduct home studies for prospective foster and adoptive parents, and provide post-placement visits and support
- Monitor active foster and adoptive homes on an ongoing basis to assess compliance with agency and state requirements
- Facilitate monthly support group to foster and adoptive parents to discuss relevant parenting issues
- Participate in recruitment of new foster and adoptive families
- Process referrals to foster care and adoption program and coordinate placement of foster/adoptive parents with children or birth mothers
- Provide case work for birth mothers placing babies for adoption

Licensing Tasks:

- Oversee annual re-licensing process for child-placing and residential programs, assist with contract renewals and additional program audits as directed
- Ensure compliance with all licensed, contracted and grant-funded program requirements on an ongoing basis

Program Tasks:

- Review and evaluate programmatic and systemic procedures for all agency programs and make recommendations for improvement
- Implement procedural and systemic improvements by working with program directors
- Supervise monthly peer review process for all licensed, contracted and accredited programs

Grant Tasks:

- Conduct research and submit grant proposals to new and existing grant funding sources
- Maintain and cultivate relationships with grantors

*All other tasks as assigned by the Executive Director or Director of Operations and Clinical Services

Reporting Relationship: This person reports directly to the Executive Director and the Director of Operations and Clinical Services.

Qualifications:

- Master's degree in social work or related field; Licensed or Licensed-eligible and minimum two years' experience
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families
- Excellent writing skills
- Excellent organizational skills
- Strong interpersonal skills

Human Resources

HR-45-40

Job Description – Outpatient Therapist

Scope: This person will provide a safe therapeutic environment for both children and adults that will allow them to openly and freely express their feelings and work through issues of loss, abuse, abandonment and other family related traumas.

Job Responsibilities:

- Conduct an initial intake on all clients
- Schedule regular therapy sessions as directed by Clinical and Operations Director
- Maintain written case notes
- Prepare written treatment plans
- Prepare progress reports
- Communicate with school, psychiatrist, pediatrician, and other professionals working with the child
- Attend supervision and staff meetings
- Responsible for coordination and attendance of all psychiatric appointments for all outpatient clients receiving services through JAFCO
- Clinical on-call for emergencies; minimum of one week per month
- Assistance as task supervisor for clinical interns
- Follow Florida Child Abuse Reporting Rules
- Share all concerns with direct supervisor and the JAFCO Director of Operations and Clinical Services

Reporting Relationship: This person reports directly to the Director of Operations and Clinical Services.

Qualifications:

- Master's Degree in Social Work, Psychology, Family Therapy
- Two years direct experience working with children and families
- Licensed or license eligible
- CPR and First Aid certification
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.
- Completion of 16 CEU's of supervision in Clinical Social Work Practice for supervision of staff and interns
- 24 hours of MAPP training for prospective foster and adoptive parents
- PCM Practitioner II certification

Human Resources

HR-45-41

Job Description – Independent Living Program Coordinator

Scope: This person will ensure that children residing in the JAFCO Group Home and alumni attain the life skills necessary to be able to live independently as they transition to adulthood.

Job Responsibilities:

- Create individual independent living plans for each group home child between the ages of 11 and 21
- Adhere to all guidelines and rules as set by the State of Florida for Independent Living for foster care youth.
- Provide life skills, support and guidance to children ages 11-21
- Coordinate life skills classes including topics such as social skills, budgeting and money management, personal care and home maintenance skills to prepare children for independent living
- Assist with financial aid, college applications, admissions testing and other paperwork preparatory to attending college.
- Offer assistance and training to off campus youth to achieve independence or ensure continued independence.
- Assist with finding alternative housing when needed.
- Ensure that all contract and grant outcomes and requirements related to the Independent Living program are met
- Create, maintain and update all paperwork and files for each participant on an ongoing basis.
- All other duties as requested by Executive Director, Director of Operations and Clinical Services and Residential Director.

Reporting Relationship: This person reports directly to the Director of Operations and Clinical Services.

Qualifications:

- Master's degree in Education, Social Work or related field plus two years' experience working with children
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families

Human Resources

HR-45-42 Job Description – Social Worker

Scope: This person will function as a team member in coordinating services for children under the care and supervision of JAFCO's family preservation, foster care, adoption, emergency shelter and group home programs. The social worker will serve as the child and family's advocate in attempting to provide and facilitate the best possible care and treatment available.

Job Responsibilities: This person's job responsibilities include but are not limited to the following:

- Conduct an initial intake on all clients
- Schedule regular therapeutic home visits and contacts as directed by the treatment team or courts
- Maintain written case notes
- Prepare written treatment plans
- Prepare progress reports and court reports
- Attend court hearings related to the child
- Communicate with school, psychiatrist, pediatrician, and other professionals working with the child
- Attend supervision and staff meetings
- Follow Florida Child Abuse Reporting Rules
- Share all concerns with direct supervisor and the JAFCO Clinical and Operations Director
- Prepare a termination summary prior to the child's discharge from the program

Reporting Relationship: This person reports directly to the Director of Operations and Clinical Services.

Qualifications:

- Master's Degree in Social Work, Psychology, Family Therapy and two years direct experience working with children
- CPR and First Aid Certification
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000

Human Resources

HR-45-43 Job Description – Northeast Communities Social Worker

Scope: This person will function as a team member in coordinating services for children under the care and supervision of JAFCO's family preservation, foster care, adoption, emergency shelter and group home programs. The social worker will serve as the child and family's advocate in attempting to provide and facilitate the best possible care and treatment available.

Job Responsibilities:

- Conduct an initial intake on all clients
- Schedule regular therapeutic home visits and contacts as directed by the treatment team or courts
- Maintain written case notes
- Prepare written treatment plans
- Prepare progress reports and court reports
- Attend court hearings related to the child
- Communicate with school, psychiatrist, pediatrician, and other professionals working with the child
- Attend supervision and staff meetings
- Follow Pennsylvania Child Abuse Reporting Rules
- Share all concerns with direct supervisor and the JAFCO Director of Operations and Clinical Services
- Prepare a termination summary prior to the child's discharge from the program
- Assist the Director of Northeast Development with fundraising activities

Qualifications:

- Master's Degree in Social Work, Psychology, Family Therapy and two years direct experience working with children
- Completion of annual 40 hours in-service training
- CPR, First Aid and Water Safety Certification
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children

Human Resources

HR-45-44

Job Description – Senior Caregiver Specialist

Scope: This person will function as a team member in coordinating services for children under the Senior Caregiver Program. This social worker will serve as the child and grandparent's advocate in attempting to provide and facilitate the best possible care and treatment available.

Job Responsibilities:

- Conduct an initial intake on all clients
- Schedule regular home visits and contacts per contract requirements
- Maintain written case notes and case file documentation per program requirements and agency standards
- Prepare written service plans
- Prepare progress reports and court reports, if needed
- Attend court hearings related to the child
- Communicate with school, psychiatrist, pediatrician, and other professionals working with the child
- Prepare a termination summary prior to the child's discharge from the program
- Attend supervision and staff meetings
- Follow Florida Child Abuse Reporting Rules
- Share all concerns with JAFCO Clinical and Operations Director
- Maintain all contract requirements

Reporting Relationship: This person reports directly to the Director of Operations and Clinical Services

Qualifications:

- Bachelor's Degree in Social Work, Psychology, Family Therapy and two years direct experience working with children
- Completion of 40 hour annual in-service training
- CPR and First Aid Certification
- MAPP training
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children

Human Resources

HR-45-45 Job Description – Children’s Ability Center Developmental Services Coordinator

Scope: This person will coordinate all aspects of the JAFCO Developmental Disabilities Program.

Job Responsibilities:

- Work with architects and general contractors on all aspects of development and construction of JAFCO Children’s Ability Center.
- Identify and maintain partnerships with existing community programs, schools, doctors and other special needs professionals and provide information and referral to parents and families.
- Assist existing JAFCO programs and staff to work with children with developmental disabilities and typical children currently being served by JAFCO.
- Develop program and maintain waiting list for respite center and other services to be provided at the new center.
- Oversee the JAFCO Developmental Disabilities Advisory Board and assist with fundraising as needed.
- Research state-of-the-art best practice therapeutic and service delivery models for Children with Developmental Disabilities.
- Participate as a member of the existing JAFCO Clinical Team with both typical children and children with developmental disabilities: Supervise visits, conduct home visits, provide in-home behavioral support and on-call emergency support, conduct parent support and training groups, complete intake assessments, open files, create case plans and complete case plan reviews, write case notes and reports, conduct therapy sessions; all of the above in compliance with JAFCO, CARF and Medicaid standards.
- Daily back up support for the on-call staff in all programs, with the exception of two weekends per month off
- Any other reasonable task requested by immediate supervisor.

Reporting Relationship: This person reports directly to the Director of Operations and Clinical Services and Executive Director.

Qualifications:

- Master’s Degree in Social Work, Special Education or related field plus two years’ experience and licensed.
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children
- Proficient in Word and Excel
- Qualified Supervisor Certification or enrolled
- Completion of 16 CEU’s of supervision in Clinical Social Work Practice
- 24 hours of MAPP training for prospective foster and adoptive parents
- PCM Practitioner II certification

Human Resources

HR-45-46 Job Description – Assistant to the Program Coordinator

Scope: This person will function as the assistant to the Program Coordinator

Job Responsibilities:

- Responsible for maintaining and updating all contract administration and compliance requirements.
- Accountable for coordination and scheduling of all client services including support groups, trainings, enrichment activities, respite care, meetings and room assignments
- Greet and direct all clients and visitors to proper location/activity
- Coordinate child drop off and pick up from activities
- Assist clinical team in behavior and crisis management
- Staff and Board meeting planning and support
- Oversight of facility maintenance, security and physical plant
- Supervising the maintenance staff and contract facility workers
- Responsible for oversight of emergency procedures and facility safety program including drills, trainings and inspections
- Clerical support as needing including typing, filing, copying, faxing, updating forms, formatting documents, tracking supervision and trainings
- Answer phones and provide information to callers
- Preparation of needed items and documentation to support staff and programs
- Training of new staff who are hired to take on any of the above responsibilities after start-up phase is complete
- Any other reasonable duties assigned by supervisor

Reporting Relationship: This person reports directly to the Program Coordinator and Director of Operations and Clinical Services

Qualifications/Skills:

- Bachelor's degree and a minimum of 3 years' experience working with families with children with a developmental disability
- Excellent written and verbal communication skills
- Proficient in Word, Excel, Outlook and general computer programs
- High energy, excellent interpersonal skills, ability to problem solve and multi-task
- Ability to work both independently and as part of a team
- Willingness to work some evenings and weekend hours and be part of the on-call team

Human Resources

HR-45-47 Job Description – Children’s Ability Center Capital Campaign Director

Scope: The JAFCO Children’s Ability will provide support, therapy, child enrichment and respite care to families who are raising a child with a developmental disability. The \$30m capital campaign includes approximately \$13m for construction and \$17 million for an endowment dedicated to help fund the operations of the center.

JAFCO has raised more than \$10 million so far, and we are about to embark on the next phase of this campaign to raise the remaining \$20m. Working alongside the Development Officer and reporting to the Executive Director, the Capital Campaign Director will guide and support the members of the JAFCO Children’s Ability Center Board members in their work on the capital campaign.

Job Responsibilities:

- Overall campaign management and organization including pipelines, prospect tracking, strategy, task assignment and maintenance of timelines.
- Researching and identifying prospects.
- Scheduling meetings, preparing talking points, assembling presentations and full meeting prep for Board members, campaign volunteers and JAFCO staff.
- Overseeing acknowledgement of all campaign gifts and pledges and preparation of pledge payment reminders and pledge agreements.
- Writing all campaign correspondence including solicitation proposals, meeting requests, and meeting follow up.
- Maintaining master campaign calendar to maximize cultivation events and keep campaign committee on track.
- Organizing and monitoring volunteer assignments and follow-up, and assisting in all aspects of volunteer-led events.
- Submitting monthly reports to the Board of Trustees.
- Assisting JAFCO development team at all major events to represent the capital campaign.
- Providing tours of the campus on a regular basis and by request.
- Serving as a member of the JAFCO development team and coordinating all events to maximize cooperation and effectiveness.
- Any other reasonable task requested by the Executive Director.

Reporting Relationship: This person reports directly to the Executive Director.

Qualifications:

- Bachelor’s degree is required.
- Three to five years fundraising experience relevant to the job responsibilities.
- Experience in and knowledge of fundraising, specifically capital campaigns is required.
- Highly organized, self-motivated, detail-oriented, creative, strategic and professional.
- Ability to manage multiple projects under tight deadlines.
- Excellent writing, analytical and research skills are essential.
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families.
- A high level of computer literacy, including experience using online databases and other sources to locate financial and philanthropic information.
- Exceptional interpersonal skills and an ability to work collaboratively with all levels of staff, volunteers, Board members, donors, and prospective donors.

Human Resources

HR-45-48 Job Description – Children’s Ability Center Social Worker

Scope: This person will function as a team member in coordinating services for children and their families under the care and supervision of JAFCO Children’s Ability Center for Children with Developmental Disabilities. The social worker will serve as the child and family’s primary advocate facilitating the best possible care and services available.

Job Responsibilities:

- Provide comprehensive information and referral for services within the South Florida developmental disabilities community.
- Provide counseling and case management services both in the office and in home.
- Maintain case documentation including bio-psychosocial assessment, case notes, treatment plans and other reports based upon Medicaid, CARF, county and state standards
- Facilitate support groups and parent education and behavior training seminars
- Advocate for client by coordinating all community and professional services and eliminating barriers to accessing treatment including transportation if needed.

Reporting Relationship: This person reports directly to the Program Coordinator and Director of Operations and Clinical Services

Qualifications/Skills:

- Master’s Degree in Social Work or related field, Licensed, and a minimum of 3 years direct experience and commitment to working with children who have a developmental disability and their families.
- Excellent written and verbal communication skills.
- Competent in Word and Excel
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children.

Human Resources

HR-45-49 Job Description – Children’s Ability Center Behavior Specialist

Scope: Development, implement and supervise the behavioral services and strategies of the JAFCO Children’s Ability Center

Job Responsibilities:

- Program Development to ensure safety, structure and enrichment for the children
- Provide training to staff, volunteers and parents
- Assess individual needs of each child and develop behavioral plan
- Physically provide on-site behavioral interventions as needed and model behavioral skills for staff
- Facilitate groups with caregivers, siblings and family members
- Develop materials to support behavior training
- Attend team meetings and parent conferences
- Train all staff in PCM as Level 2 Practitioner
- Any other reasonable request made by supervisor

Reporting Relationship: This person reports directly to the Program Coordinator and Director of Operations and Clinical Services

Physical Job Requirements: Must be physically capable of driving an automobile in a safe manner. Must be able to lift up to 35 pounds, stoop, bend, kneel, stand/walk up to 4 hours, and be capable of continuous activity with children. Position requires the ability to work nights and weekends. To cover the on-call schedule shared with management level staff. Must be able to physically participate in and complete PCM Instructor Training.

Qualifications:

- BCBA
- Master’s Degree plus 3 years’ experience
- Experience in programming and behavioral intervention with children with developmental disabilities
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children
- Experience with supervision and consultation
- Excellent communication skills to support and train staff

Human Resources

HR-45-50 Job Description – Children’s Ability Center Behavior Tech

Scope: Works in cooperation with the Behavior Specialist to ensure the safety, structure and enrichment of the children receiving services through JAFCO Children’s Ability Center.

Job Responsibilities:

- Assessment of behavioral situations and reacting appropriately
- Implementation of the behavior plan
- Development of materials to support behavior training
- Documentation of behavior and skill acquisition data
- Maintenance of client records
- Attendance at team meetings and parent conferences
- Any other reasonable request made by supervisor

Reporting Relationship: This person reports directly to the Behavior Specialist.

Physical Job Requirements: Must be physically capable of driving an automobile in a safe manner. Must be able to lift up to 35 pounds, stoop, bend, kneel, stand/walk up to 4 hours, and be capable of continuous activity with children. Must be able to physically participate in and complete PCM Practitioner Level 2 certification.

Qualifications:

- BCBA Student Intern or related field
- Minimum of high school diploma and 3 years’ experience with children with developmental disabilities.
- Experience in programming and behavioral intervention with children with developmental disabilities.

Conditions of Employment:

- Completion of annual 40 hours of in-service training
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children
- CPR and First Aid certification
- PCM Level 2 practitioner
- Must be available to work nights and weekends.

Human Resources

HR-45-51 Job Description – Children’s Ability Center Recreation Therapist

Scope: This person will be responsible for the development, implementation and supervision of programs for children with developmental disabilities birth through 22 years old related to recreation and/or adapted physical fitness and education. Responsible for training employees, program planning and working directly with the children to serve their needs.

Job Responsibilities:

- Create, plan, coordinate and implement high quality and enjoyable recreational programs and activities for children of all ages with different levels of abilities
- Train, supervise and evaluate staff and volunteers
- Development and coordinate relationship and planning with Special Olympics
- Develop and evaluate outcomes of recreation programs and activities
- Develop therapeutically based participant outcomes
- Provide direct supervision and instruction to children in all activities
- Participate as member of clinical team
- Attend staff meetings and trainings as required
- Work flexible hours to include weekends and evenings
- All other reasonable requests from supervisor or Program Director

Reporting Relationship: This person reports directly to the Program Coordinator and Director of Operations and Clinical Services

Physical Job Requirements: Must be able to lift up to 25 pounds, stoop, bend, kneel, stand/walk up to 4 hours, and be capable of continuous activity with children both indoors and outdoors; must be physically able to participate in PCM training (Professional Crisis Management). Must be physically capable of driving an automobile in a safe manner.

Qualifications:

- Bachelor’s degree in recreational therapy or adaptive physical education
- Certified Therapeutic Recreation Specialist, preferred
- Minimum of two years of experience with children with developmental disabilities in a group setting
- Ability to assess needs of individual program participants
- Knowledge of various anatomical and physiological conditions and limitations of the differently-abled
- Thorough knowledge of the recreational needs of the differently-abled
- Ability to develop new recreational programming for special populations including the differently-abled
- Ability to communicate clearly and concisely, orally and in writing to groups and individuals
- Ability to supervise assigned subordinates in a manner conducive to full performance and high morale
- Ability to establish and maintain healthy interpersonal relationships with children, families, employees, volunteers and the general public
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families
- Completion of annual 40 hours of in-service training (by end of first year of employment)
- First Aid and CPR certification
- PCM Certification (completed within one month of hire)

Human Resources

HR-45-52 Job Description – Children’s Ability Center L.P.N.

Scope: This person will oversee and provide for the medical and physical needs of the children who receive services at the JAFCO Children’s Ability Center, while ensuring best health and wellness practices.

Job Responsibilities:

- Arrange and ensure that all medical appointments are attended and followed up.
- Administer medication per physician’s orders and document as per agency policies and procedures.
- Implement all doctors’ recommendations.
- Ensure/provide proper care of children when they are ill.
- Oversee all hospitalizations and discharge instructions.
- Provide for the physical needs of the children.
- Ensure/provide proper daily hygiene of the children including bathing, toilet, and first aid and wound care.
- Train staff and supervise proper hygiene practices, bathing, toileting, first aid and wound care.
- Prepare, or arrange for, daily meals and snacks.
- Maintain a safe and hazard-free home environment.
- Work as part of the team and assist with child care duties as needed.
- Participate as member of clinical team meetings.
- Attend staff meetings and in-services as required.
- Be available and flexible to accommodate scheduling needs.
- All other duties as requested by Director of JAFCO Children’s Ability Center.

Reporting Relationship: This person reports directly to the Program Coordinator and Director of Operations and Clinical Services

Physical Job Requirements: Must be physically capable of driving an automobile in a safe manner. Must be able to lift up to 35 pounds, stoop, bend, kneel, stand/walk up to 4 hours, and be capable of continuous activity with children, must be physically able to participate in PCM training (Professional Crisis Management).

Qualifications:

- Licensed Practical Nurse
- Minimum of 3 years’ experience with children with developmental disabilities
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children.
- Completion of annual 40 hours of in-service training.
- First Aid certification.
- CPR Certification.
- PCM Certification (completed within one month of hire)
- Behavior training prior to start date
- Water Safety Certification.
- Food Preparation Training

Human Resources

HR-45-53 Job Description – Children’s Ability Center Direct Care Staff

Scope: This person will provide direct care for the needs of the children in the JAFCO Children’s Ability Center.

Job Responsibilities:

- Provide for the physical, emotional, social, recreational needs of the children in a home-like environment
- Manage behaviors utilizing agency policies and procedures.
- Ensure all medical needs of child are met as directed by medical personnel.
- Prepare, or arrange for, daily meals and snacks and assist with feeding as directed.
- Maintain a safe, structured and nurturing home environment.
- Coordinate and assist in developing/supervising children’s activity schedule.
- Coordinate/assist with children’s transportation to extracurricular activities.
- Accompany and engage children in all activities.
- Ensure proper hygiene routines.
- Ensure medication distribution and document appropriately.
- Attend staff meetings and in-services as required.
- Be available and flexible to accommodate scheduling needs.
- All other duties as requested by Director of Respite and Family Resource Center.

Reporting Relationship: This person reports directly to the Program Coordinator and Director of Operations and Clinical Services

Physical Job Requirements: Must be physically capable of driving an automobile in a safe manner. Must be able to lift up to 35 pounds, stoop, bend, kneel, stand/walk up to 4 hours, and be capable of continuous activity with children; must be able to perform housekeeping duties such as mopping and vacuuming large areas; must be physically able to participate in PCM training (Professional Crisis Management).

Qualifications:

- High School Diploma or Equivalency; Bachelor’s degree preferred.
- 3 years’ experience with children with disabilities in a group setting.
- Completion of annual 40 hours of in-service training.
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children.
- Successful completion/implementation demonstration of behavior training.
- First Aid certification.
- CPR Certification.
- PCM Certification (completed within one month of hire)
- Water Safety Certification.
- Food Preparation Training.

Human Resources

HR-45-54 Job Description – Children’s Ability Center Site Director

Scope: In this role the Director will be directly responsible for the day-to-day operations of the JAFCO Children’s Ability Center including supervision of all staff and programs working in conjunction with the Director of Operations and Clinical Services, the Executive Director and the Board of Trustees

Job Responsibilities: This person’s job responsibilities include but are not limited to the following:

- Supervising and monitoring programs and day-to-day operations of all Ability Center programs to ensure that service delivery is performed according to the agency’s mission, policy and procedures, safety standards and service philosophy and ethical standards
- Supervising all supervisory staff and facilitate management meetings on a regular and as needed basis
- Overseeing quality and compliance of all case files and ensuring that all files meet agency requirements as well as Medicaid, ChildNet, CARF, APD and County standards and requirements of all contracts and funders
- Developing new programs and initiatives and research alternative funding sources and contract opportunities
- Reporting of all unusual and safety related incidents to management, tracking and analysis of incident reports, creating safety procedures and improvement plans
- Ensure that all programs are operating within budgetary guidelines by working in conjunction with the agency Comptroller
- Participate as a member of rotating on-call team as back-up
- Any other reasonable task requested by the Director of Operations & Clinical Services and/or Executive Director

Reporting Relationship: Reports to the Director of Operations & Clinical Services

Qualifications:

- Bachelor’s Degree with a minimum of five years’ experience in social services management, operations and/or service delivery supervision
- Computer expertise in Microsoft Office, Outlook and Excel; able to adapt to working with other JAFCO clinical programs
- Strong organizational skills and ability to multi-task
- Prior experience in direct supervision of staff
- Good interpersonal skills and the ability to interact with multi-generational levels
- Commitment to service excellence and quality improvement
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their families

Human Resources

HR-45-55 Job Description – Children’s Ability Center Administrative Support Specialist

Scope: Under the direct supervision of the Site Director this position provides administrative and secretarial support for the Clinical and Development Teams at the Children’s Ability Center. In addition to typing, filing and scheduling, performs duties such as record keeping, coordination of meetings and conferences, obtaining supplies, coordinating direct mailings, and working on special projects. Also, answers non-routine correspondence and assembles highly confidential and sensitive information. Deals with a diverse group of important external callers and visitors as well as internal contacts at all levels of the organization. Independent judgment is required to plan, prioritize and organize diversified workload, recommends changes in office practices or procedures.

Job Responsibilities: This person’s job responsibilities include but are not limited to the following:

- Types and designs general correspondences, memos, charts, tables, graphs, business plans, etc. Proofreads copy for spelling, grammar and layout, making appropriate Performs desktop publishing. Creates and develops visual presentations for the development team
- Establishes, develops, maintains and updates filing system for the Site Director and the other department. Retrieves information from files when needed
- Schedules and organizes complex activities such as meetings, conferences and department activities for all members of the Ability Center
- Acts as a liaison with other departments and outside agencies, handles confidential and non-routine information and explains policies when necessary
- Works independently and within a team on special nonrecurring and ongoing projects.
- Assist with preparation of agency mail including envelope stuffing and postage for all departments
- Assists with other related clerical duties such as photocopying, faxing, filing and collating
- Work with other Admins for the ordering, receiving, stocking and distribution of office supplies
- Run business related errands as needed
- Prepare coffee, refreshments for guests, staff and clients
- Act as a back up to front desk receptionist
- Assist all staff with special projects as needed

Reporting Relationship: This person reports directly to the Children’s Ability Center Site Director

Qualifications:

- Minimum High School diploma; Associate’s or Bachelor’s Degree preferred
- Proficient in Microsoft Word, Excel, Outlook and PowerPoint
- Comfortable with menu driven database
- Excellent written communication skills
- Excellent professional appearance and demeanor
- Good judgment and common sense skills
- Clear professional speaking voice
- Accuracy and ability to work independently
- Ability to multi-task and remain calm under pressure

Human Resources

HR-45-56 Job Description – Children’s Ability Center Facility Manager

Scope: This person will be responsible for overseeing the daily operations of the JAFCO Children’s Ability Center including monitoring traffic flow of guests, residents, staff and clients, building and room utilization, maintenance, and repair and safety

Job Responsibilities: This person’s job responsibilities include but are not limited to the following:

- Responsible for maintaining and updating all contract administration and compliance requirements.
- Accountable for coordination and scheduling of all client services including support groups, trainings, enrichment activities, respite care, meetings and room assignments
- Greet and direct all clients and visitors to proper location/activity
- Coordinate child drop off and pick up from activities
- Assist clinical team in behavior and crisis management
- Staff and Board meeting planning and support
- Oversight of facility maintenance, security and physical plant
- Supervising the maintenance staff and contract facility workers
- Responsible for oversight of emergency procedures and facility safety program including drills, trainings and inspections
- Clerical support as needed including typing, filing, copying, faxing, updating forms, formatting documents, tracking supervision and trainings
- Answer phones and provide information to callers
- Participate as a member of rotating on-call team
- Preparation of needed items and documentation to support staff and programs
- Training of new staff who are hired to take on any of the above responsibilities after start-up phase is complete
- Any other reasonable duties assigned by supervisor

Reporting Relationship: This person reports directly to the Children’s Ability Center Site Director

Qualifications/Skills:

- Bachelor’s degree and a minimum of 3 years’ experience working with families with children with a developmental disability
- Excellent written and verbal communication skills
- Proficient in Word, Excel, Outlook and general computer programs
- High energy, excellent interpersonal skills, ability to problem solve and multi-task
- Ability to work both independently and as part of a team
- Willingness to work some evenings and weekend hours and be part of the on-call team

Human Resources

HR-45-57 Job Description – Children’s Ability Center Family Enrichment Program Coordinator

Scope: This person will coordinate the Family Enrichment program for the JAFCO Ability Center.

Job Responsibilities: This person’s job responsibilities include but are not limited to the following:

- Create a Family Enrichment program for parents of children with developmental disabilities JAFCO Children’s Ability Center
- Make presentations about the center to community stakeholders during group tours and events (both on and off site), during intake sessions, parent support and training groups, volunteer recruitment and training, fundraisers and any other relevant activity
- Identify and maintain partnerships with existing community programs, schools, doctors and other relevant professionals and agencies in order provide up-to-date information and referral to parents and families on existing services and also to ensure that the community is up-to-date on the Children’s Ability Center Programs
- Assist with scheduling of all family enrichment activities and maintain waiting list for all services to be provided at the center
- Research and create new programs based upon state-of-the-art best practice therapeutic and service delivery models for Children with Developmental Disabilities including staffing and budgetary needs
- Participate as a member of the JAFCO Clinical Team to facilitate the initial intake and assessment process and other activities not limited to: respite care, therapy services, child enrichment activities, social work support services, parent support and training groups, Sibshops, parents night out, on call emergency support, volunteer training and other activities, services and programs
- Responsible for required documentation related to intake process client files, case plans and case plan reviews, case notes and reports, therapy sessions in compliance with JAFCO, CARF and Medicaid standards and all other contracts and funder requirements.
- Participate as member of rotating on-call team
- Any other reasonable task requested by immediate supervisor

Reporting Relationship: This person reports directly to the Children’s Ability Center Site Director and the Director of Operations and Clinical Services

Qualifications:

- Master’s Degree in Social Work, Special Education or related field plus two years’ experience and licensed
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children
- PCM Practitioner Level 2 Certification

Human Resources

HR-45-58 Job Description – Children’s Ability Center Family Resource Program Coordinator

Scope: This person will function as a team member in coordinating services for children and their families. The Family Resource Program Coordinator will serve as the child and family’s primary advocate facilitating the best possible care and services available.

Job Responsibilities: This person’s job responsibilities include but are not limited to the following:

- Provide comprehensive information and referral for services within the South Florida developmental disabilities community
- Provide counseling and case management services both in the office and in home
- Maintain case documentation including bio-psychosocial assessment, case notes, treatment plans and other reports based upon Medicaid, CARF, county and state standards
- Facilitate support groups and parent education and behavior training seminars
- Supervise clinical staff and social workers
- Advocate for client by coordinating all community and professional services and eliminating barriers to accessing treatment including transportation if needed
- Participate as a member of rotating on-call team as back-up
- Any other reasonable duties assigned by supervisor

Reporting Relationship: This person reports directly to the Children’s Ability Center Site Director and the Director of Operations and Clinical Services

Qualifications/Skills:

- Master’s Degree in Social Work or related field, Licensed, and a minimum of 3 years direct experience and commitment to working with children who have a developmental disability and their families.
- Excellent written and verbal communication skills.
- Competent in Word and Excel
- Must maintain Bodily Injury Liability insurance of \$100,000 per claim, \$300,000 per incident on their personal automobile when driving clients or their children.

Human Resources

HR-46

Social Media & Networking Recommendations

Original Date: 07/15/10

Revision Date: NA

Policy Number: HR-46

Department of Origin: Human Resources

Policy:

Communicating via social media networks on the computer has become a popular way to connect with other people, but it can be a sensitive issue in the workplace and it may interfere with our professional boundaries. The definition of social media includes, but may not be limited to, the following: E-mail communication, Facebook, My Space, Twitter, YouTube, LinkedIn, and any other method of communication via the Internet. As a professional, please be aware that your online presence reflects both yourself and the organization and you must be aware that your actions captured via pictures, posts or comments may have an impact on JAFCO. Employees should use their professional judgment realizing that your posts may be viewed by other employees, supervisors, other professionals you work with and clients. As a general rule, refrain from posting anything online that you aren't comfortable with everyone seeing. The following guidelines are recommended for all employees who use social media:

- Social networking and personal e-mail should not interfere with work responsibilities during the work day.
- Information published on any social media communication should comply with JAFCO's confidentiality policies (Section 213 Employee Handbook). Be respectful and do not publish any sensitive information regarding the organization, employees, clients and other parties associated with JAFCO. (Refer to Section 718 Employee Handbook on problem resolution to resolve conflicts.)
- It is not recommended that supervisors and the people they supervise be involved in social networking with each other. (Example: A supervisor should not request that a supervisee become a friend on Facebook.) Employees shall maintain appropriate boundaries at all times.
- Employees shall not be involved with clinical clients of JAFCO in social networking and shall maintain appropriate boundaries at all times. When asked by a client to become a "friend" on Facebook, the employee should reply "Thank you so much for the invitation but company policy does not allow me to accept." Donor relationships are somewhat different and development staff who decide that they need to communicate with donors via Facebook may wish to create a separate Facebook account that they use for work and keep their other account private. Staff must be careful to ensure that all content posted is professional in nature.
- Communication between co-workers should be approached with caution. Remember, you are responsible for what you post or e-mail and you should expect that it could be made public. According to JAFCO's policy regarding sexual and other unlawful harassment (Section 703 Employee Handbook), the following is prohibited: Viewing pornography online or sending pornographic jokes or stories via email; any e-mails that contain jokes or comments regarding race, gender, disability, nationality, religion or any other legally protected characteristic.

Employees who are already communicating with fellow employees at the time this policy is issued should seriously consider the above guidelines and use their own good judgment or ask their supervisor for assistance.

Signature:



07/15/10

Executive Director

Date

Clinical Department

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The above mentioned policies and plans have been reviewed and or revised by the executive director

Signature:

Executive Director

Date

Clinical Department

C-1

Intake Procedures and Practices

Original Date: 03/01/06

Revision Date: 04/17/2014

Policy Number: C-1

Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to maintain clearly written admission, re-admission, and exclusionary criteria. In addition, if an individual is found to be ineligible for services then she/he will be informed as to the reason and recommendations for alternative services and referral sources will be provided, if permitted.

The screening process will include a preliminary determination of eligibility for services, a screening for emergency needs and/or referrals, a brief screening process and referral of the individual to the most appropriate program for admission.

At the point of initial referral to any program JAFCO shall begin the process of assessing the needs and strengths of the child's family and will document these in the case record.

- The JAFCO Intake Form will be completed, to the extent possible, by the individual who receives the initial referral. A file will be opened for all referred person served, which shall contain the JAFCO Intake Form and other materials relevant to the assessment including but not limited to the following name, age, gender, date of intake, presenting problems (person served perspective), insurance information, if applicable, determination of ability to pay fees, preliminary diagnosis, eligibility for services, alternative services referral, if appropriate and initial recommendations for treatment and:
 - a. The identification of the specific needs of the child and family which warrant consideration of removal and placement of the child (if applicable);
 - b. The family's strengths;
 - c. If appropriate, the degree of involvement of the child's parents and significant others in the child's care;
 - d. The available resources;
 - e. The stated goals for the family;
 - f. The available social and medical history of the child and his family members;
 - g. The child's legal status;
 - h. A description of the child's emotional reaction to and understanding of the need for placement; and names, addresses, and phone numbers of the parents, siblings, relatives or others affected by the plan.
 - i. If the person served is a female assess for current pregnancy and if they are receiving prenatal care.
- Those eligible for services will meet the following criteria:
 - a. Medical and psychological stability at a level to function on an outpatient treatment level.
 - b. The specific components of the screening process are as follows:
 - The following information will be obtained on the screening intake form: Persons over the age of 18 will not be admitted to services (if applicable).
 - The staff member conducting the intake screening will confer with the Director of Operations and Clinical Services and determine eligibility for services. Any acute medical issues that may affect admission and care will be referred to the physician for a possible pre-admission screening.
 - With persons served transferring from other programs, all medical and social records that may be pertinent to providing care must be received prior to the person served admission process.
 - All persons served found ineligible for services will be provided with alternative treatment recommendations and referrals. With the person served permission, the referral source (if not self-referred) will be informed as to the reasons the person served was not admitted. Documentation will be maintained on all persons found ineligible for treatment.

In court ordered placements, where a child is not voluntarily placed by the parents or legal guardian, JAFCO shall comply with the requirements set forth in Chapter 39, F.S., Part V.

In cases where the placement is voluntarily made by the parents or legal guardian, if one has been appointed, JAFCO shall secure written authority for placement prior to accepting a child into care. The agency shall also comply with Chapter 39, F.S., Part V, as it relates to voluntary placements.

Clinical Department

C-1

Intake Procedures and Practices (continued)

Except in emergency circumstances, JAFCO shall obtain written consent from the parents or legal guardian, if one has been appointed, or the court, to provide routine medical care for a child accepted into care. If medical consent cannot be obtained at the time of the placement, it must be obtained within 72 hours of the child's entry into care.

Medical procedures which are not considered part of routine medical care must be specifically authorized by the parent of the child, the legal guardian, if one has been appointed, or a court of competent jurisdiction unless the situation is so urgent as to make the delay required to secure authorization potentially dangerous to the health and safety of the child. In cases where parental rights have been terminated and the child has been committed to an agency for placement in an adoptive home, the agency may consent for medical care without a court order except for abortion or permanent sterilization of the child.

Advance Directives

Education and assistance with advance directives is available to aid competent adults and their and their families to plan and communicate in advance their decisions about medical treatment and the use of artificial life support. Included is the right to accept or refuse medical or surgical treatment and psychiatric advance directives where allowed by law.

Referrals to the Program

Referrals will be accepted from Jewish community and religious organizations, the School Board of Broward County, the Broward Sheriff's Department, local police departments, DCF, physicians, and social service and mental health agencies. The above-mentioned organizations will be contacted and presentations on the program will be offered in conjunction with written materials.

Family Assessment and Goal Planning

A strengths/needs assessment of the family both as a unit and as individuals will form the basis for family goal planning and for determining the appropriate intervention technique(s). The assessment and goal planning procedures utilized by JAFCO are strength based in origin. This approach will allow for maximum participation by the family while enabling the therapist(s) to quickly assess areas where they must be directive and take control in order to preserve family functioning. This method affords the opportunity for family members to assume tasks and responsibilities as soon as is reasonable. This type of family assessment identifies ways to quickly build on the family's base of support and natural helping systems.

The goal-planning method restates problems as needs, allowing the family to take more ownership and responsibility for change. Setting realistic goals with families helps them to feel more in control and less defensive or resistant. The ability of the therapists to use the techniques as outlined above and to display a high degree of competency to the family is critical in engaging family participation. This is one of many reasons that the program will rely on highly skilled and trained staff. At the initial stages of crisis, a family is usually most open to change. The resistance often begins as the crisis is starting to resolve itself. Therapists will be prepared to use the initial motivations for change and to employ the appropriate techniques to maintain the momentum.

Signature:



Executive Director

04/17/2014

Date

Clinical Department

C-2

Placement Services to Families and Children

Original Date: 09/01/06

Revision Date: NA

Policy Number: C-2

Department of Origin: Clinical Department

Policy:

This section does not apply to parents whose rights have been terminated by the courts or to parents who have signed voluntary surrenders for purposes of adoption or the children cared for in foster care while awaiting placement for adoption.

When two agencies share responsibility for service to a child or a family, there shall be a clear delineation of responsibility for each service to be provided and both agencies must assure that service gaps do not occur as a result of shared planning. Service plans in shared cases must be in writing and must be approved by both service providers. The following services shall be provided to the child's parents:

1. The agency shall make reasonable efforts to prepare the child's parent or parents to resume their parental roles and responsibilities unless this is contraindicated by the case plan;
2. The agency shall help the family gain access to the services necessary to preserve and strengthen the family and accomplish the goals of the case plan;
3. The agency shall assist the family to assess the problems which brought about the need for placement;
4. Children in the care of the department or in the care of a duly licensed child-placing agency are subject to the requirements of Chapter 39, F.S., Part V, as applicable; and
5. The agency shall have a written performance agreement, signed by the parents, or a case plan which shall include, but not be limited to, the following:
 - a. The responsibilities of the agency and the parent for carrying out the steps to meet the goals of the case plan;
 - b. The financial arrangements between the agency and the parents for the support of the child while in care; and
 - c. The arrangement for visitation between the child and his parents
6. If the case plan for the child is adoption, a properly signed and witnessed surrender and consent for adoption form shall eliminate the requirement for a performance agreement with the parent of the child. Selection of Care:
 - a. JAFCO shall select the most appropriate service for the child, consistent with the child's and family's need.
 - b. If foster care or residential care is the plan of choice, JAFCO shall arrange or assist in the arrangement for any specialized services the child or his family may need in order to remedy the problems which brought them to the agency.
 - c. JAFCO shall make a reasonable effort to select a placement for the child that is as home-like as possible and which is as close as possible to the home of the child's parent so that visitation between the child and his parents is possible.
 - d. JAFCO, when selecting care, shall take into consideration a child's racial, cultural, ethnic, religious heritage and sibling relationships and shall preserve them to the extent possible without jeopardizing the child's right to care or to permanent family
 - e. JAFCO shall select the placement which will most effectively achieve the goals of the case plan.
 - f. The parents shall be involved in the placement selection and the service plan consistent with the best interests of the child.
 - g. When a child is referred for foster care, JAFCO shall only place the child in a licensed foster home.

Clinical Department

C-2

Placement Services to Families and Children (continued)

- 7. Pre-placement Preparation
 - a. The JAFCO social worker should help the child understand the reasons for placement and prepare him for the new environment to the extent of each child's capacity to participate and understand. The case worker shall plan and participate in at least one pre-placement visit except in cases of emergency placement and shall be available to the child, the child's parents or the foster family for supportive services.
 - b. JAFCO shall arrange for a medical examination for each child within 72 hours of their placement with JAFCO.
 - c. JAFCO shall obtain developmental information and shall preserve this information on each child.
 - d. JAFCO shall arrange for an examination by a dentist for each child three years of age or older within 30 days of placement with JAFCO.
 - e. JAFCO shall arrange for an eye examination and a hearing assessment by a licensed professional for each child three years of age and older within 30 days of placement.
 - f. JAFCO shall obtain a written copy of each child's immunization record within 30 days of their admission to placement. If this is not available, the agency shall develop an immunization program for the child in consultation with medical personnel. This record shall be maintained in the child's case file.

Signature:



Executive Director

09/01/06

Date

Clinical Department

C-3

Parental Medical Consent

Original Date: 09/01/06
Revision Date: NA
Policy Number: C-3
Department of Origin: Clinical Department

Policy:

It is the intent of JAFCO to maintain in accordance with 65C-14, for children in foster and residential care, except in emergency circumstances, JAFCO will obtain written consent from the parents or legal guardian of one has been appointed, or the court, to provide routine medical care of a child accepted into care. If medical consent cannot be obtained at the time of placement, it must be obtained as soon as possible upon the child's entry into care.

Medical procedures which are not considered part of routine medical care must be specifically authorized by the parent of the child, the legal guardian, if one has been appointed, or a court of competent jurisdiction unless the situation is so urgent as to make the delay required to secure authorization potential dangerous to the health and safety of the child as determined by the doctor or hospital.

Signature:



09/01/06

Executive Director

Date

Clinical Department

C-4

Person Served Grievance

Original Date: 09/01/06
Revision Date: 08/08/14
Policy Number: C-4
Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to encourage our person served and their families to bring to the attention of management any of their complaints about their treatment, living conditions, or other relevant matters. For this reason the person served shall be provided with an opportunity to present their complaints and have the decision of management reviewed through a formal complaint and grievance procedure. All complaints and grievances shall be resolved fairly and promptly.

In order to do this, guidelines will be established in order to provide all persons served and their family members with the opportunity to secure consideration of a grievance dealing with any of the following possible problem areas (this list is not inclusive):

1. Person served suffered mistreatment, such as harsh scolding, hitting, spanking, and other violent treatment
2. Inappropriate touching and other forms of sexual harassment or sexual abuse
3. Missing person served belongings
4. Bullying by other child residents
5. Neglect, as evidenced by lack of proper supervision and others
6. Lack of food or supplies
7. Broken equipment
8. Any abuse of regulations of which the person served may be aware
9. Any abuse or fraud of DCF or Medicaid billing policies
10. Any situation which the child or family believes is troublesome or inappropriate

The submission of a grievance or complaint by a person served or family member shall in no way adversely affect the person served or his/her treatment. The following procedure shall be followed by an aggrieved person served or family member:

If the person served is a new person served or resident, then he or she is encouraged to discuss all the rules and regulations, schedules, and any other issues, freely with his or her counselor right away, in order to better understand how he or she may be most comfortable and successful in the program.

When there is a grievance or complaint, the follow steps are to be taken:

Step One:

- The person served or family member should personally discuss his/her grievance with the counselor directly in charge of her/his case. The person served must receive an answer within 3 working days.
- The complaint is about the counselor directly in charge of the child of the child's case, the child or family member should direct the complaint to the Executive Director of JAFCO at 954-749-7230.
- The child or family member has a right to have their complaint resolved, if this is within the authority or scope of work of JAFCO and the written documentation of the resolution of the complaint shall be put in the person served record. A copy of the disposition/resolution of the complaint shall be given to the child's family member or guardian.
- JAFCO administration shall advise the employee of their rights to retain an advocate or council.

Clinical Department

C-4

Person Served Grievance (continued)

Step Two:

- If JAFCO does not resolve the complaint to the person served or family member's satisfaction, the person served or family member has the right to:
 1. Notify DCF, District 10 office. The telephone number of the Children's Mental Health Specialist, to whom the complaint should be made, is 954-443-3443.
 2. Direct complaints regarding possible billing irregularities or fraud, then the complaint must be directed to the local DCF office, who will route the complaint to the proper person. A complaint can also be made directly to the Medicaid Fraud Reporting number (800-966-7266).
 3. Contact the local Office for Civil Rights or the United States Department of Health and Human Services (HHS) if the person served feels that their civil rights have been violated.

Telephone Numbers for Reporting Complaints or Grievances:

- Adult and Child Abuse Hotline 800-962-2873
- Executive Director of JAFCO 954-749-7230
- DCF Children's Mental Health Specialist 954-443-3443
- Medicaid Fraud Reporting 866-966-7266
- DCF Office for Civil Rights 850-487-1901
- U.S Department of Health & Human Services 404-561-7888

The supervisor or designee shall provide the person served with advocate, legal and personal contact numbers.

Signature:



Executive Director

08/08/2014

Date

Clinical Department

C-5

Treatment of Confidential Information

Original Date: 09/01/06
 Revision Date: NA
 Policy Number: C-5
 Department of Origin: Clinical Department

Policy:

JAFCO staff members are required to guard the confidentiality/privacy of all of the children and families we serve. Staff will not discuss any information regarding any child or family to anyone else who does not have the right or need to have said information. Discussions of incidents relative to children/families are to be limited among staff and excluded to persons outside the JAFCO system.

Pertinent material may be sent to consultants or professional agencies to which JAFCO is referring a child with approval of the JAFCO Executive Director and the guardian of the person served.

Correspondence or written progress reports that are sent to agencies or parents are to contain the name of the child for which they are directly responsible. If other children are involved in incidents, their names are not to be used.

Children/family's records are not to be used by anyone for research other than those research projects which have been approved by the Executive Director, following approval by the Board of Trustees.

All staff will assure the confidentiality/privacy of all children and families when using the telephone.

Should a caller request information about a child/family, the worker shall ask the caller to identify self and shall only release information germane to the caller's question, provided the caller falls under the guidelines of the State of Florida, chapter 39, as amended, and current rules of DCF. All persons requesting information who do not fit under the guidelines must secure a request for a release of information.

JAFCO staff shall not disclose the contents of the case record to a parent, legal guardian or past person served (who is now a legal adult) until such a request is reviewed and approved by JAFCO legal counsel. Only the contents of the record which has to do with the record of the child while in the care of JAFCO may be released. Information which was gathered from other sources which is relevant to time periods either prior to or after JAFCO services, must be obtained from those sources directly.

In accordance with 65C-14, the privacy of the child and his natural or prospective parents shall be protected. The agency shall ensure that any public appearances by the children involving publicity or fund raising are voluntary and written consent of the child's parent or legal guardian is on file.

Information sent to another agency by JAFCO staff should be germane to the specific questions of that agency. Material should be summarized in a letter form and copies of records should not be forwarded unless specifically requested.

When subpoenaed into court, workers shall cooperate and answer appropriate questions. Shared information should be brief and to the point. If a question sounds inappropriate, worker may ask the court for clarification before answering.

When the presiding judge orders the worker to answer a question, the worker shall comply.

Signature:



09/01/06

Executive Director

Date

Clinical Department**C-6****Person Served Rights and Services**

Original Date: 09/01/06

Revision Date: 08/08/14

Policy Number: C-6

Department of Origin: Clinical Department

Person Served Rights and Responsibilities

Florida law requires that the person served is made aware of their rights and responsibilities by their treatment provider while receiving treatment. The person served may request a copy of the full text of this law from JAFCO. A summary of your rights and responsibilities follows:

- The person served has the right to be treated with courtesy and respect, with appreciation of his or her individual dignity, and with protection of his or her need for privacy.
- The person served has the right to a prompt and reasonable response to questions and requests.
- The person served has the right to know who is providing your treatment and who is responsible for your care.
- The person served has the right to know what patient support services are available, including whether an interpreter is available if he or she does not speak English.
- The person served has the right to know what rules and regulations apply to his or her conduct.
- The person served has the right to be given by the health care provider information concerning diagnosis, planned course of treatment, alternatives, risks, and prognosis.
- The person served has the right to refuse any treatment, except as otherwise provided by law.
- The person served has the right to be given, upon request, full information and necessary counseling on the availability of known financial resources for his or her care.
- If the person served is eligible for Medicaid/Medicare, he or she has the right to know, upon request and in advance of treatment, whether JAFCO accepts the Medicaid/Medicare assignment rate.
- The person served has the right to receive, upon request, prior to treatment, a reasonable estimate of charges for treatment.
- The person served has the right to receive a copy of a reasonably clear and understandable, itemized bill and, upon request, to have the charges explained.
- The person served has the right to impartial access to treatment or accommodations, regardless of race, national origin, religion, physical handicap, or source of payment.
- The person served has the right to be referred for treatment at his or her own expense for any emergency medical condition that will deteriorate from failure to provide treatment.
- The person served has the right to know if treatment is for purposes of experimental research and to give his or her consent or refusal to participate in such experimental research.
- The person served has the right to express grievances regarding any violation of his or her rights, as stated in Florida law, through the grievance procedure of JAFCO which served him or her and to the appropriate state licensing agency.
- The person served is responsible for providing to JAFCO, to the best of your knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to his or her physical and mental health.
- The person served is responsible for reporting unexpected changes in his or her condition to the health care provider.
- The person served is responsible for reporting to the health care provider whether he or she comprehends a contemplated course of action and what is expected of them.
- The person served is responsible for following the treatment plan recommended by the health care provider.
- The person served is responsible for keeping appointments and, when he or she unable to do so for any reason, for notifying the health care provider.
- The person served is responsible for his or her actions if they refuse treatment or do not follow the health care provider's instructions.
- The person served is responsible for assuring that the financial obligations of his or her health care is fulfilled as promptly as possible.
- The person served is responsible for following the health care provider's rules and regulations affecting patient care and conduct.

Clinical Department

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Person Served Rights and Services (continued)

- The person served is responsible to report abuse or neglect of yourself or of other persons served to the Florida Abuse Hotline Number at 1-800-96-ABUSE.
- The person served has the right to contact DCF Office for Civil Rights at 850-487-1901 or the United States Department of Health and Human Services (HHS) at 404-561-7888 if the person served feels that their civil rights have been violated.
- The person served has the right to make formal complaints (see grievance policy).

It is the policy of this agency that each person served has the right to the following:

- Know the rules
- Have their records kept private
- Receive services regardless of race, sex, creed, color, handicap, age, marital status or national origin
- To be treated with respect, to believe what they wish to believe and say what they think and feel
- Be placed in the kind of treatment that is needed
- Receive treatment even though they cannot pay for the services being provided
- Refuse or quit treatment and to understand the consequences of these actions
- Formally complain without fear of revenge if they think their rights have been violated
- Decide (with the help of appropriate staff) what their goals are and how to achieve them, and to work with staff that can help them reach their goals

Discipline Policy

The use of discipline in JAFCO programs may be defined as a positive educational process that establishes and teaches a realistic and socially acceptable manner of behavior. The use of discipline should be a planned, rigorous and consistent process that protects the dignity of the child while instilling in him/her the skills and attitudes which will allow him/her to function well as an individual, a family member and with society at large.

Discipline is not a procedure applied to an individual because his behavior has displeased someone in authority; such actions may be termed punishment and usually have an overall negative effect.

It has been noted that learning does not take place in the presence of anxiety; therefore, methods of discipline should attempt to encourage learning and respect, rather than anger and aggression.

When a resident has demonstrated that he does not have the skills to handle difficult situations in an appropriate manner, it is staff's responsibility to recognize that the resident is only using those behaviors which have worked in the past.

Therefore, it is necessary that we provide the child with an experience which provides him with:

1. accurate feedback about his behavior
2. an opportunity to feel responsible for his actions without focusing on others
3. an accurate representation of how society (staff, residents, family and community workers) feel about his behavior
4. when necessary, a chance to reflect without involvement of other distractions (e.g. when necessary, physical removal from other residents)
5. information about appropriate ways to perceive stress and handle it socially, as well as how to develop social interaction that further increases self-esteem
6. a method by which to rectify the transgression without having continuous inappropriate guilt and
7. when appropriate, an opportunity to perform a written task to aid in internalizing the educative process
8. the program/service shall have knowledge of the person served legal status and when applicable an agency staff shall provide information to the person served regarding resources related to legal status. The persons served legal status information shall be collected by an agency clinician during the assessment process (see the assessment policy).

Clinical Department**Physical Restraint**

Physical restraint may be described as the use of physical means to confine another behavior. When a child's behavior present a clear and present danger to the welfare and safety of the child, other children, staff, the child's family, property or society at large, physical restraint may be deemed necessary. It is imperative that physical restraint be used only to confine the child's behavior as long as it is necessary and not to be used as a punishment. It must be noted that physical restraint is only a method by which to halt the child's behavior so a discipline process may begin. Physical restraint in and of itself is usually not considered an effective discipline process which has positive long term effects. Physical restraint is conducted only by staff who have been certified as having completed PCM training (see policy nonviolent practices).

Example of physical restraint could be: holding a child back from a fight, maintaining a child in a particular area so as to prevent further harm, holding a child to protect him or others from his own behavior, taking hold of a child who is out of control to focus his attention or interrupt his behavior.

It is important that it is understood that the use the physical restraint can possibly cause pain or injury, therefore, those staff who are certified to use such methods must take great caution.

Anytime physical restraint must be used it is also important that the staff person using restraint maintain a calm and even demeanor so as to lower the intensity of the child and further (see Exclusion and Restraint Policy #C-40).

Anytime physical restraint is used, an incident report must be completed which accurately describes the situation, why restraint was necessary, who did the restraining and what the consequences were. Failure to accurately report restraint incidents will result in disciplinary actions up to and including dismissal.

Physical Aggression

It is JAFCO's policy that physical aggression is never accepted in any manner as an interaction between staff members and residents. Physical aggression may be defined as the purposeful causing of bodily pain with the intent of altering another's behavior or of satisfying an individual's personal need to attack or "get even with" another individual. Examples of physical aggression could be paddling, spanking, hitting, slapping, kicking, hair pulling, throwing, slamming, severe shaking, etc.

Any staff member who is found to be involved in any act of physical aggression will immediately be subject to disciplinary action up to and including dismissal and the legal process of the State of Florida with regard to child protection laws.

Unacceptable Discipline Practices

It is the intent of JAFCO to treat all persons served/resident/ with dignity and respect even when the resident is being disruptive or inappropriate. For this reason, some forms of discipline are deemed inappropriate and are not approved. All persons served/residents are guaranteed the basic needs of food, clothing, shelter and safety.

The following are examples of discipline methods which are not to be used:

1. Verbal abuse of a person served/resident by staff. Person served/residents are not to be called "names," sarcastically addressed or put down or deliberately embarrassed.
2. Using a resident or person served to punish another resident. Staff is not to encourage youth to punish each other or not carry out staff reprimands.
3. Meals are not to be used as a restriction or punishment. If a resident is inappropriate at mealtime, he may have his meal at a later time or in his room and the contents of the meal may be changed to facilitate its serving (not its nutritional value) but access to food is not to be denied.
4. Use of work as punishment is not to be used unless it is directly related to, or is a natural consequence of a specific dysfunctional behavior. Work tasks that have no specific goal related purpose or that have no inherent value are never to be used, e.g. digging holes and filling them up, creating disarray in order to have a child clean it up.

Clinical Department

C-6

Person Served Rights and Services (continued)

5. Placing a child in a situation which could cause physical or emotional harm.
6. Any staff member found using unacceptable discipline practices will immediately be subject to disciplinary action.
7. Staff will not restrict children's visitation with parents or legal guardian as a form of punishment with the exception of situations which involve protection of the child, his family and the community.

Signature:



Executive Director

08/08/14

Date

Clinical Department

C-7 Publicity Consent

Original Date: 09/01/06
Revision Date: 05/03/11
Policy Number: C-7
Department of Origin: Clinical Department

Policy:

JAFCO strives to protect the privacy rights of persons served during agency Public Relations and Fundraising activities. As part of the Intake procedure, JAFCO's Director of Operations and Clinical Services obtains a signed release for each person served, or the parent/legal guardian of a minor child, that allows the use of the person served picture for public relations and fundraising activities. If the person served or parent/legal guardian request exclusion from the use of his/her pictures in these activities, that request will be honored and under no circumstances will the person served picture be used for any purpose.

Procedure:

- JAFCO staff shall ensure that any person served participating in a public relations or fundraising event is neither required nor encouraged to express gratitude to the organization through public statements.
- An Authorization for Photograph or Videotaping Form must be completed for any person served whose picture, name or information (e.g. - an interview) is used for public/community relations purposes. These releases must be completed prior to any use for such publication
- All JAFCO events that are taped or photographed must be approved by the Executive Director or the Director of Operations and Clinical Services (or designee) in order to ensure that the proper releases have been obtained prior to any such events.
- Completed forms will indicate the types of picture or information that may be used, the purpose of the picture or information, the signatures of the person served, the guardian (if applicable), and one witness.
- The completed form is filed in the person served clinical file.
- The authorization for photograph or videotaping form must be updated annually.
- The person served may revoke the release at any time.
- The person served must request this revocation in writing.
- No person served known to be under protective service supervision or in foster care may be photographed for any public relations or fundraising activities.
- A person served may be photographed to assist in educational activities. For example, a photograph may be used to assist in learning his/her placement at a table. These photographs will never be used for public relations or fundraising activities purposes.

Signature:



Executive Director

05/03/11

Date

Clinical Department

C-8 Treatment Plan

Original Date: 03/01/06
 Revision Date: NA
 Policy Number: C-8
 Department of Origin: Clinical Department

Purpose:

The AHCA Florida Medicaid Community Behavioral Health Services Coverage and Limitation Handbook established the need for treatment plan development as a clinical element of the treatment process. Each person served is actively involved in the process of his/her treatment planning. The plan is done with a person-centered approach and contains goals and objectives that are measurable it will define challenges and potential solutions. The goals and objectives incorporate the persons served strengths, needs, abilities, and preferences.

Procedure:

1. Definition: a Master Treatment Plan is a single, document defining the treatment need of the person served based on the information gathered from assessments.
2. Person served involvement: The persons served, family and or guardian and staff members jointly develop the plan within forty-five calendar days. The plan shall be signed and dated by staff members, the person served and the legal guardian/ parent when applicable. All persons served are actively involved in and have a significant role in the individual planning process. The person served has a major role in determining the direction of his or her individual plan based on their strengths, needs, abilities and preferences. Inclusion of the family, natural support system and local community is encouraged, when appropriate. The treatment team must ensure that the person served is assuming responsibility for the implementation of the plan, encouraging his/her participation and facilitating access to community resources.
3. Additional Needs: Any identified need beyond the scope of the program must be identified during the treatment plan development and adequately addressed through referrals for additional services.
4. Components: A Master Treatment Plan must be a comprehensive document comprised of:
 - a. Persons served diagnosis based on the ICD-10-CM and/or the DSM IV, identified in an assessment by a Licensed Practitioner of the Healing Arts.
 - b. Goals that are expressed in the words of the person served, and are reflective of the informed choice of the person served (parents or guardians) and appropriate to the persons served diagnosis, age, culture, strengths, needs, abilities and preferences expressed during the assessment process.
 - c. Objectives for each goal are measurable, reflective of the expectations of the person served and the treatment team and consists of the person's age, development, ethnic and cultural background, disabilities, disorder, or concerns. Objectives are the building step towards the goal and must be attainable to the persons served and target dates are included.
 - d. Services/Interventions are aimed to accomplish each objective/goal and are based on established best practices assuring the effectiveness of treatment.
 - e. Amount, frequency and duration of each service during the treatment plans course are included.
 - f. Focuses on the integration and inclusion of the person served into the community, family, natural support system and other needed services.
 - g. Communicated to the person served in a manner that is understandable.
 - h. Dated signatures of the staff members rendering the service, the person served and the guardian, parent or legal custodian when required (mandatory for children under the age of 18). If the treatment plan is developed and signed by a staff member who does not meet FS 65D-30 or Medicaid criteria as a qualified professional of the healing arts, the treatment plan will be reviewed , countersigned and dated by a licensed professional or a qualified professional of the healing arts upon its completion.
 - i. A discharge criterion including possible reasons for transition or discontinuation of services.
 - j. A copy of the is provided when applicable

Clinical Department

C-8

Treatment Plan (continued)

5. Treatment Plan Reviews: A treatment plan review is a process conducted to ensure that the treatment plan goals, objectives, and services continue to be appropriate to the person served needs. It is also instrumental in evaluating the person's process. After the above steps of the treatment planning process occurs, the person served and staff member must determine if what was set out to be achieved was accomplished. If the original goals and objectives were achieved, then new ones can be established, if necessary by completing an addendum in addition to the treatment plan review. If the original goals and objectives were not achieved, then a revision of these should be made to reflect this. The treatment plan review will be completed at a minimum of every 3 months or when the treating team has assessed that the person served requires a change in treatment. A Licensed Practitioner must approve, countersign and date the plan immediately upon completion. The treatment plan must identify any significant change or vital events impacting the life of the person served during the period being reviewed.
6. Special considerations:
 - a. Legal requirements and legally imposed fees will be identified when applicable.
 - b. Exceptions to the requirement of a signature by the parent, guardian or legal custodian include a minor with an emotional crisis seeking treatment but only for assessment and crisis intervention in two sessions and for a period of one week.
 - c. For children in the care and custody of the State both the caseworker and the foster parent must participate in the treatment planning process and the signature of the caseworker is required.
 - d. If the person served age or clinical condition impedes obtaining his/her signature, a written explanation of the justification for this exception must be provided.
7. Any standard protocol adopted by an Agency's program shall expand but not supersede this policy.

Signature:



Executive Director

03/01/06

Date

Clinical Department

C-9

Psychiatric Assessment

Original Date: 03/01/06

Revision Date: NA

Policy Number: C-9

Department of Origin: Clinical Department

Policy:

JAFCO staff will refer for psychiatric evaluation those persons served whose symptomatology may suggest functional or organic pathology whose etiology may or may not be related to alcohol or other drug/ dependence.

Purpose:

To ensure that persons served of JAFCO are evaluated for psychiatric disorders in a timely manner, the following policy and procedures are established.

Procedure:

1. During weekly clinical staffing the therapist will discuss cases believed to need psychiatric evaluation with their immediate supervisor and the Director of Operations and Clinical Services (or designee).
2. The Director of Operations and Clinical Services (or designee) will proceed to discuss/refer the case with the agency psychiatrist and will ensure that the person served is evaluated upon the next available appointment.
3. The following are indications for making a psychiatric referral:
 - a. Actively suicidal or present suicidal ideation or recent history of suicide attempts.
 - b. Acutely psychotic or manic
 - c. Lack of impulse control which may harm self or others
 - d. Disorientation to time, place, person
 - e. Significant memory deficit
 - f. Evidence of visual, auditory or other hallucinations
 - g. Acute anxiety/panic or depression
 - h. Present or recent prescriptions for psychotic medication
 - i. Medication evaluation
 - j. Suspected neuro-cognitive deficits
4. All written reports/evaluations completed by the psychiatrist will be placed in the person served clinical chart.
5. In the case of a psychiatric emergency the following county services should be utilized:
 - a. Call Broward Mobile Crisis Unit or
 - b. Call 911 and have persons served transported via law enforcement or private ambulance service to the hospital (call ahead to notify hospital).

Signature:



03/01/06

Executive Director

Date

Clinical Department

C-10

Documentation Compliance

Original Date: 03/01/06
Revision Date: 10/17/06
Policy Number: C-10
Department of Origin: Clinical Department

Purpose:

To enter clinical documentation into the person's served clinical record in a timely manner.

Procedure:

All intake information must be completed upon admission and placed in the clinical record within 24 hours.

- Upon assignment of the case to a therapist, all Bio-Psychosocial Evaluations are due within 30 days and are placed in the person's served clinical record.
- All Master Treatment Plans shall be completed within 30 business calendar days and will be placed in the person served clinical record.
- All clinical case notes are completed at the end of each business day and entered into the person served clinical chart by the end of each business week.
- All contact logs must be completed within twenty-four (24) hours of the contact.
- Contact logs are to be filed when:
 - a. One sheet for the month is completed and signed by Supervisor. or
 - b. At the end of the month and they are signed and by Supervisor.
- The Treatment Plan Review is completed at a minimum of a least every 3 months or when the person served has a life altering or treatment altering change. The documentation will be entered into the person's served record within 24 hours of completion.
- All psychiatric documentation will be entered upon completion.
- All forms in the clinical records must be filled out to their entirety prior to entering the form in the record.
- All CFARS will be completed within the appropriate time guidelines and placed in the person's served clinical record at the end of the business day.
- All PERFS will be completed within the appropriate time guidelines and placed in the person's served clinical record at the end of the business day.
- All files will be maintained in an orderly and confidential manner.

Signature:



Executive Director

10/17/06

Date

Clinical Department

C-11

Curfew

Original Date: 10/17/06
Revision Date: NA
Policy Number: C-11
Department of Origin: Clinical Department

Purpose:

To provide age appropriate structured guidelines for time off campus.

Procedure:

Residents under the age of 16 years are not permitted off campus without the supervision of a group- home staff member or other adult designee unless approved in advance by program administrative team.

Residents ages 16 and over have off-campus privileges and a curfew of:

- 10:00 p.m. on weekdays/school nights
- 12:00 midnight on weekends/holidays/non-school nights.

Unsupervised, off-campus privileges must be earned by the resident. In order to earn such privileges; the resident must:

- Be respectful towards staff
- Follow all program rules
- Attend school daily
- Maintain good grades
- Attend therapy appointments as scheduled
- Remain drug and alcohol free as evidenced by random drug screens

Exceptions to above-mentioned policy may be granted on an individual basis at the discretion of program administrative team.

Signature:



Executive Director

10/17/06

Date

Clinical Department

C-12

Bio-Psychosocial Assessment

Original Date: 07/03/07

Revision Date: 04/17/14

Policy Number: C-12

Department of Origin: Clinical Department

Description of the relationships with significant others and peers Scope:

This policy and procedure applies to all clinical employees of JAFCO.

Purpose:

The intent of JAFCO CMHC is to ensure that essential information is obtained during the bio-psychosocial assessment for all persons served admitted to JAFCO's clinical treatment program

Responsibility:

It is the responsibility of the Director of Operations and Clinical Services (or designee) to implement this policy and procedure. It is the responsibility of the Director of Operations and Clinical Services (or designee) to disseminate this information to employees under his/her direction.

Policy:

It is the policy of JAFCO CMHC that a comprehensive bio-psychosocial history assessment be completed for all person served.

Procedure:

Upon admission, all person served are assigned to a primary clinician, who shall be responsible for completion of the assessment within 30 days. Upon completion of the assessment, the document is placed in the person served clinical file. The information gathered in the assessment shall be used for diagnosing and treatment planning. This assessment shall include at a minimum the following:

1. Source of information and identifying data
2. Description of the presenting problems
3. Description of the childhood and family history
4. Description of the current living situations, including identification of financial, religious, ethnic/cultural, spiritual and legal factors.
5. Description of the current family relationship
6. Advanced directives (when applicable)
7. History of physical, sexual, emotional and/or substance abuse
8. Impact of any medical conditions on the patient's functioning and treatment
9. Family goals and recommendations for family/significant other involvement
10. Patient strengths/coping skills or lack of
11. Additional clinical comments
12. For females only: is the person served pregnant and are they receiving prenatal care
13. Specific treatment recommendations related to the treatment modalities available (group, family and individual therapy TBOSS, psychiatric treatment further assessments, evaluations and referral for psychological testing when required, medical care and or services outside the scope of JAFCO services)
14. current Global Assessment Score
15. need for assistive technology
16. risk taking behaviors
17. suicide risk
18. personal safety risk
19. risk to others
20. abilities and interest
21. preferences
22. previous behavioral health services including diagnostic history and treatment history
23. mental status

Clinical Department

C-12

Bio-Psychosocial Assessment (continued)

24. medication history
25. co-occurring disorders
26. current level of functioning
27. culture
28. spiritual beliefs
29. educational history
30. employment history
31. legal involvement
32. family history
33. history of trauma: abuse ,neglect, violence
34. relationships, including families, friends, community members,
35. literacy level
36. need for availability for social support
37. psychological and social adjustment to disability and or disorder
38. Resultant diagnosis(es), if identified
39. interpretive summary

If a person served is admitted within six (6) months of discharge and has a current bio-psychosocial (not more than one year old), an addendum shall be completed. A sample of the form is attached see appendix G.

Signature:



Executive Director

04/17/14

Date

Clinical Department

C-13

Reporting Infectious Disease

Original Date: 07/13/07

Revision Date: NA

Policy Number: C-13

Department of Origin: Clinical Department

Purpose:

The purpose of this policy and procedure is to identify the system used for identifying and reporting infectious diseases.

Scope:

This policy applies to all employees of JAFCO.

Responsibility:

It is the responsibility of the Director of Operations and Clinical Services and/or designee to implement this policy. It is the responsibility of the Director of Operations and Clinical Services (or designee) to disseminate this information to each employee under his/her direction.

Policy:

It shall be the policy of JAFCO to keep written records of all infectious diseases reported to the organization. Any patient or employees illness that require further reporting to staff, federal, state and local public health authorities and/or accreditation bodies will be completed by the Director of Operations and Clinical Services (or designee) in collaboration with the Medical Director and Executive Director.

Procedure:

1. Any infectious diseases reported by person served, guardian, outside social worker, or employees will be maintained in a written log by clinical management.
2. When necessary the staff will refer the person served to their PCP for further evaluation and disposition.
3. If the person served is found to be actually/potentially contagious, he/she will be isolated at home and from program activities until cleared by a physician to return.
4. If employee is found to be actually/potentially contagious, he/she will be placed on leave of absence until cleared by physician to work.
5. In collaboration with physician and administrator, the Director of Operations and Clinical Services (or designee) will determine whether any further reporting is necessary and make such reports to the appropriate authorities according to laws and regulations.

Signature:



Executive Director

07/13/07

Date

Clinical Department

C-14

Consent for Treatment

Original Date: 07/13/07

Revision Date: NA

Policy Number: C-14

Department of Origin: Clinical Department

Purpose:

To ensure that each person served understands his or her treatment and consents to treatment by reviewing and signing a written consent.

Scope:

This policy applied to all employees of JAFCO.

Responsibility:

It is the responsibility of the Director of Operations and Clinical Services and/or designee to implement this policy and procedure. It is the responsibility of the Director of Operations and Clinical Services (or designee) to disseminate this information to employees under his/her direction.

Policy:

It is JAFCO's policy to have each person served complete a "consent for treatment" informed consent as part of the admission package

Procedure:

1. The assigned clinician/designee shall give each person served Consent for Treatment form. It is reviewed and explained to each person served and guardian.
2. In the event that the person served is in agreement with the terms of treatment and signs the consent for treatment, it must be witnessed by the staff member.
3. The signed consent shall be filed in the administrative section the person's served clinical file.

Signature:



Executive Director

07/13/07

Date

JAFCO Policy and Procedure Manual
Clinical Department
C-15 Universal Precautions

Original Date: 07/06/07
Revision Date: NA
Policy Number: C-15
Department of Origin: Clinical Department

Purpose:

The purpose of this policy is to prevent and protect person served and personnel from cross-contamination and infectious diseases. Since medical history and examination cannot reliably identify all person served infected with HIV, Hepatitis B or other blood borne pathogens, all blood and body should be considered potentially infectious. This approach shall be referred to as "Universal Precautions." These precautions should be used in the care of all person served. All staff should routinely use appropriate barrier precautions to prevent skin and mucous-membrane exposure when contact with blood or other fluids of any person served is anticipated.

Scope:

This policy applies to all employees of JAFCO Inc.

Responsibility:

It is the responsibility of the Director of Operations and Clinical Services and/or designee to implement this policy. It is the responsibility of the Director of Operations and Clinical Services (or designee) to disseminate this information to each employee under his/her direction.

Policy:

All employees of the center shall adhere to Universal Precautions for all person served and in all circumstances. In addition, those identified as being at risk for occupational exposure to blood borne pathogens will be entered into the Exposure Control Plan and be taught Universal Precautions, (direct care staff) updated annually on these precautions and reviewed at least annually on these precautions and reviewed at least annually for compliance.

Procedure:

1. Gloves will be worn for touching blood and body fluids, mucous membranes or non-intact skin of all person served, for handling items or surfaces soiled with blood or body fluids.
2. Hands and other skin surfaces are to be washed immediately if contaminated with blood or body fluids. Hands must be washed immediately after gloves are removed.
3. Mouth pieces, resuscitation bags or other ventilator devices should be used instead of mouth to mouth resuscitation.
4. Any staff with exudative lesions or weeping dermatitis should refrain from all direct client care and from handling equipment belong to the persons served or the agency until the condition resolves. Cuts and scratches of hand or arm may be covered with an opposite type dressing before gloving.

The precautions are based on the limited ways in which blood borne diseases are transmitted; therefore, it is not necessary to routinely use any barriers other than those already discussed (e.g. shoe coverings, disposable body suits) or to use any barrier during routine person served care not involving exposure to body substances.

The use of extraordinary measure may enhance any misunderstanding about the transmission of AIDS and other infectious diseases and hinder the educational efforts of the institution. In implementing a policy of universal precautions, it is important to ensure staff understanding not only of the procedures involved, but the rationale and basis for deciding when to employ specific barrier precautions.

Signature:



07/06/07

Executive Director

Date

Clinical Department

C-16

Medical Care

Original Date: 02/09/07

Revision Date: 12/3/2013

Policy Number: C-16

Department of Origin: Clinical Department

Purpose:

It is the intent of JAFCO to coordinate the best possible comprehensive medical care for all children served. Medical and dental services shall be provided as routine, preventative, emergency, and follow-up.

Policy:

Within seventy-two hours of admission to JAFCO, each child in the group home and shelter (residential program) ages 0-18 shall receive a physical examination. A dental and eye exam shall be scheduled within thirty days of admission for group home person's served. After initial examinations are completed, follow-up appointments shall be scheduled as directed by the physician and within a year of the original physical examination and within six months of the dental. Exception to this policy shall be made when ordered by a treating physician.

All direct care staff shall be trained on alerting 911 when emergency medical situations arise. In order to protect the child's best interest, 911 will be called and staff shall describe the child's presenting symptoms the staff will abide by all instructions provided. The direct care shall also have access to the name and number of the pediatrician and psychiatrist. Medical situations shall be immediately communicated to Residential Manager on call and the Director of Operations and Clinical Services and /or Executive Director for further disposition.

Procedure:

In order to provide the children at JAFCO with the proper medical care required the staff shall take the following steps to ensure the each child's individual medical needs are addressed. The medical log shall contain the following information: name, age, date of admission, initial appointments name and number of the treating practitioner and follow up recommendations. Residential Program management shall review the log at the beginning of each month, schedule all-necessary appointments for the month, arrange for transportation, and follow up. All children residing at JAFCO shall have annual examinations coinciding with their birthdate and dental exams every six months (see the individualized care plan in the persons served file).

Signature:



12/3/2013

Executive Director

Date

Clinical Department

C-17

Transportation

Original Date: 02/06/07
Revision Date: NA
Policy Number: C-17
Department of Origin: Clinical Department

Purpose:

It is the intent of JAFCO to ensure coordination for all transportation needs of the person served.

Policy:

JAFCO vans shall be readily available for scheduled person served oriented appointments. There are nine mini-vans designated to meet the village transportation needs, 3 for the emergency shelter and 6 for the group homes. Each shift shall have at least one direct care staff that is able to provide transportation when required. There shall be the appropriate ratio of staff to person served when transporting a group of person served.

Signature:



Executive Director

02/06/07

Date

Clinical Department

C-18 Allowance

Original Date: 10/17/06
Revision Date: NA
Policy Number: C-18
Department of Origin: Clinical Department

Purpose:

To install an economic value system that is age and behavior appropriate.

Procedure:

- The minimum amount of weekly allowance is determined by the resident's age at the rate of \$1.00 per year starting at 5 years of age.
- Individual increases are agreed at the discretion of supervisory personnel, based on the child's level of functioning and individual needs.
- All residents will be allowed the opportunity to earn, spend and save.
- Residents must complete assigned daily chores in order to earn the maximum amount of allowance. If the chores are not completed in a timely manner with a positive attitude, money may be deducted from their allowance. In addition, if the child causes destruction to property, certain deductions may be made in order for the child to pay restitution or the child can opt to do additional work chores to earn enough income to make restitution payments. A restitution payment schedule will be individualized and agreed upon by staff and child.
- Each child will receive a minimum amount of one dollar per week even if deductions are necessary and no chores are completed.
- Allowance will be allocated weekly each Friday and then held for the residents in a locked area until a staff member distributes it to the residents (monies for allowance are kept separate and apart from the Network Providers financial account).
- Residents are strongly discouraged from keeping money in their rooms to avoid loss, however if a child demands to hold his own allowance money they are informed that it will not be replaced if it is lost or missing. Children are encouraged to save their allowance and may open a bank account if they choose.
- A log is maintained of allowance distribution and balances on a weekly basis.

Signature:



Executive Director

10/17/06

Date

Clinical Department

C-19

Case Records

Original Date: 09/01/06
 Revision Date: 07/06/07
 Policy Number: C-19
 Department of Origin: Clinical Department

Policy:

JAFCO shall maintain current records for each person served receiving the following services: placement in a foster home, adoptive home, residential group care facility, outpatient, clinical treatment and Children’s Ability Center programs. The following information at a minimum shall be contained in each file: Documentation needs shall vary in accordance with the specific treatment needs of the different programs.

- Demographic information including the name, address, social security number, sex, religion, race, birth date, and birthplace of the child;
- The name, address, telephone number, social security numbers, and marital status of the parents or guardians of the child;
- The name, address, and telephone number of siblings if placed elsewhere and other significant relatives, if available;
- Copies of legal documents of importance to the type of care such as birth record and any court dispositions;
- The medical history shall include, if available, cumulative health records, addresses of all health care providers who provided treatment, examination or consultation regarding the child as well as all psychological and psychiatric reports;
- The social assessment and background of the family and parents;
- An assessment completed by a licensed practitioner when applicable
- A plan for treatment
- A summary, which reflects the dates of contact, initial assessment, case plan, and content of the worker’s visit:
- The circumstances leading to the decision of the parents to place the child, the agency’s involvement with the parents, including services offered, delivered, or rejected;
- Education records and reports, if applicable;
- Summary of case reviews which reflect the contacts with and the status of all family members in relation to the case plan as well as the achievements or changes in the goals;
- Summary of any administrative or outside service reviews on the progress of each child toward goal determination;
- Summary of child’s contacts with family members which reflect the quality of the relationships as the way the child is coping with them; and
- A record of the child’s placements with names of caregivers, addresses and the dates of care.

Documentation Errors

It is the policy of JAFCO that there be a standard manner of inserting and deleting items into clinical records in order to avoid errors.

1. All entries into the person served record shall be made in black (color) ink.
2. When an error is made in an entry in the person served record, white-out or other methods of correction which obscure the error are forbidden. The proper way of correcting an error is as follows:
 - a) Cross out the part the entry that is in error with one line. Write above the crossed out section “Error” and write your initials. Then, in an appropriate location, write the correct entry.
 - b) Never write over an entry in an attempt to correct an error.
 - c) Never, under any circumstances, insert a blank sheet or document with a signature on it into the person served record.
3. Every attempt must be made to write entries in a legible manner.

Signature:



07/06/07

Executive Director

Date

Clinical Department

C-20

Record Retention and Storage

Original Date: 09/01/06
 Revision Date: 10/08/08, 04/25/14
 Policy Number: C-20
 Department of Origin: Clinical Department

Policy:

JAFCO shall maintain the organizational records of all persons served in locked filing cabinets at all three facilities located at the JAFCO Children’s Village 4200 N. University Drive, Sunrise, the JAFCO Children’s Ability Center 5100 N. Nob Hill Road, Sunrise, and the JAFCO Northeast Branch 2345 Bryn Mawr Avenue, Suite 100, Bryn Mawr, Pennsylvania. In accordance with 65C-15.030, case records for children in foster care or residential group care will be maintained for a minimum of seven years. Case records will be permanently retained for children placed by the agency for adoption - including files related to biological and adoptive families. All files are stored in a locked filing cabinet

Procedure:

All files and documents which are required to be maintained in accordance with DCF regulations and the Florida Administrative Code will be done so. All documents considered part of the permanent file will be maintained in accordance with Florida Law. All such files shall be maintained in JAFCO’s offices and protected as to confidentiality.

Security of person served records is the responsibility of all agency employees. The following procedure shall be utilized to insure the security of records:

1. Records shall be filed in file cabinets when not being used. Records are not to be left unattended on workers’ desks or in workers’ offices overnight. Record file cabinets shall be locked by office staff when they depart for the day.
2. Records shall remain in the respective program office and not be removed from the building. If a record is required for a court appearance, the holder of the record is responsible for its return.
3. Dictation notes, phone messages and other notes on person served shall be protected by the worker and not left in conspicuous or unattended places.
4. Dictation shall be recorded in person served records as soon as possible and hand written notes shall be shredded before being deposited in waste containers.
5. Messages and other notes shall also be shredded before deposited in waste containers.
6. Clinical staff (or practicum students) wishing to review another clinician’s records must first consult the supervisor or Director of Operations and Clinical Services (or designee). After receiving approval, the records may be reviewed in the office area. Student Interns wishing to review records may do so only in the presence of a staff member and photocopies of such materials may not made by the interns.
7. Pertinent material may be sent to consultant or professional agencies to which JAFCO is referring a child with approval of the appropriate supervisor.
8. Correspondence or written progress notes/reports that are sent to agencies or parents are to contain only the name of the child for which they are directly responsible. If other children are involved in incidents, their names are not to be used.
9. Children/family records are not to be used by anyone for research other than those research projects which have been approved by agency executive staff, following approval by the total administrative staff.
10. In the unfortunate event that the agency should close, the person served files will remain in storage at “North Miami Mini Storit” 1301 NE 119th Street, North Miami, FL 33161, 305-897-7757. The adults file will be preserved for seven years and the children’s files will be preserved for seven years after their eighteenth birthday.

Clinical Department

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Record Retention and Storage

When files and records that JAFCO is required to retain become impractical to be maintained in the respective program offices filing cabinets, they may be moved to another long term storage area, provided that the storage area is shown to be a secure, locked facility, with reasonable controls to assure unwarranted access, protected with fire safety devices and placed in the long term storage facility will be maintained in the program office.

Signature:



Executive Director

09/01/06

Date

Clinical Department

C-21

Child Placing Documentation Requirements

Original Date: 09/01/06
Revision Date: 07/06/07
Policy Number: C-21
Department of Origin: Clinical Department

Policy:

It is the intent of JAFCO to comply with all the laws, statues, and regulations in regards to documentation as contained in 65C-14

Foster Care Case Records

JAFCO shall make every effort to maintain stable foster care placements for each child in foster care. When replacement is indicated, first consideration shall be given to returning the child to the parents or to placing the child with relatives, except for children surrendered for adoption. If the return of the child to the parent or placement of the child with a relative is not appropriate, all of the following shall be documented in the child’s record within 10 working days after replacement in foster care:

- The reason for replacement;
- An evaluation of the appropriateness of continued foster care;
- Documentation of replacement preparation appropriate to the child’s capacity to understand;
- Evidence of notification to the parents of the child’s replacement, unless surrenders for adoption are obtained; and
- The information that was shared with the new foster parents about the child, including the case plans

Family Case Record

JAFCO shall have on file a record of the family of every child whom the agency places into care which contains:

- Demographic information including address, birth dates, race, religion, family composition, and persons important to the child;
- The social history, including any psychological or psychiatric reports and medical histories;
- Strengths and needs of the family and the services required;
- Worker’s assessment and initial case plan;
- Signed agreements between the agency and family;
- Summary of dates of contact and progress toward goals;
- Case review reports; and
- Discharge summary.

If JAFCO received the child from a custodian other than a parent, the agency shall also maintain these records on the prior custodian.

Family Foster Home Records

JAFCO shall keep separate records for each family foster home which shall contain:

- The application to provide foster care;
- Verification that the screening requirements of Section 409.175, F.S., Chapter 10-20, F.A.C., have been successfully met;
- Family assessment;
- Medical information;
- Annual assessment of strengths and weaknesses of the foster family relative to the care of the individual children placed with them;
- All licensing compliance studies and reports connected with it;
- List of children placed, dates admitted, date of discharge, and reason for discharge; and
- A termination summary for homes which are closed, and the reason for closure.

Clinical Department

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Child Placing Documentation Requirements (continued)

Adoptive Home Records

JAFCO shall keep records for each adoptive family, which shall contain:

- The applications;
- The adoptive assessment study;
- Medical information;
- Character references from at least three sources;
- A summary of family contacts following approval for adoption until the child is placed;
- A copy of all the information given to the parent's concerning the child or children to be placed for adoption with them;
- All legal documents pertaining to the adoption; and
- Summary containing the placement decision, pre-placement and post-placement contacts with the family and the adoptive child, including services provided to stabilize the placement and decisions regarding finalization of the adoption.

Periodic Review

JAFCO will comply with all requirements in regard to judicial and periodic review as contained in Chapter 39, part V, Florida Statutes, and 65C-14. In addition, JAFCO will document a quarterly review of the case plan for the child, which includes, but is not limited to, the following:

- As assessment of the child's adjustment since placement in care;
- Any significant changes in the growth and development of the child;
- All changes in the case plan, or reasons for adjusting the goals or responsibilities;
- Assessment of the relationship between the child and his/her caregivers;
- Any problems which have occurred; and
- The progress toward the achievement of the goals of the case plan

Upon discharge, a child's record shall contain:

- A discharge summary showing services provided during care, the growth and accomplishments, needs which remain to be met, and recommendations of the services needed to meet these goals;
- Date of discharge, reason for discharge, and the name, address, telephone number, and relationship of the persons or agency to whom the child was discharged; and
- After care plans which specify the responsibility for follow-through

Signature:



Executive Director

07/06/07

Date

Clinical Department

C-22

Right to Privacy

Original Date: 04/14/03

Revision Date: NA

Policy Number: C-22

Department of Origin: Clinical Department

Policy:

Notice of Privacy Practices of JAFCO, Inc. and other health care providers which are members of our system, including the following:

- The Department of Children and Families and their Representatives
- Court and Judges
- Approved Funding Sources

This notice describes how confidential information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

1. We have a legal duty to protect health information about you.

We are required to protect the privacy of health information about you and that can be identified with you, which we call "protected health information," or "PHI" for short. We must give you notice of our legal duties and privacy practices concerning PHI:

- We must protect PHI that we have created or received about your past, present, or future health condition, health care we provide to you, or payment for your health care.
- We must notify you about how we protect PHI about you.
- We must explain how, when and why we use and/or disclose PHI about you.
- We may only use and/or disclose PHI as we have described in this Notice.

This Notice describes the types of uses and disclosures that we may make and gives you some examples. In addition, we may make other uses and disclosures which occur as a byproduct of the permitted uses and disclosures described in this Notice.

We are required to follow the procedures in this Notice. We reserve the right to change the terms of this Notice and to make new notice provisions effective for all PHI that we maintain by first:

- Posting the revised notice in our offices;
- Making copies of the revised notice available upon request (either at our offices or through the contact person listed in this Notice); and
- Posting the revised notice on our website.

2. We may use and disclose PHI about you in the following circumstances.

- a. We may use and disclose PHI about you to provide health care treatment to you. We may use and disclose PHI about you to provide, coordinate or manage your health care and related services. This may include communicating with other health care providers regarding your treatment and coordinating and managing your health care with others. For example, we may use and disclose PHI about you when you need a prescription, lab work, an x-ray, or other health care services. In addition, we may use and disclose PHI about you when referring you to another health care provider.
- b. We may use and disclose PHI about you to obtain payment for services. Generally, we may use and give your medical information to others to bill and collect payment for the treatment and services provided to you. Before you receive scheduled services, we may share information about these services with your health plan(s). Sharing information allows us to ask for coverage under your plan or policy and for approval of payment before we provide the services. We may also share portions of your medical information with the following:

Clinical Department

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Right to Privacy (continued)

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- Billing departments;
 - Collection departments or agencies;
 - Insurance companies, health plans and their agents which provide you coverage;
 - Hospital departments that review the care you received to check that it and the costs associated with it were appropriate for your illness or injury; and
 - Consumer reporting agencies (e.g., credit bureaus).
- c. We may use and disclose your PHI for health care operations. We may use and disclose PHI in performing business activities, which we call "health care operations". These "health care operations" allow us to improve the quality of care we provide and reduce health care costs. Examples of the way we may use or disclose PHI about you for "health care operations" include the following.
- Reviewing and improving the quality, efficiency and cost of care that we provide to you and our other patients. For example, we may use PHI about you to develop ways to assist our health care providers and staff in deciding what medical treatment should be provided to others.
 - Improving health care and lowering costs for groups of people who have similar health problems and to help manage and coordinate the care for these groups of people. We may use PHI to identify groups of people with similar health problems to give them information, for instance, about treatment alternatives, classes, or new procedures.
 - Reviewing and evaluating the skills, qualifications, and performance of health care providers taking care of you.
 - Providing training programs for students, trainees, health care providers or non- health care professionals (for example, billing clerks or assistants, etc.) to help them practice or improve their skills.
 - Cooperating with outside organizations that assess the quality of the care we and others provide. These organizations might include government agencies or accrediting bodies such as the Joint Commission on Accreditation of Healthcare Organizations.
 - Cooperating with outside organizations that evaluate, certify or license health care providers, staff or facilities in a particular field or specialty. For example, we may use or disclose PHI so that one of our nurses may become certified as having expertise in a specific field of nursing, such as pediatric nursing.
 - Assisting various people who review our activities. For example, PHI may be seen by doctors reviewing the services provided to you, and by accountants, lawyers, and others who assist us in complying with applicable laws.
 - Planning for our organization's future operations, and fund raising for the benefit of our organization.
 - Conducting business management and general administrative activities related to our organization and the services it provides, including providing information.
 - Resolving grievances within our organization
 - Reviewing activities and using or disclosing PHI in the event that we sell our business, property or give control of our business or property to someone else.
 - Complying with this Notice and with applicable laws.
- d. We may use and disclose PHI under other circumstances without your authorization. We may use and/or disclose PHI about you for a number of circumstances in which you do not have to consent, give authorization or otherwise have an opportunity to agree or object. Those circumstances include:
- When the use and/or disclosure is required by law. For example, when a disclosure is required by federal, state or local law or other judicial or administrative proceeding.
 - When the use and/or disclosure is necessary for public health activities. For example, we may disclose PHI about you if you have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading a disease or condition.
 - When the disclosure relates to victims of abuse, neglect or domestic violence.
 - When the use and/or disclosure is for health oversight activities. For example, we may disclose PHI about you to a state or federal health oversight agency which is authorized by law to oversee our operations.
 - When the disclosure is for judicial and administrative proceedings. For example, we may disclose PHI about you in response to an order of a court or administrative tribunal.
 - When the disclosure is for law enforcement purposes. For example, we may disclose PHI about you in order to comply with laws that require the reporting of certain types of wounds or other physical injuries.

Clinical Department

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Right to Privacy (continued)

- When the use and/or disclosure relates to medical research. Under certain circumstances, we may disclose PHI about you for medical research.
- When the use and/or disclosure is to avert a serious threat to health or safety. For example, we may disclose PHI about you to prevent or lessen a serious and eminent threat to the health or safety of a person or the public.
- When the use and/or disclosure relates to specialized government functions. For example, we may disclose PHI about you if it relates to military and veterans' activities, national security and intelligence activities, protective services for the President, and medical suitability or determinations of the Department of State.
- When the use and/or disclosure relates to correctional institutions and in other law enforcement custodial situations. For example, in certain circumstances, we may disclose PHI about you to a correctional institution having lawful custody of you.
- e. You can object to certain uses and disclosures. Unless you object, we may use or disclose PHI about you in the following circumstances:
 - We may share your name, your room number, and your condition in our patient listing with clergy and with people who ask for you by name. We also may share your religious affiliation with clergy.
 - We may share with a family member, relative, friend or other person identified by you, PHI directly related to that person's involvement in your care or payment for your care. We may share with a family member, personal representative or other person responsible for your care PHI necessary to notify such individuals of your location, general condition or death.
 - We may share with a public or private agency (for example, American Red Cross) PHI about you for disaster relief purposes. Even if you object, we may still share the PHI about you, if necessary for the emergency circumstances.

If you would like to object to our use or disclosure of PHI about you in the above circumstances, please call our contact person listed on the cover page of this Notice.

- f. We may contact you to provide appointment reminders. We may use and/or disclose PHI to contact you to provide a reminder to you about an appointment you have for treatment or medical care.
- g. We may contact you with information about treatment, services, products or health care providers. We may use and/or disclose PHI to manage or coordinate your healthcare. This may include telling you about treatments, services, products and/or other healthcare providers. We may also use and/or disclose PHI to give you gifts of small value
- h. We may contact you for fundraising activities. We may use and/or disclose PHI about you, including disclosure to a foundation, to contact you to raise money for the agency. We would only release contact information and the dates you received treatment or services at the agency. If you do not want to be contacted in this way, you must notify in writing our contact person listed on the cover page of this Notice.

Under any circumstances other than those listed above, we will ask for your written authorization before we use or disclose PHI about you. If you sign a written authorization allowing us to disclose PHI about you in a specific situation, you can later cancel your authorization in writing. If you cancel your authorization in writing, we will not disclose PHI about you after we receive your cancellation, except for disclosures which were being processed before we received your cancellation.

3. You have several rights regarding PHI about you.

- a. You have the right to request restrictions on uses and disclosures of PHI about you. You have the right to request that we restrict the use and disclosure of PHI about you. We are not required to agree to your requested restrictions. However, even if we agree to your request, in certain situations your restrictions may not be followed. These situations include emergency treatment, disclosures to the Secretary of the Department of Health and Human Services, and uses and disclosures described in subsection 4 of the previous section of this Notice. You may request a restriction by completing and submitting the appropriate request form.
- b. You have the right to request different ways to communicate with you. You have the right to request how and where we contact you about PHI. For example, you may request that we contact you at your work address or phone number or by email. Your request must be in writing. We must accommodate reasonable requests, but, when appropriate, may condition that accommodation on your providing us with information regarding how payment, if any, will be handled and your specification of an alternative address or other method of contact. You may request alternative communications by submitting your written request to the Director of the program serving you.

Clinical Department

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Right to Privacy (continued)

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- c. You have the right to see and copy PHI about you. You have the right to request to see and receive a copy of PHI contained in clinical, billing and other records used to make decisions about you. Your request must be in writing. We may charge you related fees. Instead of providing you with a full copy of the PHI, we may give you a summary or explanation of the PHI about you, if you agree in advance to the form and cost of the summary or explanation. There are certain situations in which we are not required to comply with your request. Under these circumstances, we will respond to you in writing, stating why we will not grant your request and describing any rights you may have to request a review of our denial. You may request to see and receive a copy of PHI by completing and submitting the appropriate request form.
- d. You have the right to request amendment of PHI about you. You have the right to request that we make amendments to clinical, billing and other records used to make decisions about you. Your request must be in writing and must explain your reason(s) for the amendment. We may deny your request if: 1) the information was not created by us (unless you prove the creator of the information is no longer available to amend the record); 2) the information is not part of the records used to make decisions about you; 3) we believe the information is correct and complete; or 4) you would not have the right to see and copy the record as described in paragraph 3 above. We will tell you in writing the reasons for the denial and describe your rights to give us a written statement disagreeing with the denial. If we accept your request to amend the information, we will make reasonable efforts to inform others of the amendment, including persons you name who have received PHI about you and who need the amendment. You may request an amendment of your PHI by completing and submitting the appropriate request form.
- e. You have the right to a listing of disclosures we have made. If you ask our contact person in writing, you have the right to receive a written list of certain of our disclosures of PHI about you. You may ask for disclosures made up to six (6) years before your request (not including disclosures made prior to April 14, 2003). We are required to provide a listing of all disclosures except the following:
- For your treatment
 - For billing and collection of payment for your treatment For our health care operations
 - Made to or requested by you, or that you authorized
 - Occurring as a byproduct of permitted uses and disclosures
 - Made to individuals involved in your care, for directory or notification purposes, or for other purposes described in subsection 8.5 above
 - Allowed by law when the use and/or disclosure relates to certain specialized government functions or relates to correctional institutions and in other law enforcement custodial situations (please see subsection 8.4 above) and
 - As part of a limited set of information which does not contain certain information which would identify you
- The list will include the date of the disclosure, the name (and address, if available) of the person or organization receiving the information, a brief description of the information disclosed, and the purpose of the disclosure. If, under permitted circumstances, PHI about you has been disclosed for certain types of research projects, the list may include different types of information.
- f. You have a right to a copy of this Notice. You have the right to request a paper copy of this Notice at any time. We will provide a copy of this Notice no later than the date you first receive service from us (except for emergency services, and then we will provide the Notice to you as soon as possible).

4. You may file a complaint about our privacy practices.

If you think your privacy rights have been violated by us, or you want to complain to us about our privacy practices, you can contact the person listed below:

Sarah Franco, Executive Director
4200 N. University Drive
Sunrise, FL 33351
954-749-7230

You may also send a written complaint to the United States Secretary of the Department of Health and Human Services.

If you file a complaint, we will not take any action against you or change our treatment of you in any way.

Clinical Department

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Right to Privacy (continued)

5. Effective date of this Notice.

This Notice of Privacy Practices is effective on April 14, 2003.

Notice of Privacy Practices

Our Responsibilities

We are required by law to maintain the privacy of your health information and provide a description of our privacy practices. We will abide by the terms of this notice and notify you if we cannot agree to a requested restriction.

Use and Release of Medical Information

We may use and release you medical information (clinical and billing) for:

- Payment, Treatment, and Healthcare Operations
- Business Associates
- Appointment Reminders
- Health-related Benefits or Services
- As required by law to State/Federal Agencies
- Entities assisting in Disaster Relief

Your Health Information Rights

Although your person served files physical property of JAFCO, you have the Right to:

- Request Information
- Request Amendments
- An Accounting of Disclosures
- Request Privacy Restrictions
- Request Alternate Communication
- File Complaints
- Obtain a Detailed Copy of this Notice

Please refer all requests to our Executive Director.

Access:

You have the right to inspect and copy information that may be used to make decisions about your care. Usually, this includes the information in your Designates Record Set (Person served File), but there are limited circumstances in which we can deny your request. These denials must be provided to you in writing, and you may request a second review in writing.

Amend:

If you feel that the information we have about you is incorrect or incomplete, you may ask us to amend, or add to the information. You have the right to request and amendment for as long as the information is kept by or for the physician.

A Paper Copy of This Notice:

You have the right to detailed paper copy of this notice. You may ask us to give you a copy of this notice at any time. Even if you have agreed to receive this notice electronically, you are still entitled to a paper copy of this notice.

Complaints

If you believe your privacy rights have been violated you may file a complaint with us by contacting the Privacy Officer with the Secretary of the Department of Health and Human Services. All Complaints must be submitted in writing.

You will not be penalized for filing a complaint.

Clinical Department

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Right to Privacy (continued)

Other Uses of Medical Information

Other uses and disclosures of medical information not covered by this notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or release medical information about you, you may withdraw that permission, in writing, at any time.

Changes to This Notice

We reserve the right to change this notice and the revised or changed notice will be effective for information we already have about you as well as any information we receive in the future. The current notice will be posted in the practice and include the effective date. We can provide additional copies of the notice when you check in for future appointments, at your request.

If you have any questions about this notice, would like to request a form or have any complaints, please contact:

Executive Director: Sarah Franco at 954-749-7230

We may deny your request for an amendment and if this occurs, you will be notified of the reason for the denial in writing.

An Accounting of Disclosures:

You have the right to request an accounting of disclosures of medical information about you. This does not include disclosures for treatment, payment, operations, or to you or your authorized representative.

Request Restrictions:

You have the right to request a restriction or limitation on the medical information we use or release about you for treatment, payment or health care operations. You also have the right to request a limit on the medical information we release about you to someone who is involved in your care or the payment for your care, like a family member or friend. We are not required to agree to your request, but will do so if the request is reasonable.

Request Confidential Communications:

You have the right to request that we communicate with you about medical matters in a certain way or at a certain way or at a certain location. We will agree to the request to the extent that it is reasonable for us to do so. We reserve the right to contact you by other means and at other locations if you fail to respond to communications from us.

My signature indicates that I have received and understand this notice.

_____	_____	_____
Person Served	Date	Signature
_____	_____	_____
JAFCO Employee	Date	Signature

Clinical Department

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Right to Privacy (continued)

Person served Right to Amend Records**Policy**

All persons served by JAFCO have the right to request an amendment to records in their Designated Record Set (DRS), which is all of the information in the person served file. The person served will be contacted within 7 calendar days regarding the outcome of their request. An addendum to the person served records may be suggested if an amendment is denied.

Procedure

- Person served will submit a Request to Amend Records form to the appropriate program's Administrative Assistant.
- The request should include specifics about the information to be amended, and the reason for the request.
- The Administrative Assistant will forward the request to the Program Director, who will consult with involved JAFCO employees regarding the person served request for amendment.
- The person served will be contacted by the program staff within 7 calendar days regarding the outcome of the request.

Denial

- Should it be determined that the request for amendment is insufficient or inappropriate, the person served will be notified within 7 calendar days.
- The denial will be maintained, along with the request, in the person served file.
- If appropriate, an addendum to the person served records may be suggested in lieu of an amendment.

Appeal

- The person served has the right to appeal the denial of the requested amendment, and will be provided with the Appeal Form if so requested.
- The Appeal will be reviewed by the Executive Director and the person served will be notified of this decision, including an explanation, within 30 days. A meeting will be scheduled with the Executive Director and appropriate staff members if the person served so chooses.
- The appeal, and the response, will be maintained in the person served file.
- If the person served is dissatisfied with the appeal decision, they have the right to bring their complaint to a higher authority, such as a court of law.

Sanctions for Breaches of the HIPAA Privacy Rule**Policy**

It is the policy that all JAFCO employees will understand and comply with all aspects of the HIPAA Privacy Rule. Any breaches to this rule will result in sanctions for the involved employee(s). JAFCO will make every reasonable effort to mitigate if a breach occurs and is damaging to an individual.

Procedure

- All Directors/Supervisors will educate their employees on the HIPAA Privacy Rule, including all related agency policies.
- Any known or suspected breach of this rule must be reported to the Supervisor and/or Director, who will in turn conduct a formal counseling session with the involved employee(s). The session will be documented, and the employee(s) and Director will sign the documentation.
- The incident will be reported to the Executive Director, who will meet with the Director to determine appropriate sanctions based on the specifics of the breach.
- Sanctions may include, but are not limited to, written warning, suspension and termination, depending upon the nature of the breach, and the employee's intent regarding the breach.
- Employees have the right to request a meeting with the Executive Director to address the breach, as well as to contest the sanction.

Clinical Department

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Right to Privacy (continued)

- Should an agreement not be reached between the employee and the Executive Director, the employee may request to meet with the Vice President and the President of JAFCO.
- If an agreement was not reached, the employee may report the situation to the JAFCO Board of Directors for final determination.

Signature:



Executive Director

04/14/03

Date

Clinical Department

C-23

Person Served Family Involvement with Treatment

Original Date: 07/20/07

Revision Date: NA

Policy Number: C-23

Department of Origin: Clinical Department

Purpose:

It is the intent of JAFCO to define the areas of required treatment for each individual and to provide informative and educational information so that the person served and his or her guardian can adequately participate in the therapeutic process. The information shared with the person's served family is determined by person served permission and/or legal status.

Scope:

This policy applies to all employees of JAFCO.

Responsibility:

It is the responsibility of the Director of Operations and Clinical Services and/or designee to implement this policy. It is the responsibility of the Director of Operations and Clinical Services (or designee) to disseminate this information to each employee under his/her direction.

Policy:

It is the policy of JAFCO to assess and provide recommendations specific to the person served needs and appropriate to the level of care and treatment. In addition, the thoughts, feelings and desired outcomes from the person served/family shall be taken into consideration. Jointly the clinical team and the person served/family will formulate a plan of treatment.

Procedure:

1. Person served and or guardian shall be provided with feedback on treatment appropriate modalities and recommendations.
2. Learning needs are assessed and address cultural and religious beliefs, emotional barriers, desire and motivation to improve behavior, physical and cognitive limitations, and barriers to communication.
3. As appropriate to the person served condition and assessed needs and within the center's scope of services, the person served is educated about and involved in the following:
 - a. Plan of care, treatment, and services
 - b. Basic health practices and safety
 - c. Safe and effective use of medications
 - d. Nutritional interventions, modified diets (residential programs)
 - e. Coping strategies and techniques to help them reach their optimum level of functioning.

Signature:



07/20/07

Executive Director

Date

Clinical Department

C-24

Aging and Disability Resource Center Grievance

Original Date: 09/01/06

Revision Date: NA

Policy Number: C-24

Department of Origin: Clinical Department

Minimum guidelines for provider grievance procedures applicable to all adverse actions deemed terminations, suspensions, or reductions in service

Medicaid Waiver person served have the right to request a fair hearing from the Department of Children and Families (DCAF) Office of Appeal Hearings in addition to or as an alternative to these procedures.

Notice to the provider of the adverse action to be taken and explanation of the grievance procedures for reviewing that decision

1. The Provider must be informed by the decision maker of the action, in writing, no less than 10 calendar* days prior to the date the adverse action will be taken. (Prior notice is not applicable where the health or safety of the individual is endangered if action is not taken immediately; however, notice must be made as soon thereafter as practicable.)
2. Services cannot be reduced or terminated, nor any adverse action taken during the 10 day period.
3. The Notice must contain:
 - a. a statement of what action is intended to be taken;
 - b. the reasons for the intended action;
 - c. an explanation of:
 - i. the individual's right to a grievance review if requested in writing and delivered within 10 calendar* days of the Notice postmark (assistance in writing, submitting and delivering the request must be offered and available to the individual);
 - ii. in Medicaid Waiver actions, the individual's right to request a fair hearing from DCAF;
 - iii. the individual's right, after a grievance review, for further appeal;
 - iv. the right to seek redress through the courts if applicable;
 - d. a statement that current benefits will continue if a grievance review is requested, and will continue until a final decision is made regarding the adverse action; and a statement that the individual may represent himself/herself or use legal counsel, a relative, a friend, or other qualified representative in the requested review proceedings.
4. All records of the above activities must be preserved in the person served file.

Grievance review procedure upon timely receipt of a written request for review

1. Within 7 calendar* days of the receipt of a request for review, the provider must acknowledge receipt of the request by a written statement delivered to the requester. This statement must also provide notice of:
 - a. the time and place scheduled for the review;
 - b. the designation of one or more impartial reviewers who have not been involved in the decision at issue; the opportunity to examine, at a reasonable time before the review, the individual's own case record, and to a copy of such case record at no cost to the individual;
 - c. the opportunity to informally present argument, evidence, or witnesses without undue interference at a reasonable time before or during the review;
 - d. a contact person for any accommodations required under the Americans with Disabilities Act; and assistance, if needed, in order to attend the review; and the stopping of the intended action until all appeals are exhausted.
2. All grievance reviews must be conducted at a reasonable time, date and place by one or more impartial reviewers who have not been directly involved in the initial determination of the action in question.
3. The reviewer(s) must provide written notification to the requester, within 7 calendar* days after the grievance review, stating:

Clinical Department

C-24

Aging and Disability Resource Center Grievance (continued)

- a. the decision, the reasons therefore in detail;
- b. the effect the decision has on current benefits, if favorable, or the circumstances regarding continuation of current benefits until all appeals are exhausted;
- c. the individual's right to appeal an adverse decision to the Aging and Disability Resource Center by written request within 7 calendar* days, except in decisions involving the professional judgment of a legal assistance provider;
- d. the availability of assistance in writing, submitting and delivering the appeal to the appropriate agency;
- e. the opportunity to be represented by himself/herself or by legal counsel, a relative, a friend or other qualified representative;
- f. for legal assistance service appeals, the individual's right to file a grievance with the Florida Bar regarding complaints related to the actual legal representation provided.

Procedure for appeals of a grievance review decision upon timely receipt of a written appeal to the area agency on aging

- 1. Within 7 calendar* days of the receipt of a notice of appeal of a grievance review decision, the AAA must acknowledge receipt of the notice of appeal by a written statement delivered to the appellant. This statement must also provide notice of:
 - a. the time and place scheduled for the appeal;
 - b. the designation of one or more impartial AAA officials who have not been involved in the decision at issue;
 - c. the opportunity to examine at a reasonable time before the appeal the individual's own case record to date, and to a copy of such case record at no cost to the individual;
 - d. the opportunity to informally present argument, evidence, or witnesses without undue interference during the appeal;
 - e. assistance, if needed, in order to attend the appeal;
 - f. and the stopping of the intended action until all appeals are exhausted.
- 2. All appeals of grievance reviews must be conducted at a reasonable time, date and place by one or more impartial AAA officials who have not been directly involved in the initial determination of the action in question.
- 3. The designated AAA official(s) must provide written notification to the requester within 7 calendar* days after considering the grievance review appeal, stating:
 - a. the decision, and the reasons therefore in detail;
 - b. the effect the decision has on current benefits, if favorable, or the circumstances regarding continuation of current benefits until all appeals are exhausted;
 - c. the individual's right to appeal, if applicable.
- 4. Except for Medicaid Waiver actions, the decision of the AAA shall be the final decision; and the availability of assistance in requesting a fair hearing, including a notice regarding accommodations as required by the ADA.
- 5. All records of the above activities must be preserved and remain confidential. A copy of the final decision must be placed in the person served file.

* In computing any period of time prescribed or allowed by these guidelines, the last day of the period so computed shall be included unless it is a Saturday, Sunday, or legal holiday, in which event the period shall run until the end of the next day which is neither a Saturday, Sunday, or legal holiday.

Signature:



Executive Director

09/01/06

Date

Clinical Department

C-25.1 Admission

Original Date: 07/20/07

Revision Date: 04/25/14

Policy Number: C-25.1

Department of Origin: Clinical Department

Policy

It is the intent of JAFCO to provide the best quality treatment to our person served. In the attempt to establish effective goals and objectives, the clinical team shall take into consideration the person served and guardians' desired outcomes. The treatment team will assess all areas of need and shall begin the process of discharge planning upon admission. Upon discharge, there shall be a continuum of the care plan to ensure that the person served continuing care needs are followed up.

Scope:

This policy applies to all members of the clinical team.

Responsibility:

It is the responsibility of the Director of Operations and Clinical Services and/or his designee to implement this policy. It shall be the responsibility of the Director of Operations and Clinical Services (or designee) to disseminate this information to staff under their direction.

Purpose:

JAFCO shall ensure continuity of care for all persons served. The function of this policy is to indemnify that the person served is safely and efficiently discharged to the appropriate environment and/or level of care.

Procedure:

By establishing clinical criteria for each level of treatment provided, JAFCO can ensure a uniform and consistent approach to the admission and discharge process for all potential persons served.

General Criteria for Levels of Care: Unless otherwise specified, the following criteria apply to all levels of care:

1. Clinical Admission Criteria: (One of the following):
 - Symptoms sufficient for a DSM-IV or ICD-9 psychiatric diagnosis.
 - Presence of moderate to severe psychiatric symptoms not yet diagnostically formulated but sufficient to justify psychiatric treatment.
 - Significant impairment or deterioration in functioning likely due to a psychiatric condition.
 - Likelihood that the individual's impairment will respond to the indicated level of care.
2. Inclusion Criteria:
 - The individual is willing to be treated and consents to treatment or, if treatment is required but the person served is not willing to consent or able to consent, appropriate legal steps have been taken to enable treatment.
 - The individual's special needs can be met.
 - The individual does not require treatment at a higher level of care.
 - Treatment at this level of care is available, appropriate and indicated for the clinical condition.
 - Available transportation to treatment.
3. Continued Stay Criteria:
 - Continues to meet Clinical Admission Criteria and Inclusion Criteria.
 - Does not meet Exclusion Criteria.
4. Emergency Shelter Admission Criteria:
 - Children ages 0 to 12, male or female, referred either by DCF or the lead agency in either Broward, Dade or Palm Beach county or privately by the parents themselves due to abuse or neglect or risk thereof.

Clinical Department

C-25.1 Admission (continued)

5. Group home Admission Criteria:

- Admission is by referral only. The referral process is initiated by telephone with the JAFCO Director of Operations and Clinical Services (or designee). Following a review of the referral packet a clinical interview with the child will be scheduled.
- All placements are made based on the needs, strengths, and safety of each child referred and already in placement, as well as the skills of the staff team designated to work with each child.
- Children are ages 6 through 18, referred either by the DCF, ChildNet or privately by their family members or professionals in the community due to history of family problems necessitating the removal of the child from the family.
- Children who cannot be placed successfully in a traditional or supportive foster home setting (as per therapeutic recommendations) or who may have failed to be successful in previous foster home placement.
- Children who would benefit from the environment provided by the JAFCO Village.

6. Children's Ability Center Criteria:

- JAFCO seeks to serve children and young adults from birth through their 22nd birthday who have a chronic disability. Developmental disabilities include disabilities attributable to intellectual disabilities, autism, cerebral palsy, epilepsy, spina bifida and neurological impairments.
- They may also include special medical conditions related to the disabilities where these criteria are met.
- JAFCO seeks to serve high risk children who require services beyond that required by children generally. These would include those with developmental delays in cognition, language, or physical development.
- JAFCO will include those with a physical or genetic anomaly associated with a developmental disability.
- All admissions are made based on the needs, strengths, and safety of each child referred, as well as the skills of the staff team designated to work with each child.
- All children served will meet the criteria for a diagnosis that is considered a developmental disability.
- JAFCO will serve all persons that meet the above stated criteria throughout the tri-county area (Broward, Dade, Palm Beach) regardless of age, religion or color.

Signature:



Executive Director

02/19/10

Date

Clinical Department

C-25.2

Discharge Plan

Original Date: 07/20/07

Revision Date: 02/19/11, 04/25/14

Policy Number: C-25.2

Department of Origin: Clinical Department

Policy:

It is the intent of JAFCO to provide the best quality treatment to our persons served. In the attempt to establish effective goals and objectives, the clinical team shall take into consideration the person served and guardians' desired outcomes. The treatment team will assess all areas of need and shall begin the process of discharge planning upon admission. Upon discharge, there shall be a continuum of care plan to ensure that the person's served continuing care needs are followed up.

Scope:

This policy applies to all members of the clinical team.

Responsibility:

It is the responsibility of the Director of Operations and Clinical Services and/or his designee to implement this policy. It shall be the responsibility of the Director of Operations and Clinical Services (or designee) to disseminate this information to staff under their direction.

Purpose:

JAFCO shall insure continuity of care for all persons served. The function of this policy is to indemnify that the person served is safely and efficiently discharged to the appropriate environment and/or level of care.

Procedure:

By establishing clinical criteria for each level of treatment provided, JAFCO can ensure a uniform and consistent approach to the admission and discharge process for all potential person served.

Outpatient Criteria for Levels of Care: Unless otherwise specified, the following criteria apply to all levels of care:

1. Discharge Criteria

- Interim diminishing of symptoms and return to higher level of functioning consistent with transition to a lower level of care
- Goals of the treatment plan for the indicated level of care have been met totally and/or the person served has attained sufficient coping skills in order to maintain symptoms at baseline
- Proven lack of efficacy of treatment at the indicated level of care and patient can be safely maintained without this level of care
- For TBOSS only, the GAF score is 60 or higher
- Clinical Admission Criteria, Inclusion Criteria and/or Continued Stay Criteria are no longer met. – For example:
 1. Person served withdraws consent to treatment and cannot be legally detained
 2. Exclusion Criteria develop.
 3. Person served develops an acute medical condition-requiring medical long term hospitalization
 4. Person served meets criteria for a higher level of care

2. Emergency Shelter Criteria:

- Emergency shelter placement is usually short-term interim, within days the child is discharged. The discharge goals are; either reunified with the family, placement in foster care or placement in a group home setting.

3. Group Home Criteria:

1. Group home placement is usually long term in most cases the goal for the child is reunification with his or her family. When reunification with the family is not an option then the child might be placed with appropriate foster parents or adoptive parents. The child may also require a more restrictive setting based on treatment needs

Clinical Department

C-25.2

Discharge Plan (continued)

4. Ability Center Criteria:

- The person served turns 22 years of age
- The family moves out of area
- The parent/legal guardian is no longer satisfied with our services and we cannot overcome grievances.
- There person served is placed residentially and parent is not seeking any support services
- The person served needs exceed our ability to provide care/services (example: child requiring ventilator or respirator)

5. Continuum of Care/Referral Plan

- Each person served will receive a discharge summary/plan indicating after care linkages and referral services to ensure continuum of care.
- JAFCO shall have the person served/guardian sign consent for release of information to referral source.
- JAFCO will follow-up within 72 hours of discharge.
- Every attempt shall be made to make personal contact with the person served and/or guardian.
- The supervisor or designee shall initiate contact with the abovementioned persons via telephone, home visit, electronically and/or correspondence.

Signature:



Executive Director

02/19/11

Date

JAFCO Policy and Procedure Manual
Clinical Department
C-25.3 Exclusionary Criteria

Original Date: 07/20/07
Revision Date: 02/19/11
Policy Number: C-25.3
Department of Origin: Clinical Department

Policy:

It is the intent of JAFCO to provide the best behavioral health treatment to our persons served. In the attempt to establish effective goals and objective, the clinical team shall take into consideration the persons served and guardians' desired outcomes. The treatment team will assess all areas of need and shall begin the process of discharge planning upon admission. Upon discharge, there shall be a continuum of care plan to ensure that the person served continuing care needs are followed up. In the event that the person served does not meet criteria for admission or at any point in treatment fails to meet criterion the following exclusionary criteria shall be followed.

Scope:

This policy applies to all members of the clinical team.

Responsibility:

It is the responsibility of the Director of Operations and Clinical Services and/or his designee to implement this policy. It shall be the responsibility of the Director of Operations and Clinical Services (or designee) to disseminate this information to staff under their direction.

Purpose:

JAFCO shall ensure continuity of care for all persons served. The function of this policy is to indemnify that the person served is safely and efficiently discharged to the appropriate environment and/or level of care.

Procedure:

By establishing clinical criteria for each level of treatment provided, JAFCO can ensure a uniform and consistent approach to the admission, inclusion, exclusion and discharge process for all potential persons served.

General Criteria for Levels of Care: Unless otherwise specified, the following criteria apply to all levels of care:

1. Exclusion Criteria:
 - The individual cannot be safely or appropriately treated at the indicated level of care.
 - The individual's or treatment guardian's willing participation is necessary but they are unwilling to participate.
 - Legal restrictions prohibit treatment at the indicated level of care.
 - Presence of an acute medical condition whose treatment takes precedence (and concurrent psychiatric treatment is not possible).
 - From all levels of care, this would include acute intoxication or substance dependence requiring detoxification.
 - Treatment at the indicated level of care would endanger the treating professionals.
2. Exclusionary Criteria for the Residential Programs:
 - Children who are actively psychotic, suicidal or substance addicted.
 - Children with behaviors that could place themselves or other children in danger.

Clinical Department

C-25.3

Exclusionary Criteria (continued)

3. Exclusionary Criteria Specific to Group Home residents:
- Specific to Group Home residents.
 - Children whose primary diagnosis I mental retardation or autism.
 - Children whose behavior could place themselves or other children and staff in danger.
 - Children that need 24 hour one-on-one supervision.
 - Children whose needs could not be met with placement at the JAFCO Village.

Signature:



Executive Director

02/19/11

Date

Clinical Department

C-26

Incident Report/Sentinel Event

Original Date: 09/01/06
Revision Date: 08/08/14
Policy Number: C-26
Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to identify and report critical incident information to ensure child safety and to prevent future risk

Procedure:

1. This policy applies to all incident reporting for children and families receiving services from JAFCO.
2. This reporting procedure does not replace the abuse, neglect and exploitation reporting system. All allegations of abuse, neglect or exploitation must always be reported immediately to the Florida Abuse Hotline.
3. This operating procedure does not replace the investigation and review requirements provided for in DCF's Child Death Review Procedures.
4. It is the responsibility of all JAFCO staff to promptly report all incidents in accordance with the requirements of this procedure.

Use of the Incident Reporting Form

1. The Child Net (or local CBC) Incident Report forms will be used by JAFCO staff in reporting critical incidents. JAFCO will use their own internal incident reporting forms for non-critical incidents, such as minor injuries.
2. The Incident Report Form may be used internally to report an incident or event that may pose a threat to the child, document the actions taken, and formally notify the Child Net/CBC social worker and supervisor. As an internal reporting tool, there may be occasions when the situations reported do not necessarily place a child at risk but are recorded using this instrument nonetheless. For example, if a child runs away from his/her residence but returns without incident within one hour, the report will be completed for the person served but the event is not of the seriousness to require report to the department.
3. The Incident Report Form is used internally and externally to record an incident or event that does place the child or others at risk, to document the actions taken and the follow-up needed, and to formally notify the case manager's supervisor, case manager, Child Net/CBC, and DCF.

Definitions of Reportable Incidents:

For purposes of this procedure, the following are incidents or events that must be reported immediately to the JAFCO Director of Operations and Clinical Services (or designee) and Child Net/CBC/ DCF.

1. **Abuse/Neglect/Abandonment/Threat of Harm:** Allegations of abuse/ neglect/abandonment/threat of harm that justifies and requires a report to the Florida Abuse Hotline.
2. **Altercation:** A physical confrontation occurring between a child or parent and employee or two or more children when a person served is under the protective supervision of the department and which results in one or more person served or employees receiving medical treatment by a licensed health care professional.
3. **Automobile Accident:** Accident occurring in a private or JAFCO vehicle during the course of employment. (If a child/ is not involved, do NOT notify the department.)
4. **Baker Act:** Emergency hospitalization of any person served for whom we have case management responsibility.
5. **Person Served Death:** A child whose life terminates due to or allegedly due to an accident, act of abuse, neglect or other incident occurring while in the presence of a JAFCO employee.
6. **Criminal Activity:** Employees or person served. With regard to employees, criminal activity is reportable when it occurs while on JAFCO or subcontracted agency property while the employee is on the business of JAFCO, which results in an arrest.
7. **Disease Epidemic:** Any disease that fits the definition of "outbreak" likely to result in a high level of public interest.
8. **Elopement (runaway):** The unauthorized absence beyond one hour of a child who is under the protective supervision of the department.
 - When a child runs from a foster home, the foster parent must notify their JAFCO Social Worker and Child Advocate/Case Worker immediately. The child's Child Advocate is responsible for filing an incident report with Child Net/CBC and DCF.

Clinical Department

C-26

Incident Report/Sentinel Event (continued)

- If the person served runs away while under the protective supervision of the department, and is living at home with biological parents, the biological parent must notify police and the child's case manager immediately. The child's department case worker is responsible for filing an incident report with DCF.
 - If the child runs and is living in a provider facility (group home, residential treatment center, etc) the director of that facility is responsible for reporting the incident to the department and notifying placement.
 - When the person served returns from runaway status, the same responsible entities must notify Child Net/CBC and Placement.
9. Escape: The unauthorized absence as defined by statute, JAFCO policies and procedures of a person served committed to, or securely detained in, a Department of Children and Families mental health or developmental services forensic facility covered by Chapters 393, 394 or 916, F.S.
 10. Foster Home/Facility Complaint: A foster parent referral or licensing complaint that require an assessment and investigation by the appropriate department agency, although the incident may not require a report to the Florida Abuse Hotline.
 11. Other Incident: An unusual occurrence or circumstance initiated by something other than natural causes or out of the ordinary such as a tornado, kidnapping, riot or hostage situation, which jeopardizes the health, safety and welfare of person served who are under the protective supervision of the department.
 12. Law Violation: Any arrest of a person served while under the protective supervision of the department, or arrest of an employee of JAFCO.
 13. Medical Error: Medication error, including omission, incorrect medication dosage administration of any person served while under the protective supervision of the department.
 14. Serious Person Served Injury or Illness: A medical condition of a person served requiring medical treatment by a licensed health care professional sustained or allegedly sustained due to an accident, act of abuse, neglect or other incident occurring while in the presence of a JAFCO employee, or in a JAFCO facility. If the child is hospitalized, notify placement.
 15. Sexual Battery or Sexual Acting Out: An allegation of sexual battery by a person served on a person served, employee on a person served, or person served on an employee.
 16. Suicide Attempt: An act which clearly reflects the physical attempt by a person served to cause his or her own death while under the protective supervision of the department, which results in bodily injury requiring medical treatment by a licensed health care professional. This also pertains to suicidal ideation when resulting in an admission to a hospital or crisis stabilization unit.
 17. Theft/Vandalism/Damage: The intent is to report damage that is significant and non-accidental.

Definitions of Reportable Incidents to JAFCO Supervisors

Incidents that must be reported to the program supervisor include but are not limited to the following:

1. missing child (any child who is not in the immediate eyesight of a staff member), medication error, injury, illness, aggressive incidents of any kind (between two children, child on staff, staff on child, staff on staff), use of nonviolent interventions, presence of a weapon on campus, any incidents of sexual abuse or physical abuse or neglect by the staff (see policy on Abuse), and any sexualized behaviors of the children.
2. JAFCO is committed to ensuring the safety of all persons serves as well as that of the agency's employees. All incidents at JAFCO must be documented and reported to the proper entity, whether internal or external reporting must happen as soon as possible and no later than the end of the shift in which the incident occurred.

Internal Chain of Reporting

Procedure:

1. The employee that witnesses the incident or was directly involved in the incident or the direct supervisor is responsible for the written documentation of the incident in the form of an Incident Report as soon as the situation is stabilized and all parties are safe and cared for.
2. Once the report is completed the direct supervisor will review the incident with the employed and ensure that the report is clear and accurately reflects the incident that occurred.
3. The report will be completed within twenty-four hours of the occurrence of the incident and the original will be reviewed by the Director of Operations and Clinical Services. The incident will be shared with the appropriate legal authorities/guardians by phone and also in writing as required. (See policy on incident report external reporting).

Clinical Department**C-26****Incident Report/Sentinel Event (continued)**

4. A copy of the report will be kept in the file of the person served and also in the Incident Report Binder. It will be added to the monthly incident log.
5. After being reviewed and signed by the writer of the report and by the Director of Operations and Clinical Services, the Executive Director will review and sign the report within one week of the incident.
6. The program supervisor will conduct a debriefing with all staff on the person served's treatment team. Previous reports related to the same person served, staff member, shift, physical location or activity will be reviewed to identify any trends and interventions that may be needed.
7. The program supervisor will ensure that all staff receives ongoing training on incident management and reporting.

External reports:

1. All critical incidents will be reported to the external licensing agency within 2 hours of the incident.
2. When a child is involved in an incident in a foster home, the foster parent must notify their state social worker and their JAFCO social worker immediately. The JAFCO social worker is responsible for filing an incident report with the appropriate CBC agency and notifying the placement unit if the incident is elopement, Baker Act, or overnight hospitalization.
3. If the person served is involved in an incident while under the protective supervision of the department, and is living at home with biological parents, the biological parent must notify police and the child's case manager immediately. The child's social worker is responsible for filing an incident report with DCF, the sheriff's office or the local CBC.
4. If the child elopes or is involved in any other type of incident while under the protective supervision of the department, and is living in a provider facility (group home, residential treatment center, etc.), the director of that facility is responsible for filing an incident report with Child Net or local CBC and for notifying the child's social worker at the local CBC agency (and the placement unit if the incident is elopement, Baker Act, or overnight hospitalization).
5. When the person served returns from runaway status, the same responsible entities must notify the local CBC agency and placement.

Reporting Procedure for Critical Incidents

1. Certain incidents are labeled "priority incidents" and must be reported verbally to the local CBC agency within two hours and the JAFCO Clinical or Executive Director immediately upon knowledge of the incident. These are reported to Sarah Franco, Executive Director of JAFCO (954-749-7230 x109, cell phone 954-562-0837). All other incidents that do not fall into a "priority" category must be reported to the department and by way of the written reporting form within 24 hours of the incident or knowledge of the incident.
2. Those incidents labeled "PRIORITY INCIDENTS" requiring verbal report are the following five categories. (See definitions above):
 - a. Person served death
 - b. Any event that might warrant media attention
 - c. Sexual battery
 - d. Suicide attempt
 - e. Other incident as described above ("An unusual occurrence or circumstance initiated by something other than natural causes or out of the ordinary such as a tornado, kidnapping, riot or hostage situation, which jeopardizes the health, safety and welfare of person served")
3. All verbal reports are followed by hard copy written reports sent within 24 hours of the incident. The DCF, District 10 Safety Concern or District 9 Incident Reporting Form must be completed. For Palm Beach County, the report must be emailed to the IncidentReportsPalmBeach@childnet.us within 24 hours of the incident. For Broward County, Safety Concerns must be emailed to Safety@Childnet.us.
4. Report reviewer (identified on the form) will ensure that the report form is completely filled out before it is emailed/faxed. At minimum the report will contain:
 - a. Section I
 - Incident category
 - Date and time of incident
 - Location of incident and Provider
 - Victim/person involved
 - Reviewed By
 - Incident reporter and that person's telephone number

Clinical Department

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Incident Report/Sentinel Event (continued)

- Brief summary of the incident
 - b. Section II
 - Fill out in full
 - c. Section III
 - Provide a detailed description of the incident.
 - d. Section IV
 - Corrective Action
 - Follow up
 - e. Section V
 - "Individuals Automatically Notified" must ALWAYS contain the child's Child Advocate, then whoever else is notified by individual provider program requirements.
5. Any incident report that does not contain the required information will be returned for completion
 6. The Director of Operations and Clinical Services will forward the incident report to the following:
 - a. The Placement Coordinator
 - b. The Executive Director
 - c. Children's Mental Health Coordinator
 7. The local Human Rights Advocacy committee will be informed of reportable events.
 - a. Follow-Up Review of Critical Incidents to Prevent Future Occurrence
 - b. The JAFCO Quality Improvement Director is responsible for ensuring a system of review of reportable events to determine what actions need to be taken, if any, to prevent future occurrences and a follow-up process to ensure such needed actions are successfully implemented.
 - c. Any incident that is likely to involve media or public attention or which resulted in serious injury to a child will be immediately reviewed by the JAFCO CQI team to determine the basic answers to who, what, when, where, and how the incident occurred. At a minimum, JAFCO staff will attempt to determine whether:
 - Staff were in compliance with program policies and procedures;
 - Appropriate handling of the situation and action taken to protect the child;
 - Steps taken to maintain control of the situation and to limit risk to the child(ren) and liability to JAFCO, Child Net/CFC/DCF.
 - d. JAFCO will track and analyze all incident reports. A copy of the original report will be maintained in the child's case record. On a monthly basis, JAFCO will report to the CQI team the number of reports filed, the nature of the reports, the actions taken as a result of the report, and any underlying problems that the reports may indicate need attention.
 - e. Aggregate summaries will be prepared and submitted at each quarterly meeting of the CQI Committee.

Release of Information

Any request by the public or media for a copy of the incident report will be directed to the Executive Director of JAFCO.

Signature:



Executive Director

08/08/14

Date

JAFCO Policy and Procedure Manual
Clinical Department
C-27 Independent Living

Original Date: 09/01/06
Revision Date: 05/03/11
Policy Number: C-27
Department of Origin: Clinical Department

Program Overview:

Children residing in the JAFCO Group Home Program ages 13 to 21 will participate in the Independent Living Program. The goal of this program is to assist person served with the development of important skills to prepare them for the transition from group care to independent living. The child will develop an individualized plan with his or her therapist to address their specific needs.

The Independent Living Program (ILP) is designed to provide the children at JAFCO with the information, advisement and support that will help them make the transition from group home care to life on their own. Youth 13 years of age and older will participate in the ILP, regardless of their goal- be it furthering their education or moving into the workforce at 18.

The staff at JAFCO is dedicated to provide support to the child during the process of becoming self-sufficient in the community.

In addition to life skills classes, therapeutic sessions and seminar trainings the person served will practice the skills with Life Coach in order to master them prior to living independently.

Topics of learning include but are not limited to the following:

1. Anger management/conflict resolution
2. Self-esteem
3. Hygiene and self-care
4. Money management/budgeting
5. Substance abuse prevention, gun safety and violence prevention
6. Vocational development/employment training/interviewing skills
7. Communication skills/ interpersonal skills/ goal setting
8. Decision making/problem solving/relationships
9. Health and housekeeping
10. Apartment living/community resources
11. Parenting skill

These topics are discussed in both individual and group sessions. The children shall have the opportunity to role play life situations such as, going for a job interview, effective communication with doctors, bank officials and other authority figures. Children shall learn the importance of budgeting and money management. They shall practice putting together resumes and filling out applications. They shall learn the importance of a good personal hygiene regimen, basic first aid, the concept of routine medical care and shall have awareness of safe sex practices. They shall learn healthy coping skills in order to deal with peer pressure, violent confrontations and other conflicts that may arise. They shall gain a positive and healthy self-image enabling them to express feelings, opinions and develop and maintain appropriate interpersonal relationships.

The JAFCO Life Coach, along with the clinicians, will work with each teen on a weekly or biweekly basis depending on their age and needs, integrating the three sections of the program as described below.

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Independent Living (continued)

The three sections are as follows:

1. Skills classes: Skills are taught in small groups through lessons that are designed to help teens learn basic life skills.
2. Individual programming: Tailored to meet the specific needs of each teen, the individual programming will consist of educational planning, social skills, job skill development, career and vocational assessments, career exploration and post-secondary information and preparation.
3. Seminars and Community involvement: Person served shall participate in First Aid & CPR classes, alcohol & substance abuse seminars, health education classes, parenting skill classes, jobs and internships and others areas of interest and need. Most of the time the seminars are provided on campus, however; JAFCO shall initiate contact with individuals, agencies and groups in the communities in order to refer our person served. Additionally, whenever possible we match the person served with a mentor.

The Life Coach shall monitor the ILP actives and the child's attendance weekly. A formal review of the plan shall be conducted at a quarterly minimum. The plans shall be reviewed by the treating team, which shall include the child's participation. The intent of the review process shall be to determine the child's progress or lack of. Adjustments to the plan shall be made accordingly.

The objective of the Independent Life Activity program is to assist and teach children key areas of life so that they shall become productive and independent adults in today's demanding society.

Signature:



Executive Director

05/03/11

Date

Clinical Department

C-28

Medication Training and Education

Original Date: 2/14/08

Revision Date: 04/17/14

Policy Number: C-28

Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to ensure that appropriate education and ongoing training is provided to the persons served, family members, and staff regarding the practice of prescribing and dispensing medications. In addition to, the conditions in which medication use is indicated and the impact the medication may have on an individual's disability and/or quality of life.

Procedures:

1. Medical staff will meet with all persons served and family members, when appropriate, prior to the initiation of any prescribed medications, to provide education regarding the medications that are chosen for use.
2. Through the use of informed consent, medical staff will provide the persons served and their family members with education in the following areas:
 - a. Biological principles associated with the medications.
 - b. The risks and side effects of each medication.
 - c. The intended benefits.
 - d. Contraindications associated with the medications.
 - e. Possible adverse interactions between multiple medications and food.
 - f. Risks associated with pregnancy.
 - g. The importance of taking the medications as they are prescribed.
 - h. Laboratory monitoring, if appropriate.
 - i. The rationale for the medications.
 - j. Alternatives to the use of medications.
 - k. Alternative medications.
 - l. Signs of relapse and/or non-adherence to medication prescriptions.
 - m. Potential drug reactions when combining prescription and non-prescription medications.
 - n. Instruction on self-administration, when applicable.
 - o. Side effects.
 - p. Early signs of relapse related to medication efficacy.
 - q. Instructions on self-administration, when applicable.
 - r. Wellness management and recovery planning.
 - s. The availability of financial support and resources to assist the person served with handling the cost associated with medication.
3. Persons served and their family members will receive ongoing education concerning their medication at a minimum of every 90 days during the Quarterly Medication Review process. As per the Medication Documentation Policy and Procedures, a Quarterly Medication Review will be completed every 90 days and will include the following information:
 - a. The person's name and ID/social security number.
 - b. Documentation of the need for continued use of medication.
 - c. Current medication prescribed.
 - d. Documentation of any unusual side effects and management strategies for control of side effects.
 - e. Documentation of any contraindications associated with the medication.
 - f. Documentation that all unusual side effects and contraindications have been discussed with the person served.
 - g. Observations related to continued medication use and the observed behavior of the person served.
 - h. Signature of physician, credentials, date, and printed name.
4. The quarterly review process will include a meeting with the person served and family members, if appropriate, to discuss all aspects of the medication regimen and continue the process of ongoing education regarding the prescribed medications.
5. Persons served shall be encouraged to seek information and education regarding their medication regimen or any additional aspects of medication treatment at any time in their participation in services.

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Medication Training and Education (continued)

6. Staff members who are directly involved the administration of medications and staff members who are involved in the direct service provision of persons using medications as part of their treatment, will receive ongoing education and training in pharmacology. The training will include all aspects of the use of medications, risks, benefits, side effects, contraindications, adverse interactions, risks, rationale for using medications, alternatives to medications, alternative medications, ways to recognize non-adherence to medication, potential drug reactions, and other relevant aspects of medications use. Education and training will be provided in the following formats:
 - a. Regular, required in-service presentations by medical staff that possess expertise in these areas as part of their licensure and certifications.
 - b. Regularly scheduled staff meetings conducted with the Director of Operations and Clinical Services (or designee), supervisor, therapist and staff psychiatrist.
 - c. Reference materials are readily available to all providers, such as the Physician's Desk Reference, and educational materials directly related to the use of medications in a behavioral health setting. Reference material information will include information on generic and brand name drugs, strength and dosage, and pharmacological data, including contraindications and side effects.
7. Personnel files will reflect the ongoing training and education in the area of Pharmacology, and individual performance evaluations will contain specific goals and objectives in this area, if appropriate.

Signature:



Executive Director

04/17/2014

Date

JAFCO Policy and Procedure Manual
Clinical Department
C-29 Medication Inventory

Original Date: 04/09/08
Revision Date: N/A
Policy Number: C-29
Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to maintain the security of all medications through an ongoing inventory of all prescription medication to verify that it is maintained appropriately and free from loss and/or misuse.

Procedures:

Non-Controlled Medication:

1. Date of All prescription medications are to be counted to verify quantity when services begin, when prescribed, or when new medications enter the facility.
2. The non-controlled medication will be documented in the Medication Inventory Log, after the initial count, at each location medication is stored. The following information will be documented in the log:
 - a. count
 - b. Individual's name.
 - c. Name of medication, quantity, and strength.
 - d. Prescription number.
 - e. Staff signature/initials.

Controlled Medications:

1. All controlled medications are to be counted at each shift change and documented in the Controlled Substance Inventory Log. The count will be completed when the medication keys are exchanged by the staff members who are changing shifts. Both staff members will conduct the count.
2. The Controlled Substance Inventory Log will contain the following information:
 - a. Date and time of count.
 - b. Individual's name.
 - c. Quantity of medication at the beginning of shift.
 - d. Amount dispensed.
 - e. Quantity of medication at the end of the shift
 - f. Staff signatures/initials of both staff members.
3. Any discrepancy in the controlled substance count will be reported immediately to the on-call supervisor. The supervisor, with the input from the staff members, will complete an incident report, as per the incident report policy and procedures, and will initiate an ongoing investigation to complement the incident reporting procedures.
4. The controlled medication procedures and inventory log will be randomly audited for accuracy and correct documentation by the program supervisor or designated staff Any discrepancies will warrant initiation of a report to the Director of Operations and Clinical Services (or designee) in order to initiate a quality improvement investigation.

Clinical Department

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Medication Inventory (continued)

Sample Medication:

1. Sample medication is medication given to a physician for person served use by a licensed pharmaceutical company. It will be used only in cases when there are no alternative sources of medication available, and its use will be time-limited.
2. Sample medication will be prepared, pre-packed, sealed, and labeled prior to distribution.
3. Sample medication that is stored at the facility will be counted weekly and recorded in the Sample Medication Log.
4. When sample medication is used, the following will be recorded in the sample medication log:
 - a. Date of use.
 - b. Name of individual receiving medication.
 - c. Quantity used and the amount remaining in stock.
5. Sample medication will only be used under the order and supervision of a physician.

Signature:



Executive Director

04/09/08

Date

JAFCO Policy and Procedure Manual
Clinical Department
C-30 Medication Storage

Original Date: 04/28/08
Revision Date: N/A
Policy Number: C-30
Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to store all medications in a safe and secure manner.

Procedures:

1. All medication is to be stored in secure, designated areas under a double lock. Medications will be stored in a locked box at all times when not in use. The cabinets and/or drawers will not contain items other than medication.
2. All prescription medications are to be stored in their original containers and have a legible label. All medications will be maintained in their original containers.
3. An individual's prescription and non-prescription medications, while maintained in their original containers, will be maintained in plastic zip-lock bags with the individual's name clearly marked on the bag. This will assist in organization of the medication storage area, and will also help with minimizing loss or misplacement of medications.
4. Over-the-counter medications are to be stored in the designated medication area. All over-the-counter medication is to be labeled with the individual's name and date of purchase.
5. Medications requiring special containers for stability are to be dispersed and stored in accordance with specifications.
6. All medications requiring refrigeration will be stored in a refrigerator in a secure area that is clearly labeled as "Medications Only." No other items, such as food or drink, will be allowed in the refrigerator. Refrigerated medications will be stored at 35-48 degrees Fahrenheit. Medications that do not require refrigeration will be stored at 59-86 degrees Fahrenheit.
7. Medications and pharmacy products will not be stored with food supplies, lab samples, or other non-pharmaceutical products.
8. Prescription pads used by physicians to order medications, medication supplies, and medication for incineration, are to be stored in safe and secure areas under double lock.
9. No employees may store personal medication at any facility and all medication storage areas will be maintained in a clean and orderly manner.
10. A designated staff member will retain the keys to the medication storage areas at all times. If at any time the designated staff member leaves the facility during a scheduled work shift, the keys to the medication storage area will be left with another qualified staff member at the facility. Any missing keys will be reported to the Director of Operations and Clinical Services (or designee) immediately. If it is determined that the security of the medication area has been compromised, the locks will be changed.

Signature:



Executive Director

04/28/08

Date

Clinical Department

C-31

Medication Documentation

Original Date: 04/08/08

Revision Date: 6/25/09

Policy Number: C-31

Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to document medication administration accurately and complete the necessary documentation to ensure all the requirements for the management of medications are fully met.

Procedures:**A. Documentation Requirements:**

1. Consent for Medication Form: All medications prescribed by a physician will require the completion of Consent for Medication form. This form will contain the following information:
 - a. The medication necessary for the overall treatment.
 - b. The category of medication and the expected benefits.
 - c. The specific medication name and dosage range.
 - d. Purpose of the medication.
 - e. Common side effects.
 - f. Alternative treatments.
 - g. Approximate length of treatment.
 - h. Risks.
 - i. Attending physician's signature.
 - j. Person served or legal representative's signature.
 - k. If applicable use of medication (s) by women of child bearing age
 - l. If applicable use of medication during pregnancy
 - m. Special dietary needs and restrictions associated with medication i.e. alcohol
 - n. If applicable necessary laboratory test
2. Physician Order Form: This form will be completed at the onset of medication treatment, and completed by a physician or a nurse, acting on orders from the physician. The form will contain the following information:
 - a. The person's name and ID/social security number.
 - b. Acknowledgement of advice of side effects and consent.
 - c. Date medication prescribed.
 - d. Name of medication.
 - e. Dosage.
 - f. Strength.
 - g. Route of administration.
 - h. Schedule of administration.
 - i. Dates discontinued or changed, with specific reasons for change.
 - j. Next medication follow-up appointment.
 - k. Signature of physician ordering or nurse, if acting on verbal orders.
 - l. Signature of physician within two working days of order, if the nurse wrote the order.
3. Medication Administration Record (MAR): A Medication Administration Record form will be completed whenever a medication, as ordered or PRN, is administered. This form is initiated at the time the medication is ordered by the physician. The MAR will be changed monthly or as needed. The MAR is changed by transcribing the physician order to the MAR and can be completed by a nurse or employee trained in medication management. Each person served will have a Medication Administration Record Form which contains the following information:
 - a. The person's name and case number
 - b. Date of administration.
 - c. Dosage, strength, route, frequency of administration, and number of supply given.
 - d. Next medication due date.
 - e. Initial of nurse administering medication.
 - f. Signature of nurse administering medication, with credentials.

Clinical Department

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Medication Documentation (continued)

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- g. If PRN medication is given, additional documentation should be noted, including the complaint or reason that medication was needed, and an evaluation of the effectiveness or any side effects 30 minutes after the medication was taken.
 4. Off Site Medication: If it is necessary for persons served to follow their medication regimen away from the organization's facilities, an Off-Site Medication Form will be used.
 - a. The following information will be documented prior to the person served leaving with medications on an overnight status:
 - The name of the person served.
 - To whom the care of the person served is being released and his/her relationship to the person served.
 - The address and telephone number of the person to whom care of the person served was released.
 - Medication name and strength.
 - Frequency and quantity.
 - The time, date, and staff initials noting the transfer of medication and to whom the medication was given.
 - Signature of the person receiving the medications.
 - b. Upon a return from overnight status, the following information will be documented:
 - The name of the medications returned, quantity returned, time, and date.
 - Staff initials, signature, and date.
 - c. For persons served who require medication and are going off-site but returning the same day, the following information will be documented.
 - The name of the person served.
 - Medication name, strength, and quantity.
 - The name of the person to whom medications were released, date, time, and staff initials.
 - Signature of person to whom medications were released.
 - The name of the medications returned, quantity returned, time, date, and staff initials.
 5. Annual Medication Review: A Annual Medication Review will be completed every year by the physician or qualified professional licensed to prescribe medications, and will address:
 - a. The person's name and ID/social security number.
 - b. Documentation of the need for continued use of medication and the efficacy of the medication.
 - c. Current medication prescribed.
 - d. Documentation of any unusual side effects and management strategies for control of side effects.
 - e. Documentation of any contraindications associated with the medication.
 - f. Documentation that all unusual side effects and contradictions have been discussed with the person served.
 - g. The appropriateness of the continued use of each medication, based upon the needs and preferences of the person served.
 - h. Signature of the physician, credentials, date, and printed name.
 6. Progress Notes: Progress related to medication management will be noted in the record at the following times and in the following manner:
 - a. Whenever a medication administration occurs, or whenever a physician prescribes a medication, documentation will include the date of service, reference to the treatment plan, and a brief statement summarizing the service.
 - b. The Quarterly Medication Review will be documented in the progress note as per the required components described in this policy.
 7. Allergy Sticker: Allergy stickers will be placed on the front of all records for any person served known to have drug sensitivity, and will be reviewed and updated by staff, as appropriate.

B. Related Documentation Procedures:

1. Ambiguous Physician's Orders: Staff members will ensure the safe administration of medication by clarifying any ambiguous physician's orders in the following manner:
 - a. Staff members will consult with the assigned supervisor when there is a question concerning a physician's order.
 - b. The supervisor will consult with the prescribing physician for clarification and/or resolution of the ambiguous order.
 - c. The prescribed medication will be held and not administered/delivered to the person served until the ambiguous order is resolved.

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Medication Documentation (continued)

- d. If the treating physician changes medication a new consent shall be signed and reviewed with the legal guardian
- e. A new consent shall be obtained on a yearly basis.
- 2. If a prescribed medication is not given for any reason, a corresponding progress note needs to be completed documenting the circumstances and reason the medication was not administered. If the lack of administration is deemed to be counterproductive to the welfare of the person served, the person in charge of administration is to inform the physician and, if applicable, the person who is coordinating the care of the person served.
- 3. In the event of an allergic reaction or other side effect related to the prescribed medication, a staff member will notify the prescribing professional and document the event in a progress note.

Signature:



Executive Director

6/25/09

Date

JAFCO Policy and Procedure Manual
Clinical Department
C-32 Medication Errors

Original Date: 04/28/08
Revision Date: N/A
Policy Number: C-32
Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to address medication errors in a manner that significantly reduces and manages risk and results in improved services and outcomes.

Procedures:

- A. Medication errors will be defined as not following the established policies and procedures regarding Administration, Management, Disposal, Storage, and Inventory. Specifically the following key areas will define the parameters of medication errors:
 - 1. Administration and Documentation:
 - a. Incorrect medication
 - b. Incorrect dose
 - c. Incorrect amount
 - d. Incorrect route of administration
 - e. Incorrect person served
 - f. Incorrect time
 - g. Medication omitted
 - h. Incomplete consent form
 - i. Incomplete Physician order form
 - j. Incomplete Medication Administration Record documentation
 - k. Quarterly Medication Review not completed
 - 2. Storage, Inventory, and Disposal:
 - a. Medication not stored in proper environment (refrigeration)
 - b. Medication not locked and maintained in a secure manner
 - c. Medication keys lost
 - d. Medication count not completed
 - e. Medication count results in extra or missing medication
 - f. Medication container mislabeled
 - g. Incineration containers not segregated and stored appropriately
 - h. Inappropriate disposal of syringes and needles
- B. All medication errors will be reported in the following manner:
 - 1. The Critical Incident policy and procedures will be utilized to report and fully investigate medication errors and result in organizational quality improvement activities.
 - 2. The on-call supervisor will be immediately informed of the medication error and will notify the Director of Operations and Clinical Services (or designee) to determine what action will be taken.
 - 3. The person served receiving medication services will be informed at the discretion of the physician if it is determined through the physician's clinical judgment that the error impacted the treatment of the person served in any manner.
 - 4. A progress note will be entered into the record of the person served when it is determined by the supervisor and/or physician that the medication error resulted in a significant degree of impact on the care of the person served.
- C. All medication errors that are not a direct threat to the person served well-being will result in a verbal counseling contact between the employee and his/her supervisor. This contact will be documented and maintained in the employee's personnel file.

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Medication Errors (continued)

- D. Medication errors that result in a direct threat to the health and safety of the person served can and may result in reassignment of the employee and, if necessary, termination of employment. These include, but are not limited to improper administration that results in injury or trauma to the person served.

Signature:



Executive Director

04/28/08

Date

Clinical Department

C-33

General Guidelines for Medication Use

Original Date: 04/28/08

Revision Date: 4/20/09

Policy Number: C-33

Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to provide access to medications that support the maximum functioning of the persons served while reducing specific symptoms and minimizing the impact of side effects. To ensure this policy is fully realized, JAFCO shall enhance services through detailed and comprehensive Medication Use policy and procedures.

Procedures:

1. JAFCO shall provide, through direct provision, access to medications and medication management to ensure that persons served are provided with maximum benefits of appropriate medication use practices.
2. JAFCO shall ensure that all persons served receive optimal medication use services. Services will include, but not be limited to:
 - a. All persons served will participate in initial and ongoing screenings and assessments of all areas related to medication use, including past medications use, its effectiveness, past side effects, and allergic or adverse reactions.
 - b. Screening and assessments will include the evaluation of co-existing medical conditions that may affect or be affected by the use of medications, and the identification of alcohol and other drug use, which may affect subsequent medication use.
 - c. Individual plans will reflect specific goals and objectives related to medications prescribed to support maximum functioning and minimize symptoms.
 - d. The organization will strictly comply with all applicable local, state, and federal laws pertaining to medications and controlled substances.
 - e. A physician will be available for consultation 24 hours a day, 7 days a week to support the persons served and staff members in all aspects of services related to medications and emergencies.
 - f. All medications prescribed will be documented through the use of an informed consent form. The form will provide a guide for a comprehensive overview of each medication prescribed, its intended purpose, side effects, precautions, alternative treatments, approximate length of treatment, and risks. The form will also contain specific information in the area of precautions regarding the use of medications by women of child-bearing age, the use of medications during pregnancy, and special dietary needs and restrictions associated with use of the medications.
 - g. If a generic brand of a medication is not available, yet the person served needs to continue using the specific medication, the Director of Operations and Clinical Services (or designee) shall contact the Controller and a check or credit card shall be provided in order to pay for the brand name medication. The fiscal department has made provisions to allow for such cost. (Cost center for medication). If the attending psychiatrist deems that a medication is needed but perhaps not in his/her realm of expertise a referral shall be completed and direct care staff shall coordinate appointment and transportation for persons served that reside in the residential program. For outpatient services, a referral shall be provided to the legal guardian.
3. As per the Medical Emergencies Policy and Procedure, the telephone number of the local poison control center will be posted throughout the organization, and all staff members and persons served will be advised as to the location of this information.
4. If medications are prescribed by sources outside the organization, optimal outcomes will be supported through the following methods:
 - a. Staff members will request a release of information to communicate with the outside source, both verbally and through obtaining records, if appropriate.
 - b. If an appropriate release has been obtained, staff members will communicate with the prescribing source to clarify any information related to the medication regimen, will relate any information that may serve to maximize functioning for the person served through potential medication changes, and will provide information concerning individual functioning that may aid the prescribing source in decision-making.

Clinical Department

- c. Staff members will assist the persons served in arranging to meet with providers outside the organization who are providing medications and associated care.
5. All provision of medication management within the organization will be coordinated with the physician providing primary care through the following methods:
 - a. Staff members will request a release of information to communicate with the primary care provider regarding issues related to medications.
 - b. If an appropriate release has been obtained, the attending physician or designee will communicate with the primary care physician or designee to discuss and/or clarify any information relevant to prescribing and taking medications.
 - c. A meeting or conference will be encouraged with the primary care physician, the organization's attending psychiatrist/physician, the person served, family members, and staff members involved in direct services of the person served if it is determined that such a meeting would facilitate communication between the parties that would be beneficial to the person served.
6. JAFCO shall utilize medication treatment guidelines and protocols consistent with current practices in Medication Management. Attending physicians and other qualified professionals licensed to prescribe medications will maintain continuing education and training associated with licensure and certification requirements and maintenance of best practices in the field of Pharmacotherapy. All staff members involved in medication services will maintain performance objectives on a yearly basis associated with medication treatment guidelines and protocols.
7. Drug Utilization Review: JAFCO shall maintain a program of drug utilization review to monitor drug usage and prescribing practices and assist providers with information to improve prescribing and dispensing practices.
 - a. The drug utilization review program will be chaired by a physician and made up of a representative group of health care professionals who have recognized knowledge and expertise in one or more of the following:
 - The clinically appropriate prescribing of psychotropic drugs.
 - The clinically appropriate dispensing and monitoring of psychotropic drugs.
 - Drug use review, evaluation, and interventions.
 - Medical quality assurance.
 - b. The drug utilization program will provide education to practitioners about common drug problems with the aim of improving prescribing and dispensing practices, monitoring drug usage and prescribing practices, and educating providers of inappropriate drug utilization when it deems it appropriate to do so. The program will utilize two specific methods of review as follows:

Individual-Specific Review: This review will be conducted monthly. Prescription profiles will be selected for review based on individual risk for drug therapy problems. The process will include a risk assessment of all person served and utilize therapeutic criteria covering multiple classes of medication. When appropriate, written feedback will be sent to a physician and/or pharmacist provider.

Problem-Focused Review: The emphasis of this review will be narrowed to a specific therapeutic issue where broad scale provider education may be valuable. Selection for review will be based on a specific diagnosis or medication. Topics of review will often be derived from issues identified during individual-focused reviews.

Signature:



Executive Director

04/20/09

Date

Clinical Department

C-34

Transition/Support Services

Original Date: 04/01/08

Revision Date: 04/17/2014

Policy Number: C-34

Department of Origin: Clinical Department

Purpose:

The CARF 2008 Behavioral Health Standards Manual SECTION 2.d.1-11 establishes the need for transition planning in order to support ongoing recovery or treatment gains for the person served.

Procedure:

1. **Definition:** A Transition/Discharge Plan is developed at the earliest possible point in treatment when it is determined what the outcomes of the treatment plan goals should be. The person’s progress or lack thereof indicates the need for a more or less intensive, a more or less restrictive level of service (s), determining either a transfer or referral to other programs or the imminent discharge. The main purpose of this written document is to ensure continuity of services and treatment.
2. **Involvement of the person served:** The person served and assigned staff member jointly develop the Transition Support Plan. All persons served are actively involved and have a significant role in the transition planning process and have a major role in determining the direction of his or her individual plan based on their strengths, needs, abilities and preferences. Inclusion of the family, legally authorized representative, natural support system and local community are encouraged, when appropriate. A copy of the plan must be provided to the person served upon transition or discharge.
3. **Components:** A Transition/Discharge Plan must be a comprehensive document comprised of:
 - a. Description of the person’s served progress towards his/her wellbeing.
 - b. Gains achieved during program participation expressed in the words of the person served, reflective of the informed choices of the person served (parent or guardian) and including the person’s strengths, needs, abilities and preferences for wellbeing.
 - c. Information on the person served medication(s), and or administration, when applicable.
 - d. Identifiable support systems that will assist the person served wellbeing, i.e. family, friends, and peer support groups.
 - e. Precise referral source information including location, contact, name, telephone number, hours of operation and days of services.
 - f. Options available in case of recidivism.
 - g. Follow ups when discharge or removal from a program for aggressive behavior.
 - h. The supervisor shall make contact within 72 hours via telephone or electronically
4. **Time frames:** This plan must be completed at the earliest stage of the person served treatment, which is immediately upon development of the individualized treatment plan. A copy of this plan can be found in the treatment plan section in the individual file of the person served.

Any standard protocol adopted by a JAFCO program shall expand but not supersede this policy.

Signature:



4/17/2014

Executive Director

Date

Clinical Department

C-35 Program Staffing

Original Date: 04/08/08
 Revision Date: 04/25/14
 Policy Number: C-35
 Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO that all programs shall be staffed with sufficient numbers of qualified staff to meet the needs of the person served and is consistent with State and Federal laws governing staff ratios and caseloads.

Procedure:

1. The programs shall define the number and the type of staff required to provide quality care, treatment, and service to the person served.
2. A supervisor or designee shall be assigned to each shift that the program is operating. The supervisor will be the resource for problem resolution, troubleshooting, and response to medical or behavioral emergencies, and shall be responsible for the safety and well-being of persons served and staff during his/her assigned shift.
3. The programs shall develop a model of treatment that defines the ratio of clinicians to non-clinical staff, students, and volunteers required to conduct and supervise treatment.
 - a. The staffing model will follow the treatment model as much as possible.
 - b. The model will define acceptable substitutions for numbers and type of staff in the overall model and will define unacceptable staffing levels/ratios as well.
 - c. At all times, a minimum staffing number consistent with State and Federal guidelines will be maintained in order to assure person served and staff safety.
4. Caseloads will be assigned according to industry standards for provision of high quality care, treatment, and service to person served.
5. Supervisors will ensure that the staffing model in support of the treatment model is fulfilled. If there are staffing shortages that result from absentee staff, the minimum staffing levels must be assured through the granting of overtime status to current staff.
6. If there are staffing vacancies, positions may not be filled by students or volunteers in order to meet the minimum staffing requirements.
7. Contracted staff members who are hired to fill vacancies must meet all of the required competencies and receive the orientation and mandatory training that the position requires.
8. Residential programs will have the following staffing ratios:
 - a. The Shelter: ages 0 to 5, there will be 1 staff for every 4 children when awake and during sleep 1 staff for every 6 children.
 - b. The Group Home: There will be 1 staff for every 6 children for both awake and sleep unless there is a child under the age of 4, then the ratio will be 1 staff for every 4 children
 - c. The Ability Center: There will be 1 staff for every 3 children. If the child is medically complex or behaviorally challenged, the ratio will be 1 staff to 1 child. In addition, a qualified LPN or RN will be available on all shifts when there is a child who is medically complex.

Signature:



04/08/08

Executive Director

Date

Clinical Department

C-36

Treatment Plan Addendum

Original Date: 04/08/08

Revision Date: N/A

Policy Number: C-36

Department of Origin: Clinical Department

Policy:

A treatment plan addendum form is required whenever a new service, goal or objective is added to the treatment plan to ensure that treatment is medically necessary and authorized.

Purpose:

To ensure that all required and necessary services are included in the treatment plan for the person served.

General Considerations:

1. The program staff that is assigned to the case must complete the addendum form.
2. The treatment plan addendum form must be signed by the person served and the physician or the licensed practitioner of the healing arts prior to the new service starting.
3. The treatment plan addendum is not billed unless a treatment plan review is conducted and the accompanying documentation is completed at the same time.

Procedure:

1. Document the name of the person served, medical record number, date and the name of the staff responsible for completion of the addendum.
2. Indicate the service/treatment being added to the treatment plan.
3. Specify the focus area or behaviors/symptoms that support the diagnosis and need for the service.
4. Based on the input of the person served, develop goals, measurable objectives, modalities and length and frequency/duration of treatment and a target date for accomplishment of the identified goals and objectives.
5. Provide a recommended discharge plan for the service being added.
6. Obtain the signature from the person served and the physician/licensed person of the healing arts authorizing the addition service.
7. Offer the person served a copy of the treatment plan addendum form and document that a copy was offered or an explanation of the service.
8. Once the signature is obtained the person served may begin to receive the service.

Signature:



04/08/08

Executive Director

Date

Clinical Department

C-37

Treatment Plan Review

Original Date: 04/01/08
Revision Date: N/A
Policy Number: C-37
Department of Origin: Clinical Department

Policy:

JAFCO shall review individual treatment plans on a regular basis, at least quarterly or when medically necessary, to determine the progress and ongoing needs of the person served and establish medical necessity.

Purpose:

1. The treatment plan review is a process conducted to ensure that the services and treatment goals and objectives continue to be appropriate to meet the needs of the person served and to assess the progress of the person served and continued need to for services.
2. To offer ongoing assessment of the progress toward goals of the person served.
3. To allow for changes/adjustments to the treatment plan.
4. To allow for periodic review of the treatment plan of the person served for relevance and modification as necessary.
5. To include person's served input and desires.

General Considerations:

1. As per the planning process, the treatment plan review is individualized to meet the needs of each person served.
2. The treatment plan review form is to be used to document the treatment plan review.
3. The treatment plan must be reviewed at least quarterly starting from the date the first treatment plan was signed/authorized following admission to JAFCO. For example, a person admitted on July1 to psychiatric services shall need a written treatment plan review no later than October 1 even though a therapy services were authorized and added to the plan at a later date. Or vice versa.
4. Treatment plans may be reviewed more often than quarterly when the situation or significant event occurs that renders it medically necessary to review the services of the person served, such as psychiatric hospitalization, serious incident, or any other changes in goals, objectives or interventions.
5. The treatment team shall be involved with the treatment plan reviews and shall include the primary and responsible team members the person served and significant others desired by the person served with his/her consent. In the case of minors, a legal guardian shall be present.
6. The primary therapist is responsible for coordinating the review with all other service providers assigned to the person served during the review period.
7. The primary team member is responsible for coordinating a treatment plan review at least every 3 months yet any other member of the team may initiate additional reviews, only if the review is medically necessary and all other members of the team are consulted. Regardless of which member of the team initiates the review, time frame between reviews is not to exceed 3 months.
8. If the review results in services being added to the treatment plan, the treatment team shall make the referral and the treatment plan addendum form shall be completed.
9. The start and end time on the treatment plan review are to be entered by the staff member who meets face-to face with the person served to review the plan.

Clinical Department

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Treatment Plan Review (continued)

Procedure (Responsibility of the Primary Therapist):

1. Document the name of the person served, medical record number, DSM-IV code, the date the treatment plan expires, name of staff completing the review and additional participants in the review process.
2. Indicate if any psychiatric hospitalizations have occurred since previous review and specify on the update information psychiatric hospitalization or update assessment form.
3. Assess the current level of functioning of the person served.
4. Document the medical necessity for the review
5. Document any progress towards goals and for each service as defined on the individual treatment plan
6. Provide the justification for continuation of the service and/or change in services and recommended discharge plan each service being reviewed.
7. Complete the treatment plan review disposition section (recommendations).
8. Obtain the signature of the person served or the legal guardian certifying he/she had input into the review of treatment plan review.
9. The staff member who meets face to face with the person served shall offer him/her a copy of the completed treatment plan review.
10. The psychiatrist or licensed clinician shall enter signature, title, and date for the purpose of certifying that the individual treatment plan being reviewed by the treatment team is appropriate and continues to meet the treatment needs of the person served and hereby authorizes the rendering of the proposed JAFCO services.
11. File the original form in the person served record.
12. In the event that additional serves are recommend outside the scope of JAFCO, a referral form shall be completed. If the additional services are internal then an internal form shall be completed.

Signature:



Executive Director

04/01/08

Date

Clinical Department

C-38

Confidential Information Dissemination

Original Date: 02/14/08
Revision Date: 04/09/08
Policy Number: C-38
Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to ensure that all verbal and written information of persons served is released and requested in a manner that protects the individual's right to confidentiality. Information may not be released without the individual's or the guardian's written permission, except as the law permits or requires. JAFCO shall make reasonable efforts to limit use, disclosure of, and requests for private health information to the minimum necessary to accomplish the intended purpose.

Procedures:

Information may be released in written and/or verbal form. The release of information will occur upon receipt of an authorization determined as valid. Validity is determined by the presence of each of the following items:

- The name of the person about whom information is to be released, including social security number.
 - The specific content of the information that is to be released.
 - The person to whom the information is to be released.
 - The signature of the person who is legally authorized to sign the release and the date on which the release is signed.
 - The expiration date of the authorization, not to exceed one year.
 - Information that defines how and when the authorization can be revoked.
1. Requests for Information:
 - a. All requests for information will be in writing.
 - b. Requests for information from an individual's record will be answered within 5 business days from the date of receipt. If the information cannot be provided within this period, the requester will be informed in writing of the reasons for the delay and the anticipated date the information will be available.
 - c. Requests for records that have been incorporated into JAFCO's records from outside sources will not be released and the requestor will be encouraged to seek those records from their original source.
 2. Release of Sensitive Information:
 - a. Information contained within the records of the person served may have a serious adverse effect on a person served mental or physical health if disclosed to the individual. Such information may contain materials requiring an explanation or interpretation to assist in its acceptance and/or assimilation in order to avoid an adverse impact on the health of the person served. To minimize the risk of a release of information adversely impacting a person served, the following guidelines will apply:
 - b. The JAFCO Director of Operations and Clinical Services (or designee) shall review all requests of individuals seeking direct access to their records. Information identified as potentially sensitive will be reviewed by the Director of Operations and Clinical Services (or designee). This review will occur within 5 business days of the request.
 - c. All materials directly related to behavioral health treatment that includes a diagnosis, assessment, or interpretative data will be reviewed by the Director of Operations and Clinical Services (or designee) and the Quality Improvement Director.
 - d. Should it be determined by the professional staff member that after a careful and conscientious explanation of the information to the person served has been made, and it is the opinion that access to the information could be harmful, physical access shall be denied. The justification for making the denial will be fully documented by the staff member and final concurrence will be made by the staff psychiatrist. The person served shall be advised of the denial, the reasons for the denial of the request, and advised of the right to file a grievance, should the person served disagree with the decision.
 3. Legal counsel will be consulted when the release of information involves the following circumstances:
 - a. Any request for records that are to be used in a suit against the organization or in a prosecution against a person served.
 - b. All subpoenas for records that were not accompanied by a written consent signed by the person served.
 - c. All requests for information which indicates a possible liability for the cost of care and services.

Clinical Department

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Confidential Information Dissemination (continued)

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4. Information may be released without the consent of persons served under the following conditions:
 - a. To medical personnel who have a need for the information for the purpose of treating a condition which poses an immediate threat to the health of a person served.
 - b. To public health authorities related to infection with HIV when there is a written request that the information and there is a fine or penalty for failure to comply.
 - c. To a spouse or sexual partner of an individual when it is reasonably believed that the individual will not provide disclosure of information related to infection with HIV when that information is necessary to protect the health of the spouse or sexual partner.
 - d. To recover or collect the costs of medical care from third party health care insurance carriers contracted with by the persons served and required by the health plan to be disclosed.
 - e. To Federal, State, or local government agencies or entities charged under applicable laws with the protection of public health and safety. In such cases, the information may be released with the consent of the person served whose records are being requested, or upon receipt of a written request from the head of the government entity. A request for release under these circumstances may be either a standing written request based on reporting requirements, or a specific written request from the head of a law enforcement agency for a special law enforcement purpose. Standing requests must be updated in writing every 3 years.
 - f. Disclosure as a result of a court order from a court of competent jurisdiction.
 - g. To the Department of Children and Family Services for the purpose of investigating abuse, neglect or exploitation.
 - h. To the Medical Examiner, in conjunction with an investigation of a suspicious death.
 - i. To professional review organizations, in accordance with government contracts (Medicare/Medicaid).
 - j. Disclosure of information to a third party payer in a care cost recovery action will be limited to date of birth; social security number; payment history; and account number, unless the person served provides a written consent designating further information to be released.
 5. An accounting record will be maintained on all records released by JAFCO. It will include the date, nature and purpose of each disclosure, the name of the party to whom the disclosure is made. This accounting record will be maintained in the record from which the disclosure was made. In addition, a logbook will be maintained for all release of information for data reporting purposes (Disclosure of Confidential Information Log).
 6. Special consent is required to release records that contain information related to drug and alcohol addiction and abuse, and tests for, or infection with HIV. Any authorized disclosure from records containing information of this type will be limited to that information which is necessary for the purpose of the disclosure. Because of the special nature of this information, the release must be processed by JAFCO to assure compliance with the special regulatory requirements.
 7. The following type of communications do not constitute disclosure of information/records:
 - a. Communication of information between any JAFCO employees who have a need for the information in connection with their official duties.
 - b. Communications with law enforcement offices which are directly related to the person served committing or threatening to commit a crime on the organization's property or against an employee of the organization.
 - c. Communication of information which does not provide a person served identifying information.
 8. JAFCO shall adhere to the following guidelines when mailing confidential private health information:
 - a. Stamp all envelopes containing records as confidential.
 - b. Clearly indicate a particular office on the address where the envelope is to be delivered.
 - c. Whenever possible, include in the address the name of the staff member authorized to open the envelope.
 - d. All envelopes individually addressed will contain the following statement in the outside of the envelope: "TO BE OPENED BY ADDRESSEE ONLY".
 9. When faxing confidential information, the following guidelines will apply:
 - a. Confidential private health information will only be transmitted by fax when absolutely necessary or required by the requestor, and other traditional methods, such as confidential mail, is not possible to deliver the information.
 - b. All fax cover pages for confidential information will contain the following:
 1. The name and program of the person to whom the fax is intended.
 2. The name, program, and phone number of the person sending the fax.
 3. The statement "Confidential Information" in a large bold font.

Clinical Department

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Confidential Information Dissemination (continued)

4. A statement that clearly identifies the accompanying material as confidential information that reads as follows: *"The documents accompanying this facsimile transmission contain confidential information which is legally privileged. The information is intended only for the use of the person served named above. If you have received this facsimile in error, please immediately notify us by telephone to arrange for return of the documents to us, and that you are hereby notified that and disclosure, copying, distribution or the taking of any action in reliance on the contents of this facsimile information is strictly prohibited."*
- c. In situations where the information is not being regularly faxed to a common organization and individual, a phone call will be made to the person receiving the fax to verify the fax number and a follow-up call will be made to ensure the receipt of the fax.
- d. Fax transmissions will be restricted to persons specifically authorized to transmit confidential information.
- e. Upon the receipt of any confidential misdirected fax, the sender will be contacted and the information will be shredded.
10. Any information released verbally over the phone, can only be done after verification of the caller's identity through taking the phone number and making a call back prior to releasing the information.
11. All telephone calls from outside the organization that request confirmation of an individual being served by JAFCO will be handled by repeating the following statement: *"I can neither confirm nor deny that the individual in question is receiving services or has ever received services without a written authorization from that individual."*
12. Any JAFCO employee who knowingly and/or willfully violates provisions of this policy and procedures will face administrative disciplinary action that may result in termination of employment.

Signature:



Executive Director

04/09/08

Date

Clinical Department

C-39

Orientation of Persons Served

Original Date: 04/08/08
 Revision Date: N/A
 Policy Number: C-39
 Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to orient each person served to the organization and its programs in a manner that is understandable to the person served, and ensures that all persons served will have a functional awareness of the components of the services to be provided to them. This process is designed to increase the ability of the person served to achieve maximum benefit from services.

Procedures:

1. All persons who enter JAFCO programs will receive a comprehensive orientation, provided by the person coordinating their treatment, or a representative of the program assigned to provide the orientation.
2. The provider of the orientation will utilize a consumer orientation checklist to ensure that all relevant components of orientation are systematically covered in the process.
3. Following a review of all items on the consumer orientation checklist, the person served will be asked to sign the checklist indicating they have an understanding of the information presented, understand the program rules, and are fully aware of any restrictions or privileges that may be imposed due to a violation of the program rules.
4. The orientation and Handbook includes an explanation covering the following service components:
 - a. Tour of facility
 - b. Rights and Responsibilities of the Person Served
 - c. Policy on grievance and appeal procedures
 - d. Intent/consent to treat
 - e. Services provided, days and hours of operation, and expected level of participation
 - f. Access to emergency services, including after-hours emergencies
 - g. Code of ethics/conduct
 - h. Confidentiality policy and limits of confidentiality
 - i. Methods, opportunities, and policy on input
 - j. Explanation of financial obligations, fees, and financial arrangements
 - k. Fire, safety, and emergency precautions
 - l. Policy on seclusion and restraint (if applicable, residential clients only)
 - m. Policy on tobacco products
 - n. Policy on illicit or licit drugs brought into the program
 - o. Policy on weapons brought into the program
 - p. Identification of the staff(s) responsible for service coordination
 - q. Program rules, including any restrictions, use of motivational incentives, policy on the loss and regaining of privileges and possible consequences for specific attitudes and behaviors (if applicable residential clients only)
 - r. Purpose and process of Bio-Psychosocial Assessment
 - s. Individual plan development and the Persons Served active role in goal development and explanation of the potential course of treatment/services
 - t. Discharge/transition criteria and procedures
 - u. Agency's Policy regarding response to and identification of potential risk to the person served
 - v. Agency's Policy on prescription medication brought to the agency by the Person Served
 - w. Agency's expectations for legally required appointments, sanctions, or court notification (if applicable)
 - x. Education on advance directives (if applicable)

Clinical Department

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Orientation of Persons Served (continued)

5. All employees providing the orientation will be provided with training prior to their participation to assure all employees are providing orientations in a consistent manner.
6. Following the orientation, the signed orientation checklist will be filed in the person's served record.

Signature:



Executive Director

04/08/08

Date

Clinical Department

C-40

Nonviolent Practices

Original Date: 03/20/08

Revision Date: 04/17/2014

Policy Number: C-40

Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO that seclusion is never used. It is the policy of JAFCO to refrain from using restraint as a behavioral intervention in the course of treatment for any person served, in the outpatient program. For Residential Program and Children's Ability Center person's served, physical restraint is used as an emergency intervention and is used in the event that failure to do so would result in severe injury or death. The organizational safety policy on violent and aggressive behavior, which directs staff to summon external law enforcement personnel, is followed in behavioral emergencies; however, the following procedures would be utilized when law enforcement personnel did not arrive immediately in order to prevent severe injury or death to an individual. During initial assessment of the person served, utilization of Professional Crisis Management (PCM) will be evaluated. (Please refer to policy C-55).

Procedures:

Residential

1. If a vertical or horizontal immobilization is used, the technique will be limited to physical holds only by employees who have completed PCM training and are judged by the organization as qualified to perform the above-stated techniques.
2. Vertical and/or horizontal immobilizations will only be used after all attempts at verbal de-escalation and other less restrictive alternatives have failed. Conditions in which physical holds will be used are as follows:
 - a. Continuous aggression.
 - b. Continuous self-injury.
 - c. Continuous high-magnitude disruption.
3. Vertical and horizontal immobilizations will be limited to 1 hour. After 1 hour, law enforcement will be contacted to intervene.
4. Whenever possible, this will be conducted in a private area or room. To preserve the persons served dignity the room shall have adequate lighting and good air flow as well as a comfortable air temperature. In addition, there will be a safe and comfortable seating or lying arrangement.
5. Observation will occur throughout the time needed.
6. In the event that emergency providers are called, employees will call 911 from the nearest phone and request immediate assistance, provide the organization's address, and describe the situation that is occurring.
7. Employees will await the arrival of emergency personnel at the site's entrance, direct them to the area where the incident is occurring, and provide them with a brief overview of the situation.
8. The need for vertical or horizontal immobilizations will be continuously monitored and assessed to ensure that the least restrictive intervention is being utilized until the person served is no longer a threat to self or others and/or meet the conditions necessary for that level of intervention.
9. If a vertical or horizontal immobilization technique occurs, the critical incident form will be completed and forwarded as per the critical incident policy and procedure.
10. Following the incident, a meeting with the person served, the staff member involved in the incident and the Director of Operations and Clinical Services or designee shall be held within one working day to discuss the following with the person served and/or parent or legal guardian:
 - a. The incident that occurred that led to the actual physical hold.
 - b. The antecedents that led up to the specific incident.
 - c. The reason for the physical hold.
 - d. The person's served reaction to the physical hold and what they experienced.
 - e. Giving control back to the person served.
 - f. Develop a safety plan if one is not existent with the person served, staff and legal guardian if applicable.
 - g. Actions that could make future incidents unnecessary.
 - h. The meeting/discussion will be documented in the record of the person served.
 - i. The use of seclusion and or restraint shall always be documented as a critical incident.

Clinical Department

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Nonviolent Practices (continued)

- j. The Executive Director or designee shall review and signs off on all uses of restraint; after every occurrence, within a designated time frame 24 hours. This is done to determine conformance with applicable policies and procedures.
- k. The use of restraint is recorded and is used to analysis patterns of use, history of use by personnel, environmental contributing factors, and assessment of program design contributing factors and used for quality improvement.

Outpatient

- 1. The staff shall isolate the area where the person served is escalating.
- 2. At no time shall staff try to apprehend the person served.
- 3. In the event the person served has a weapon, staff shall evacuate the building.
- 4. In the event that emergency providers are called, employees will call 911 from the nearest phone and request immediate assistance, provide the organization's address, and describe the situation that is occurring.
- 5. Employees will await the arrival of emergency personnel at the site's entrance, direct them to the area where the incident is occurring, and provide them with a brief overview of the situation.
- 6. Following the incident, a meeting with the person served, the staff member involved in the incident and the Director of Operations and Clinical Services or designee shall be held within one week in the event that the client is hospitalized, upon the meeting shall take place upon his/her discharge to discuss the following with the person served and/or parent or legal guardian:
 - a. The incident that occurred that led to the police intervention.
 - b. The antecedents that led up to the specific incident.
 - c. The reason for the hospitalization (if applicable).
 - d. The person's served reaction to the intervention.
 - e. Actions that could make future incidents unnecessary.
 - f. Develop a safety plan if one is not existent with the person served, staff and legal guardian if applicable.
 - g. The meeting/discussion will be documented in the record of the person served and will be used to analysis patterns of use, history of use by personnel, environmental contributing factors, and assessment of program design contributing factors and used for quality improvement.

Signature:



Executive Director

04/17/14

Date

JAFCO Policy and Procedure Manual
Clinical Department
C-41 Clinical Supervision

Original Date: 02/14/08
Revision Date: 06/30/09
Policy Number: C-41
Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to maintain a well-structured clinical supervision system, designed and maintained in a manner that enhances the skills and abilities of the supervised employees, and results in an increase in the quality of services provided. In addition, it is the policy of JAFCO to utilize the supervision process, along with the corporate compliance program, to ensure that all ethical and confidentiality policies and procedures are being met consistent with all legal, regulatory, and accreditation guidelines. A variety of methods will be utilized to maintain a well-structured supervisory system that includes direct observation, individual meetings, chart reviews, performance evaluations, and facilitation of a peer review process.

Procedures:

- A. The JAFCO supervisory system will be configured as follows:
 - 1. The Medical Director and the Director of Operations and Clinical Services (or designee) shall meet at least one time per month.
 - 2. The direct supervision of the therapists will be the responsibility of the supervisor.
 - 3. The Director of Operations and Clinical Services (or designee) shall supervise the supervisors at least one time per week.
 - 4. If needed, the supervisor will carry a reduced direct care caseload as long as all supervisory duties are completed in a timely manner, and there is ample time to provide quality supervision of benefit to the employee.
 - 5. The Director of Operations and Clinical Services and/or designee shall conduct meetings with all clinical programs one time per week.
- B. The components of the therapy supervision process are as follows:
 - 1. **Direct Observation:** All observed behavior and interactions involving the therapeutic staff within their roles and responsibilities are utilized in the supervisory process. Interactions with other staff, persons served, family members, and visitors that are observed by the supervisor serve as information sources that can be used within the individual supervisory process. Such things as tone of voice, language use, and non-verbal behaviors are observed and serve as potential indicators of skills and abilities for supervisory discussion, feedback, and possible therapist performance improvement.
 - 2. **Individual Supervision:** Individual supervision occurs on a weekly basis, for staff that are in the process of obtaining licensure. Professional staff shall be supervised individually at a minimum of one time per month or more frequently as per the supervisor's determination. However, between group and individual sessions, each staff shall receive four hours per month of supervision. The duration of the clinical supervision for each therapist/staff shall be for one-hour. The supervision session shall be held on a regularly scheduled day of the week. The supervision sessions contain one or more of the following activities:
 - a. **Review of Caseload:** Review of the therapist's caseload and any specific issues regarding the size and mix of the caseload that either party deems important to discuss to support patient care.
 - b. **Case Review:** Review of an individual person served and case record to discuss assessments, treatment planning, interventions, progress, counseling interventions, and to generate ideas for alternative approaches or an increase or decrease in a particular method or approach to therapy.
 - c. **Performance Evaluation:** Review and discussion of the therapist's annual performance evaluation, at the time of required annual completion, or when referencing during the evaluation year for assessing the level goals and objectives listed on the evaluation are being met.
 - d. **Miscellaneous and/or Acute Issues:** Review of both acute patient related situations that can support the therapist in their job performance and/or review of acute therapist performance related issues that may detract from the quality of patient care.

Clinical Department

C-41

Clinical Supervision (continued)

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3. Group Supervision: Components of the group supervision process are as follows:
 - a. Clinical Staff Meetings: Meetings with the therapeutic staff will occur bi-weekly on a regular scheduled day, at a regularly scheduled time. The purpose of the meeting is to utilize a team approach to care through the discussion of policy, procedures, and clinical approaches, in-service "therapist specific" training, and review and discussion of individual person served program status in a manner that supports the care of the person served.
 - b. Peer Person served Record Review: Therapists will meet at least on a quarterly basis to participate in a review of person served records. The Director of Operations and Clinical Services or supervisor will facilitate the review by providing an agenda, guidance in the components of the review and each person's responsibility in participation, and education and training consistent with the outcome of the case reviews. Procedures for this process are contained in the JAFCO Peer Record Review Policy found in the Quality Improvement Plan.
 - C. The components of the supervisor's responsibilities are as follows:
 1. Scheduling, Conducting, and Documenting Individual /Group Supervision Sessions: Documentation of the supervisory meetings will be contained on JAFCO Individual Supervision Form. The form will contain the following information resulting from the session:
 - a. The date of the session.
 - b. The time of the session.
 - c. The name of the supervisee.
 - d. A description of the topics, issues, and process.
 - e. Any new expectations of performance to be met that resulted from the discussion of acute events and behavior.
 - f. Any information related to progress with meeting the goals and objectives noted on an individual's performance evaluation. (if applicable).
 2. Review of Individual Case Records: Prior to meeting with an individual, the supervisor may review one or more files to determine the current level of the quality of documentation in a chart, and/or to assist a supervisee with managing a challenging set of circumstances related to a person served needs and preferences.
 3. Completion of The Annual Performance Evaluation and Review With Employee: This process will involve:
 - a. Completing the evaluation form by scoring the specific indicators of performance related to the employee's job duties.
 - b. Meeting with the employee to determine and negotiate job performance goals and objectives based on specific job duty areas needing improvement.
 - c. Reviewing the previous year's goals and objectives to determine the level in which they were met.
 - d. Determining specific training and supervision methods to support the noted performance goals and objectives.
 - e. Obtaining the employee's signature, signing the form, and ensuring that the human resource designee gets the form and places it in the employee's personnel file.
 4. Facilitation of the Peer Record Review Meeting and Process: The Director of Operations and Clinical Services and/or supervisor will conduct the quarterly Peer Record Review meeting and process according to the procedures contained within JAFCO's established policy for the review.
 5. Communication of Clinical Supervision Information to the Director of Operations and Clinical Services: The Director of Operations and Clinical Services (or designee) meets on a weekly basis with the supervisor (or designated supervisor) and provides the following information within the meeting:
 - a. Caseload and services.
 - b. Information related to therapist staffing levels and needs.
 - c. Level of therapist performance, consistent with performance evaluation results.
 - d. Other information related to therapy services and direct patient care that may impact the quality of care and/or the risk of loss exposure to the organization.
 - e. Recommendations for new hires.
 - f. Status and assigned duties of current agency interns.

Clinical Department

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Clinical Supervision (continued)

6. Dissemination of Information at the Continuous Quality Improvement Council Meeting: The Director of Operations and Clinical Services (or designee) is responsible for reporting all information related to therapeutic services that may be relevant in the ongoing management of the organization. Information can include, but is not limited to:
- a. Caseload and services.
 - b. Staffing levels and needs.
 - c. Therapy and clinical policy and procedure revisions.
 - d. Implementation of new practices, results of the peer review process.
 - e. Results of performance improvement related to direct patient care in the areas of effectiveness of treatment and satisfaction of patient's with services.
 - f. Critical Incidents or situations impacting patient care and risk of loss exposure.
 - g. Coordination of clinical services with other disciplines.

Signature:



Executive Director

06/30/09

Date

Clinical Department

C-42

Records of the Person Served

Original Date: 04/08/08

Revision Date: 04/17/14

Policy Number: C-42

Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to develop and maintain a complete and accurate record to ensure that all appropriate individuals have access to relevant clinical and other information regarding each person served.

Procedures:

- A. The individual record of each person is maintained in such a manner as to protect the confidentiality and integrity of the record. The guidelines for this process are as follows:
1. Each record will be issued an identifying number upon the first admission to any of JAFCO's services or programs. This number will be uniform throughout all services and dates of services provided.
 2. All active records will be maintained in administrative offices in locked cabinets at all three facilities located at the JAFCO Children's Village 4200 N. University Drive, Sunrise, Florida 33351, the JAFCO Children's Ability Center 5100 North Nob Hill Road, Sunrise, FL 33351 and the JAFCO Northeast Branch office 2345 Bryn Mawr Avenue, Suite 100, Bryn Mawr, Pennsylvania 19010.
 3. All active records will be maintained in a systematic fashion that follows a standard format for record organization established by JAFCO.
 4. Documentation in the individual record shall be clear and legible.
 5. All information in the active record shall be current and complete, and documents that require signatures shall contain original signatures.
 6. To maintain uniform individual records that protect the integrity of demographic, financial, and clinical information, the individual records will be assembled according to the following guidelines:
 - a. The individual record is defined as all information collected and used regarding an individual seeking services from JAFCO.
 - b. The individual record shall contain three distinct types of information: demographic, financial, and clinical.
 - c. The assembly of the record is initiated upon admission to services and/or programs.
 - d. Upon discharge from JAFCO, the individual record is assembled into a final order according to the established standard closed record format.
 - e. A complete listing of closed records that have been disassembled according to procedures and removed to storage areas will be maintained in the records room.
 7. Individual outpatient records shall be retained for 7 years after minor's 18th birthday.
 8. In the case of children, the record shall be maintained for seven years after their eighteenth birthday.
 9. Currently JAFCO has maintained all person served records an apprehension of a possible subpoenas.
 10. All preadmission screening forms of persons not admitted to JAFCO shall be retained for seven years. If the form has no identifiable information regarding the person served, it will be destroyed in one year. External referral for Rule 65c-13 ms for referrals to JAFCO shall be included in the record for persons admitted and will be retained for at least seven years.
 11. Foster and Adoptive Families Rule 65c-13.
 - a. Files of prospective foster families who do not become licensed shall be retained by the agency for five years
 - b. Files of licensed foster families shall be maintained for twenty years after closure whether or not the child is placed.
 - c. Files of foster applicants who were denied licensure shall be maintained for twenty years
 - d. Files of for adoptions that contain information pertaining to the child shall be maintained indefinitely in case the child wants to see it when he/she turns eighteen years of age
 - e. **Note:** these files may be scanned to a disk and the hard copy may be destroyed.

Clinical Department

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- B. All individual records will contain, at a minimum, the following information:
1. The date of admission.
 2. The name, address, and telephone number of the person's representative, guardian, or representative payee, if appointed.
 3. Emergency contact information including a name, address, and telephone number.
 4. The name of the person coordinating services.
 5. The location of any other records.
 6. The name, address, and telephone number of the person's primary care physician.
 7. Insurance payment information.
 8. The person's health history, current medications, admission screening, documentation of orientation, assessments, and individual plan and reviews.
 9. The person served progress notes
 10. A transition plan, when applicable
 11. A discharge summary.
 12. Any correspondence pertaining to the person served.
 13. Authorization for release of information.
 14. Documentation of internal or external referrals.
- C. To ensure that records are maintained in a uniform manner, are secure, and are available to support continuity of care, the following guidelines will apply:
1. All records will be filed, secured, and retrieved by the assigned staff member providing the service to the person served.
 2. The Director of Operations and Clinical Services (or designee) shall be responsible for controlling the records and implementing policies and procedures pertaining to the records.
 3. Records will be kept in a secured area with access limited to only clinical staff. The records area will be secured by lock. Only designated staff and designated supervisory personnel will have access to keys to the area. A designated staff member will be available and known to all staff in order to access the records after hours and in case of an emergency.
 4. All records shall be kept in areas that provide reasonable protections from fire, water damage, and other hazards. JAFCO shall make all efforts to protect all records against damage.
 5. Records will be made available in a timely manner to authorized personnel by the records staff for scheduled appointments, for documentation purposes, and for reviews upon request.
 6. Assigned staff members shall be responsible for safeguarding the record and returning it to the secured area before the end of the business day.
 7. The filing of all loose materials in the record is a function of the records or other designated staff. The filing is to be kept current and will be placed in individual records within three working days. All loose filing will be kept in a container designated as "to be filed" within a secured records area/room or staff office if at a service location.
 8. Any loose filing that cannot be identified will be turned over to the supervisor. The material in question will be identified through exploration with service providers of content contained in the materials.
 9. If records need to be transported to a different location, such as court proceedings, records will be placed in a sealed manila envelope or boxes marked "confidential" and placed in the locked trunk of car for transportation to the destination. The assigned staff to the case shall be responsible for safeguarding the records while they are in transport. At no time will the records be left unattended.
- D. Records shall be audited on a random basis; monthly basis by the Supervisor, quarterly by the Quality Improvement Director. The peer review committee shall audit quarterly, or more frequently as needed.
- E. Documentation in records shall be consistent, directly related to services provided, and in compliance with legal, risk management, and clinical care standards. The following guidelines apply to documentation in the record:
1. Written documentation will be completed in black ink only.
 2. All written documentation will be clear, concise, accurate, and legible.
 3. All entries will be made within 24 hours to increase accuracy of documentation.
 4. Any late entries will be documented using the actual date the note is written with a reference to the exact date the service occurred.

Clinical Department

C-42

Records of the Person Served (continued)

5. If a mistake is made in the record, a single line will be drawn through the incorrect information, "error" will be written above the entry, and the provider's initials and date will be noted. Liquid paper, or any kind of marking over an error so it cannot be read, is not appropriate in any circumstance as it may invalidate the entire record in a legal proceeding.

Signature:



Executive Director

04/17/14

Date

Clinical Department

C-43

Documentation

Original Date: 4/30/08
Revision Date: N/A
Policy Number: C-43
Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO that each contact or transaction regarding the person served must be documented in a progress note.

Purpose:

The purpose of this policy is to ensure that direct service and supervisory activities have guidelines regarding the basic standards for clinical documentation in medical records.

General Considerations:

1. Clinical documentation is intended to provide pertinent information that is readily accessible which indicates services rendered.
2. The clinical documentation indicates resources recommended/used and justification for collection of fees.
3. There are some clinical forms that serve as documentation for the justification of the fee collection without necessitating the development of a progress note.
4. This policy is intended to demonstrate compliance with state guidelines regarding Quality Improvement Documentation Standards.
5. Progress notes, for all service modalities, need to describe the services rendered that support the treatment prescribed on the treatment plan, as well as the completion of portions of the treatment plan.
6. Progress notes need to be developed to indicate any significant event regarding the person served. This progress note should be copied and forwarded to any substitute record to ensure that all treatment team members are aware of the current status of the person served.

Procedure:

1. All notes should be completed in black ink, signed including credentials, dated and legible.
2. Progress notes should be written within 24 hours of contact with the person served, service rendered or any transaction regarding the person served.
3. If corrections are necessary to a written progress note, the responsible staff member must strike through the error with one single line and initial the strike through. No white out is permitted.
4. Late entries are discouraged, however if necessary the progress note must specify that it is a late entry at the beginning of the note.

Signature:



Executive Director

04/01/08

Date

Clinical Department

C-44

Special Adaptive Equipment

Original Date: 4/08/08
Revision Date: 4/29/08
Policy Number: C-44
Department of Origin: Clinical Department

Policy:

In the event a child with special needs arrives, it is the policy of JAFCO to accommodate all appropriate special needs due to health, allergies, or special needs as a result of a temporary or permanent disability. Thus, JAFCO is committed to providing environments that promote and protect children's health and well-being by maintaining appropriate backup or alternative equipment.

Purpose:

A child in care must be provided with sufficient adaptive equipment to meet their individual needs for growth, development, communication and activity.

Procedures:

1. Information regarding adaptive equipment needs will be gathered at the time of admission from the person served and or guardian if possible.
2. Possible adaptive equipment may include but not limited to:
 - a. Hearing aides
 - b. Communication devices, manual or electronic
 - c. Wheelchair, manual or electric
 - d. Crutches
 - e. Walkers
 - f. Shower chairs
3. Individuals with specific requirements, such as batteries, will be maintained in an easily accessed place during their stay.

Signature:



Executive Director

04/29/08

Date

Clinical Department

C-45

Special Dietary Requirements

Original Date: 4/30/08
Revision Date: N/A
Policy Number: C-45
Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to accommodate all appropriate special dietary needs due to cultural and religious beliefs, health, allergies, or special needs as a result of a temporary or permanent disability or life style choices. Thus, JAFCO is committed to providing environments that promote and protect children's health, well-being, and ability to learn by supporting healthy eating.

Purpose:

1. A child in care must be provided with sufficient nourishing food to meet their individual needs for growth, development, and activity.
2. A child's individual needs for growth, development, and activity must take the following into account:
 - a. General nutritional requirements of children
 - b. Special nutritional requirements of the particular child, including any requirements or limitations diagnosed or prescribed by a health care provider
 - c. The child's views, including the child's specific likes and dislikes
 - d. The child's culture and diet customs, if applicable
 - e. Any special requirements of the child relating to the manner in which food is served or prepared, if the child is young or has special needs

Procedures:

1. Information regarding dietary needs will be gathered at the time of admission from the Person served and or guardian if possible.
2. Individuals with more specific or restrictive diets will need documentation of accommodations needed to ensure proper nutrition during their stay.
3. In the case of SEVERE allergies;
 - a. Should always be reported upon arrival or at intake
 - b. Staff should be notified.
 - c. Please keep in mind that any known allergy is the responsibility of the child with the allergy;
4. To support allergy safety, ingredients will always be listed on the posted menus, so that anyone eating our offered food knows what is contained in each dish.
5. Current policy is that we are able to provide these options for participants:
 - a. Meat option
 - b. Vegetarian option
 - c. Vegan option
6. Dietary information must be clearly communicated to staff involved in the care of the child, direct and those who purchase supplies.

Signature:



Executive Director

04/30/08

Date

Clinical Department

C-46 Medical Disposal

Original Date: 02/14/08
 Revision Date: 04/05/08
 Policy Number: C-46
 Department of Origin: Clinical Department

Policy:

It is the policy of to dispose of all expired, discontinued or unused medications in a manner that ensures the medications are not used for any purposes other than that which they were intended, and to ensure adequate protection to personnel handling JAFCO trace contaminated antineoplastic waste.

Procedures:

- A. Medication Disposal:
 - 1 Expired or unused medication will not be used for administration.
 - 2 Medication with incorrect labeling or count will be returned to the pharmacy of origin for correction.
 - 3 Each medication’s expiration date will be checked prior to each administration.
 - 4 Any expired, unused or discontinued medication will be removed from the storage area, with the following information recorded in the Medication Disposal Log:
 - a Date discontinued or expired.
 - b Prescription number.
 - c Individual’s name.
 - d Medication, strength, quantity.
 - e Disposal method (returned to pharmacist for disposal)
 - f Staff signature.
 - g Pharmacy Signature
 - 5 Medication Disposal Methods:
 - a Return unused medication to pharmacist for disposal and/or to a Broward County Medication Disposal location.
 - b Empty medication containers, used creams, ointments, etc., will be placed in the trash after any identifying labels are removed or made illegible.

Signature:



04/05/08

Executive Director

Date

Clinical Department

C-47

Clinical Emergency Services

Original Date: 02/14/08
Revision Date: N/A
Policy Number: C-47
Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to ensure that the emergency medical and mental health needs of all persons served are addressed twenty-four hours a day, seven days a week. The organization will maintain an "on-call" system when staff is not available to cover the emergency medical and mental health needs of all persons served.

Procedures:

- A. The on call system will be activated during non-program hours when full-time day staff is not available at the facilities. Program hours are Monday through Thursday 8:30 am to 7:00 pm, and Friday 8:30 am to 5 pm. Further, crisis intervention is provided 24 hours/ 7 days a week. A cell phone will be activated at all times outside of the program hours. The cell phone number will be provided to all persons served through a variety of methods that will include: handbook, posted throughout the clinic, and in clinic brochures.
- B. Coverage for the on-call system will be established on a rotation basis. Emergency cell phone coverage will be handled by the on call staff and supervisors. Each coverage period will be one week in length.
- C. An on call schedule will be developed each month by the Director of Operations and Clinical Services or designated staff and distributed to all persons responsible for coverage.
- D. An employee will be designated as the on-call supervisor and will be responsible for the following:
 - 1. On call/emergency intervention policy and procedure development and revision.
 - 2. Serve as the back-up for all on call personnel.
 - 3. Responsible for coordinating on-call schedule changes.
 - 4. Responsible for communicating all on-call schedule changes.
 - 5. Oversee cell phone maintenance.
- E. All persons responsible for crisis cell phone coverage that are unable to fulfill on-call duties for any reason will initiate action to find a replacement for their scheduled time of duty, and will notify the on-call supervisor of the change.
- F. When a designated crisis intervention staff receives an emergency page, they will respond as follows:
 - 1. If it is determined that the person is at harm to self or others the following will apply:
 - a. If an unexpected medical emergency is occurring that is an immediate threat to person served or others, identifying information will be sought and 911 will be contacted and reported that a behavioral emergency is in progress.
 - b. Following contact with emergency personnel, program supervisor will be contacted and apprised of the situation.
 - 2. If it is determined that the person is experiencing a medical problem, the following will apply:
 - a. The on-call staff will seek information to fully assess the situation and determine if the person served needs further medical attention and/or treatment.
 - b. If it is determined that the person served requires follow up medical attention and/or treatment, then the on-call staff will contact the psychiatrist of the person served and the Director of Operations and Clinical Services (or designee).
 - c. If it is determined that the situation is not of an emergency nature that threatens the person's served physical or mental health status, the following will apply:
 - d. The person served will be advised to follow up with his/her assigned therapist, the Director of Operations and Clinical Services or designated staff.
 - 3. All calls may necessitate the completion of a critical incident report, as per the organization's policy in this area.
 - 4. All calls will be logged in the Emergency Call Log.

Signature:



Executive Director

02/14/08

Date

Clinical Department

C-48

Waiting List

Original Date: 04/08/08

Revision Date: 04/25/14

Policy Number: C-48

Department of Origin: Clinical Department

Policy:

JAFCO aims to serve families immediately upon referral without using a waitlist, with the exception of the MST program and programs offered through the Ability Center, waitlists are not maintained. In the event that the persons served require treatment and services beyond the scope of the agency, appropriate referrals shall be made.

Procedures:

The JAFCO Director of Operations and Clinical Services (or designee) shall make the referral to the appropriate receiving facility based on the needs of the persons served below is a list of agencies that JAFCO may refer to:

JAFCO Outpatient:

- Henderson Mental Health Center
- Smith Community Mental Health Center
- 211 First Call for Help
- Kids in Distress
- Chrysalis Center
- Camelot Care Services
- Children's Home Society
- Mental Health Association
- Children's Harbour
- Institute for Child and Family Health
- Memorial Healthcare System
- Family Central

JAFCO Residential Program

- ChildNet
- Camelot Care
- 4 Kids
- Children's Harbour
- Children's Home Society
- Family Resource Center
- CHARLEE
- CFCE
- Covenant House
- Lippmann Shelter

JAFCO Children's Ability Center

- APD (Agency for Persons with Disabilities)
- 211 First Call for Help
- ARC Broward
- Family Network on Disabilities.

Signature:



04/08/08

Executive Director

Date

Clinical Department

C-49

Group Home Twenty-Four Hour Supervision

Original Date: 02/07/07

Revision Date: NA

Policy Number: C-49

Department of Origin: Clinical Department

Purpose:

JAFCO will provide all group home residents with twenty-four hour adequate supervision.

Procedure:

The Residential Director is charged with the duty of scheduling and assuring the appropriate staff to meet staff/person served ratio to provide twenty-four hour supervision seven days a week. In the event that a staff calls out sick, they shall notify the Group Home Manager on call cell phone. The manager will immediately arrange for adequate coverage according to the following ratio:

Ages 1 to 6:	1 to 4 awake	1 to 6 asleep
Ages 6 and older:	1 to 6 awake	1 to 12 asleep

Overnight Supervision:

The JAFCO Group Home program was specifically designed with a private bathroom in each bedroom and one child per room whenever possible to allow for night supervision without awake staff using an alarm system. When all the children are in their bedrooms for the evening, they will close their doors allowing the staff to set the house alarm and then allow that staff to sleep. All doors have a sensor that shall activate a slight beep on the keypad in the staff bedroom when doors are opened. The staff must awake in order to turn off the alarm and assess the child's needs. In the event of an emergency the Group Home Manager on call will come to the facility.

The group-home manager and Director of Operations and Clinical Services (or executive director in his or her absence) shall be reachable by cell phone twenty-four hours a day, seven days a week. All emergencies shall be communicated to the Director of Operations and Clinical Services and /or Executive Director immediately for direction.

Signature:



02/07/07

Executive Director

Date

Clinical Department

C-50

Group Home Communication

Original Date: 02/07/07

Revision Date: NA

Policy Number: C-50

Department of Origin: Clinical Department

Purpose:

It is the intent of JAFCO to maintain clear communication among staff to facilitate efficiency and quality of services provided to the group-home person served.

Procedure:

In order to allow communication among staff working different shifts a communication log shall be kept in the staff safe room of each group home. The log shall be deemed the formal form of communication for children’s needs, behaviors, consequences and appointments. On a daily basis, the manager or a designated staff shall enter the name of the person served, significant event and /or appointment (s). In the event of an appointment, the manager also confirm that appointment with that staff member by phone to ensure compliance.

Upon arrival to their shift, each staff shall review the log of duties, initial it as the method of acknowledgment and call the manager on duty with questions and concerns.

Follow- up will be documented in the group home case notes. The manager shall review the log on a daily basis.

Signature:



02/07/07

Executive Director

Date

Clinical Department

C-51

Placement Availability

Original Date: 02/05/07

Revision Date: NA

Policy Number: C-51

Department of Origin: Clinical Department

Purpose:

It is the intent of JAFCO to receive referrals and offer immediate placement to children in need of shelter placement. A twenty-four, seven days per week service has been established to meet our commitment.

Policy:

The JAFCO staff shall verify availability in a timely manner in order to serve effectively and efficiently the person served referred to the shelter program. The shelter manager or designated staff shall be available to receive referrals via office phone or cell phone twenty –four hours a day, seven days a week.

Procedure:

Once the referral has been placed, the manager shall determine the availability of the bed, by taking into consideration the age of the child, sex and any special needs and alerts. The Director of Operations and Clinical Services (or designee) and/ or the Executive Director shall make all final determinations on placements. The designated JAFCO staff will contact the referral source as soon as possible or at most within one hour of the referral and provide a verbal disposition.

Signature:



Executive Director

02/05/07

Date

Clinical Department

C-52

Emergency Shelter Communication

Original Date: 02/07/07

Revision Date: NA

Policy Number: C-52

Department of Origin: Clinical Department

Purpose:

It is the intent of JAFCO to maintain clear communication among staff in to order increase efficiency and quality of services provided to the shelter person served.

Procedure:

The shelter manager shall establish a clear method of communication among staff working different shifts. The manager shall designate a journal that shall be kept inside the shelter office. This system shall be the form of formal communication. On a daily basis, the manager or a designated staff shall enter the name of the person served, significant event and or appointment (s). In the event of an appointment, the manager shall also confirm that appointment with the staff member by phone to ensure compliance.

At the commencement of each shift, each staff shall review the journal and initial it as the method of acknowledgment.

Signature:



Executive Director

02/07/07

Date

Clinical Department

C-53

Shelter Care Twenty-Four Hour Supervision

Original Date: 02/07/07

Revision Date: NA

Policy Number: C-53

Department of Origin: Clinical Department

Purpose:

JAFCO will provide the all children placed in the JAFCO Children’s Emergency Shelter with twenty-four hour awake supervision.

Procedure:

The shelter manager shall be charged with scheduling and assuring the appropriate ratio of staff to person served in order to provide twenty-four hour awake supervision based upon the following ration to be used as a minimum standard of service:

Ages 0 to 6:	1 to 4 awake	1 to 6 asleep
Ages 6 and older:	1 to 6 awake	1 to 12 asleep

In the event of a staff calling in sick, the team leader will immediately beep the Shelter Manager to arrange for coverage. In the event that coverage is not secured, the Shelter Manager will come to the facility until adequate personal can be secured according to ratio.

Regardless of the census there will never be less than two staff for the night shift to allow for coverage in an emergency.

The night shift staff shall be awake at all times, completing laundry and other chores. There shall be fifteen-minute bed checks. These checks shall be logged and the manager shall review them daily. The children’s bedroom doors shall remain open for added supervision. During awake hours only one child is permitted in the bedroom/bath at a time. All play activity is to take place in the common area.

The shelter manager and/or Director of Operations and Clinical Services (or designee) shall be reachable by cell phone twenty-four hours a day, seven days per week. All emergencies shall be communicated to the Director of Operations and Clinical Services (or designee) and/or Executive Director in his or her absence.

Signature:



02/07/07

Executive Director

Date

Clinical Department

C-54

Shelter Care Educational Plan

Original Date: 02/07/07

Revision Date: NA

Policy Number: C-54

Department of Origin: Clinical Department

JAFCO is committed to continuing the education of all children placed in our facility with the following guidelines:

1. All school age children grades K through 12 will attend school as soon as possible following placement. Child Net children will be transported to their home school by JAFCO until transportation can be arranged through the school board.
2. Pre-school age children will attend the neighborhood pre-school, Preschool Prep, transported by JAFCO.
3. If for any reason a child is not able to attend pre-school or public school immediately the JAFCO pre-school teacher will work with these children on a daily basis with the following goals. Of course, based upon the level of abuse or neglect and the amount of time that the children remain at the shelter (sometimes only one night), there will be different levels of development that are accomplished. Therefore these goals serve only as a guideline for the pre-school teacher to work with.

	Physical and Language	Emotional	Social
<p>Birth To 1 month</p>	<p><u>Feedings</u>: 5-8 per day <u>Sleep</u>: 20 hrs. per day <u>Sensory Capacities</u>: makes basic distinctions in vision, hearing, smelling, tasting, touch, temperature, and perception of pain</p>	<p>Generalized Tension</p>	<p>Helpless Asocial Fed by mother</p>
<p>2 months To 3 months</p>	<p><u>Sensory Capacities</u>: color perception, visual exploration, oral exploration. <u>Sounds</u>: cries, coos, grunts <u>Motor Ability</u>: control of eye muscles, lifts head when on stomach.</p>	<p>Delight Distress Smiles at a Face</p>	<p>Visually fixates at a face, smiles at a face, may be soothed by rocking.</p>
<p>4 months To 6 months</p>	<p><u>Sensory Capacities</u>: localizes sounds <u>Sounds</u>: babbling, makes most vowels and about half of the consonants <u>Feedings</u>: 3-5 per day <u>Motor Ability</u>: control of head and arm movements, purposive grasping, rolls over.</p>	<p>Enjoys being cuddled</p>	<p>Recognizes his mother. Distinguishes between familiar persons and strangers, no longer smiles indiscriminately. Expects feeding, dressing, and bathing.</p>

Clinical Department

C-54

Shelter Care Educational Plan (continued)

7 months to 9 months	<u>Motor Ability:</u> control of trunk and hands, sits without support, crawls about.	Specific emotional attachment to mother. Protests separation from mother.	Enjoys "peek-a-boo"
10 months to 12 months	<u>Motor Ability:</u> control of legs and feet, stands, creeps, apposition of thumb and fore-finger. <u>Language:</u> says one or two words, imitates sounds, responds to simple commands. <u>Feedings:</u> 3 meals, 2 snacks <u>Sleep:</u> 12 hours, 2 naps	Anger Affection Fear of strangers Curiosity, exploration	Responsive to own name. Wave bye-bye. Plays pat-a-cake, understands "no-no!" Gives and takes objects.
1 years to 1 ½ years	<u>Motor Ability:</u> creeps up stairs, walks (10-20 min), makes lines on paper with crayon.	Dependent Behavior Very upset when separated from mother Fear of Bath	Obeys limited commands. Repeats a few words. interested in his mirror image. Feeds himself.
1 ½ years to 2 years	<u>Motor Ability:</u> runs, kicks a ball, builds 6 cube tower (2yrs) Capable of bowel and bladder control. <u>Language:</u> vocabulary of more than 200 words Sleep: 12 hours at night, 1-2 hr. nap	Temper tantrums (1-3yrs) Resentment of new baby	Does opposite of what he is told (18 months).
2 years to 3 years	<u>Motor Ability:</u> jumps off a step, rides a tricycle, uses crayons, builds a 9-10 cube tower. <u>Language:</u> starts to use short sentences controls and explores world with language, stuttering may appear briefly.	Fear of separation Negativistic (2 ½ yrs.) Violent emotions, anger Differentiates facial expressions of anger, sorrow, and joy. Sense of humor (Plays tricks)	Talks, uses "I" "me" "you" Copies parents' actions. Dependent, clinging, possessive about toys, enjoys playing alongside another child. Negativism (2 ½ yrs.). Resists parental demands. Gives orders. Rigid insistence on sameness of routine. Inability to make decisions.

Clinical Department

C-54

Shelter Care Educational Plan (continued)

3 years
to
4 years

Motor Ability: Stands on one leg, jumps up and down, draws a circle and a cross (4 yrs.) Self-sufficient in many routines of home life.

Affectionate toward parents.
Pleasure in genital manipulation
Romantic attachment to parent of opposite sex
(3 to 5 yrs.)
Jealousy of same-sex parent.
Imaginary fears of dark, injury, etc. (3 to 5 years)

Likes to share, uses "we"
Cooperative play with other children, nursery school.
Imitates parents.
Beginning of identification with same-sex parent, practices sex-role activities. Intense curiosity & interest in other children's bodies.
Imaginary friend.

4 years
to
5 years

Motor ability: mature motor control, skips, broad jumps, dresses himself, copies a square and a triangle.

Language: talks clearly, uses adult speech sounds, has mastered basic grammar, relates a story, and knows over 2,000 words (5 yrs.)

Responsibility and guilt
Feels pride in accomplishment

Prefers to play with other children, becomes competitive
prefers sex-appropriate activities

Signature:



Executive Director

02/07/07

Date

Clinical Department

C-55

Positive Approaches to Behavioral Interventions

Original Date: 02/05/09

Revision Date: 12/3/2013

Policy Number: C-55

Department of Origin: Clinical Department

Policy:

It is the policy of JAFCO to use positive approaches to foster appropriate behavior and skill acquisition to the person served. JAFCO is committed to providing direction and training to all program staff that provide direct care/services to persons served.

Purpose:

The intent of this policy is to encourage the use of positive approaches to behavioral interventions. The objective of any behavioral intervention should be that the persons served acquire appropriate behaviors and skills in order to improve daily functioning. It is critical that behavioral intervention techniques focus acquisition rather than merely behavior reduction or elimination.

Procedure:

Staff that provide direct care or service shall participate in behavior management training at a minimum of one time per year. Positive behavior interventions are approaches to a persons served behavior designed to teach and support socially appropriate conduct and to supplant socially inappropriate conduct. The training shall include but not be limited to the following:

- building rapport with persons served.
 - understanding basic behavioral concepts.
 - understanding behavior.
 - giving clear directions and consequences.
 - ensuring that rules are clear and enforceable.
 - identifying ways to keep the environment positive and reinforcing, giving praise.
 - assessment of the environment to identify and remove triggers.
 - identification or reinforcers for the persons served ranging from those that are naturally occurring to artificial reinforcers.
 - conflict resolution and anger management training, intervening early in the chain of events and de-escalation techniques.
 - managing severe aggression (PCM).
 - assessing and assisting with the development of a personal safety plan as need.
1. All staff providing direct care/ services shall be required to recognize and report to their direct supervisor all negative and/or self-defeating behaviors exhibited by persons served. A clinician shall conduct an assessment in order to determine the severity of the behavior and develop an addendum to the treatment plan. The plan shall include positive approaches and describe strategies for dealing with the person served before, during, and after rule breaking/inappropriate behaviors.
 2. Clinical staff shall assess person served behaviors prior to treatment planning and continuously throughout the course of treatment. During active treatment, positive interventions shall be documented in:
 - a. Assessments
 - b. treatment plans
 - c. progress notes
 - d. treatment plan reviews

Clinical Department

C-55

Positive Approaches to Behavioral Interventions (continued)

3. When a safety plan is required, it shall be formulated with the persons served and legal guardian and shall be maintained as part of the treatment plan. The safety plan shall be reviewed periodically during therapeutic sessions and such review will be documented on a progress note. The progress of behaviors shall be reviewed and documented at least quarterly in the form of a treatment/care plan review. It shall be the decision of the clinical team of when the safety plan is no longer required.
4. As part of maintaining positive approaches to the person severed needs all staff shall adhere to procedures concerning timely and consistent response to incidents of harassment and/or violence (see harassment and grievance policies).

Signature:



12/3/2013

Executive Director

Date

Clinical Department

C-56

Courtesy Transportation to Facilitate Supervised Visitation

Original Date: 07/11/12

Revision Date: NA

Policy Number: C-56

Department of Origin: Clinical Department

Policy:

When deemed appropriate by JAFCO'S Director of Operations and Clinical Services (or designee) or Shelter Manager, the Shelter program may provide courtesy transportation for children placed in the shelter to accommodate family visitation.

Procedure:

1. The Shelter Manger shall provide confirmation prior to leaving the JAFCO premises of the visit time, location and name of designated visit supervisor to the Shelter staff responsible for transportation of children to/from a visit.
2. Only children directly involved in the visit shall be transported.
3. Shelter staff responsible for the transportation will remain with the child(ren) in the vehicle until the Case Manager, Child Advocate or other previously identified visit supervisor arrives and takes the child(ren) into the visit.
4. The visit supervisor shall provide photo identification to the Shelter staff before taking the child(ren) into the visit and will sign the visitation log sheet.
5. If the designated visit supervisor is not available to take the child(ren) into the visit at the scheduled time and location, the staff will contact their supervisor/shelter manager for further instructions.
6. At the termination of the visit, Shelter staff will take the child(ren) back into their vehicle (from the designated visit supervisor only).
7. Shelter staff shall not have direct contact with family members.
8. Transportation will not extend beyond the Broward County border.

Signature:



Executive Director

07/11/12

Date

Clinical Department

C-57

MST Gift Card Incentive Program

Original Date: 07/18/12

Revision Date: NA

Policy Number: C-57

Department of Origin: Clinical Department

Policy:

JAFCO shall purchase and, as needed, maintain a supply of gift cards for incentives.

Procedure:

1. JAFCO’s comptroller is in charge of safe keeping the gift cards. The cards will be placed in a sealed envelope and locked securely each evening in the financial office. The cards are placed under 2 locks at the end of each business day (in a locked drawer and in a locked office for the safekeeping of gift cards).
2. Clinical staff shall assess the needs of each person served assigned to their caseload. The staff shall prioritize needs and present the case(s) to the Director of Operations and Clinical Services (or designee). The Director of Operations and Clinical Services (or designee) shall determine whether an incentive is warranted and shall contact the comptroller to authorize the incentive. The staff shall complete the card log to include the name of the recipient, the date and the reason for the card. In addition, the staff shall sign the log.
3. Gift Cards shall be purchased as needed and issued to persons served within the quarter, if possible. All gift cards must be issued to persons served before the end of the Fiscal Year and/or prior to the end of the contract. Each quarter, the Director of Operations and Clinical Services (or designee) shall determine those persons served that may be eligible for an incentive award and purchase only the cards that are to be distributed.
4. Gift cards may not be purchased in the month of September, the last month of the contract term.
5. When JAFCO invoices CSC, JAFCO must submit the original store receipt for the cards. A distribution log, signed by the recipient(s), must be maintained on site for review by CSC Compliance Accountants.

Signature:



07/18/12

Executive Director

Date

Clinical Department

C-58

Internal Case Transfer

Original Date: 09/24/12
Revision Date: NA
Policy Number: C-58
Department of Origin: Clinical Department

Policy:

It is the internal policy of JAFCO to transfer person served cases (when applicable) from one therapist to another in a consistent manner in all programs. This will ensure that all persons served transition to a new therapist with minimal or no disruption to treatment.

Procedure:

1. The Director of Operations and Clinical Services (or designee) will approve all case transfers.
2. The original therapist will discuss the client(s) case with the new therapist.
3. The original therapist and the new therapist will have a joint session with the client.
4. The Director of Operations and Clinical Services (or designee) will reassign the case on the activity log.
5. All of the above is documented in the clients file.
6. No treatment plan review is required unless it is due.

Signature:



Executive Director

09/24/12

Date

Clinical Department

C-59

Release and Aftercare Plan

Original Date: 12/3/2013
 Revision Date: NA
 Policy Number: C-59
 Department of Origin: Clinical Department

Policy:

It is the intent of JAFCO to provide the best quality treatment and services to our persons served. In the attempt to establish effective goals and objectives, the treatment team shall take into consideration the person served and guardians' desired outcomes. The treatment team will assess all areas of need and shall begin the process of discharge planning upon admission. When a discharge is planned from the residential program, the release and aftercare plan (form) shall be completed within 45 days prior to release and sent to the assigned Child Advocate at least 30 days prior to the release date. If the release is unforeseen and unplanned, the report shall be completed and sent to the Child Advocate within 10 days of when the discharge date becomes known. The report shall include the following;

1. A summary of services, an assessment of goal achievement, and identification of the needs which remain to be met.
2. Recommendations for treatment following release from care, including provisions for support and referrals.
3. The anticipated date and reasons for release.
4. The person served's specific living arrangement after release and the contact information of the placement after release if known.

Scope:

This policy applies to all members of the clinical and residential team.

Responsibility:

It is the responsibility of the Director of Operations and Clinical Services and/or designee to implement this policy. It shall be the responsibility of the Director of Operations and Clinical Services to disseminate this information to staff under their direction.

Purpose:

JAFCO shall insure continuity of care for all persons served. The function of this policy is to indemnify that the person served is safely and efficiently discharged to the appropriate environment and/or level of care.

Signature:



Executive Director

12/03/2013

Date

Clinical Department

C-60

Harassment Policy

Original Date: 12/03/13
Revision Date: NA
Policy Number: C-60
Department of Origin: Clinical Department

Policy:

JAFCO is committed to a nurturing and therapeutic environment where persons served shall achieve their full potential. JAFCO's policy and procedure on harassment is designed to provide an environment where it is clear that harassment is unacceptable, thereby reducing the chance that harassment will occur in the first instance; and a mechanism to resolve complaints where it is felt that harassment has occurred.

Disciplinary action may be taken to deal with actions or behavior, intentional or unintentional, which results in a breach of this policy. Disciplinary action may also be taken if allegations of harassment are found to be malicious or vexatious.

It should be noted that harassment can also lead to civil and criminal claims beyond JAFCO's own disciplinary proceedings. For example, victims may be able to apply to the Civil Courts for an injunction to restrain the offending behavior or claim damages for anxiety caused.

JAFCO's Grievance Procedure provides an alternative means of resolving allegations of harassment, if the incident/s occurred on the JAFCO campus premises and involves a person served against another person served. The person may take forward a complaint under the grievance procedure (which includes a mechanism for appeal) or under this procedure.

Scope:

This policy applies to all persons served who may be a victim of or perpetrator to harassment:

- A person served against a person served
- A person served against a member of staff

Definition of Harassment:

For the purpose of this policy, harassment is defined as unwelcome comments (written or spoken) or conduct which violates an individual's dignity, and/or creates an intimidating, hostile, degrading, humiliating or offensive environment.

Examples of Harassment:

- **Sexual harassment:** unnecessary touching, unwelcome jokes of a sexual nature, inappropriate use of suggestive visual display, intimidating behavior such as ; asking for, or offering sexual favors in return for privileges
- **Bullying:** This can be physical or psychological, examples psychological bullying includes unmerited criticism, isolation, gossip, essential information withheld, or behavior that is intimidating or demeaning.
- **Racial harassment:** Examples include inappropriate questioning and/or jokes about racial or ethnic origin offensive and intimidating behavior, including threatening gestures.
- **Harassment of disabled people:** Examples include discussion of the effects of a disability on an individual's personal life, uninvited touching or staring, and inappropriate questioning about the impact of someone's disability.
- **Stalking:** This can be physical or psychological, including leaving repeated or alarming messages on voice mail or e-mail, following people home, or approaching other sand asking personal information.
- **Harassment on ground of sexual orientation:** Examples include homophobic remarks or unwelcome jokes, threats to disclose sexuality and intimidating questions about sexual activity.

Clinical Department

C-60

Harassment Policy (continued)

Responsibility of all staff and person served:

All staff and person served can help to prevent harassment by being sensitive to the reactions and needs of others, and ensuring that their conduct does not cause offence; discourage harassment by others through making it clear that such conduct is unacceptable and supporting colleagues and peers who are taking steps to stop the harassment.

JAFCO is responsible for providing an environment where it is clear that harassment is not acceptable; taking action when it is aware that harassment may be or is taking place; ensuring that managers are aware of their responsibility for trying to prevent and, in the first instance, resolve problems in the immediate workplace.

Monitoring of policy and procedures

All persons served are encouraged to notify the employee which they feel most comfortable with to disclose their concern. That employee along with the person served shall document the incident and provide it to the Director of Operations and Clinical Services or designee. The Director of Operations and Clinical Services or designee shall have 5 business days to research the allegation. On the 6th business day, the Director of Operations and Clinical Services or designee shall make every effort to correct the situation.

The Incident Report Review Committee shall compile statistics and trends relating to cases of harassment and or incidents and shall provide an annual report to the CQI Council containing information about the number and nature of complaints and any disciplinary action taken, without naming the individuals involved. This policy will be regularly reviewed.

Individual liability

An employee or person served who is found to be harassing another individual may be liable at law for his/her actions and may face action in the courts.

Signature:



Executive Director

12/3/2013

Date

Clinical Department

C-61

Missing Children/Runaway Policy

Original Date: 04/04/2007

Revision Date: 01/31/2014

Policy Number: C-61

Department of Origin: Clinical Department

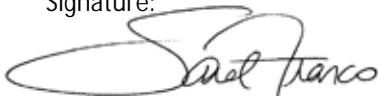
Policy:

It is the policy of JAFCO to ensure that there is a system of comprehensive notification when a staff detects that a child is missing. JAFCO staff shall be trained to provide continuous supervision to all children in their care and to follow procedures as listed below. All new employees shall be trained during their orientation period upon hire. In addition, the agency shall provide ongoing training throughout the year. In order to ensure that best efforts are made to facilitate the recovery of a child.

Procedure:

1. The staff member who notices that a child is missing will;
 - a. Immediately report this to the on-site supervisor and notify the emergency support team (all supervisors on campus and those who are on-call).
 - b. The search shall begin with the immediate environment.
 - c. The on-site supervisor shall call law enforcement within 5 minutes of the child missing and will call the Director of Operations and/or Executive Director immediately after the call to 911.
 - d. If law enforcement is not cooperative the supervisor shall take the officers name and specific enforcement agencies name. The supervisor shall then speak to a supervisor of said agency.
 - e. If the child was placed by Child Net, the JAFCO supervisor shall notify the Child Net Runaway Hotline at 954-414-5999.
 - f. The on-site supervisor will notify the child's legal guardian that the child is missing.
 - g. In the event that the missing child was placed at JAFCO by an agency such as Child Net, the placing agency shall be notified immediately by the on-site supervisor.
2. The emergency support team will assist in the search for the child by: using a physical search, reviewing camera surveillance, communicating via cell phone and text message and using any GPS system that is in place. The searchers will call out the name of the child as they are searching and use any information from the legal guardians about what incentive might encourage the child come out of a hiding spot.
3. The on-site supervisor shall be the person responsible for communicating with law enforcement until the child is located.
4. Once the child is located, his/her legal guardian will be notified immediately and supportive counseling will be given.
5. An incident report shall be submitted within 24 hours to any agency that monitors placements at JAFCO and to the Director of Operations.
6. Within 24 hours after the child is located, the Director of Operations or designee shall conduct a debriefing with participating staff to review the incident in detail.

Signature:



Executive Director

01/31/2014

Date

JAFCO Policy and Procedure Manual
Foster Care & Adoption Program

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CF-9	Services to Adoptive Parents
CF-10	Adoption Minimal Requirements
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The above mentioned policies and plans have been reviewed and or revised by the executive director.

Signature:

Executive Director

Date

Foster Care & Adoption Program

CF-1

Monitoring and Annual Licensing Study

Original Date: 09/01/06
Revision Date: NA
Policy Number: CF-1
Department of Origin: Foster Care & Adoption Program

Policy:

A JAFCO staff member will conduct an annual re-licensing evaluation of the agency's licensed foster homes in order to make a timely recommendation to the department concerning renewal of the family's license.

Signature:



Executive Director

09/01/06

Date

Foster Care & Adoption Program

CF-2

Services to Children in Foster Care

Original Date: 09/01/06
Revision Date: NA
Policy Number: CF-2
Department of Origin: Foster Care & Adoption Program

Policy:

JAFCO shall supervise the care of the child and shall coordinate the planning and services to the child and his family as stated in the case plan.

The JAFCO social worker shall see each child as often as necessary to carry out the case plan. Children in family foster care shall be visited at least monthly.

When the case plan for the child is to return to his/her parents, JAFCO shall meet with the parents and the child on a regular basis to assess progress in the following areas:

- Resolution of the problems which precipitated placement;
- Any difficulties in the relationship between parents and child;
- The family's adjustment to the separation;
- Achievement of any case plan goals.

Should the parents or child require any services not offered by JAFCO, a referral shall be made by JAFCO to the appropriate available community service. Arrangements shall be made by the referring agency to maintain communication with the second service provider and progress and lack of progress made as a result of the alternate services shall be documented in the case file.

JAFCO shall make provisions for any available specialized health care services which are needed. Each child shall have a dental and physical examination annually. Psychological, psychiatric or psychometric evaluation and counseling shall be provided as needed.

JAFCO shall provide assistance to foster parents including counseling and services if these are needed in order to support the placement.

Signature:



Executive Director

09/01/06

Date

JAFCO Policy and Procedure Manual
Foster Care & Adoption Program
CF-3 Foster Home Licensing

Original Date: 09/01/06
Revision Date: NA
Policy Number: CF-3
Department of Origin: Foster Care & Adoption Program

Procedure:

JAFCO shall conduct a thorough licensing study to determine the applicant's ability to comply with the licensing standards set forth in this rule.

The licensing home study shall include at least one home visit in addition to office contacts. Face-to-face interviews with each member of the applicant's household shall be conducted. All contacts shall be documented in writing.

JAFCO will have foster homes available in the event that an adoptive placement disrupts and the child needs to be temporarily placed.

The foster parents and members of their household 18 years of age and older must meet the screening requirements of Section 409.175, F.S., Chapter 10-20, F.A.C.

JAFCO shall recommend to the department that the license application be granted or denied.

Signature:



Executive Director

09/01/06

Date

JAFCO Policy and Procedure Manual
Foster Care & Adoption Program
CF-4 Foster Home Studies

Original Date: 09/01/06
Revision Date: NA
Policy Number: CF-4
Department of Origin: Foster Care & Adoption Program

Procedure:

A qualified JAFCO staff member shall conduct a foster home study of each foster home applicant.

The study shall assess the following areas:

- The family's motivation for applying to become a foster family;
- The strengths, weaknesses, and personal adjustment of each member of the household;
- An assessment of the applicant's ability to provide for the physical and emotional needs of a child;
- The adjustment of any biological children in the home;
- Discussion of the family's religious orientation, if any;
- The applicant's attitude toward the parents of children placed in foster care;
- The applicant's child caring skills;
- The type of child desired;
- The types of children who might be appropriate for placement with the family;
- The types of children who might be inappropriate for placement with the family.

Signature:



Executive Director

09/01/06

Date

Foster Care & Adoption Program

CF-5

Revoke Foster Home License

Original Date: 09/01/06

Revision Date: NA

Policy Number: CF-5

Department of Origin: Foster Care & Adoption Program

Policy:

JAFCO shall send the department written notice of their intent to request revocation of a family foster home license. JAFCO shall state the reasons they are contemplating revocation and shall provide the department with documentation supporting their findings. All license revocations shall comply with requirements of Chapter 120, F.S.

Signature:



Executive Director

09/01/06

Date

Foster Care & Adoption Program

CF-6

Responsibility to Foster Parent

Original Date: 09/01/06
Revision Date: NA
Policy Number: CF-6
Department of Origin: Foster Care & Adoption Program

Policy:

JAFCO shall provide or identify training opportunities for foster parents to increase their skills and ability to parent children who are not their own. JAFCO shall ensure that each newly licensed foster parent receive not less than 12 hours of training per year during the first two years of licensure. Training opportunities should include training on agency policy, rules and laws, training which provides foster parents with an understanding of foster care, training which provides foster parents with an understanding of the needs of children and their families, training on the responsibilities of the foster parent to the agency and the child.

JAFCO shall have a signed agreement with all foster parents which includes the following:

- Expectations and responsibilities of the agency staff and the foster parents
- The fiscal and medical arrangements for the children placed in the home
- The authority which foster parents can exercise for the children placed in their home
- The actions which require agency staff authorization; and
- A statement of the agency's discipline policy.

Foster Home Subsidy and Board Rate:

JAFCO's Board of Directors has decided at present to set its foster home subsidy and board rates in accordance with current DCF District 10 rates. JAFCO will periodically review its subsidy and board rate policy and may or may not, in the future, be linked to Duff's rate structure.

Signature:



Executive Director

09/01/06

Date

Foster Care & Adoption Program

CF-7

Confidentiality of Foster/Adoptive Parents

Original Date: 09/01/06

Revision Date: NA

Policy Number: CF-7

Department of Origin: Foster Care & Adoption Program

Policy:

All foster and adoptive parents are required to guard the confidentiality/privacy of all of the children and families served by JAFCO. Foster/Adoptive parents, as well as JAFCO staff, will not discuss any information regarding any child or family to anyone else who does not have the right and need to have said information as set forth in the guidelines as published under the State of Florida, chapter 39. Discussion of incidents relative to children/families is to be limited among JAFCO staff and excluded to persons outside the JAFCO system.

Foster/Adoptive Parents wishing to review records must first consult with the child's assigned worker. After receiving approval, the records may be reviewed in the JAFCO office area.

Signature:



Executive Director

09/01/06

Date

JAFCO Policy and Procedure Manual
Foster Care & Adoption Program
CF-8 Adoptive Home Study

Original Date: 09/01/06
Revision Date: NA
Policy Number: CF-8
Department of Origin: Foster Care & Adoption Program

Policy:

Qualified JAFCO staff will conduct home studies for prospective adoptive families before the placement of a child, which will include at least one home visit. All prospective JAFCO foster and adoptive families will attend the MAPP Pre-service Training Program. In addition, JAFCO will adopt and utilize the MAPP home study format. The MAPP home study process meets and exceeds 65C-15.028 requirements for adoptive home studies, which require the following to be evaluated and documented in the family file:

1. The evaluation shall be summarized in a written report.
2. The report shall be maintained by the agency as a permanent record, and shall include the following:
3. The applicant's motivation for adoption;
4. The strengths, weaknesses and personal adjustment of each member of the household;
5. The attitudes and feelings of the family, its extended family or significant others towards adoptive children;
6. The attitudes of the applicants toward the birth parents and the reasons children may be in need of an adoptive placement;
7. The applicant's plan for discussing adoption with the child
8. The applicant's emotional stability and maturity
9. The applicant's ability to cope with problems
10. The applicant's capacity to give and receive affection
11. The applicant's child caring skills
12. The adjustment of birth children and previously adopted children, if applicable;
13. The applicant's ability to provide financially for the child and other family members;
14. A medical assessment identifying any medical problems which may limit the applicant's ability to parent a child to adulthood;
15. The applicant's religious orientation, if any;
16. The location and physical environment of the home;
17. The plan for child care if the prospective adoptive parents both work outside the home;
18. A recommendation in regard to the number, age, sex, characteristics, and special needs of the children who can be best served by the family;
19. Evidence of screening of the applicant's by the Florida Protective Services System Abuse Registry and law enforcement clearance; and
20. Any special characteristics or limitations of the applicant's regarding children placed for adoption in their home.

Signature:



Executive Director

09/01/06

Date

Foster Care & Adoption Program

CF-9

Services to Adoptive Parents

Original Date: 09/01/06
Revision Date: NA
Policy Number: CF-9
Department of Origin: Foster Care & Adoption Program

Policy:

1. JAFCO shall provide MAPP (Model Approach to Partnerships in Parenting) training for prospective foster and adoptive families. JAFCO Foster and Adoptive Parents will also be offered opportunities for periodic in-service training. Such training may be offered in the following areas:
 - Crisis intervention and diffusion tactics, strategies, and theory.
 - The dynamics of physical and sexual abuse.
 - Working with special populations, such as learning or physically disabled children; families with serious, acute, or chronic illness; or families who have experienced the death of a loved one.
 - The ethics and legal requirements of working with children and adolescents.
2. JAFCO shall discuss the potential child with the prospective adoptive family and shall prepare them for the placement of a particular child. The preparation shall include, but not limited to:
 - Presentation of written information about the child, his/her personal characteristics, a copy of his complete medical history and files, if available, his academic potential and school performance including copies of school report cards, if applicable, and all available non-confidential information about the child's background and his birth family.
 - Completion of at least one visit with the child prior to placement. Placement of foreign children and infants handled by a licensed Florida child-placing agency are exempted from the requirement of pre-placement visits.
3. A JAFCO social worker shall visit with the adoptive family at least monthly, after the placement of a child, until the adoption is finalized.
4. Observations made during the visits shall be documented in a case file and shall form a basis for case planning with the family and the child.
5. JAFCO shall assist the family and the child with problems that are identified in the placement and shall work toward their remediation.
6. If JAFCO places a child out of the state for the purposes of adoption, the agency shall comply with the Section 409.401, F.S., et seq., the Interstate Compact on the Placement of Children. A request for supervision and services to be provided by another licensed child-placing agency must be in writing. The written request must contain a request for periodic status reports on the child's progress and adjustment.
7. JAFCO shall provide service to the adoptive family and child until the adoptive placement is finalized or terminated.

Description of Adoption Services

A primary objective of JAFCO will be to find permanent adoptive homes within the Jewish community for children in care whose case plans do not indicate a reasonable possibility of returning to the custody of their biological parents within a two year time period. A central tenet of the JAFCO philosophy is that "every child is adoptable" (including older children, adolescents, sibling groups, emotionally disturbed, physically and mentally handicapped, and terminally ill children, etc.).

Making Adoption Accessible to a Wider Spectrum of American Families

Traditional adoption agencies, either intentionally or unintentionally, have developed screening mechanisms designed primarily to consider families described as the "model adoptive couple." This term grew out of a study by Henry Maas in the 1950's of adoption in nine different communities. Maas found that the average adoptive couple was in their mid-thirties, white, Protestant, middle class, active church members, and high school graduates. This portrait of the adoptive family was present in all nine communities "despite differences in community size, degree of urbanization, ethnic composition, economy, geography and history." Maas concluded that adoption agencies saw their role as finding "ideal" families for children, and their interpretation of this ideal family reflected predominant American values. Furthermore, agencies "viewed with suspicion" were any that were willing to accept a placement other than a white, healthy, infant child, even if they met all the criteria of the "ideal" This attitude is illustrated in a 1979 article by Sallie Churchill in which she describes the case of a couple who adopted a set of twin infants.

Foster Care & Adoption Program

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Services to Adoptive Parents (continued)

When it was discovered prior to finalization that one of the twins had cerebral palsy, the agency sought to have the "defective" child institutionalized. The family in this case had to initiate a court battle to obtain the right to adopt both children.

Adoption Alternatives

Among the adoption alternatives to be offered by JAFCO will be the following:

- Closed Adoptions - here all communications and relations between adoptive child and biological family and relatives are completely severed.
- Semi-Closed Adoptions - all communications and relations between the adoptive child and biological family and relatives are completely severed, but the adoptive and biological parents have a written agreement to share information for a specific time period. These agreements generally allow for birth parents to receive pictures and general developmental information from the adoptive parents who forward this material to the adoption agency at agreed upon intervals. The social worker then shares this information with the birth parents. Therefore, no formal contact is required between biological and adoptive parents.
- Semi-Open Adoptions - birth parents meet the parents who will be adopting the child, without any identifying information being shared. Generally, the meeting occurs at the agency after the birth parents has signed relinquishments, prior to the actual placement of the child. The birth parents' social worker is present to help facilitate the discussion. This meeting may or may not be followed up with agreements to continue to share pictures and developmental information for a specific time period.
- Open adoptions - adoptive and birth parents meet and share identifying information. It is important that all parties concerned discuss and decide on definite expectations, visitations, restrictions, and responsibilities, perhaps culminating in a specific written contract.

Innovative Assessment and Adoptive Family Preparation Programs

All prospective adoptive parents will participate in MAPP training, which consists of 24 hours of training and, at appropriate times, also will involve in this experience other members of the family (children, grandparents, etc.). Families attending MAPP training will be encouraged to participate in a mutual selection process whereby the family, together with the agency, will assess the strengths and needs of each family. The preparation program will allow the family to conduct much of their own evaluation, simultaneously with the agency, based on experiences and insights gained during training.

A major objective of the preparation program will be to heighten the awareness of adoptive (and foster) parents while encouraging them to develop their sensitivity and understanding toward birth parents and their needs. Part of the group experience will be informal presentation by a panel consisting of a birth parent who has been involved in sharing, an adopted adult, and an adoptive couple who has participated in a semi-open placement. Couples will also be encouraged to further their understanding through reading material such as "The Adoption Triangle, Adopting the Older Child, and newsletters from Concerned United Birth Parents".

Prospective adoptive parents, like foster parents, will complete eighty percent of their own home study packet. In addition to completion of the preparation program, prospective adoptive families will be screened through the Florida Child Abuse Registry and also through local and national police checks. Families will receive a minimum of two interviews (one of which will be in their own home), and will be responsible for obtaining three personal written references as well as employer references.

Through the involvement of prospective families in the preparation programs, JAFCO staff and the adoptive family will both gain insight into the prospective family, the types of children they could integrate into their family, and the affect that a new family member will have on the family structure. Among the many areas that will be explored in the mutual assessment will be the following:

- What is the perceived importance of blood ties to the family? ("People with a broad psychological recognition of kinship can more readily nurture adopted children, since they do not see kinship as strictly limited to the biological nuclear family, the extended family or the clan." (Ward, p. 25).
- Can the prospective family develop a feeling of "entitlement to parent" - a necessary factor in developing a commitment to the child (Ward, p. 25).

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Services to Adoptive Parents (continued)

- How do the prospective adoptive parents perceive birth parents. To what extent does the prospective family recognize the importance of older children in maintaining past significant relationships (with biological parents, relatives, friends, former foster parents, etc.)? To what extent is the prospective adoptive family willing to consider alternatives to closed adoption?
- What will be the effect of specific types of adoption on family structure and dynamics?
- How will extended family, neighbors, community and friends view the adoption and how prepared is the family for expected "social discrimination"?
- How readily does the family recognize their own needs? Do they have a realistic understanding of their own family structure, relationship, communication pattern, etc. How open is the family to receiving help when necessary from outsiders (i.e., social workers, therapists)?
- To what extent can the family tolerate negative behavior and still be capable of providing the child with emotional support?
- To what extent will family members tend to be overly dependent on the child to meet their own emotional needs? (Ward, p. 26).
- What has been the history of family members in forming past relationships? The formation of strong attachments in the past is considered a good predictor of the ability to form such relationships in the future (Ward, p. 28).

Emphasis on the Promotion of Attachment Building

An essential component in successful adoption is the ability of parent/family and child to bond. The bonding process takes time, and responsible agencies must closely monitor the family-child relationship and do everything in its capacity to promote the development of strong attachment behaviors. JAFCO will follow suggestions by Marc Ward (1981), Vera Fahlberg (1979a, 1979b), and others in the literature who have conducted research on the issue of attachment building. The following actions will be taken to facilitate attachment building, particularly in respect to the placement of older children:

- Sensitize parents to the likely event that their older adoptive children will need to continue past relationships. Support parents in their decision to permit and encourage children to maintain these relationships to the extent the child wishes.
- Promote the adoptive parents "feelings of entitlement." These feelings will be discussed in training and can be encouraged through ensuring parents of both their moral and legal right to adopt a particular child.
- Involve adoptive parents in as many biological parenting functions as possible (i.e., being present at the birth of the child).
- Utilize sensitivity in matching adoptive parents and children in order to ensure that "some characteristics of the former satisfies an important part of the good-parent image of the latter." For example, an articulate child is probably better placed with parents who value verbal interaction than with those who value shared manual tasks." (Ward, p. 22).
- Reinforce parent's feelings of "doing good" both for the child individually and for the community as a whole. Parental gratification for doing the right thing accompanied by "social approval and support" can assist in holding together this relationship until true bonding can occur.
- Provide ongoing support services to both adoptive parents and child.
- Encourage prospective adoptive parents to develop a "psychological pregnancy" through the parental preparation program. Through intensive preparation for parenthood, families can experience a psychological pregnancy providing that agencies can "reduce the insecurity and provide a reliable timeframe for the arrival of the child." (Ward, p. 29).
- Utilize periods of high emotion to promote bonding. Shared experiences of high emotion have been shown to produce bonding. Since adoptive parents are not always present at birth, child psychiatrist Fahlberg offers concrete suggestions for capitalizing on both the parents' and the child's emotions at the moment of the move. The worker can ask parents and child in front of each other if they want this adoption. The affirmative replies (known by the worker) encourages physical closeness such as hugging and kissing. Also, when the child is in the new home, physical illness, tantrums, acute upset over separation, and other occasions when the child is vulnerable can be used to increase reciprocal attachment. (Ward).

Foster Care & Adoption Program

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Services to Adoptive Parents (continued)

- Encourage the family to engage in as many "ritual claiming behaviors" as possible. Examples of such behaviors are:
 - a. Taking a family picture,
 - b. Referring to child as 'my son' or 'my daughter',
 - c. Sending out adoptive announcements,
 - d. Attending synagogue adoption rituals,
 - e. Sharing the extended family and participating in family reunions, and
 - f. Sharing family secrets and jokes (Ward, p. 30).

Post Placement Assessment and Follow-Up Programs

JAFCO will provide at least one year of post placement monitoring and assessment. The extent of ongoing contact will vary according to the appraisal of need. A minimum of one contact per month will be provided during the first year after placement. Extensive support services with daily contacts if necessary will be available for families who are experiencing serious problems. The major objective of the JAFCO post placement program will be to identify developing adjustment problems at a sufficiently early stage to allow for corrective intervention prior to the development of a major crisis. To lessen the possibility of "over intervention" which can either exacerbate minor problems or can lead to over dependence, post placement contact will be low keyed, informal, and supportive in nature. Emphasis generally will be on supporting the adoptive family with encouragement in order to help them gain the necessary insight, communications, and skills to allow for their own internal management of problems. Only when problems are detected which are not being handled effectively and which are of a potentially serious nature, will JAFCO apply corrective intervention techniques.

Through ongoing contact, JAFCO staff will discuss with the parents, child, and other significant family members whether pre-placement expectations are being realized. Parents, for example, will be asked whether their adoptive child's temperament, abilities, demands, appearance, etc. come close to their original expectations. These questions will lead to discussion, which will allow staff to learn how the family is adjusting to the differences between reality and the expectations which accompany most adoptions. The self-image of all family members also will be explored. JAFCO staff will examine how the family is tolerating negative behavior. Are "parents encouraging excessive good behavior early in the placement as proof that the decision to adopt was right?" Are their problems related to what Ward calls "validation of parenthood?" "This can express itself in an emphasis on parental rather than on the child's needs, conflict over discipline, over concern or curiosity about the child's birth parents, problems in attachment formation to a child who is different from an imagined biological child, or positive responses to a child only when he/she resembles a lost real or fantasized child." In these cases there tends to be a "lack of reciprocity in the relationship because the child is depersonalized." (Ward, p. 27).

Other serious problem areas JAFCO staff will monitor is how the family (parent, child, and siblings, etc.) is coping with anxiety and fears relating to rejection. Family members who have a strong fear of rejection often interpret perfectly normal behavior as negative. A slight glance or gaze will often be perceived as a rejection. Problems of this nature can lead the person perceiving the rejection to withdraw emotionally from the relationship, which can then either delay or destroy the movement toward bonding. During placement JAFCO staff will monitor the interrelationship among the family members essentially to see if they are enjoying each other. Mutually enjoyable relationships, given time and frequency of contact, provide both a necessary and sufficient condition for the promotion of strong bonding.

Family Support Services

Where serious problems in family communication and dynamics are detected, either after placement has occurred or with prospective adoptive families, JAFCO staff, or clinicians working cooperatively from outside the agency, will be available to assist in corrective intervention. MAPP training will generally identify such problems prior to the placement of a child. Where these problems are considered correctable, JAFCO will assist those families willing to find professionals to work with them in identifying, understanding, and providing corrective solutions. Families who are capable of correcting identified problems will have their home studies reactivated without prejudice.

Foster Care & Adoption Program

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Services to Adoptive Parents (continued)

Most families will not exhibit serious dysfunctional behaviors during the home study, but due to the tremendous stress associated with the adoptive process, many will develop serious problems after placement. Families in the preparation program will be taught to anticipate such problems and to view as a positive occurrence their ability to recognize family stress and the accompanying problems that result from the placement. Families will be encouraged to share this information with their adoption worker, who can provide both support and guidance in working through these troubled periods. When necessary additional professional assistance will be provided to adoptive families who are experiencing difficulties.

JAFCO will also seek to encourage ongoing adoption support groups. Support groups may be developed for adopted children, adoptive parents, and for adoptive families. JAFCO will explore and assist in the development of retreat programs, trips, and social events.

Fees and Costs

JAFCO is a charitable organization supported by the Jewish Community in South Florida to assist children and families in need. As most families in crisis are financially limited, it has been JAFCO's policy to provide services to person served families without any fees. JAFCO has neither requested nor received any fees from person served. It is JAFCO's intent, however, to charge fees for adoption services based on a sliding fee scale.

Adoption fees shall be established based on the reasonable costs of the following services for the total adoption program:

- Medical services for the child and the birth mother,
- Legal services,
- Home study services,
- Living expense for the birth mother,
- Foster care services,
- Pre and post placement social services,
- Contracted services,
- Other necessary services, and
- Agency facilities and administrative costs.

Signature:



Executive Director

09/01/06

Date

JAFCO Policy and Procedure Manual
Foster Care & Adoption Program
CF-10 Adoption Minimal Requirements

Original Date: 09/01/06
Revision Date: NA
Policy Number: CF-10
Department of Origin: Foster Care & Adoption Program

Policy:

JAFCO has been established to match children in need of a permanent home with those families in the Jewish community who wish to adopt a child and provide him or her with a loving and caring environment. The following minimum requirements are expected of families wishing to adopt a child:

- Residency. Applicants are expected to have permanent residence in the State of Florida and remain in this state until the child is placed, post placement services are completed, and the adoption legalized.
- Marital Status. The preferred plan for a child is a two-parent home, with a mother and a father. However, single-parent applicants are considered and welcomed. A previous divorce on the part of one or both spouses is not a deterrent to adoption. The quality of the current marital relationship is of primary concern.
- Age. The minimum age of each parent is expected to be 24 years. No more than 40 years age difference is desired between parents and the child placed. If couples are older than the desired age, this aspect will be discussed and evaluated on an individual basis and handled with flexibility within reason. Exceptions may be made in order that a certain child's needs for an adoptive home can be met.
- Health. JAFCO seeks parents who are in relatively good health and should have a reasonable life expectancy. Health limitations will be considered on an individual basis. Medical reports will be requested at the start of the adoption study. Infertility reports are not required.
- Finances and Housing. JAFCO expects that a family should have sufficient income to meet the expenses incurred by adding another member to the family and to make reasonable provisions for future financial stability for the child. In evaluating the financial situation, management of resources and planning are considered more significant than the actual level of income. It is expected that housing be adequate to meet the needs of all family members, but there are no definite rules regarding the size or type of housing.

Partial Expense Reimbursement for Adoptive Services

Adoptive parents are asked to participate in the cost of adoptive services. The purpose of the adoptive parents reimbursing the agency is to make it possible for children to have adoptive homes and to continue effective and strong services in adoption. No applicants, however, will be deprived of adopting a child because of their inability to pay the established reimbursement fee. Such decisions will be decided on a case-by-case basis by a committee established for such a purpose by the Board of Trustees. Adjustments and waivers of the fee will be considered in justified situations.

In order to provide adoptive services to all in the community desiring such, JAFCO has established a sliding scale based on family gross annual income from all sources, with a set minimum and maximum fee. Those families who feel that the following fees present an undue hardship, may request a special exemption or fee reduction, which will be decided on a case-by-case basis by the Board of Trustees. In order to maintain consistency and strength in services, JAFCO must ask adoptive parents for full reimbursement wherever possible. The following services and sliding scale rates have been established:

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Adoption Minimal Requirements (continued)MAPP Training and Adoption Home Study:

Sliding Scale Factor:	1.5% of combined family annual gross income
Minimum Fee:	\$600
Maximum Fee:	\$1200
Method of Payment:	
1/2 fee due upon signing the Adoption Placement Agreement.	
1/2 fee due within 30 days after completion of Adoptive Home Study.	

Adoptive Placement*:

Sliding Scale Factor:	10% of combined family annual gross
Minimum Fee:	\$6,000
Maximum Fee:	\$12,000
Method of Payment:	
1/3 due upon receipt of letter of acceptance for placement (non-refundable)	
1/3 due one month after placement	
1/3 due three months after placement	

*Note: Adoptive Placement Fee provides for the following services, where applicable: counseling services, living expense for the birth mother, foster care services, pre and post placement social services, and facilities and administrative costs. It does not cover the legal services and fees for the adopting family. The adopting parents agree to engage an attorney, at their expense, to represent them in the legal proceedings.

As stated prior, JAFCO intends to collect fees in reference to adoption services. No fees are charged to person served families in need of foster or adoption services. JAFCO's Board of Trustees feels that sufficient revenue is available through community contributions and adoption related fees to maintain fiscally viable operations.

Adoption of Child in State Custody

There are no fees for the adoption of children in state custody with the exception of legal fees. Adoptive Parents agree to engage an attorney to represent them at the final hearing. Adoptive Parents will be reimbursed \$1000 per child for this expense. JAFCO can refer the Adoptive Parents to attorneys who are willing to finalize adoptions for children in state custody for this fee.

Interstate Adoptions

If JAFCO participates in the placement of any child for adoption outside of the state of Florida with a member state or jurisdiction must be done in accordance with the Interstate Compact on the Placement of Children pursuant to the following procedures, which shall also be used when placing or bringing a child into Florida from a member state or jurisdiction. The only exemption to this rule is found in Section 409.401, Article VIII, F.S., Interstate Compact on the Placement of Children.

When placing a Florida child in a member state or jurisdiction for adoption, the initial placement request of the sending agency or person must include an original and four copies of an ICPC 100A Interstate Compact Placement Request, Form CF 794, Oct. 96, which is hereby incorporated by reference, properly completed and signed, showing the agency as responsible for planning for the child, and as financially responsible for the child, and at a minimum, three complete sets of the following:

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Adoption Minimal Requirements (continued)

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1. A cover letter on agency letterhead that:
 - a. Shows the name and phone number of the agency professional staff person who is handling the adoption;
 - b. Indicates in what state the adoption is to be finalized
 - c. Addresses the termination of parental rights of the birth father, if that subject is not included in the enclosed adoption request package;
 - d. Includes a list identifying the contents of the enclosed adoption request package; and
 - e. Is signed by an authorized agency representative
 2. Consents:
 - a. An executed consent for voluntary surrender of the child signed by the birth mother and birth father, showing that the agency has been given responsibility for the child;
 - b. If an executed consent for voluntary surrender of the child from the birth father is not available, information must be provided stating how his parental rights will be addressed;
 - c. Family history, social and medical information on the birth mother and birth father, including a clear statement as to American Indian tribal affiliation or heritage;
 - d. A narrative report on the social and educational background of the birth mother and birth father giving a clear picture of the birth parents and the reasons for their decision to place rather than parent their child. This report must contain a signed statement by the birth parents indicating their preference for registering their names in the Florida Adoption Reunion Registry pursuant to Sections 63.165, F.S.
 - e. A counseling summary which reflects that the birth parents were advised of alternatives to adoption and that they freely chose adoption from the available alternatives;
 - f. Medical information:
 - A legible copy of a hospital birth delivery and medical information report on the child, signed by a physician or registered nurse, and if the child is one year old or older, a legible copy of a physical examination report signed by a physician and completed within six months of the date of the proposed placement request; and
 - A legible copy of any medical reports or assessments signed by a hospital official, which identifies the child and the child's medical condition at the time of discharge; and
 - Legible copies of any medical reports or assessments on the child's physical or mental health and development.
 - a. The name and addresses of the licensed agency or person who has completed or updated the adoption home study on the prospective adoptive parents within one year of the proposed placement request, a copy of that home study, and a properly completed original department Adoptive Home Application, Form CF-FSP 5071, Oct. 96, which is hereby incorporated by reference, signed by the prospective adoptive parents and notarized.
 - b. A letter from the agency or person who will be providing supervision of the child and the prospective adoptive parents during the period between initial placement and finalization of the adoption, indicating that they have a current professional license in their state and agree to perform the required supervision services.
 - c. A copy of the court order permanently committing the child to the agency or an At Risk Placement Agreement signed by the prospective adoptive parents which acknowledge that they understand that the agency does not yet have permanent commitment of the child, and if, for some reason, the court does not grant permanent commitment to the agency, that they may have to return the child to the agency.
 - d. It is the responsibility of the Florida licensed child-placing agency to be knowledgeable of the adoption requirements of the receiving state or jurisdiction, and to include in the sending agency placement request package any additional documents that may be required by that state or jurisdiction.
 - e. The Florida Interstate Compact office will not accept facsimile transmission of an interstate placement request package.
 3. On interstate adoptive placement requests received from a sending state or jurisdiction that is party state under the Interstate Compact on the Placement of Children, Section 409.401, F.S., the placement request package of the sending state must include an original and three copies of their ICPC 100A Interstate Compact Placement Request Form, properly completed and signed, showing the sending agency or person as responsible for planning for the child, and as financially responsible for the child, and a at a minimum, two complete sets of materials which include:
 - a. Documents showing the legal status of the child, and that the parental rights have been terminated, or if the child is not legally free for adoption, a copy of an At Risk Placement Agreement signed by the prospective adoptive parents. The prospective adoptive parents must be acknowledge that they understand the rights of the birth parents have not been terminated, and if the court does not terminate those parental rights, they may be required to return the child to the sending state.

Foster Care & Adoption Program

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Adoption Minimal Requirements (continued)

- b. Medical information
 - Medical records showing the child's date and place of birth and current medical condition. If the child is 1 year of age or older, a legible copy of medical report must have been completed within 12 months from the date of the placement request.
 - If the child has and physical or developmental or mental health problems, there must be evidence that the prospective adoptive parents have been made aware of the full extent of the child's health problems and that they are willing and able to provide the necessary care.
 - c. Documents showing that:
 - The birth parents were interviewed in regard to their rights in the adoption and their preference for registering their names in the Florida Adoption Reunion Registry.
 - Family history, social and medical background on the birth family has been gathered and prepared, including a clear statement as to American Indian tribal affiliation or heritage.
 - d. An adoptive home study or update completed within 12 months of the request for placement prepared by an agency or individual licensed to provide this service in that state on Florida. A copy of a properly completed original department Adoptive Home Application, Form CF-FSP 5071, Oct. 96, signed by the prospective adoptive parents and notarized must be attached to the home study.
 - e. A letter from a Florida licensed child-placing agency, or intermediary, who is responsible for supervision of the child and the prospective adoptive parents during the period between initial placement and finalization of the adoption, identifying the persons who will perform this service, and indicating that this person has a current professional license, and agrees to perform the required supervision.
 - f. The Florida Interstate Compact office will not accept a facsimile transmission of an interstate placement request package from a sending state Interstate Compact office, agency, intermediary or person.
 - g. It is the responsibility of the Florida licensed child-placing agency, or intermediary, to obtain those legal and other documents from the sending state or jurisdiction that may be required by Florida law to complete or finalize an adoption in Florida.
4. It is the responsibility of the licensed child-placing agency to properly complete, sign, and submit an ICPC 100B Interstate Compact Report on Child's Placement Status, Form CF 795, Oct. 96, which is hereby incorporated by reference, to the Florida Interstate Compact office under the following circumstances:
 - a. Upon initial placement of the child with the prospective adoptive parents;
 - b. Upon any change in the physical location of the adoptive child prior to finalization of the adoption.
 - c. Upon finalization of the adoptive placement with the adoptive parents. On this occasion, a copy of the final adoption court order must accompany this from.
 5. Information on preparation of interstate placement requests and department forms, required by this administrative rule, may be obtained by writing to following address:

Office of the Interstate Compact on the Placement of Children
Family Safety and Preservation Office
Florida Department of Children and Family Services
1317 Winewood Boulevard
Tallahassee, Florida 32399-0700

Signature:



Executive Director

09/01/06

Date

JAFCO Policy and Procedure Manual
Foster Care & Adoption Program
CF-11 Definitions

Original Date: 09/01/92
Revision Date: NA
Policy Number: CF-11
Department of Origin: Foster Care & Adoption Program

Definitions:

1. **"Adoption Process"** includes the following: Recruitment of prospective adoptive parents; recruitment of individuals for the release of a child, including a child not yet born, for the purpose of adoption as part of a plan leading to the eventual placement of a child for adoption; provision of medical care or payment of maintenance costs and expenses during pregnancy in consideration for the release of a child for adoption; assessment and preparation of families before placement as part of a plan leading to the eventual placement of a child for adoption; and supervision of families, after placement and prior to the final adoption, has occurred. This section shall not be construed to impinge upon the First or Fourteenth Amendment United States Constitutional Guarantees of Freedom of Speech or Freedom of Religion.
2. **"Agency"** refers to JAFCO, a child-placing agency licensed in the state of Florida.
3. **"Child"** means any unmarried person under the age of 18 years.
4. **"Child-Placing Agency"** means any person, corporation, or agency, public or private, other than the parent or legal guardian of the child or an intermediary acting pursuant to Chapter 63, Florida Statutes, that receives a child for placement and places and arranges for the placement of a child in a family foster home, residential child caring agency, or approved adoptive home and provides any of the necessary adoptive services listed under the definition of Adoption subsection 65C-15.001(1), F.A.C.
5. **"Department"** means the Department of Children and Family Services (DCF) or one of its lead privatized agencies such as Child Net or Child and Family Connections.
6. **"Family Foster Home"** means a private residence in which dependent children who removed from their parent or legal guardian are provided 24-hour care. Such homes include emergency shelter homes, family foster group homes, and specialized foster homes for children with special needs. A person who cares for a child of a friend for a period not to exceed 90 days, a relative who cares for a child and does not receive reimbursement for such care from the state or federal government, or an adoptive home which has been approved by the department or by a licensed child-placing agency for children placed for adoption is not considered a family foster home.
7. **"Owner"** means the person who is licensed to operate the child-placing agency, family foster home or residential child-caring agency.
8. **"Operator"** means any on-site person ultimately responsible for the overall operation of a child-placing agency, family foster home or residential child-caring agency, whether or not he/she is the owner or administrator of such an agency.
9. **"Personnel"** means all owners, operators, employees, and volunteers working in a child-placing agency, family foster home, or residential child-caring agency who may be employed by or do volunteer work for a person, corporation, or agency which holds a license as a child-placing agency or a residential child-caring agency, but the term does not include those who do not work on the premises where child care is furnished and either have no direct contact with the children or have no contact with the children outside of the presence of the children's parents or guardians.
10. For purposes of screening, the term shall include any member, over the age of 12 years, of the family of the owner or operator or any person other than a person served, over the age of 12 years, residing with the owner or operator if the agency of family foster home is located in or adjacent to the home of the owner or operator or if the family member of, or person residing with, the owner or operator has any direct contact with children. Members of the family of the owner or operator, or persona residing with the owner or operator, who are between the ages of 12 and 18 years shall not be required to be fingerprinted, but shall be screened for delinquency records.
11. For purposes of screening, the term "personnel" shall also include owners, operators, employees, volunteers working in summer day camps, or summer 24-hour camps providing care or children.
12. A volunteer who assists on an intermittent basis for less than 40 hours per month shall not be included in term "personnel" for the purpose of screening, provided that the volunteer is under direct and constant supervision by persons who meet the personnel requirements of this section.
13. **"To Place"** or **"Placement"** means the process of a person giving a child up for adoption and the prospective parents receiving and adopting the child, and includes all actions by any person or agency participating in the process.
14. **"Screening"** means the act of assessing the background of personnel, pursuant to Section 409.175, F.S.
15. **"Case Plan"** means the goal-oriented, time limited individualized program of action for a child.

JAFCO Policy and Procedure Manual
Foster Care & Adoption Program
CF-11 Definitions (continued)

- 16. **“Primary residence and place of employment in Florida”** means a person who lives and works in this state at least six months of the year and intends to do so for the foreseeable future or military personnel who designate Florida as their place of residence in accordance with the Soldiers’ and Sailors; Civil Relief Act of 1940.
- 17. **“Primarily lives and works outside of Florida”** means anyone who does not meet the definition of **“primary residence and place of employment in Florida”**.

Signature:



Executive Director

09/01/06

Date

Quality Improvement

Revision Signature Page

QI-1	Continuous Quality Improvement
QI-2	Emergency Disaster Plan
QI-3	Fire Plan
QI-4	Technology Plan
QI-5	Input from Stakeholders, Persons Served, Guardians and Employees
QI-6	Accessibility Plan
QI-7	English Proficiency Policy

The above mentioned policies and plans have been reviewed and or revised by the executive director.

Signature:

Executive Director

Date

Quality Improvement

QI-1

Continuous Quality Improvement

Original Date: 09/01/06
Revision Date: 05/18/11
Policy Number: QI-1
Department of Origin: Quality Improvement

Purpose:

JAFCO is committed to developing and maintaining the highest possible quality of care. This policy shall be implemented through adherence to appropriate standards, statues, rules, regulations and ethics. JAFCO is responsible for the operation of a Continuous Quality Improvement Program that monitors, protects and enhances the quality of services for persons served. JAFCO CQI program provides a structure to facilitate a cooperative way of managing, based upon four key principles identified below that bring together the talents and capabilities of line staff and managers. The CQI Program is further designed to provide an atmosphere that stimulates creativity, problem solving, teamwork and leadership. These innovations will maximize the probability of quality, productivity, reduction in cost and will ultimately increase the level of consumer satisfaction.

Four Key Principles:

1. Focusing on the person served ascertaining clear evidence that our services are of value to our person served and their families.
2. Maintaining quality control - by measuring key variables affecting quality so it can be improved on-positioning the organization to be successful in the changing health care industry.
3. Creating an environment that will promote job satisfaction, productivity and teamwork among employees. This can be accomplished by including employees in decision-making and supporting the development of staff. This environment will help to attract and retain people who share the organizations mission, values, and culture; and
4. Assuring that staff has the training, skills, support and facilities that will support them in performing quality services. All quality activities must support the accomplishment of specific goals and objectives.

ORGANIZATION

The Governing Board of Directors charges the Chief Executive Director of JAFCO with the obligation of operating the CQI Program and further gives authority to the Executive Director to implement corrective action. The Governing Board has established, maintains and supports the CQI Program through the Agency's Administrative Professional Staff using the following mechanisms for reviewing and assessing the care of persons served.

The Executive Director receives recommendations from the professional staff through their participation in the committees as outlined in this plan. The Executive Director, through the board, has the authority to authorize and sign contracts and to make final determinations concerning business associated relationships.

The CQI Program receives administrative support through the services of the CQI Committees. Recommendations from the committees are based on information obtained from the following sources:

1. Quality of care monitoring and evaluation reports:
 - Financial / fiscal
 - Operational and service quality
 - Person served centered customer satisfaction surveys
 - External requirements, including managed care, regulatory compliance and stake holders /communities input
 - Other organization-specific requirements- HR
 - Risk Management
 - Safety oversight committee
2. Internal program evaluation findings and reports including:
 - Consumer, Stakeholder, Guardian Satisfaction Surveys
 - Outcome Measure Reports
 - Follow-up Surveys

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Continuous Quality Improvement (continued)

COMMITTEE STRUCTURE

1. The CQI Program is designed to meet the following objectives:
 - To assure that all persons served and their significant others are treated with respect and dignity (cultural diversity issues-community, person served and staff)
 - To monitor and enhance the quality and appropriateness of services for all persons served
 - To identify, assess and analysis problematic service issues and opportunities to enhance services
 - To monitor the implementation of corrections in response to service, safety and risk issues identified as problematic or opportunities to enhance services
 - To minimize exposures to loss within the Agency through the development and implementation of risk-management activities
 - To provide an evaluation and revision appropriate to the CQI Program
 - To assure that all staff have appropriate training, education, professional certification/ licensure, experience and skills to perform the duties of their job descriptions
 - To assure that the Agency resources are utilized properly and to continually assess how waste can be reduced and all resources are used as efficiently as possible
 - To assure that all necessary information relevant to external and internal consumers is clearly communicated in an expedient manner
 - To assure that efforts are made to keep employees informed, obtain their input, and continually improve employee benefits as well as the work environment
2. Membership of the Quality Improvement Council is made up of the:
 - ED (Chairperson of the CQI Committee)
 - Chairperson the Safety Committee
 - Corporate Compliance Officer
 - Chairperson the Peer Review
 - Chairperson Quality Record review Committee
 - Chairperson of the Human Resource
 - HR Coordinator Training /coordinator
 - Risk management
 - Department Directors
 - Other persons to assure representation of all program areas as designated by the Executive Director

NOTE: Persons listed above may serve in more than one role.
3. The ED will appoint members of the Quality Improvement Sub-Committees via recommendations of the Quality Improvement Council.
4. The CQI Committee shall be accountable for updating the CQI Plan, the implementation of activities as specified in the plan, and evaluation of those activities.

PROBLEM IDENTIFICATION AND RESOLUTION PROCESS

The problem identification and resolution process is a mechanism for problem solving and identifying opportunities for enhancing care of persons served. In accordance with the nature of the issue, the following steps are utilized:

1. **Problem Identification:**

Problem Identification comes from direct staff input to management, external reviews and audits, and consumer concerns. This comprehensive system designed to gain staff and consumer feedback on program quality and opportunities for program improvement. The feedback process is based on staff developed quality standards and expectations. Information through the feedback process is channeled through the Utilization Management Committee and the Quality Improvement Council (CQI) Committee for necessary action.

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Continuous Quality Improvement (continued)

2. Problem Assessment:

Identified problems or consumer care issues are reviewed and assessed by CQI. The scope and suspected severity of the issue will be addressed and may be referred to a CQI Committee or appropriate staff person(s) for further evaluation and assessment. Assessments will focus on the scope and cause (s) of the problems will be based on clinically valid criteria. Such clinically valid criteria may be established by such sources as the standards set forth by CARF, COA, DCF Rules and Regulations DSM –IV, a search of the literature in established professional journals and publications, or by a consensus among QIC members.

3. Performance Improvement Monitoring:

CQI develops and implements corrective action based on the findings and recommendations of the committees outlined in this plan. The CQI Chairperson will facilitate any corrective action, which necessitates involvement and/or approval of the Board of Directors. This improvement plan(s) will be monitored in Committee and Council meetings as needed.

CONFIDENTIALITY

The deliberations and findings of QIC and the reporting committees of the CQI Plan are confidential in nature. Information and related findings follow the guidelines within the Confidentiality Policy of the Personnel Policy of JAFCO. Relevant, staff-related findings from CQI are considered in determining placement and appointment of staff personnel.

ANNUAL EVALUATION

The CQI program and its associated committees is evaluated annually by the ED and CQI council or at any time such action is determined a necessity. The annual evaluation includes:

- A review and outcome report of all person served service problems/ issues identified through internal program evaluation findings and reports.
- A review and outcome report of problems/issues identified through the Committees outlined in this plan.
- A review of the CQI purpose, goals, and objectives.
- A review of all CQI activities, including clinical monitoring systems and procedures.

CQI data is incorporated in JAFCO Inc. Annual Evaluation report, which is prepared at the end of each fiscal year. The annual evaluation is sent to the Governing Board via the ED.

COMMITTEES

1. The Quality Improvement Council is responsible for final approval of all committee memberships, including chairpersons. All committees obtain and maintain equal representation from Administration, Prevention and Intervention Services, Central Intake and Assessment, Medical Services and Mental health treatment.
2. The Executive Director serving as Chairperson of CQI maintains an ex-officio status within all CQI committees and related activities.
3. All Committee findings and recommendations will be submitted to the Quality Improvement Council for review and decision.

SUB-COMMITTEES:**1. Human Resource Committee:**

- a. **Authority:** The Board of Directors charges the Executive Director of JAFCO, with the function operating the executive management committee. The ED further gives authority to the CQI to oversee the activities of the Human Recourse committee.
- b. **Purpose:** The purpose of the HR Committee is to ensure that consumers receive the highest quality and appropriate care, within available recourses, in an effective and well-managed agency.
- c. **Procedures:** The HR committee is designed to meet the following objectives:
 - To increase the efficiency and effectiveness with which the administrative areas of the Agency operate, thereby improving the delivery of services to person served.
 - To ensure that consumers are receiving the highest quality of services possible through continuous staff development. This data is gathered by revision of each staffs training records. The process includes identification of training/ staff development needs provision of these needs, utilization of training space, and need for equipment, supplies and aids, this is an ongoing process of periodic monitoring at minimum quarterly of the employee training records.

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- To develop operating norms for administrative areas this will serve as baseline for continuous assessments and improvement.
 - To develop systems to increase employee input and involvement in the Quality Improvement process.
 - To continually identify and develop opportunities to promote a positive working environment.
 - To review on a quarterly basis personnel files in order to maintain compliance of documentation requirements.
- d. **Integration with Quality Improvement:** The Human Resource Committee is a primary source for identification of problems and opportunities to enhance administrative operations, quality of staff providing services to consumers, and staff development needs. The Human Resource Committee meeting minutes are reviewed quarterly, as part of the CQI Plan. The information shall also serve as part of the assessment in the annual performance evaluation of the agency.
2. **Peer Review Committee/Quality Record Review:** (since the agency's accredited programs are small the above mentioned programs are combined)
- a. **Authority:** The ED gives authority to the Quality Improvement Director to oversee any Peer Review activities as well as the quality record review process
- b. **Purpose:** The purpose of the Peer Review Program at JAFCO is to ensure that services provided to persons served are in accordance with the Agency's mission and philosophy of services and all external contract requirements that indeed we are providing the highest quality of services appropriate to the needs of the individual person served. The Peer Review Committee is also valuable resource in identifying training needs and utilization management issues. This information is routed to the appropriate committees via the CQI council. The primary function of the Peer Review Process is to conduct individual record reviews with the intent of identifying cases or patterns of cases in which assessment, diagnosis, or services provided, are not in accordance with the agency standards, outside standards and/or regulations. The outcome of the review shall be used to identify personnel training needs, improve the quality of its services and included in performance improvement activities. Each Peer Review Committee member is assigned a program other than the program in which they are primarily assigned and on a quarterly basis will supervise a review conducted by peers.
- A minimum of ten percent of records from each program will be reviewed utilizing a Peer Review instrument. The instrument was developed using criteria from the agency as well external standards and regulations. Supervisory/Administrative staff may request specific program reviews be conducted outside of the regularly quarterly format. The information shall also serve as part of the assessment in the annual performance evaluation of the agency. The information gathered shall be provided to the appropriate personnel (Director of Operations and Clinical Services and supervisors).
- c. **Procedures:** The Peer Review Committee under the guidance of the Peer Review Committee Chairperson is responsible for;
- Collecting from the JAFCO database a random sample of records from each program. From an alphabetical list, every fourth person served will be selected for reviewed.
 - Conducting a minimum of ten % review of charts per program on a quarterly basis for clinical staff files and at a minimum of an annual basis for physicians' portion of the clinical file. The reviews may be conducted more when the CQI committee deems there is a systemic trend that may be affecting service delivery.
 - Compiling a quarterly performance improvement plans including recommendations for personnel training, service improvement and submitting it to the QI Director and managing clinical staff.
 - Identifying problems/needs and routing recommendations to the appropriate committee or staff for further assessment, evaluation and improvement action.
 - Providing each program supervisor with written results of the review(s) within 24 hours after completion of the review for quality improvement activities specific to the program.
 - Establishing appropriate timelines for supervisors to submit responses, each program will submit their response within seven business days to their peer review representative.
 - Collecting performance improvement action reports from supervisors for measuring program outcomes/ programs strengths and weaknesses.
- d. **Integration with Quality Improvement:** Peer Review is a primary source for identification of problems and provides opportunities to enhance persons served services related to clinical appropriateness, utilization of services and service delivery. Problem areas and potential problem areas are identified by the Peer Review committee along with implementation of CQI strategies documenting further analysis and evaluation with subsequent recommendations, which will be submitted to QCI. The Peer Review Committee minutes are reviewed quarterly, as part of the CQI program. The information shall also serve as part of the assessment in the annual performance evaluation of the agency.

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Continuous Quality Improvement (continued)

4. Quality Record Committee:

- a. **Authority:** the ED delegates to the QI Director the function of operating a Record Review Program, The ED further gives authority to the Quality Improvement Council to oversee any Record Review activities.
- b. **Purpose:** The Purpose of the Record Committee is to ensure quality control of all forms used throughout the Agency, centralize forms distribution, as much as, possible, as well as to ensure all forms fully comply with accrediting, licensing bodies standards.
- c. **Procedures:** The Record Review Committee is designed to meet the following objectives:
 - Approve all forms, throughout the agency, prior to implementation.
 - Organize a centralized forms system managed by the Agency Health Information.
 - Ensure all forms meet state, federal and accrediting body standards.
 - Work towards streamlining forms, as well as standardization, when feasible throughout the Agency.
 - Ensure quality reviews are conducted.
 - Ensure that all personnel training needs are complied with as per performance improvement plans.
 - Ensure all sample charts are current and accurate.
 - Ensure obsolete and/or unauthorized forms are not used or provided for usage in the Agency.
 - Any change in agency forms will be completed and distributed within three business days
 - Conduct periodic record reviews in order to monitor quality of documentation
 - Provide written reports of findings and collect performance improvement plans
 - At a minimum of quarterly review billing forms against the actual documentation in the person served records.
 - Initiate return of funds to funding source when billing has been found to be incorrect.
- d. **Organization:** The Quality Records Committee membership is composed of clinical and administrative representation throughout the Agency. The Committee will appoint workgroups as needed to address specific issues.
- e. **Integration with Quality Improvement:** The Record Committee is a primary source for improving the Agency Records forms system. ALL recommendations are routed to Quality Improvement Council for approval and the information shall also serve as part of the analysis in the annual performance evaluation.

5. Utilization Management Committee:

- a. **Authority:** As part of our performance improvement plan we shall create the above mentioned committee. After an internal assessment of agency needs, the CQI team has deemed the committee necessary as the agency is in the process of growing. The ED gives authority to the Quality Improvement Council to oversee any Utilization Management activities.
- b. **Purpose:** The Purpose of the JAFCO Utilization Management program is designed to meet the following objectives:
 - To increase the appropriateness and cost-effectiveness of the Agency's resources through the study of appropriate levels of service, development of established criteria and assessment of the results of these studies to staff.
 - reviews are conducted to determine levels of program capacity utilization
 - reviews are conducted to determine appropriateness of duration of services
 - review of successful discharges
 - review of non-successful discharges
 - review outcome survey
 - review person served/consumer satisfaction survey
 - review treatment denials/refusals
 - To help ensure that length of stay in programs is a function of person served needs and not program structure
 - Use the treatment unit activity report to look for trends that may lead to further investigation by QIC.
 - To provide an ongoing program, that monitors the utilization of resources and documents the impact of corrective action taken.
 - Identification of potential over/under utilization of services through utilization management activities outlined in this plan including concurrent, retrospective and problem focused reviews.
 - Reviews of activities specified in this plan by the utilization management committee.
 - To assure that person served receive quality and appropriate services with adequate resources within a timely manner
 - Monitor time between assessment and admission

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Continuous Quality Improvement (continued)

- c. **Organization:** The Utilization Management Committee is made up of staff appointed by QIC. This committee shall be accountable for the implementation of the utilization management plan, the implementation of activities as specified within this plan and evaluation of those issues are identified which will be addressed by the committee. Appropriate staff that is directly affected by the process being evaluated will be asked to serve on the committee for the duration of the project. The Utilization Management Committee is multi-disciplinary and is composed of a representative from each program.
- d. **Integration with Quality Improvement:** Utilization Management shall be a primary source for identification of problems and opportunities to enhance person served services related to clinical appropriateness and utilization of services. The potential problem areas identified by the Utilization Management Committee along with the implementation of CQI strategies documenting further analysis and evaluation with subsequent recommendations, which will be submitted to the Quality Improvement Council. The Utilization management Committee minutes are reviewed routinely as part of the CQI Plan. This committee shall start functioning 01/2009 when the database becomes effective. The above mentioned reviews are now completed by other committees. The information shall also serve as part of the assessment in the annual performance evaluation.
6. **Safety Committee:**
- a. **Organization:** The Safety Committee shall be composed of members appointed by the QIC with representatives from various components of the Agency. It is to be chaired by JAFCO Facility Manager and will report directly to QIC. The safety committee shall be the primary body at JAFCO to address safety and security issues. As such, they will make recommendations and monitor safety as well as security compliance throughout the Agency.
- b. **Responsibilities:** The Safety Committee is responsible for:
- Assisting management in reviewing and updating workplace safety rules based on accident investigation and inspection findings (internal and external see safety policy for specifications), the safety committee shall address employee reports of unsafe conditions or work practices. The committee shall also be responsible for ongoing training and drills.
 - It will also accept and address safety suggestions from employees of the organization. In addition the safety committee will address all security needs of the agency (see security manual)
 - Assisting the QCI team in periodic reviews and revisions of the Safety Program by evaluating incident reports, identifying trends, patterns, and formulating corrective measures to prevent recurrence.
 - Assisting management in evaluating accident and illness prevention programs. Promoting safety/ health awareness and co-worker participation through continuous improvements to the Safety program.
 - Members to participate in safety training, and be responsible for assisting management in monitoring workplace safety education and training. The purposes of these activities are to ensure that safety training and education is in place, effective and adequately documented.
 - Providing yearly education trainings to staff in accordance with the security manual.

The committee will make recommendations to QIC. All minutes, actions and records of the Safety Committee, are protected by Florida Statutes. The information shall also serve as part of the assessment in the annual performance evaluation.

7. **Risk Management Committee**

- a. **Responsibilities:** The Risk Management Committee is responsible for: coordinating sets of activities designed to control threats to its people, property, income, goodwill, and ability to accomplish goals (see risk management plan).
- Identifying loss exposure
 - Evaluation and analysis of loss exposure.
 - Provide plan of how to rectify identified exposure
 - Assist in implementation of action plan to reduce risk
 - Monitor plan to reduce risk
 - Report results of plan taken to reduce risk
 - Inclusion of risk reduction in annual performance improvement actives
 - Review the agencies insurance package as part of the risk management strategy on an annual basis e for:
 - adequacy
 - property coverage
 - liability coverage
 - professional coverage
 - vehicle
 - workman's comp

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Continuous Quality Improvement (continued)

The committee shall report directly to the Executive Director and the ED shall work with the board and fiscal department to avoid adverse events for which the agency may be liable. The information shall also serve as part of the assessment in the annual performance evaluation of the agency

Signature:



Executive Director

05/18/11

Date

Quality Improvement

QI-2 Emergency Disaster Plan

Original Date: 09/01/06

Revision Date: 04/25/14

Policy Number: QI-2

Department of Origin: Quality Improvement

Pre-Disaster Preparation:

Staff

The care of our children is of paramount concern to JAFCO. The agency will remain open and in operation at all times unless there is an immediate danger (i.e. a hurricane warning) For the JAFCO Children's Village, since the children live at the JAFCO facility closing is not an option unless the facility is ordered to be evacuated. For the JAFCO Children's Ability Center, this same policy will apply and families will be asked to pick up their children during a hurricane warning. All JAFCO staff have been made aware of this policy and are asked on annual basis if they are willing to participate in the care of our children and persons served during an emergency. The Director of Operations and Clinical Services has the list of the emergency staffing team with her at all times. They are alerted at the first sign of a pending emergency where advance notice is possible. At the start of hurricane season, all staff are asked to make advance personal preparations with their own homes and families where possible so that they are available to work at the facility in the event of an emergency.

Telephone Tree Procedure

All staff will be provided with an agency staff list of home and cell phone numbers to be updated monthly (Appendix I).

Contact plan is as follows:

Executive Director will contact the following 3 people:

- Facilities Manager-who will contact all Maintenance staff.
- Director of Southeast Development (or designee) will contact all board members, development, clerical, HR and QI staff.
- Director of Operations and Clinical Services will contact all directors and supervisors who will contact their staff.

Disaster Chain of Command

- Executive Director
- Director of Operations and Clinical Services
- Facilities Managers
- Maintenance Managers
- Residential Director
- Residential Supervisors and Team Leaders
- Clinical Team/Direct Care Staff
- Development Team/Support Staff

The following responsibilities have been assigned to the following staff:

Executive Director:

- Oversight of Emergency Plan and ultimately responsible for all staff and persons served.
- Communicating with DCF and APD designees, contract managers and Board of Directors as to status of agency structures and safety of all persons served.
- Present on site at in the event of a disaster or evacuation to accompany children and staff to a shelter or alternate location if necessary.
- Backup: Director of Operations and Clinical Services

Director of Operations and Clinical Services:

- Responsible for direct supervision of all clinical staff and program.
- Present be on site in the event of a disaster or evacuation to accompany children and staff to a shelter.
- Backup: Residential Director and Supervisors

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QI-2 Emergency Disaster Plan (continued)

Residential Director and Supervisors:

- Responsible for direct supervision of all clinical staff and children.
- Responsible to assist with any evacuation and ensure the emotional, physical safety of the children including monitoring of medications.
- Responsible for contacting the birth families of the children to inform them of their safety.
- Present be on site in the event of a disaster or evacuation to accompany Children and staff to a shelter
- Backup: Residential Supervisors and Team Leaders

Residential Supervisors and Team Leaders:

- Present on site to accompany children and staff to a shelter if needed
- Present on site to care for children's needs and safety
- Backup: Clinical Team/Direct Care Staff

Clinical Team/Direct Care Staff:

- Are expected to report to work as long as road conditions permit.
- Are expected to be available to work during a disaster and during an evacuation.
- Backup: Development Team/Support Staff

Development Team/Support Staff

- Call all board members to check on their safety and report on status of agency
- Contact all elderly donors and those who live alone to check on their safety and needs

Hurricane Warning

- Oversight of "lock-down" of the campus including placement of all patio furniture, benches, statues and other possible "projectiles" into the garages of the group homes.
- Shut down of all pumps and fountains.
- Stocking of all group homes with supplies, food, water and first aid supplies
- All vehicle gas tanks to be filled
- Refrigerators set to coldest setting
- Bathtubs filled with water. Pots filled with water in kitchen.
- All laundry completed. Houses cleaned and straightened for maximum safety.
- No vehicles to leave facility once a warning is issued. All children to be on site, at home or at the location where they will be riding out the storm.
 - A. Computer/IT Protection: Prior to leaving the office in the event of an imminent disaster, all computers will be shut down and all computer equipment will be unplugged, covered with plastic covering and removed from the floor. Phones will be unplugged and placed in a cabinet. Any critical files will be moved to a locked interior storage area on the second floor to avoid water damage from flooding.
Backup: I.T. assistant
 - B. In the event of a fire in one of the buildings at the facility, the children will be moved to another building if possible on the grounds of the JAFCO village. If not possible, JAFCO will confer with ChildNet as to the feasibility of using a temporary housing situation (hotel or motel) located one mile from the Village (Uptown Suites or the Hilton) where the children could reside with staff supervision until more permanent accommodations could be arranged.

Persons Served

JAFCO persons served are both residential and in the community.

For residential person served:

- They will remain at the JAFCO Village for the duration of the storm. The JAFCO facility was built according to hurricane guidelines, has hurricane proof glass and interior safe rooms within each of the 7 structures. The main building is powered by a 100 KW diesel generator which will operate for 96 hours without refueling.

For non-residential persons served all JAFCO social workers follow the following procedures:

- Go over emergency preparation guidelines with the person served at the beginning of hurricane season
- Check in with their person served by home when a hurricane or tropical storm is brewing to ensure that they have their supplies, an evacuation plan and obtain alternate contact information.

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Emergency Disaster Plan (continued)

- Ensure that their persons served are prepared at the issuance of a hurricane warning/watch.
- Make a final call at the issuance of a hurricane watch with a request for the person served to contact them immediately after the storm. All social workers and supervisors will take the person served contact log home with them in the event of a storm.

Equipment/Record/File Retention

- A. All active JAFCO records are currently housed at the JAFCO Children's Village at 4200 N. University Drive, Sunrise, FL. 33351 or at the JAFCO Children's Ability Center at 5100 N. Nob Hill Rd. Sunrise, FL. 33351
- B. Closed JAFCO records are located at North Miami Mini Stor-It, 1301 NE 199th Street, North Miami, FL.
 - Paper Files: All active files are maintained in locked file cabinets. At the children's village the clinical files are kept locked in the Director of Operations and Clinical Services' office and in the MST supervisor office on the first floor. The business files are kept locked in the business office on the second floor and archived business and clinical files are kept locked on the second floor in a storage room. The files in the Children's Ability Center are kept in the locked file storage room on the first floor. The windows in both centers are made of hurricane-proof glass which should prevent water damage in most cases.
 - Computer files: On a daily basis, the entire server is backed up locally using the Microsoft Server Backup Utility. Also on a daily basis, all new and changed files are encrypted and backed up remotely to a file server at the off-site personal office of the IT consultant.
 - Computer Network: Due to the installation of the stand-alone generator in the main building at the JAFCO Children's Village, power should be retained during a power outage allowing the server and the local area network to operate. Internet access might be disrupted but the office will be able to operate with the exception of external email.

Protection of Electrical Devices and Furniture:

- A. Staff will be asked to store important items securely in locked drawers and cabinets prior to leaving in the event of a hurricane warning.
- B. Computers and phones will be wrapped in plastic and secured in an interior room where possible. The IT Help Desk Manager will oversee this process.

Utilities:

- A. In the event of loss of power the JAFCO generator will come on within seconds allowing full power to the main building. Portable generators will be used in the group homes to power some lights, the TV, and the refrigerator. The children will come to the main building for hot food, laundry, hot water and air conditioning.
- B. An entire pallet of drinking water will be kept on hand at the beginning of every hurricane season. All bathtubs will be filled at the onset of a hurricane warning for wastewater. A standing order is in place with our food service company for immediate delivery of water as soon as roads are clear as well as with the fuel company for delivery of our diesel fuel for the generator.

Recovery

Evacuation Procedures:

- A. The JAFCO Children's Village and the Ability Center are not located in an evacuation zone. In addition the JAFCO Children's Village Shelter and each building has an interior safe room/bathrooms (with no outside windows or doors) that can be used for shelter purposes. However if evacuation were necessary, the JAFCO Children's Village would evacuate to the Park Lakes Elementary School Shelter and the Children's Ability Center would evacuate to Coral Glades High School. Please see the attached form for contact information.
- B. All direct care and supervisory staff would accompany the children to the shelter. All JAFCO personnel have been instructed to call in their whereabouts following a disaster and are required to report to work as soon as they are able. The JAFCO Executive Director and in his or her absence the Director of Operations and Clinical Services would take the Permanent Register of the group home and shelter program with them upon evacuation and contact the legal guardians via cell phone. The Respite Director would take the child binder to contact the parents/legal guardians.

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Emergency Disaster Plan (continued)

Work Site:

Immediately following a disaster the Executive Director and the Board President shall jointly survey the damage to the agency. An appropriate inspecting body will assess the safety of the structures. Any repairs will be made that are necessary and the children will be returned to the Village as soon as possible. JAFCO has a reserve account available for emergencies as well as adequate insurance coverage. Necessary safety repairs would be made first with cosmetic repairs to continue following re-entering the buildings. The JAFCO executive director will stay in contact with ChildNet personnel to update them on the status of operations of the agency

Alternate Work Site/Residential Site:

- A. If any of the JAFCO offices are not able to be used following a disaster a temporary office will be set up in one of the following alternate sites (in different counties) assuming that they have not been damaged:
 - The home of the JAFCO executive director located at 7332 NW 83 Way, Tamarac, Florida 33321.
 - The home of JAFCO Board President Ron Simon located at 10540 La Reina Road, Delray Beach, Fl. 33446
 - The home of any JAFCO board member who has not suffered damage to their home. A list is attached.
- B. All JAFCO clinical staff have cell phones that they would use for communication until normal operations were restored.
- C. In the event of serious damage to the facility, residents at the JAFCO Village will be moved into one of the seven structures that is not damaged. A local hotel will be used as an alternate site. The Respite Home at the Children's Ability Center would be temporarily closed down until repairs could be made.

Communications:

- A. The telephone procedure will be used to inform staff about alternative phone numbers. Since the JAFCO phone system is outside of Florida we are able to contact our phone provider and forward the main JAFCO number to an alternate phone number. If phone service is disrupted JAFCO Executive Director will have calls forwarded to her cell phone and will answer calls 24 hours per day.
 - Primary phone: JAFCO office phone
 - Secondary phone: Staff cell phones
 - Backup-Staff home phone
- B. The JAFCO backup generator will provide power to the phone system. If lines are down cell phones and email will be used if available. JAFCO will call in status of facility to the local media stations which will be broadcast on radio and TV.

Person Served:

- A. At the start of hurricane season all supervisors will ensure that each JAFCO person served has a viable emergency plan and the necessary supplies. The Director of Operations and Clinical Services will ensure that all Supervisors ensure that all person served have been contacted prior to staff leaving the facility in the event of a hurricane warning. Each social worker and therapist will take with them persons served address and phone log and will make contact with person served both before and after an emergency to assess their needs. Alternate and emergency contact numbers will be obtained to facilitate contact.
- B. The JAFCO Children's Village, built in 2001 and the JAFCO Children's Ability Center, completed in 2014, meet all post hurricane safety codes. The JAFCO Children's Village shelter and each building have safe rooms that are located in the interior of each building allowing for children to remain in their homes unless otherwise evacuation by Emergency Personnel. The JAFCO Children's Village and the Ability Center are not located in an evacuation zone. However if evacuation were necessary, the JAFCO Children's Village would evacuate to the Park Lakes Elementary School Shelter and the Children's Ability Center would evacuate to Coral Glades High School. Please see the attached form for contact information.
- C. Extra food and water and hurricane supplies (first aid, batteries, flashlights, radios, portable phone and TV.) will be purchased by the facilities manager prior to the beginning of hurricane season and placed in the storage room on the second floor of the Mahler Complex at the village. Upon issuance of a hurricane warning these supplies will be placed both in the JAFCO Emergency Shelter and in each of the group homes. The JAFCO Emergency Shelter and the JAFCO offices have a full power diesel generator which will come on automatically after moments of a power outage and run for a minimum of 96 hours. Children from the group homes will come to the main building for meals, laundry and may sleep in offices and common areas if needed due to weather or damage to their home.

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Emergency Disaster Plan (continued)

Staff:

Once roads have been cleared and declared safe by county EOP personnel, staff will begin to report to work. Field visits will begin to needy person served once County personnel permit this level of travel within the county. Until then staff will contact person served by phone to assess needs and emergencies.

Training:

The Executive Director has the lead responsibility for annual staff training on Emergency Operations Plan. This training will take place prior to the start of hurricane season. Training will include a review of this plan, questions and answers and discussion and input from staff. New staff will be trained on the EOP on line.

Signature:



Executive Director

12/28/06

Date

Quality Improvement

QI-3

Fire Plan

Original Date: 09/01/06

Revision Date: NA

Policy Number: QI-3

Department of Origin: Quality Improvement

The safety of the children is of utmost importance and concern to JAFCO. In order to ensure that precautions are taken in the unfortunate event of a fire, the following plan has been developed and implemented

Facility Evacuation Capability: Prompt

Reporting the Fire

- Dial 911 and report the fire to emergency services. Advise the exact location of the fire:
Group Home #1 - 4210 N. University Drive, Sunrise
Group Home #2 - 4230 N. University Drive, Sunrise
Group Home #3 - 4250 N. University Drive, Sunrise
Group Home #4 - 4260 N. University Drive, Sunrise
Group Home #5 - 4270 N. University Drive, Sunrise
Group Home #6 - 4280 N. University Drive, Sunrise
Administrative Building and Emergency Shelter 4200 N. University Drive, Sunrise
JAFCO Children's Ability Center – 5100 N. Nob Hill Road, Sunrise
JAFCO Northeast Branch – 2345 Bryn Mawr Avenue, Bryn Mawr
- When a fire is discovered in the building, it is the staff's responsibility to remove all person served from the building and the area of the fire. Make sure all staff leaves the fire area, close the door in order to control the smoke and evacuate. Evacuate home at once.
- The Group Homes, Emergency Shelter and Administrative building have a monitored fire alarm system and are equipped with smoke detectors throughout the home and heat detectors in the kitchens.

Response to Fire Alarm

- Staff must dial 911. Staff will then assure that each person served exits the building in an orderly manner consistent with the evacuation plans. Make sure all staff and person served are a safe distance from the fire, smoke and emergency vehicles. Supervisors should be informed as soon as all person served are safely down the street from the building. Supervisors will provide guidance and support, while helping secure alternative arrangements if it is unsafe to return to the facility.
- If a flow switch alarm goes off in one of the group homes, or shelter, it will send a signal to the fire alarm panel in the crisis center. The designated JAFCO emergency official will immediately call the location in question, verify fire/smoke/water flow and dial 911. The Supervisor/Director will also verify 911 by redialing. They will have been trained to reset the system for drills and false alarms.
- To prevent false alarms the central station has 1 minute 30 seconds to notify leadership at JAFCO before dispatching the fire department automatically. All buildings are occupied with supervisory staff 24 hours per day. If a fire/smoke problem is discovered in a building or an alarm goes off, all residents must evacuate at once and follow 911 procedures. This policy of discovery is only to eliminate false alarm.

Isolation of Fire

- Procedures for containing fire: In the event of a fire, one staff will follow and stay with the person served as they exit the building, while the other staff will assure all doors are closed to help in containment of the fire. Closing doors should be done during evacuation – once you leave do not go back.
- Staff will ensure that none of the fire doors are blocked.
- After completing a full evacuation of the building, staff will evaluate their ability to extinguish or control the fire. If they determine they can do so safely, staff, may, if they choose, use a fire extinguisher to attempt to extinguish or control the fire. Remember to point the fire extinguisher to the base of the fire and sweep back and forth along the base. Personal safety is most important.

JAFCO Policy and Procedure Manual
Quality Improvement
QI-3 **Fire Plan (continued)**

Evacuation of Area

- In the event of a fire, the entire building must be evacuated completely of person served and staff. Do not leave any person served or staff inside any area of the building.
- Our person served are priority when evacuating the building and are always evacuated first. Staff members will assure that person served are safely out of the building before exiting themselves. Staff must watch for emergency vehicles and ensure that all persons served and staff stays away from traffic and smoke.
- Once outside the building, staff will lead all person served to the designated meeting area. At the JAFCO Children's Village that area shall be at the basketball court. At the JAFCO Children's Ability Center that area shall be at the playground.
- Once outside of the building, staff will account for all person served. Person served are to be kept together, cared for and monitored by staff until such time it is safe to return to the building.
- Familiarize yourself with all of the emergency evacuation routes posted throughout the building. Use the appropriate exit based on the location of the fire. Always attempt to use appropriate exit to evacuate through the primary evacuation route (doors) first, then use the secondary evacuation routes if primary is blocked.
- The Emergency Shelter/Crisis Center is staffed with a minimum of 2 staff members at all times, and the number of staff members will vary based upon the number of person served according to the following ratio: for children 0 to 5 1:4 awake, 1:6 asleep. For children 6 to 12 1:6 awake, 1:12 asleep.
- There will be approximately six persons served and one to two staff members in each of the group homes during awake hours and one staff member at night.
- Residential person served will be children, ages 0-18. The vast majority of residential person served will old enough to promptly exit the facility on their own. There will be sufficient staff to ensure the safe evacuation of all persons served. The estimated time required for persons served and staff to safely exit the facility in the event of a fire is less than two minutes.
- At the JAFCO Children's Ability Center the staff ration is 1:3 unless otherwise specified. Each child is assessed based on individual needs. Children may require 1:1 or additional staff supervision. All staff rations will be assessed upon intake.

Training

- Fire drills will be conducted at least one time each month or twelve times annually, on each shift.
- Each fire drill will be documented and kept on file for review.
- All staff will receive training for fire related emergencies, at the start of employment and at least once each following year. Training will include appropriate use of fire extinguishers. Documentation of training of new employees for fire related emergencies are kept in employee personnel files.
- Documentation of training of existing employees for fire related emergencies are kept in employee personnel files
- Documentation of staff training in fire extinguisher use is kept in employee personnel files.
- Any deficiencies noted during fire drills will be addressed and corrected immediately with supervisors and staff.

Fire Alarm Procedure

- When fire alarm sounds children who can walk on their own will line up with staff by the playground exit door.
- Staff will do a head count and children with staff will walk out, holding hands, to the basketball courts.
- Infants can be hand carried out the closest exit door, or can be wheeled out in a rolling crib through the closest exit door.
- Staff will assist any child requiring extra assistance, including wheelchairs.
- Supervisor and/or team leader will remain, if area is safe, and open propriety doors, do final walk through, checking all bedrooms, baths and closets. Exit through the closest exit door.
- All staff and children will meet on the basketball courts for a headcount.

Signature:



Executive Director

12/28/06

Date

Quality Improvement

QI-4 Technology Plan

Original Date: 09/01/06
Revision Date: 08/01/14
Policy Number: QI-4
Department of Origin: Quality Improvement

1. Hardware:**a. Available Hardware Utilization:**

- i) 71 desktop and laptop computers are being utilized on a daily basis to create and access documents related to persons served, development, accounting, organizational and human resources. Computers are also used for communication, outcome reporting, research and training thru internet or email. All computers and laptops are networked to two servers located in the phone/electrical room at the JAFCO Jewish Children's Village. Computers are available for person's server for communication and training at all three branches.
- ii) The JAFCO network and VPN are protected by firewalls that perform stateful packet inspection (SPI) or stateful inspection and keeps track of the state of network connections (such as [TCP](#) streams, [UDP](#) communication) traveling across it. The firewalls are programmed to distinguish legitimate packets for different types of connections. Only packets matching a known connection state will be allowed by the firewall; others will be rejected. The JAFCO Jewish Children's Village is equipped with a SonicWALL TZ 200 Firewall, the JAFCO Children's Ability center with a Cisco ASA5505 ACAC and the JAFCO Northeast Communities with a SonicWALL TZ 2105 firewall.
- iii) A NEC SV8100 VoIP phone system is in place and is a major source of internal and external communications. The system includes:
 - (1) NEC SV8100 IP Server configured for:
 - 32 Digital Stations Ports
 - 4 Analog Station Ports 1-PRI
 - 64 VoIP Resource Cards
 - 8 Port Voicemail/Auto Attendant with 40 email Integration Licenses
 - (2) SV8100 128 IP Packages include:
 - 60 button DSS Console
 - 30 DT330 Digital Terminals 24 w/LCD
- iv) 44 mobile phones have been assigned to JAFCO staff (35 to staff, 6 to Group Homes, 1 to Shelter and 2 emergency on-call phones) to facilitate communication between employees, persons served and donors. Staff is able to access the JAFCO email system from their phone. JAFCO maintains 6 mobile phones for persons served.
- v) JAFCO has four leased network copiers, two at the JAFCO Jewish Children's Village (Toshiba EStudio 455 and EStudio2830C), and one at the JAFCO Children's Ability Center (Toshiba EStudio 3055C) and one at the JAFCO Northeast Communities (Toshiba EStudio 2555C). All copiers have copy, print, scan and fax capabilities. The copiers are used to facilitate business, communications, programs, training and documentation for staff, persons served and donors. The JAFCO Jewish Children's Village shelter has an additional fax line which is used as a backup.
- vi) Individual printers are shared in most offices, with the copiers being the backup or default printer for all employees.
- vii) Postage meter at the JAFCO Jewish Children's Village is used for mailing person served, office and marketing purposes.
- viii) USB Flash Drives are available as needed for staff.
- ix) Internal and Remote Backup is in place for all three agency branches. All data is encrypted before an internal backup is made and before it leaves the network for remote backup.
- x) 2 hardwired and 7 wireless handheld credit card scanners are utilized for processing of agency fees and donations.

b. Hardware Improvements:

- i) Add additional server at the JAFCO Jewish Children's Village.
- ii) ID card machine.
- iii) Postage meters for JAFCO Children's Ability Center and JAFCO Northeast Communities.
- iv) Replace smart switches JAFCO Jewish Children's Village.

Quality Improvement

QI-4 Technology Plan (continued)

- v) Conferencing system for the JAFCO Jewish Children's Village.
- vi) Entertainment system for the lobby at the JAFCO Jewish Children's Village.
- vii) Bulletin system for the lobby at the JAFCO Jewish Children's Village.
- viii) Update or Replace audio video system in the theatre at the JAFCO Jewish Children's Village.
- ix) Add laptop to audio video system in the theatre at the JAFCO Jewish Children's Village to be able to provide PowerPoint presentations and on-line trainings.

c. Estimated Hardware Improvement Cost:

- i) Additional Server: \$3,500
- ii) Badge ID card software, IDville ID Maker Advanced ID badge printer, Logitech C920 HD web cam, mini tripod, white photo backdrop, 200 blank PVC plastic badges, 300 print YMCKO printer ribbon, printer cleaning kit, two year warranty and technical support: \$2,599
- iii) Postage meters: \$300 per year per location.
- iv) 3 Smart Switches: \$1,200
- v) Conferencing system for the JAFCO Jewish Children's Village: to be determined
- vi) Entertainment system \$200
- vii) Bulletin system \$1,000
- viii) Update/Replace Audio, Video system: Cost to be determined
- ix) Theatre laptop: \$400

d. Affect of Improvements:

- i) Additional server will be a mirror copy of Server2 and be used solely as a back up to Server2. Having a backup server will eliminated down time should Server2 malfunction.
- ii) ID card machine will allow HR department to create IDs for all employees with ease and on-the-spot and will diminish the possibility of fake IDs, creating a safer facility and in additional will be less time consuming than the current method of creating ID cards.
- iii) Postage meters at each of the JAFCO locations will facilitate the mailing to person's server, donors and vendors, reduce the cost of postage and be more time efficient for staff.
- iv) Replacement of smart switches provide centralized management and connection of all computers and will connect provide a web interface and will allow configuration of basic settings, such as VLANs, port bandwidth and duplex.
- v) A new conferencing system will facilitate conference meetings over the phone in a clear, easy and reliable fashion.
- vi) An entertainment system will keep persons served, donors and vendors entertained while waiting in the lobby
- vii) A bulletin system will electronically inform persons served, donors and vendors of day to day on-goings of the agency
- viii) By updating or replacing the audio video system we will be able to show movies, presentation, marketing and training videos in high definition with a sharp crystal clear image and surround sound that delivers the lowest audible notes and effects with clarity and balance.
- ix) With the addition of a theatre laptop we will be able to project presentations and on-line videos for training, fundraising and entertainment purposes.

2. **Software:**

a. Available Software Utilization:

- i) FileMaker Pro 8 Clinical database (JADE) is available to all clinical staff, and contains information regarding persons served. JADE can generate forms and reports. Training on JADE is ongoing for all clinical staff.
- ii) Donor database, Result Plus 10.0.10.10 by Metafile is used by development team daily to enter gifts, collect and access donor data, create marketing mailing lists, reports and statistics.
- iii) Microsoft Office 2010 is used daily by all office employees for to create business documents, spreadsheets, presentations and databases. Two employees utilize Microsoft 2007.
- iv) Microsoft Small Business Server 2011 is utilized by entire office staff to create electronic mail, calendaring, contacts and tasks.
- v) QuickBooks 2012 is used by the comptroller daily for financial management and bookkeeping; tracking bills, invoices, donations and estimates.
- vi) Adobe Creative Suite is used daily by the Development team to create general organizational, marketing and communication pieces.

Quality Improvement

QI-4

Technology Plan (continued)

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- vii) Kaspersky Enterprise Security is installed on all computers and servers. It is the backbone of our network antivirus security system, delivering essential, real-time virus protection from the latest malware, including computer viruses, spyware, Trojan, rootkits and more. It works behind-the-scenes with intelligent scanning and small, frequent updates, while proactively protecting us from known and emerging virus threats.
 - viii) Questionnaire and survey software is available for use on Wufoo or Constant Contact.
 - ix) Chart writing software is available by Microsoft Visio.
 - x) CFARS clinical assessment spreadsheet is in place
 - b. Software Improvements:
 - i) Replace/Purchase clinical database
 - ii) Basic ongoing Microsoft Office and computer technology training.
 - iii) Purchase of Blackbaud Raisers Edge donor database
 - c. Estimated Software Improvement Cost:
 - i) Clinical Database: TBD
 - ii) Microsoft Office and computer technology training is done in house and there is no cost associated with the training.
 - iii) Blackbaud Raisers Edge: Approximately \$65,000
 - d. Software Interface with Assessed Hardware Needs:
 - i) At present time no issues are foreseen with available software interface to our assessed hardware needs.
 - e. Effect of Improvements:
 - i) Purchasing new database will help provide and keep track of necessary information required by managed care providers, accurately update our person served records in a timely fashion and create visibility into everyday operations. The following are the improvements expected:
 - (1) Integration
 - (2) Modules that will fit our programming needs
 - (3) Referral, intake and discharge process
 - (4) Administration process
 - (5) Case management process
 - (6) Person served information and census management
 - (7) Clinical documentation
 - (8) Medical documentation
 - (9) Appointment and treatment schedule
 - (10) Quality assurance
 - (11) Document management
 - (12) Treatment plans
 - (13) Progress and case notes
 - (14) File sharing
 - (15) Create and print reports
 - (16) Create and print forms
 - (17) Report statistic
 - (18) Create reports
 - (19) System Integration
 - (20) Billing
 - (21) Medication management
 - (22) Web base application will allow flexibility to access system remotely
 - (23) Workflow automation
 - (24) Connectivity
 - (25) Productivity
 - ii) Continuous updating of website and integration with donor database will improve the following:
 - (1) Facilitate updating website information
 - (2) Make site more user friendly and interactive
 - (3) Ease of donating
 - (4) Online campaigning
 - (5) Mass emailing
 - (6) Enhance marketing efforts

Quality Improvement

QI-4

Technology Plan (continued)

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- iii) Basic Microsoft Office and technology training will provide all staff with technology, computer and program knowledge to improve document control.
 - iv) Purchase and installation of Raisers Edge Donor Database will facilitate our fundraising efforts. The following improvements are expected:
 - (1) Maintain clean and accurate data
 - (2) Build a complete 360° view of our donors
 - (3) Improve fundraising effectiveness
 - (4) Event management
 - (5) Volunteer management
 - (6) Connect with constituents
 - (7) Relationship tracking
 - (8) Email marketing
 - (9) Project research and analysis
 - (10) Wealth screening
 - (11) Detailed reports and queries

3. Security:

a. Available Security:

- i) To increase the physical and safety security of those we serve, employees, donors and visitors the *JAFCO Jewish Children's Village* is a monitored gated facility with entry only to those who are granted access and the following technology and technological systems are in place.
 - (1) Main gate, pedestrian gate and administrative building front door entrance are equipped with entry key pad. Visitors enter by using key pad connecting them to on site staff requesting permission to enter.
 - (2) Access control card key readers are used to gain access by employees to the following entrances or specific areas in the administrative building:
 - main gate
 - exterior main entrance to administrative building
 - Exterior side shelter entrance and exit.
 - Exterior office entrance.
 - interior entry from administrative building to shelter
 - interior exit from shelter to administrative building
 - interior entry from kitchen to shelter
 - interior exit from shelter to kitchen
 - interior entry to shelter manager office
 - interior entry to shelter janitor closet
 - (3) CAT multi door and TEC series setup and maintenance software controls card key readers and key pad. The human resource manager manages and controls this system.
 - (4) Security cameras are placed in several key locations at the facility:
 - main gate key pad
 - main front entrance
 - main gate license plate
 - pool area
 - shelter living room
 - front lobby
 - shelter side entrance
 - back stairwell
 - kitchen entrance
 - staff entrance to main building
 - (5) Color flat screen security monitors are in place at the following locations and can also be accessed via the internet:
 - Receptionist
 - Office of Executive Director
 - Office of the Director of Operations and Clinical Services Group Home Office
 - Shelter Manager office

Quality Improvement

QI-4

Technology Plan (continued)

- Development office
 - Electrical/Phone room
- (6) WaveReader software version 4.2.4 is in place to view actual and recorded video via internet from the digital video multiples recorder which is located in the electrical/phone room.
- (7) Administrative building, shelter and group homes have been equipped with an alarm system. Alarm control panels are at the following locations:
- behind receptionist desk
 - office entrance
 - shelter manager's office
 - front door of each group home
 - master bedroom of each group home
- (8) Compass software version 2.0.47.1, database version 1.5.8.101 is in place and controls alarm panel users and partitions. The human resource manager manages and controls this system
- (9) Panic buttons are located at the front desk, the Executive Director's office and Director of Operations and Clinical Services' office.
- ii) To increase the physical and safety security of those we serve, employees, donors and visitors the **JAFCO Children's Ability Center** is a monitored gated facility with entry only to those who are granted access and the following technology and technological systems are in place.
- (1) IP CCTV Surveillance system is in place and consists of the following 17 licensed cameras:
- IP Interior 1.3 MP Dome Cameras
 - 4 IP Exterior 1.3 MP Vandal Dome Cameras
 - 4 IP Exterior 2 MP Vandal Dome Cameras
 - 4 IP Exterior 3 MP Housing Cameras
 - 13-1977 Pedestrian TE Camera
- (2) Remote Desktop Surveillance Monitors are located in the following locations:
- Front desk reception
 - Counter desk
 - Site Directors desk
- (3) Access Control System is in place that is comprised of access control panels and a telephone entry unit by Rosslare; power supplies by Altronix; card readers by Rosslare, electric strike locks by HES, magnetic locks by Rosslare and peripheral safety devices by "Bosch" and "Rosslare". All doors in the main building and the group home have card readers. Below is a breakdown of the of the access control door devices:
- 67 Card readers
 - 41 Electric Strike Locks for Cylinder Latching Hardware
 - 4 Electric Strike Locks for Crash Bar Latching Hardware
 - 6 Magnetic Locks for three double door locations
 - 17 Push-To-Exit (PTE) buttons
 - 6 PIR Motion REX Units
- (4) Exterior Access Control System that is comprised of the following:
- Two pedestrian gates with card readers on both sides for read-in/read-out
 - Two pedestrian gates with card readers for read-in and NEC single button call boxes have been installed to communicate via the existing NEX telephone system.
 - Two access control panels are located in the 2nd floor server room to access the four pedestrian gates and to interface with side swing gate telephone entry unit. The Rosslare system is tied into the existing Rosslare access control system for seamless programming and management. The telephone entry unit is configured for entry code and calling only. The card reader interfaces with Rosslare access control system.
- iii) All JAFCO computers in the offices and group homes are scanned frequently for inappropriate website.
- iv) Any device brought in (i.e. laptops, flash drives, memory cards etc.) by employees, persons served, donors and vendors will automatically be scanned for viruses and malware when connecting to the JAFCO network. All laptops must have up-to-date antivirus software.
- b) Currently the use of available technology and related systems to increase the security and confidentiality of our overall operations is in place but needs ongoing updating and verification.

Quality Improvement

QI-4

Technology Plan (continued)

- c) Estimated improvement cost.
 - i) No costs are estimated for improvements at this time

4. Confidentiality:

- a. We utilizing technology and technological systems to increase the confidentiality of our informational systems to protect information from persons not legally allowed to access such information with the following:
 - i) Servers and computers are password protected.
 - ii) Individual programs (i.e. Quickbooks, JADE clinical database and Result Pus Donor database) on servers are password protected.
 - iii) Wireless routers are password protected.
 - iv) Each computer is password protected and passwords are set to change every three months. The password requires a combination of minimum 6 characters, including one capital letter and one number and it may not contain any part of a previous password.
 - v) Paper files reside in locked cabinets.
 - vi) Access to electronic and paper files are based upon position in agency.
 - vii) All out going emails include the following statement: This communication was sent from JAFCO and contains information that may be confidential or privileged. The information is solely intended for the use of the addressee only. If you have received this communication in error, please immediately notify the sender by telephone or by electronic mail. Any disclosure, copy, distribution, or use of the contents by anyone other than the intended addressee of this communication is prohibited.
- b. Currently the use of available technology and related systems to increase the security and confidentiality of our overall operations is in place and automatically updated on a regular basis.
 - i) Verify that all confidential information on computers is password protected.
- c. No costs are estimated for improvements at this time.

5. Backup Policies:

- a. Person Served and Organizational Information Back Up
 - i) Internal Full system back-ups are performed nightly to Server2.
 - ii) Full (VSS) snapshots are created of the servers twice a day.
 - iii) Incremental remote back-ups are performed nightly of all files that have been changed, added or deleted since previous back-up. 30 copies of changed files are retained, and deleted files are retained for 30 days prior to being permanently deleted. All data is encrypted before leaving the network.
 - iv) Incremental remote back-ups of the DB Server are performed nightly of all files changed, added, or deleted since previous back-up. 30 copies of changed files are retained, and deleted files are retained for 30 days prior to being permanently deleted. All data is encrypted before leaving the network.
 - v) In case of a threatening disaster the JAFCO computer system will be backed up on an external hard drive which will be placed in a waterproof and fireproof safe in a second story interior room.
- b. Additional technology to increase the protection from loss of information is needed:
 - i) 3TB Drive to facilitate additional back-up process
- c. The estimate cost for back up improvements are:
 - i) 3TB Drive: \$200

6. Assistive Technology:

- a. We assess each person served, employee and visitors and will utilize available technology to make reasonable accommodations for the cognitive and physical disabilities as needed.
- b. Assistive Technology needed:
 - i) Telecommunication device for the deaf or hard of hearing.
- c. The estimated cost for the improvements are:
 - i) Captioned telephone: \$75

7. Disaster Recovery Preparedness:

- a. Technology and systems used to assist in recovery from a disaster situation:
 - i) In case of a threatening disaster the JAFCO server will be backed up on an external hard drive and removed from site by Facilities Manager to the JAFCO Children's Ability Center 2nd story server room.
 - ii) During a power outage, a generator will supply power to the administrative building.
 - iii) In the event of an imminent hurricane the Director of Communications will instruct staff prior to leaving premises to shut down all computers, unplug all computer equipment, remove from floor to higher location and cover with plastic and unplug phones and place in cabinets.

Quality Improvement

QI-4

Technology Plan (continued)

- b. At this time no additional technology and systems available to assist in recovery from a disaster situation are being considered.
 - c. There are no estimated costs for Disaster Recovery Preparedness at this time.
8. **Virus Protection:**
- a. Our computer information systems are protected by Kaspersky Enterprise Security which has been installed and is running on both servers and all computers and laptops. This system includes Files System Real Time Auto Protect, Internet Email Auto Protect, Microsoft Exchange Auto Protect and Tamper Protection. Live Updates occur every day when released. In and out going files, data and emails are scanned for viruses in real time. Weekly full system anti-virus scans are performed as well every Friday at 9:00 pm on each workstation
 - b. To improve the integrity of our information we plan to upgrade Kaspersky Enterprise Security Protection on a yearly basis.
 - c. Estimated Annual Costs of upgrading our virus protection to the necessary level is approximately \$37 per computer per year.

Quality Improvement

QI-4 Technology Plan (continued)

JAFCO Technology and System Plan 2014-2016

Hardware: All objectives include research and access available technology and cost, present purchase option to Executive Director for approval of purchases, and purchase and install new hardware. All methods include contacting of supply vendors, presentation of hardware improvements to Executive Director and training of staff on use of new hardware

Goal	Objective(s)	Method(s)	Date of Achievement	Person(s) Responsible
1. Additional server	Integrate server	Purchase and install new server	2015	Dwight Barnes, IT Help Desk Specialist
2. ID card machine	Secure & easy creation of ID cards	Purchase and use	2015	Dwight Barnes, IT Help Desk Specialist
3. Postage meters for JAFCO Children's Ability Center and JAFCO Northeast Communities.	Facilitate & reduce cost of mailings	Lease and install	2015	Dwight Barnes, IT Help Desk Specialist
4. Replace smart switches JAFCO Jewish Children's Village.	provide centralized management and connection of all computers, servers and network	Purchase & install	2015	Dwight Barnes, IT Help Desk Specialist
5. Conferencing system for the JAFCO Jewish Children's Village	Facilitate meetings to be attended via phone	Purchase and install new system	2016	Dwight Barnes, IT Help Desk Specialist
6. Entertainment system for the lobby at the JAFCO Jewish Children's Village	Provide entertainment while waiting	Purchase and install	2016	Dwight Barnes, IT Help Desk Specialist
7. Bulletin system for the lobby at the JAFCO Jewish Children's Village	Provide up to date information to visitors	Purchase and install	2016	Dwight Barnes, IT Help Desk Specialist
8. Update or Replace audio video system in the theatre at the JAFCO Jewish Children's Village	High Definition viewing of movies, presentations and trainings	Update or Purchase and install	2015	Dwight Barnes, IT Help Desk Specialist
9. Add laptop to audio video system in the theatre at the JAFCO Jewish Children's Village	Ability to show presentations and on-line trainings	Purchase and install	2015	Dwight Barnes, IT Help Desk Specialist

Quality Improvement

QI-4 Technology Plan (continued)

Software: All objectives include review of costs throughout process for approval with Executive Director. All Methods include approval from Executive Director.

Goal	Objective(s)	Method(s)	Date of Achievement	Person(s) Responsible
1. Replace/Purchase clinical database	Provide accurate and accessible persons served data, statistics and reports	Purchase, install and convert existing data	2015	Technology Team
10. Microsoft Office and technology training.	Provide staff with more knowledge	Conduct training on a monthly and as needed basis with staff	Ongoing	Dwight Barnes, IT Help Desk Specialist
11. Purchase Blackbaud Raisers Edge	Improve donor data management, fundraising efforts, keep track of events, statistics and reports	Purchase, install, train and covert data	August 2014	Yolande Wijtenburg, Director of Communications & Debbie Alvarez, Database Manager

Security: All objectives include review of costs throughout process for approval with Executive Director. All Methods include approval from Executive Director.

Goal	Objective(s)	Method(s)	Date of Achievement	Person(s) Responsible
None at this time	NA	NA	NA	NA

Confidentiality: All objectives include review of costs throughout process for approval with Executive Director. All Methods include approval from Executive Director.

Goal	Objective(s)	Method(s)	Date of Achievement	Person(s) Responsible
None at this time	NA	NA	NA	NA

Backup Policies: All objectives include review of costs throughout process for approval with Executive Director. All Methods include approval from Executive Director.

Goal	Objective(s)	Method(s)	Date of Achievement	Person(s) Responsible
1. 3TB Drive process	Facilitate backup process	Purchase and install	2015	Dwight Barnes, IT Help Desk Specialist

Quality Improvement

QI-4 Technology Plan (continued)

Assistive Technology: All objectives include review of costs throughout process for approval with Executive Director. All Methods include approval from Executive Director.

Goal	Objective(s)	Method(s)	Date of Achievement	Person(s) Responsible
Telecommunication device for the deaf or hard of hearing.	Facilitate communications for the deaf or hard of hearing	Purchase and have a captioned telephone available for use	September 2014	Dwight Barnes, IT Help Desk Specialist

Disaster Recovery Preparedness: All objectives include review of costs throughout process for approval with Executive Director. All Methods include approval from Executive Director.

Goal	Objective(s)	Method(s)	Date of Achievement	Person(s) Responsible
None at this time	NA	NA	NA	NA

Virus Protection: All objectives include review of costs throughout process for approval with Executive Director. All Methods include approval from Executive Director.

Goal	Objective(s)	Method(s)	Date of Achievement	Person(s) Responsible
Kaspersky Enterprise Security	Continue to protect our computers and service with anti-virus software	Update virus protection yearly	Annually	Dwight Barnes, IT Help Desk Specialist

Signature:



Executive Director

08/20/14

Date

Quality Improvement

QI-5

Input from Stakeholders, Persons Served, Guardians and Employees

Original Date: 09/01/08

Revision Date: NA

Policy Number: QI-5

Department of Origin: Quality Improvement

Objective:

JAFCO is committed to actively seeking information from persons served, their families, employees, referral sources, funding sources, and other stakeholders, and committed to providing services in a manner that utilizes that information to ensure that the needs and preferences of all stakeholders are consistently met.

Process:

The process of seeking and utilizing input from stakeholders contains the following basic components:

- Obtaining input from persons served, their families, and other stakeholders on a regular basis as per required by external monitors and internal policies; quarterly.
- Reviewing the input through administration and management.
- Ensuring that our programs are “input driven” and reflect the needs and preferences of the persons we serve.
- Using the input to change the practices and policies of the organization.

The Quality Improvement Committee is charged with reviewing, revising, and developing an ongoing written input plan. This process includes developing additional methods to obtain and utilize input, ensuring that the information is being communicated to all stakeholders, and facilitating improvement of the practices of the organization.

Plan:

- The following is JAFCO’s plan for input from persons served for the fiscal year 2010-2011. In addition to ongoing satisfaction surveys, which measure areas such as; person served rights, quality of services, accessibility, cultural competency and orientation. In addition, informal interviews may be conducted in order to collect feedback from the person served.
- JAFCO shall establish a person served/stakeholder suggestion box. JAFCO has placed the suggestion boxes in visible locations. Suggestion forms and pencils are available at each suggestion box along with a sign that encourages feedback and suggestions. Each month suggestions are gathered by a designated staff and during clinical staff meetings suggestions shall be considered for the purpose of program evaluation.
- Several members of the JAFCO management team will initiate a process to seek relevant and specific feedback from family members and/or guardians of persons served by the organization. Family members will be provided with satisfaction surveys unique to family issues. Information is expected to be utilized to analysis trends and is provided to the management team for consideration in changing policy, procedures, and practices. It is the goal of the project members to utilize these information sources within six months after the initiation of the project.
- The following is JAFCO’s plan for input from persons served for the fiscal year 2010-2011. In addition ,to ongoing processes that continue to be part of our plan, several new processes for input have been developed and are new within the organization for this fiscal year. Besides collecting input from external agencies the QI Program shall conduct informal interview with: stakeholders, guardians and person served on an on-going basis, the interview shall be conducted in person or via phone.
- Evaluation of Functioning of the Persons Served: The following is JAFCO’s plan for input from persons served for the fiscal year 2010-2011. In addition to ongoing satisfaction surveys, which measure areas such as; person served rights, quality of services, accessibility, cultural competency and orientation. In addition, informal interviews may be conducted in order to collect feedback from the person served.
- JAFCO shall establish a person served/stakeholder suggestion box. JAFCO has placed the suggestion boxes in visible locations. Suggestion forms and pencils are available at each suggestion box along with a sign that encourages feedback and suggestions. Each month suggestions are gathered by a designated staff and during clinical staff meetings suggestions shall be considered for the purpose of program evaluation.

Quality Improvement

QI-5 Input from Stakeholders, Persons Served, Guardians and Employees (continued)

- During the current fiscal year, JAFCO shall continue to use the Child Assessment Record (C-FARS) in the Group home Program and the Out Patient Program to increase the input from persons served regarding functional status at various points in the process of services. A clinician will administer the C-FARS at admission, every six months and at discharge. This information will be used in aggregate form to assist the organization in determining functional status of the persons we serve throughout their programming.
- Several members of the JAFCO management team will initiate a process to seek relevant and specific feedback from family members and/or guardians of persons served by the organization. Family members will be provided with satisfaction surveys unique to family issues. Information is expected to be utilized to analysis trends and is provided to the management team for consideration in changing policy, procedures, and practices. It is the goal of the project members to utilize these information sources within six months after the initiation of the project.
- This instrument shall assist in determining the person served level of functioning in the community as well as the strengths and weaknesses of the program. The agency also completes outcome measures that are required quarterly by external contracts. This information is also taken into account internally. The information gather from this tool shall also be aggregated to the new software for a more formal analysis by the end of 2011.
- Each quarter the program director or designee will determine the average score for subscale indicator of the external outcome measure send a copy to the interested third party as well as use findings to enhance the quality of services provided by the program. Monthly the C-FARS information is entered into the database and a report is analyzed every six months. These scores will be compared across specific time intervals to evaluate the level of change within the program and will be used by the management team as input to determine if revision of programming and services may be appropriate. The findings of both outcome measures are used in the yearly performance analysis plan.

Suggestion Boxes:

JAFCO shall establish a person served/stakeholder suggestion box. JAFCO has placed staff suggestion boxes in visible locations. Suggestion forms and pencils are available at each suggestion box along with a sign that encourages feedback and suggestions. Each month suggestions are gathered by the HR manager and shared with the HR committee in a regularly scheduled meeting for consideration of changes to assist in meeting the needs of personnel and address staff concerns and opinions. Changes are made at the facility level if they involve daily activities and issues that are specific to that location that do not require organizational policy and procedural changes. All suggestions are submitted to the management team, the CQI committee and any suggestion that would require overall policy, procedure, or programming changes are considered by the management team who determine final disposition and actions. These activities and the feedback concerning changes are reflected in the management team minutes and are distributed to all employees of the organization and summarized in a monthly report to the Board of Directors.

Staffing Conferences:

JAFCO conducts weekly clinical staff meetings with all clinicians attending a meeting facilitated by their respective program supervisor/ Director of Operations and Clinical Services. These meetings include a consistent flow of information regarding communication between persons served and staff. Any specific information that would warrant further inquiries or investigation are forwarded to the management team who utilize the information to modify, revise or change practices, policies, and procedures as a result of receiving the information. These activities and the feedback concerning changes are reflected in the management team minutes. JAFCO shall begin to disseminate information via monthly staff meetings and Human Resources newsletter to all employees of the organization and summarized in a quarterly report to the board of directors.

Family Feedback Project:

Beginning this fiscal year, several members of the JAFCO management team will initiate a process to seek relevant and specific feedback from family members and/or guardians of persons served by the organization. Family members will be provided with satisfaction surveys unique to family issues. Information is expected to be utilized to analysis trends and is provided to the management team for consideration in changing policy, procedures, and practices. It is the goal of the project members to utilize these information sources within six months after the initiation of the project.

Quality Improvement

QI-5

Input from Stakeholders, Persons Served, Guardians and Employees (continued)

External Stakeholders Assessment and Input

JAFCO has surveyed a variety of external stakeholders to determine the level of satisfaction stakeholders have regarding the services of our organization. Formatted surveys are sent to all referral sources, funding sources, ancillary providers who jointly serve our clients, and government regulatory personnel. The surveys shall be conducted once a year and the results are reported to the management as part of an annual summary report of performance improvement activities, recommendations and information. The management team makes recommendations based on the results.

Employee Satisfaction Survey

JAFCO has initiated an internal employee satisfaction survey to take place once a year. The survey was completed electronically and contains seven domains that are reflective of the organization's work setting and employee's needs and preferences. Each domain contains multiple questions regarding employee satisfaction. The results are contained in a database that is reviewed by the human resources/employee relations committee. Results are reviewed and recommendations for changes, based on the results, are forwarded to the management team for consideration.

Signature:



Executive Director

09/01/08

Date

Quality Improvement

QI-6 Accessibility Plan

Original Date: 07/16/08

Revision Date: 8/8/2014

Policy Number: QI-6

Department of Origin: Quality Improvement

Purpose:

The following serves as JAFCO's Accessibility Plan for the 2014 year. The purpose of this document is to provide a means to facilitate continual quality improvement in the area of accessibility.

Objective:

JAFCO is committed to providing an organizational milieu that seeks to accommodate the needs of all persons served, employees, and stakeholders. Central to this commitment is the removal of architectural, attitudinal, employment, and other barriers that may impede full access to the services and programs of the organization.

This Accessibility Plan corresponds to JAFCO's internal evaluation of barriers through the use of facility inspections, assessments of need, and persons served, stakeholder, and employee feedback. The Accessibility Plan is an annual plan, reviewed and endorsed by the Executive Director.

The Accessibility Plan for the Fiscal Year 2014 is as follows:

Architectural:

Architectural barriers have been identified through internal and external inspections, assessments of need, and employee, stakeholder and persons served feedback. The Continuous Quality Improvement Council and the Health and Safety Committee provide ongoing monitoring of conditions within the organization that serves to improve access. The organization's leadership conducts long and short range planning meetings that routinely include assessment of architectural needs and related costs analysis. The JAFCO Children's Village is a \$6m facility that was built in 2002 in compliance with the latest ADA standards and city building codes and is a modern, clean, uncluttered and easily accessible facility. The main building has built in ramp access and the group homes have a portable ramp to allow access for a person using a wheelchair to take the one step up into the home.

The JAFCO Children's Ability Center is a \$10m facility that was completed in 2014 and was designed to serve children with disabilities in accordance with the latest ADA standards. Special sinks, counter heights, doors, door openers, toilets and stoves were used to allow access persons in wheelchairs to have full use of the facility.

Attitudinal:

JAFCO seeks to reduce the stigma associated with child abuse and neglect children as well as persons who have mental illness, developmental disabilities, and substance abuse problems, and to promote their inclusion within the community. Person first language is utilized whenever possible and materials and websites are updated regularly with new language that is politically correct and portrays an attitude of respect towards persons served. This past year the removal of the words "special needs" from our literature related to our developmental disabilities programs was implemented. Also name of our new center was changed from the JAFCO Respite and Family Resource Center for Children with Developmental Disabilities to the JAFCO Children's Ability Center based upon feedback from stakeholders (mainly donors) that they did not know the meaning of the words "respite" or "developmental disabilities". The new name has been well received by the community due to the positive focus on each child's abilities.

Financial:

JAFCO actively seeks to reduce and/or eliminate financial constraints that may restrict the ability of all eligible persons served to access any services consistent with their needs and preferences. JAFCO is unique in its ability to successfully secure both public (20%) and private (80%) funding through contracts, grants, special events, private donations, family foundations, direct mail and on line giving and estate gifts. These sources of diversified funding and some insurance reimbursement have allowed us to deliver all of our services virtually at no cost to the person served over the past 21 years (with the exception of private adoption services). The New Children's Ability center does not yet have this same level of funding due to a recent opening date of June 1, 2014 and therefore families will have to pay fees for most while we develop our funding efforts.

Quality Improvement

QI-6

Accessibility Plan (continued)

Two government funding sources have already been obtained allowing us to provide respite services to families in Broward County only who live below 400% of the poverty level as well as enhanced case management services. A limited \$1.2m budget has been approved by our board that also includes revenues from private donations and events as well as client fees.

Environmental:

JAFCO believes that the environment in which services are provided reflect the cultures and cultural customs of the persons served, and in addition are conducive to providing a comfortable and confidential setting for persons served and employees to achieve their highest potential. The physical plant is modern and well maintained, frequently painted and repaired and cleaned daily. Each professional employee has their own desk and work space, desk phone, Iphone and computer. There are spaces available both indoors and outdoors for employees to have meetings and have lunch that are not available to persons served. There is no additional office space to expand staffing at this time. Safety is of utmost importance in our environment and a full safety plan is implemented which includes internal and external inspections, safety drills and training

Employment:

JAFCO strives to maintain a diverse workforce sensitive to the unique needs of persons served and representative of the community it serves. In addition, JAFCO strives to hire and maintain the highest of quality of employees available in the labor market within the budgetary constraints of a non-profit agency. JAFCO employees represent cultures from all over the world and range in age from 20 to over 70 years of age. As an agency that is committed to serving the Jewish community in addition to children of all cultures, we are under-represented in direct care staff from the Jewish community and that is a barrier we hope to address in 2014.

Communication:

JAFCO seeks to provide open channels of communication that allow persons served, employees, and stakeholders to access information that accurately represents the status of the organization's systems and outcomes. In addition, JAFCO seeks to facilitate communication among persons served and employees that provides a basis for personal and professional growth, and well-being. We communicate with members of the community who can also communicate via written materials and a bi-annual newsletter, an annual report, email, website, regular US mail, telephone and fax. Community members can access our staff via telephone and through our website. This year JAFCO added a voice over IP phone system integrating voice mail and email messaging which appear on staff cell phones and emails during and after work hours. JAFCO has accommodations for persons with hearing impairments and disabilities (see policy). JAFCO has upgraded our website and our use of social media and online giving for development and fundraising efforts while maintaining written communication (event invitations and newsletters) for our donors who are over 50 years of age and who prefer that medium of communication. Email communications with donors are planned and occur no more than one time per week to ensure that we do not overwhelm our donors with emails. All of our current communication is in English only and while this appears to be meeting the needs of our clients, if funding were to permit we would look into translating of our communications into Hebrew, Spanish, Creole and Russian.

Transportation:

JAFCO seeks to ensure that persons served are not limited by a lack of personal transportation options or by options that may not accommodate their disabilities, and that transportation systems fully accommodate any community member seeking to access JAFCO services. Our social workers maintain adequate insurance as per agency policy and are permitted and encouraged to transport clients in their personal vehicles if needed. For children residing in our residential facility JAFCO owns and operates a fleet of eight (seven passenger) mini vans/suv's without any signage on the vehicles in keeping with our philosophy of normalcy. We also have a donated leased sedan vehicle available for the next year to all clinical staff members. Each vehicle is different in color and brand and does not look institutional; rather they resemble a typical family vehicle. Vehicles are relatively new and modern (and are traded in every four years for safety). JAFCO offices were expressly built on two properties that are accessible via public transportation with a bus stop directly outside of our gates, allowing access via public transportation to clients from all three counties that we serve. Our new ability center does not offer transportation services at this time with exception of our enhanced case management program in which our social workers will transport parents to and from appointments if needed.

Quality Improvement

QI-6

Accessibility Plan (continued)

Technology:

JAFCO is committed to providing technology to all users to support information management and performance improvement, allowing for enhanced individual services, improved efficiency of personnel, improved productivity of personnel and better communication with persons served and stakeholders. We will make all efforts to keep up with evolving technology and the upkeep of hardware and software to continue to offer the highest quality of technology to our persons served and stakeholders. JAFCO complies with high accessibility standards to meet the needs of users with disabilities and reasonable efforts will be made to accommodate all users with assistive technology.

Other Areas:

In addition to the above specific accessibility goals and objectives, JAFCO is involved in many ongoing activities and procedures that enhance the accessibility of persons served, employees, and members of the community. Examples include personnel policies (affirmative action/EOE, exit interview process), ongoing outreach activities in all program areas, the utilization of consumer feedback/input processes such as satisfaction surveys, psychosocial assessments, and individual planning, participation in consumer advocacy groups, outcome studies, cultural competency education, and a multitude of other activities that directly facilitate the enhancement of accessibility.

Requests for Reasonable Accommodations:

Requests are accepted by phone, in person, by email or on the website and are identified, reviewed, decided upon and documented.

In 2014 one such request was received via our website in May, 2014 where a donor requested a volunteer/assistant to her push her husband in his wheelchair during a donor reception event. The donor contacted Wendy Jenkins who is our point of contact. Wendy arranged for a student intern to meet the donor at the valet and stay with them throughout the entire event. The donor was called by Wendy and by the intern as well to introduce herself to the couple in advance confirming where she would meet them and that she would stay with them for the entire evening. The day of the event the donor did not feel well and cancelled.

JAFCO's Continuous Quality Improvement Council and the Health and Safety Committee develops and approves a revised Accessibility Plan each year. The plan is reviewed and approved by the Executive Director and is made available to persons served, employees, and stakeholders.

Quality Improvement

QI-6

Accessibility Plan (continued)

Environmental Barriers

Goal: To remove any environmental barriers at the agency.

IDENTIFIED BARRIERS (Environmental)

Barrier	Solution	Priority	Cost	Funding	Due Date	Responsible Staff	Program
There is no more office space at the Village for program expansion and additional staff	<ol style="list-style-type: none"> 1. Move some staff to ability center 2. Renovate upstairs storage area into office space 3. Convert group home into office and support building and move group home and therapy staff there 	Medium	<ol style="list-style-type: none"> 1. Minimal 2. \$50,000 3. \$5,000 	Private/Village Capital campaign 2015 budget	12/15	Ex Director	Group home

Attitudinal Barriers

Goal: To educate donors about the JAFCO expansion of services to include children with disabilities and help them understand how this service and the new Children's Ability Center fits within the JAFCO mission.

IDENTIFIED BARRIERS (Attitudinal)

Barrier	Solution	Priority	Cost	Funding	Due Date	Responsible Staff	Program
Fear or lack of understanding regarding children with disabilities amongst staff, donors and volunteers	<ol style="list-style-type: none"> 1. Rebranding of agency through marketing materials, website and presentations. 2. Education of board, volunteers and donors about new center at events and during tours 	High	\$10,000 for new brochure and branding	Operations/capital campaign	12/14	Development Team/Communications Director/Marketing Company	Development

Quality Improvement

QI-6

Accessibility Plan (continued)

Communication Barriers

Goal: To reduce communication barriers in the provision of services (i.e. language, format, cultural differences, and telecommunication).

IDENTIFIED BARRIERS (Communication)

Barrier	Solution	Priority	Cost	Funding	Due Date	Responsible Staff	Program
All JAFCO written materials are in English only	Translate website and written materials into Spanish, Creole, Hebrew	low	unknown	unknown	12/17	Communications Director	

Employment Barriers

Goal: To maintain a diverse workforce sensitive to the unique needs of clients and representative of the community.

IDENTIFIED BARRIERS (Employment)

Barrier	Solution	Priority	Cost	Funding	Due Date	Responsible Staff	Program
Diversity of direct care workforce does not adequately represent the Jewish community	Expand recruitment efforts of direct care staff within the Jewish community through networking and with synagogues and schools, placing ads in community agency newsletters.	High	Little or no cost		ongoing	Human Resources/ Development Associate	Group Home

Quality Improvement

QI-6

Accessibility Plan (continued)

Other Barriers

Goal: Additional barriers, as identified, will be addressed as needed and may include but are not limited to: safety, waiting lists, staff performance, program design, funding, technology, staffing patterns etc.

IDENTIFIED BARRIERS

Barrier	Solution	Priority	Cost	Funding	Due Date	Responsible Staff	Program
1. Conduct an accessibility audit or assessment of JAFCO's facilities on an annual basis.	1. Seek and train staff/volunteers to conduct an accessibility audit. 2. Complete an accessibility audit 3. Utilize the results and integrate into annual the Accessibility Plan.	Medium priority	Little or no cost.	Funding	Annually	Facilities Manager	

Signature:



Executive Director

8/8/2014

Date

JAFCO Policy and Procedure Manual
Foster Care & Adoption Program

QI-7 English Proficiency Policy

Original Date: 07/16/10
Revision Date: 02/03/14
Policy Number: QI-7
Department of Origin: Quality Improvement

Policy:

It is the intent of JAFCO to define its policy regarding the principles of care when treating different populations being served. JAFCO is committed with complying with all regulations, statues, and best practice standards. When working with the deaf/hard of hearing, blind or non-English speaking population, JAFCO employees shall always adhere to this policy and have knowledge of procedures to follow.

Translation of Written Materials Written material (vital documents) routinely provided in English to applicants, Person Served and the public are to be available in regularly encountered languages other than English. It is vital that documents be identified and translated into the non-English language of each regularly encountered Limited English Proficient group eligible to be served or to be directly affected. Each program administrator will ensure that non-English written materials, such as program forms, brochures, etc., are available to operational staff.

Competency of Interpreters and Translators

1. Certification of foreign language interpreters is not required; however, competency requires:
 - a. Demonstrate proficiency in both English and the other language,
 - b. Fundamental knowledge in both languages including any specialized terms or concepts peculiar to the program or activity,
 - c. Sensitivity to the person's culture,
 - d. A demonstrated ability to accurately convey information in both languages.
2. Departmental or Contract Provider employees who are utilized to interpret for the deaf or hard-of-hearing shall meet the requirements in CFOP 60-10, Chapter 3.

Provision of Interpreters in a Timely Manner

1. Staff shall provide interpreters for deaf or hard-of-hearing Persons Served, Guardian and Companions in a timely manner in accordance to the following standards:
 - a. Non-Scheduled Interpreter Requests: For any emergency situation that is not a scheduled appointment, staff shall make an interpreter available as soon as possible, but in no case later than two (2) hours from the time the Person Served, Guardian or Companion or staff requests an interpreter, whichever is earlier. If the situation is not an emergency, staff shall offer to schedule an appointment (and provide an interpreter where necessary for effective communication) as convenient to the Person Served, Guardian or Companion, but at least by the next business day.
 - b. Scheduled Interpreter Requests. For scheduled events, staff shall make a qualified interpreter available at the time of the scheduled appointment. If an interpreter fails to appear for the scheduled appointment, staff shall take whatever additional actions are necessary to make a certified interpreter available to the deaf or hard-of-hearing Person Served, Guardian or Companion as soon as possible, but in no case later than two (2) hours after the scheduled appointment.

Other Means of Communication.

1. Staff shall continue to try to communicate with the deaf or hard-of-hearing Person Served, Guardian or Companion insofar as the Person Served, Guardian or Companion seeks to communicate, between the time an interpreter is requested and the time an interpreter arrives. Refer to Appendix F (In-Person Communication Etiquette), Appendix G (Interpreter and Translation Services Poster) and Appendix H (I Speak Flash Cards) as a guide.
 - a. Language services include, as a first preference, the availability of qualified bilingual staff that can communicate directly with Person Served, Guardian or Companions in their preferred language.
 - b. When bilingual staff is not available, the next preference is face-to-face interpretation provided by qualified contract or volunteer language interpreter.
 - c. Telephone interpreter services should be used as a supplemental system when an interpreter is not available, or when services are needed for an unusual or infrequently encountered language.

Foster Care & Adoption Program

QI-7

English Proficiency Policy (continued)

- d. Sign language interpreters must be certified, unless they are a DCF employee who has been determined qualified by an Independent Agency.
- e. Minor children should never be used as an interpreter.
- f. The use of assistive devices (vibratory alarms) will be incorporated with relevant services (tactile communication) for persons with multiple disabilities such as deafness and blindness.
- g. If the individual declines the use of the free foreign language or sign language interpreter, or other auxiliary aids, the persons served file must be documented in the client file.

Identifying Language Trends.

To ensure meaningful access to all programs and services, each program supervisor will identify language trends by:

1. Identifying the non-English languages that are likely to be encountered in its programs and estimating the numbers of Limited English Proficient persons eligible for services that are likely to be affected by its program. This can be done by reviewing census data, client utilization data. The estimate should be used as a guide for employee recruitment.
 - a) Informing Persons Served of the purpose for collecting data on race, ethnicity and language,
 - b) Emphasizing that such data is confidential and will not be used for discriminatory purposes,
 - c) The Person Served, Guardian or Companion does not have to provide the information if he or she chooses not to provide such information, unless required by law,
 - Identifying the points of contact in the program or activity where language assistance is likely to be needed,
 - Identifying resources needed, location and availability of these resources, and
 - Reporting the identified language needs to Director of Operations and Clinical Services.

Signature:



Executive Director

02/03/14

Date

Risk Management

Revision Signature Page

RIS-1	Risk Management Policy
RIS-2	Risk Management Plan
RIS-3	Risk Management Assessment
RIS-4	Clinical Records
RIS-5	Search Warrant

The above mentioned policies and plans have been reviewed and or revised by the executive director

Signature:

Executive Director

Date

Risk Management

RIS-1

Risk Management Policy

Original Date: 4/8/08

Revision Date: 04/25/14

Policy Number: RIS-1

Department of Origin: Risk Management

Policy:

1. It is the policy of JAFCO to be responsible for operational implementation of risk management assessments for potential and actual risks to persons served, to the public, to staff members and to the overall working and service delivery environment. Assessments shall result in preventive measures and interventions that will serve to reduce risk and loss within the organization.
2. JAFCO is also committed to long-range planning to ensure service continuity by utilizing a formal, periodic risk management process as a method of identifying loss and exposures. The process entails an assessment that shall lead to an analysis and an evaluation in order to develop a strategy plan. The intent of the plan shall be to counter any potential loss, implement effective systems which shall assist in providing ongoing management oversight of the efficacy of decisions made regarding risk management/loss prevention activities. In addition, implementation of necessary changes as may be indicated by the plan will include but not be limited to changing the service and/or business environment.

Procedures:

1. The Executive Director shall coordinate activities designed to result in reduction of risk and loss and continuously improve the quality of care.
2. The Executive Director shall be in charge of identifying and assessing risk, developing a plan with interventions, actions, and systems to control risk, conduct periodic evaluations to assess results of actions and reformulation of planning, and ensure that financial support is available to meet the goals of the risk management plan.
3. The Executive Director shall assess the organization's exposure to loss in the following causation areas:
 - a. People: This area is defined as acts or behaviors that may expose the organization to loss and liability. Appropriate areas for assessment would include, but not be limited to, incident reports, code of conduct standards and violations, safety standards, reports, consumer rights and grievance complaints, and purchasing/fiscal practices. For additional information, refer to the Corporate Compliance Policy.
 - b. Organization: This area is defined as the policies, procedures, and legal guidelines that the organization is legally responsible to follow. Appropriate areas for assessment would include, but not be limited to a review of the organization's policies and procedures compared to actual practices, a review of federal and state safety, fiscal, third party, and clinical guidelines compared to actual practices, and a review of current industry standards of care compared to actual practices.
 - c. Hardware: This area is defined as the conditions that exist within the organization. Appropriate areas for assessment would include, but not be limited to the physical structures in which services are provided, equipment used throughout the organization, health and safety reports, incident reports, maintenance reports, and the organization's tools for maintaining and transmitting information.
 - d. Insurance: This area is defined as the overall insurance program that the organization has in place to protect all assets and protects persons served, staff members, the designated authority members, and others associated with the organization, against reasonable claims due to adverse events for which the organization is liable. Appropriate areas for assessment would include, but not be limited to appropriate insurance coverage for buildings, equipment and inventory, workers' compensation, bonding of personnel, and vehicles. In addition, assessment also includes the areas of professional liability, products and services, and designated authorities' errors and omissions.
4. The agency manager or designated staff shall conduct a formal Risk Management Assessment (RMA) and report the findings of that assessment to the Quality Improvement Council/Executive Director. The Risk Management Assessment Questionnaire Form will be utilized to guide the assessment process.
5. The agency manager or designated staff shall facilitate and encourage staff member involvement in assessing risk and loss through the distribution of a risk assessment questionnaire that provides basic education regarding risk management and directs the staff member to provide opinion and feedback regarding their perception of risk within their work environment. The Quality Improvement Council shall facilitate the staff member assessment process through department and/or program educational presentations.

Risk Management

RIS-1

Risk Management (continued)

6. The quality improvement council shall review the organization's historical losses, or potential for loss in all areas assessed, and will utilize this information to establish a standing Risk Management Plan. The plan will be directed towards investigation, continued assessment, and/or coping with a specific issue, solving a particular problem, or reaching a clearly identified objective. Each goal will contain specific objectives, timelines, persons responsible, review dates, and target dates for completion.
7. When developing, managing, monitoring, and reevaluating the Risk Management Plan, the Executive Director and the Quality Improvement Council shall address issues through a continuous review of the following:
 - a. Can the problem or potential problem be eliminated?
 - b. If a problem cannot be eliminated, can action be taken to maintain an acceptable level of risk?
 - c. If a loss occurs, can the severity of the loss be reduced?
 - d. What are the various causes that can lead to the problem?
 - e. What are the possible event frequencies and consequences related to the various causes?
 - f. What alternatives can be established to deal with potential problems?
 - g. Would a combination of technical and organizational measures increase the level of prevention?
 - h. What are the results of selected control measures?
 - i. Periodic evaluation of control measures.
 - j. Corrections of control measures if they are not carried out properly.
 - k. Evaluation of risk financing options.
 - l. Evaluation of overall goal results.
 - m. Ongoing reformulation of the plan.
8. The Executive Director will provide an annual summary of its activities, and results of planning and interventions to Board of trustees and the quality improvement director to provide information for management decision-making and planning, and inclusion in the organization's reports to persons served, staff members, third parties, referral sources, regulatory agencies, and other stakeholders.

Signature:



Executive Director

12/28/06

Date

Risk Management

RIS-2

Risk Management Plan

Original Date: 4/8/08

Revision Date: 08/05/14

Policy Number: RIS-2

Department of Origin: Risk Management

2013 Overview and 2014 Update - August 5, 2014

2013 was one of the most productive and successful yet transitional years in JAFCO's 21 year history. Financially, it was a successful year with revenues exceeding expenses, which came in under budget once again due to excellent fiscal oversight by our staff and Board of Trustees. Programs continued to function at capacity with the largest growth coming from our new programs for children with developmental disabilities. Two new government grants were obtained and our private grants were at their highest level ever. Our commitment to safety kept our children and staff safe with no law suits or major incidents occurring. Finally, our adherence to our CQI process continued to improve the quality of our service delivery, compliance with the CARF standards and overall quality of the organization. JAFCO's definition of quality remains "*the commitment to continually improve*".

2014 brought the construction of our new Children's Ability Center (a family support and respite center serving children ages birth through 21 with any developmental disability) closer to completion and the opening of that center on July 1, 2014 was a significant milestone for the agency, for the South Florida community and for the disabilities community around the country.

While the center will bring together exciting, new and much needed services that have not been previously provided at this level in the developmental disabilities community, the center also brings with it significant risk in the area of funding, human resources, safety and governance. The Board of Trustees has expressed concern about how the center will fit into our overall structure and furthermore, the employees at all levels shared their concerns about how the new center will affect their workload, the availability of management to support them and how the growth will affect the agency in general. Our capital campaign of \$10m is below the level anticipated at this juncture, so a \$2m line of credit was used to complete the construction. This is the first time that the agency has ever used a line of credit and many of the trustees are concerned about the impact that this project will have on the agency as a whole. Our reserve of just under \$7m remains intact, which is positive. In addition, the decision to build in 2013 was a wise fiscal decision as the cost of building the center would be at least \$1m higher if contracted today. The capital campaign effort has been will be augmented by the addition of a full time capital campaign director whose goal is to raise \$5m in the coming year to pay off the \$2m line of credit and to create a \$3m operational reserve for the Ability Center. From an HR perspective, 2013 was filled with staff changes which also add to the overall level of stress at the agency. Turnover was significant and the additional positions that were filled in anticipation of the Ability Center opening created a situation with many new faces, offices that were filled to capacity and even scarcity of parking spots in addition to over 150 additional clients from the disability programs on the existing campus in the course of the year. Once the staff began to move over to the center in May and services began in July, there was be a noticeable reduction of people and activity at the Village as these staff, programs and clients moved to the new Children's Ability Center.

The second half of 2014 will continue to be a period of transition as the new center evolves and develops. At the same time, the feedback from the families we are serving who are raising a child with a disability has been overwhelmingly positive and we are more certain than ever that the decision to expand our services into the disability community was the right one. At the end of the day we realize that the stress we are facing as an agency pales in comparison to the life-long daily stress faced by any of the families we serve. Organizations do go through times of uncertainty during periods of growth and our motto has become.....*where there is uncertainty, anything is possible.*

The following is a detailed Risk Management Plan for 2014.

Risk Management

RIS-2

Risk Management Plan (continued)

Financial/Resource Allocation:

Summary: Analysis of the first half of the 2014 fiscal year finds us on target to meet our budget. Expenses as of 6/30 were 13% below budget. Revenues were 12% over the expected budget.

2014 Financial/Resource Allocation Improvement Plan

Goal 1: *To continue to monitor the Emergency Shelter utilization and revenue stream*

Steps:

1. Maintain/Increase daily shelter rates for government funding by 5% in July of 2014 for the new contract year.
2. Continue annual direct mail/email solicitation for the shelter
3. Increase utilization of volunteers and interns to fill rather than only to supplant staffing ratios.
4. Maintain/strengthen relationships with local CBC's and private sources for referrals.
5. Development plan with new uses for unused shelter beds and space in the event of another drop in shelter utilization.
6. Use twitter/facebook to share emotional stories with donors, create a viral \$1 campaign to "support" the child connected with each story that is sent out regarding the shelter.

Update June 30, 2014

1. Shelter rates are still at \$100 per day, new contracts have not yet been negotiated but 4% rate reductions are expected due to funding cuts announced by the State of Florida.
2. The shelter direct mail piece goes out in September around the Jewish new.
3. Staffing in the shelter is on target in terms of budget?
4. Relationship with Miami is strong, relationship in Broward and Palm Beach is somewhat strained because we filled their beds due to lack of utilization and they are not happy about this. We have met with the Broward CBC to ameliorate the relationship, however they appear to be threatened that we are offering our beds to Miami but this is only because they are not using the beds when we offer them to Broward first.
5. The shelter has been full so no other plans have been developed.
6. This step has not been completed.

Goal 2: *To reduce the financial risk of the new respite center by raising an additional \$5m in capital gifts to allow repayment of the \$2m line of credit and create a \$3m operational reserve.*

Steps:

1. Develop and empower the Children's Ability Center Board of Trustees to provide leadership for the completion of the capital campaign and operations of new center.
2. Hire full time Capital Campaign director to be funded through the capital campaign.
3. Update capital campaign brochure and collateral materials
4. Create a minimum of 3 annual operational funding events for DD Program including annual luncheon, walk/run and gala/cocktail party.
5. Prepare annual mass mailing to foundations that fund DD programs.
6. Create direct mail piece for DD program funding to be sent out bi-annually.
7. Participate in community awareness events/P.R. opportunities to educate community about JAFCO's involvement in the DD community and about the new project.
8. Create viral capital campaign allowing people to purchase "bricks" for \$1 to \$5 to raise the \$1m needed for the construction of the second respite home.
9. Create excitement around the grand opening and encourage corporate involvement, especially with the hospital and medical arena.

Update June 30, 2014

1. The Ability Center Board of Trustees has grown and has come together over the past six months. Committees have been formed and each member has taken on an active role in terms of fundraising and fiduciary responsibilities.
2. A capital campaign director was hired in Jan/14
3. A marketing firm is creating new materials for our Sept 21 grand opening
4. The luncheon is on September 12, Walk Run on March 15, 2015, Gala TBD. Legislative Breakfast Sept 4. Other small events occurring monthly.
5. Mass mailing being prepared, other grants applied for as they are available.
6. Direct mail piece in development.
7. This community awareness effort is ongoing and JAFCO participates in many community fairs throughout the year.
8. In development
9. Grand opening is being planned.

Risk Management

RIS-2

Risk Management Plan (continued)

Goal 3: *To ensure adequate staffing exists for the JAFCO Development Team for 2014*

1. To restructure the development team to include the following positions:
 - Director of Development – oversees the entire team and Broward and Dade Events and Gala
 - Development Associate – Oversees Palm Beach Events
 - Director of NE Development
 - Development Assistant – assists entire team as needed*
 - Director of Communications
 - Webmaster
 - Database Manager
 - Database Assistant Manager*
 - Database Assistant
 - Grants Writer (part time)
 - Capital Campaign Director (for respite center)
 - Development Officer (major gifts, major events and respite center funding)
 - IT Help-Desk Manager on site* (will assist database team with operations/training of database)

*these positions are currently vacant

Update June 30, 2014

1. A new Associate Director of Development, a Development Associate and a development assistant/admin have been put in place.
2. A full time IT Help Desk Manager is in place

Corporate Compliance/Anonymous Reporting Program

Summary: The JAFCO corporate compliance program includes an anonymous on-line web link for those staff who wish to maintain their anonymity. As part of the integrity of the corporate compliance policy, the staff may contact the Corporate Compliance officer via telephone for those staff members who are not comfortable with technology. In addition, staff may choose to use the agencies formal grievance procedure. Notification regarding corporate compliance is posted by time clocks and mailboxes and is maintained in the monthly HR newsletter. Staff are trained about the program upon hire and then annually. An average of one complaint per year has come in through the program but no formal complaints were made in 2013. Professional staff seem comfortable making direct complaints/reports to their supervisors or to HR and also are using the anonymous suggestion box for anonymous reporting which could account for the infrequent usage of this system. Newly hired direct care staff however appear to mistrust the anonymity of the system and there is an undertone amongst the newer employees that making even an anonymous report could result in termination. This issue has been referred to HR for resolution. Supervisor observations as well as consumer reports of any staff behavior that borders on being unethical are taken seriously so that staff who pose a safety or ethical risk are removed of their duties immediately. There were no corporate compliance complaints received in 2013.

2014 Corporate Compliance Improvement Plan

1. HR to address trust issues between direct care staff and management and specifically the area of corporate compliance reporting.
2. Corporate compliance procedures will be announced at several board meetings throughout the year.
3. Corporate compliance procedures will be announced at staff meetings throughout the year.

Risk Management

Summary: From a management standpoint, the formalized and documented review of our risk management issues by the risk management committee and the sharing of these issues and their resolution with the JAFCO Board of Trustees at board meetings has been a positive improvement in our agency and is directly credited to the CARF accreditation process:

Risk Management

RIS-2

Risk Management Plan (continued)

1. Insurance: Our insurance coverage is reviewed by the Board annually in the month of May. The CEO of our Insurance Provider is in attendance at this meeting annually to speak with the board to assure them that coverage is adequate or to make any recommendations for change. Prior to the meeting, she prepares an insurance spreadsheet which she reviews personally with the President of our Foundation Board, who previously owned his own national high risk insurance company and is very knowledgeable about insurance. With our process in place in addition to these two experts our insurance coverage is adequately reviewed and monitored and we are lucky to have them. With the creation of two new corporations this year, the new Ability Center and also our Philadelphia Corporation, we have reviewed D & O, liability and builder's risk insurance limits to insurance adequacy of coverage and timeliness of coverage as well.
2. Fiscal Transparency: Fiscal transparency with our Board of Trustees is a key and essential element of the JAFCO leadership style. As the founding Executive Director, this has always been the relationship that has existed and there would never be a time that full transparency would not be the first choice since 80% of our budget is raised from private donations and it is the responsibility of the board to ensure that staff are successful in that endeavor. Each member of the board is informed and kept up to date about the agency's financial status and any fiscal threats or concerns through full disclosure of budget to actual statements at each board meeting (every other month). The treasurer receives monthly statements via email as soon as they are completed by the comptroller. Special meetings of the board can be called for fiscal or other emergencies but this has rarely occurred in the 21 year history of the agency as our financial status has remained stable with just under \$6m in reserve in our foundation account. Board members are welcome to drop in without notice at any time to review the financial records of the agency as well as bank records and investment reports. The finance and audit committee met several times in 2014 to review the financial status of the agency and to approve the audit. This committee reports to the board at each board meeting and makes recommendations that are discussed and then approved by the board.
3. Lawsuits: All legal issues including law suits and threats thereof are disclosed to the board at the board meetings or through special meeting of the board or the executive committee if needed. We currently have two pending suits/complaints filed in the first half of 2014:
 - a. One lawsuit is pending regarding a CRAT which was given to us by a donor. Some legal issues have arisen based upon some possible self-dealing on behalf of the donor. A board member who is an attorney is moving the case to mediation on our behalf with the hopes of a favorable outcome for JAFCO financially.
 - b. An age discrimination complaint has been made to the EEOC by an employee who was terminated. JAFCO is formulating their response at this time.
4. Utilization: Foster home recruitment is a priority for 2014.
5. Safety and Security: Safety issues, security breaches and health issues are addressed at each board meeting by the CQI Safety committee chair, a board member who reviews all incident reports on a regular basis to look for trends, patterns and areas of risk and to ensure that all safety policies including training and drills are being followed.
6. Facilities Management: Major damage, accidents and major facility maintenance and repair issues are reported at each board meeting by the Executive Director. There are no major issues pending for 2014.
7. Salaries of Highly Compensated Employees: The salary of the Executive Director and the top five compensated employees is brought to the attention of the board (in executive session) on an annual basis for their approval along with the annual budget which is reviewed prior to the meeting by the board finance committee. A 457 Deferred Compensation Plan is being developed for the top 3 key employees.
8. Technology: Training, a new donor database and an onsite IT help desk are priorities for the agency and have been included in the 2014 budget.
9. Media Relations: The JAFCO policy regarding media relations is reviewed annually by the board of trustees.

2014 Risk Management Improvement Plan

1. A foster care recruitment plan will be implemented to increase foster care capacity by at least 20% in 2014.
2. Utilization of group home will be increased by presentations by clinical staff to major referral agencies.
3. A dedicated IT help desk staff person will be recruited by our IT Company to improve development efforts and efficiency.
4. A new donor database will be purchased and implemented in 2014.
5. A clinical database will be researched for a funding request in 2015.

Risk Management

RIS-2

Risk Management Plan (continued)

Update June 30, 2014

1. Additional foster care recruitment will take place in the fall and winter of 2014.
2. A meeting with JFS in Miami was held to increase referrals.
3. An IT staff was hired in June
4. A new donor database was purchased and will be implemented by Sept. 2014
5. Clinical database funding will be requested in 2015 budget.

Human Resources

2014 Human Resource Planning Improvement Plan

1. Recruit a Human Resource Director with proper qualifications for the position.
2. Improve recruitment efforts to fill vacant positions more efficiently with a specific focus on the development and direct care teams.
3. Organizational Chart review and update to include new Ability Center and NE Office.
4. Create streamlined checklists for hiring process and file management.
5. Update job descriptions annually during performance reviews
6. Create salary ranges for each position.
7. Establish Highly Compensated Employee Retirement Plan.

Update June 30, 2014

1. A new certified HR director was hired in March of 2014.
2. Development team is fully staffed at this time. Direct care staff vacancies are still significantly high.
3. Organizational Chart has been updated
4. The HR director has updated all HR files and created checklists
5. Job descriptions are updated at each performance evaluation
6. Salary ranges have not yet been created
7. Highly compensated employee plan has been created and approved by the board. It is being processed now.

Signature:



Executive Director

08/05/2014

Date

Risk Management

RIS-3 Risk Management Assessment

Original Date: 4/8/08
 Revision Date: N/A
 Policy Number: RIS-3
 Department of Origin: Risk Management

JAFCO is fortunate to have had the donation of risk management and human resource consultation services from The Human Equation, Inc. a company that is operated by our insurance firm Setnor Byer Insurance and Risk. Ms. Anita Byer, the owner of the company is a member of our Safety/Risk Committee which meets quarterly and is available to assist us with any risk management needs that may have.

Financial

As the JAFCO budget increases each year, a trend has been noted that we are relying slightly more each year upon our reserves. To date our planned giving program has balanced out any depletion of reserved funds, with the receipt of an unexpected estate gift from a donor that had recently passed away. For 2008, JAFCO anticipates an approximate 7% shortfall in meeting our budgeted revenues from private and state funding over the next 18 months due to economic indicators and government budget cuts. It is not anticipated that these cuts will have significant impact upon services delivery over the next 18 months as we do have a reserve to cover a shortfall, however fiscal planning and oversight and increased fundraising efforts are critical in the event that these trends continue beyond that time period and that these unexpected planned gifts are not relied upon in their entirety to ensure that our reserves are not depleted.

Staffing and Person served Base

A review of critical incident reports, code of conduct violations, consumer grievances and complaints revealed no significant risks to the JAFCO Staff and Person served Base currently and none are anticipated in the next 18 months.

A minor change/increase in person served base may begin to occur at the end of the 18 month period or just slightly thereafter. JAFCO is building a facility for special needs children which is anticipated to be completed at the end of 2010 or early 2011. Publicity surrounding this facility will start to increase in mid-2009 which may result in increased referrals for special needs children. Once the construction is complete, an additional 20 staff members will need to be hired for the new program.

Inventory System

The JAFCO inventory system is adequate to both identify and protect each high value item from loss, theft or inappropriate use. Reports from the agency’s auditor and CPA (Arie Taykan) and the IT Subcontractor CSS verifies a system of accountability for high value items such as office equipment, computers and vehicles.

Physical Plant Security

Security cameras are located at strategic points throughout the facility (pool, main building entry door, emergency exit gate, pedestrian gate. Monitors for these cameras are in the offices of key employees (facilities manager, executive director, Director of Operations and Clinical Services, group home office, emergency shelter office and development office) who are responsible for opening the gate to visitors. However visual clarity of the images on these monitors is poor, especially at night.

Health and Safety Program

The JAFCO Health and Safety Program led by the Safety/Risk Committee has always addressed the health and safety of staff and persons served in an adequate manner. Prior to initiating CARF accreditation standards, Florida State licensing and contract guidelines were upheld as evidenced by successful annual monitoring reports and surprise visits by Health Dept. and State officials. The following areas were found to need attention:

- Re-organization of the safety binder and self-inspection check list
- Improved Documentation of self-inspections and corrective action
- Improved Documentation of Safety Practice Procedure Trainings and Drills
- Revision of safety and security manual

Risk Management

RIS-3

Risk Management Assessment (continued)

Billing and Coding Oversight

Bill and coding procedure has proven to be adequate to improve quality and accuracy of billing and to self-identify errors.

Corporate Compliance

The JAFCO corporate compliance program has been in effect for six months, no concerns are noted.

Business Competition

No areas of concern were found

Insurance Coverage Review

A formal review of the agency's insurance coverage by the Executive Director, Foundation President and former high risk insurance agency owner as completed in May, 2008. Several deficiencies were noted in the attached report (exhibit IX)

Significant Challenges in next 18 Months

Over the next 18 months JAFCO has identified the following 3 challenges:

1. Capital Campaign interfering in operational fundraising: As we moved forward with the construction of the JAFCO Residential and Respite Center for Children with Developmental Disabilities it will be critical for JAFCO to monitor that our existing donors are not diverting their operational gifts to capital naming opportunities, thereby decreasing funding of existing programs
2. Economy- uncertain economic create lower levels of charitable giving, especially in the major gifts category.
3. State Funding-State funding cuts continue to increase annually with some cuts coming through mid-year as well, making budgeting difficult and more frequent budget reviews necessary.

Signature:



Executive Director

04/04/08

Date

Risk Management

RIS-4

Clinical Records

Original Date: 4/8/08
Revision Date: N/A
Policy Number: RIS-4
Department of Origin: Risk Management

Policy:

JAFCO shall release information regarding a person served in response to a subpoena only when proper, written authorization or a Court Order is provided.

Purpose:

To ensure that the privacy of the person served information is protected according to statutory requirements.

Definitions:

- **Subpoena:** Legal summons issued by either an attorney or administrative agency that requests the attendance of an individual at the deposition, hearing or trial to give testimony under oath; and/or to produce documents. It may not require the presence of the individual to produce the document.
- **Court ordered:** Mandatory legal summons issued by a judge for a court appearance and/or produce documents. It may not always require the presence of an individual to produce the document.

General Considerations:

1. A Subpoena may be issued by an attorney or through an administrative agency. A judge issues a Court Order. There are two types of subpoena.
 - a. Subpoena requesting attendance of a witness at a deposition, hearing or trial. This requires the person being served to appear and give testimony, under oath, in presence of the parties, their attorneys, and in the case of trial or evidentiary hearing in court.
 - b. Subpoena duces tecum (with document) requires the presence of a person as well as documents and should state specifically what documents must be produced. However, in some circumstances a subpoena duces tecum will only require the production of documents, without the need for an individual's appearance to testify. This type of subpoena is usually directed to the Director of Operations and Clinical Services for review and the documents may be mailed to the requesting entity.
2. Only the Director of Operations and Clinical Services or designee may process subpoenas. (Refer to the policy for release of information)
3. A copy of any subpoena received at JAFCO shall be sent to the Executive Director for review. When needed, the Executive Director will review with an attorney.

Procedure:

1. When a subpoena has been served, the receptionist shall immediately hand it to the Director of Operations and Clinical Services or designee, who will log the date and time of delivery in the subpoena log.
2. Director of Operations and Clinical Services or designee will locate the clinical record of the person served indicted in the subpoena.
4. Director of Operations and Clinical Services or designee will ensure that all relevant documentation has been filed and discuss the case with the assigned clinician.
5. In the event that the clinical record is requested, in relevant information shall be copied.

SUBPEONA DUCES TECUM (mailing of information only)

Responsibility: Director of Operations and Clinical Services or designated staff

- If the subpoena is not accompanied by current, written authorization from the person served or guardian, contact the attorney issuing the subpoena. Inform the attorney that JAFCO requires current, written authorization or a court order issued by a judge prior to the release of the person served information.
- Once the person served authorization or court order for production is received, count the number of pages in the person served clinical file. Provide the attorney with the charges for copies of the clinical file.

Risk Management

RIS-4

Clinical Records (continued)

- Once payment for copies is received, copy the information requested in the subpoena. Stamp each page of the copies with the confidential stamp.
- Document all contacts with the attorney or his/her office as they occur, including the date and name of the individual with whom contact was made.
- File the subpoena in the clinical record.
- Type cover letter to attorney and enclose a copy of the subpoena along with the copy of the clinical file.
- If it is determined that the individual named in the subpoena has never been a person served of JAFCO, send a letter stating so and file a copy in the subpoena log.

SUBPEONA DUCES TECUM (with appearance)

Responsibility: Director of Operations and Clinical Services or designate staff

- A subpoena may be served ordering a clinician to appear in court, or participate in a deposition, with the clinical records.
- Contact the attorney serving the subpoena to verify that the appearance date is correct. Once the date for court appearance or deposition has been confirmed, prepare copies of the clinical record as stated above for production at this appearance.

Signature:



Executive Director

04/04/08

Date

Risk Management

RIS-5

Search Warrant

Original Date: 08/30/11
Revision Date: N/A
Policy Number: RIS-5
Department of Origin: Risk Management

Policy:

JAFCO shall release information regarding a person served in response to a search warrant only when proper, written authorization or a Court Order is provided.

Purpose:

To ensure that the privacy of the person served information is protected according to statutory requirements.

Definition:

A Search Warrant is a written court order entitling law enforcement to search a defined area and seize property which constitutes evidence of commission of the alleged crime described in the warrant. A Search Warrant is available only in criminal actions.

Procedure:

1. All law enforcement personnel, state and federal agents should be escorted to the office of the Executive Director and in her absence the Director of Operations and Clinical Services. Immediately contact the Office of Attorney Stuart Rader phone 561 368-0545.
2. Identify the agent in charge of executing the warrant. Ask for a business card or record the name, title, agency, and telephone number of the agent. Ask for a copy of the warrant and any affidavit submitted to the court to obtain the warrant. Have the agent identify the prosecutor by name and phone number, if that person is not indicated on the document. (The agent is acting at the direction of the prosecutor.)
3. Inform the agent in charge that Counsel has been contacted and is on the way. Request agent in charge not to proceed until counsel arrives.
4. If agent will not wait for counsel to arrive, take the following steps to monitor the search:
 - a. Carefully read the warrant.
 - b. Make sure the warrant is signed by a judge or magistrate. If there is any discrepancy, notify the agent in charge.
 - c. Determine the scope of the warrant, the area to be searched and type of evidence to be seized. A Search Warrant permits the designated agent to search and seize property. If there is any discrepancy between the scope of the search document and the search actually conducted by the agent, notify the agent in charge. Attempt to assist the agent in retrieving those documents that are the subject of the search.
 - d. Identify those essential employees that are knowledgeable and can assist in retrieving the documents, computer information, etc. Notify the agent in charge that key employees are here to ease the search with minimal disruption of business and that other employees are permitted to leave.
 - e. Advise employees that persons executing the warrant may ask them questions. Advise employees it is their choice whether or not they want to speak with an agent, they are not required to do so.
 - f. Monitor the search, but do not impede or obstruct.
 - g. Photocopy each item seized. If the agent in charge refuses to permit you to photocopy, record in detail all items seized.
 - h. Agents sometimes number the rooms that they enter. Record the numbering scheme.
 - i. Request backup copies of all documents and computer disks, etc. before agents seize computers.

Risk Management

RIS-5

Search Warrant (continued)

- j. If agents attempt to seize privileged (e.g. attorney/client privileged communications) documents or other documents that you believe are outside the scope of the warrant, notify the agent in charge. Ask that the privileged material be segregated from the other materials and marked as "privileged".
- k. The agent in charge will prepare an inventory of the items seized. Ask for a copy of that inventory before the agent leaves, but do not sign anything verifying the content or accuracy.
- l. Ask employees not discuss the Search Warrant or any related events with the press or other employees.

Signature:



Executive Director

08/30/11

Date

JAFCO Policy and Procedure Manual
Corporate Compliance

Revision Signature Page

COR-1 Corporate Compliance Policy & Procedures
COR-2 Anonymous Online Reporting
COR-3 Fraud, Waste and Abuse Policy

The above mentioned policies and plans have been reviewed and or revised by the executive director

Signature:

Executive Director

Date

Corporate Compliance

COR-1

Corporate Compliance Policy & Procedures

Original Date: 4/8/08
 Revision Date: N/A
 Policy Number: COR-1
 Department of Origin: Corporate Compliance

Policy:

It is the policy of JAFCO to provide services that fully comply with all federal, state, and local regulations and applicable laws, and to adhere to explicit ethical standards throughout all facets of the organization's operations. JAFCO shall ensure these conditions of operation are met through an organized and ongoing comprehensive corporate compliance program.

1. JAFCO's Corporate Compliance Program seeks to meet the following overall goals:
 - a. Maintain and enhance the quality of services.
 - b. Demonstrate a sincere effort to comply with all applicable laws.
 - c. Revise and develop new policies and procedures to enhance compliance.
 - d. Enhance communications with governmental entities to ensure compliance.
 - e. Empower all involved parties to prevent, detect, respond to, report, and resolve conduct that does not conform to applicable laws and regulations, and the organization's ethical standards/code of conduct.
 - f. Establish mechanisms for staff members to ensure that questions and concerns about compliance issues are appropriately addressed.

Procedures:1. **Organizational Responsibilities:**

- a. Corporate Compliance Officer: shall serve as the Corporate Compliance Officer (CCO) and provide leadership and oversight of the Corporate Compliance Program. The CCO's duties shall include, but not be limited to:
 - Serve as the organization's internal and external point of contact for overall corporate compliance issues.
 - Develop, implement, and monitor the organization's Corporate Compliance Plan, including internal and external monitoring, auditing, investigative and reporting processes, procedures, and systems.
 - Provide regular communication to the Executive Director concerning all areas of the Corporate Compliance Program.
 - Provide specific guidance and ongoing education to staff members who are expected to know and comply with specific laws and guidelines in their regular job duties.
 - Ensure that mechanisms for preventing, detecting, reporting, and resolving compliance issues are operating in a functional manner.
 - Ensure that the organization's reporting mechanisms enhance and encourage active participation of all staff members, and provide confidentiality in the reporting process.
 - Ensure that all suspected violators and/or violations are handled according to documented policy and resolved in a manner that ensures the integrity of the organization's compliance with applicable guidelines and laws.
 - Submit an annual report to the Quality Improvement Committee that includes a summary of all allegations, investigations, and/or complaints processed in the preceding 12 months, a complete description of all corrective actions taken, and any recommendations for changes to the organization's policies and/or procedures.
 - In performance of his/her duties, the CCO shall have direct and unimpeded access to the organization's legal counsel and/or accounting firm, for matters pertaining to corporate compliance.
- b. Compliance Officer's Job Duties: The duties of the CCO, or designee, will include, but not be limited to:
 - Ongoing identification and assessment of compliance systems and issues.
 - Plan and provide guidelines for development of service specific compliance procedures through the development, revision, and ongoing monitoring of the organizational Corporate Compliance policies and process.
 - Plan and provide support for educational training and programming.
 - Disseminate compliance information.
 - Provide controls to prevent and reduce errors, and to identify wrongdoing.
 - Receive, evaluate, and respond to reports of potential violations.

Corporate Compliance

COR-1

Corporate Compliance Policy & Procedures (continued)

- Work with administrative and clinical leadership to implement remedial actions, and take appropriate corrective and disciplinary actions.
 - c. The Executive Director shall have the ultimate authority and responsibility for corporate compliance.
- 2. Employee Training:**
- a. The Corporate Compliance Program will be fully integrated into the organization's education and training systems through the following processes:
 - All new employees will review the Corporate Compliance Program Policy and the organization's Code of Conduct as part of the new employee orientation process.
 - All staff members will review the organization's Code of Conduct as part of their annual performance review evaluations.
 - Regional directors and program coordinators will inform staff members of specific ongoing compliance issues that pertain to their job duties at regularly scheduled staff meetings.
 - All staff members will participate in ongoing compliance in-service presentations and competency-based trainings.
 - Regular publication of reporting mechanisms will occur throughout the organizations communication systems. These will include, but not be limited to, email notification, internal memos, and postings on bulletin boards in staff and public areas.
 - Employee exit interviews will include compliance-related questions.
- 3. Monitoring and Auditing:**
- a. JAFCO will utilize the CCO to ensure that it conducts business in an ethical manner and ensure that any questionable business practices are thoroughly investigated through the organization's written investigation procedures.
 - b. All programs shall implement internal controls, including monitoring activities to ensure compliance with the organization's program.
 - c. Internal self-audits will include, but not be limited to, fiscal services, marketing, contractual services, health and safety practices, use of agency resources, confidentiality, dual relationships, and medical necessity.
 - d. Ongoing monitoring and auditing activities will be reported to the Executive Director for review and appropriate actions, if necessary.
- 4. Reporting System:**
- a. JAFCO shall provide mechanisms to assist staff members and/or agents in reporting suspected violations of possible criminal conduct or violation of the organizational code of ethics by persons within the organization, without fear of retribution.
 - b. Specific processes of reporting suspected violations include the following:
 - Web/Server Based: All employees can access the JAFCO employee's web site to report suspected violations. A link will be available on the web site that will allow the reporting party to provide anonymous information which will be forwarded to the corporate compliance officer.
 - All employee shall be given a number in order to make anonymous calls
- 5. Investigation Procedures:**
- a. The CCO shall initiate and conduct investigations of all reported alleged incidents.
 - b. Upon receiving information of an alleged incident or violation, the CCO will inform the Executive Director allegation.
 - c. If a member of the Quality Improvement Committee is directly connected to the alleged incident that is being investigated, he/she will be excused from the team/investigation until the final outcome and corrective action plan has been completed.
 - d. All information concerning the alleged incident will be held in strict confidentiality by all parties involved in the process, and will not be shared with any other staff member.
 - e. The CCO will conduct an initial investigation through an interview process with staff members who are assigned to duties and areas related to the alleged violation.
 - f. The CCO will determine from the initial investigation whether the situation would benefit from the involvement of the organization's legal counsel in the investigation process, and recommend such action to the Executive Director, should it be appropriate.

Corporate Compliance

COR-1

Corporate Compliance Policy & Procedures (continued)

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- g. The employee is notified that there is a complaint and, if warranted by the initial information and involves a direct service situation, may be instructed to not continue direct services with a person served until the issue is resolved. The supervisor assisting with the investigation will take primary responsibility for helping the person served with access to a clinician that can provide services during the investigation should a change in clinicians be warranted.
 - h. If the suspected violation of the Code of Conduct involves the executive management of the organization, the organization will enlist assistance from their legal counsel to serve as the final approval of outcome and recommendations.
 - i. The investigation may involve interviews with witnesses and person served, as well as reviewing other relevant information. At all times the person served rights will be respected.
 - j. If at any time during the investigation it is determined that the person served rights have been violated, the appropriate advocacy representative or entity will be immediately contacted to begin their own investigation process according to applicable laws and guidelines.
 - k. If involved, the organization's legal counsel will help ensure the confidentiality and attorney-person served privilege of any information which may be compiled, help management focus on critical issues which should be investigated, and help design a strategy for effectively using the findings of the investigation.
 - l. Following an investigation, the CCO will file a report to the Executive Director that will include a summary of all allegations, results of the investigation, and recommendations for corrective actions.
 - m. The CCO, the Executive Director, and the supervisor of the staff member(s) involved in the incident will review the recommendations and develop a corrective plan of action.
 - n. Should the investigation indicate a serious violation of policy, the organization's legal counsel will advise the Executive Director with regard to the need to self-report the violation to the appropriate government regulatory agency, and will assist in the process should it be necessary.
 - o. A written report will be compiled and submitted within fourteen (14) days from the notification of the complaint. The report will detail the following:
 - The nature of the complaint, including time, date, persons involved, services involved.
 - The person whom the complaint is lodged against.
 - Results of persons interviewed and investigation of circumstances surrounding the incident.
 - A recommendation based on the gathered information.
 - p. The Corporate Compliance Officer will make one of three possible findings in the recommendation to The Executive Director:
 - Founded: The suspected violation of the Code of Conduct was found to have occurred.
 - Unfounded: The suspected violation of the Code of Conduct was found not to have occurred.
 - Undetermined: It cannot be determined whether or not a violation of the Code of Conduct has occurred.
 - q. Once approved by the Executive Director, the supervisor will inform the employee, who is the subject of the investigation, of the outcome of the investigation.
 - r. If the finding was unfounded, the paperwork of the complaint and the investigation will be destroyed.
 - s. If the finding was undetermined, the supervisor will adjust the supervision of the employee to a level necessary to ensure that the suspected behavior is not occurring. The employee will be informed of the details and will be actively involved with the supervisor in this process.
 - t. If it is determined that the suspected violation is a consumer right's violation, then the investigation, notification, and appeal procedure will follow the consumers right's policy and procedures.
 - u. When an investigation of ethical complaints are found to have merit, the incident will be reported to the executive management as a critical incident, and will be reviewed within the appropriate format to assist in quality improvement, risk management, and corrective measures.
 - v. The CCO will monitor and evaluate the corrective plan interventions through consistent communication and contact with the supervisor in charge, and will reevaluate the actions/corrections on a monthly basis.
 - w. The CCO will provide updates of the situation to the Executive Director until the situation has been resolved.
 - x. The incident, investigation, and outcome will be included in the annual corporate compliance report to the CQI Council.
 - y. The Executive Director will utilize all information consistent with an incident, investigation, and outcome to recommend revision and development of policy, procedures, and guidelines in the area of corporate compliance.

Corporate Compliance

COR-1

Corporate Compliance Policy & Procedures (continued)

6. Enforcement and Discipline:

a. Remedial Actions:

- Remedial actions are not disciplinary and are done to correct mistakes, and enhance compliance with the Corporate Compliance Program and State and Federal regulations. In most cases, remedial actions are designed to improve performance of individual staff members. Upon investigating what appears to be behavior requiring remedial actions, the CCO will clarify policies, and will review, and revise if necessary, administrative procedures to prevent future errors.
- If remedial action is deemed necessary, the affected staff member will be notified, prior to the initiation of the action, and informed of the concerns regarding his/her performance.
- Examples of behaviors that could require remedial action might include but not limited to, failure of an individual to understand and carry out organizational-wide required procedures and policies, inappropriate or improper implementation of the organization's specific corporate compliance policies and procedures, ambiguous communications regarding job performance expectations, or negligent behavior.
- Examples of remedial actions may include, but not be limited to staff members required to take part in an education program focused on the problem area, future money management handled in a specifically designated manner, a staff member reassigned, or a change in duty until remediation has successfully corrected the error.

b. Corrective or Disciplinary Actions:

- In cases of repeated violations of intentional misconduct, or after documented remedial actions have failed to correct the problem, the organization will initiate corrective or disciplinary actions where necessary to address wrongdoing or malfeasance. The initiation of corrective or disciplinary action by the organization does not preclude or replace any criminal proceedings that may be taken by legal authorities.
- Should the organization initiate corrective or disciplinary action, it will do so in accordance with existing and applicable personnel policies.

7. Prevention:

- a. Education and training will serve as the core of JAFCO prevention efforts to ensure minimal violations of law, ethics, and code of conduct. Prevention efforts will include, but not be limited to:
- New employee orientation training.
 - Training related to the staff members' specific position.
 - Documentation of competency in required areas through performance appraisals and/or competency based exams.
 - Routine, targeted, and random audits of systems and medical charts.

Signature:



Executive Director

04/04/08

Date

Corporate Compliance

COR-2

Anonymous Online Reporting

Original Date: 4/8/08
Revision Date: N/A
Policy Number: COR-2
Department of Origin: Corporate Compliance

Procedure

1. Go to the website www.accreditationnow.com
2. Choose "Reporting" at the top of the main page.
3. Under "Available Report Selection" choose "Corporate Compliance Reporting Form."
4. You will be asked for a Login Name and Password.
5. The anonymous login name for JAFCO employees is: 10060267
6. The anonymous password for JAFCO employees is: jafco
7. You will see the reporting form with six questions to be answered regarding the incident you are reporting.
8. After completing the form, you may enter your own password at the end so that you can check the status of your report at a later time. Remember this password; you will need it to access the status of your report.
9. When your form is completed, choose the "submit" button at the bottom of the screen. You will be given a report number. Remember this report number; you will need it to access the status of your report.
10. If you would like to view the status of your report, you can go into "Reports" at the top of the main page. Then choose "Corporate Compliance Report Status". Enter JAFCO's anonymous login name (10060267), the report number and your password.

Signature:



Executive Director

04/04/08

Date

Corporate Compliance

COR-3 Fraud, Waste and Abuse Policy

Original Date: 4/8/08
 Revision Date: N/A
 Policy Number: COR-3
 Department of Origin: Corporate Compliance

Policy:

JAFCO'S Fraud, Waste and Abuse Policy and Procedures are established to facilitate the development of internal controls that will provide for the detection, prevention, and reporting of fraud, waste and abuse directed against the agency. It is the intent of this policy to promote awareness of the potential for fraud, waste and abuse throughout the agency and to provide guidelines and assign responsibility for the development of adequate internal controls and systems.

It is the policy of JAFCO to ensure compliance with the principles of right and wrong which govern the conduct of agency's' employees, consultants, contractors, and all other outside agencies/parties doing business with Broward County. This policy is intended to communicate that JAFCO's desire to eliminate unethical practices while creating an environment in which employees and/or persons served are encouraged and comfortable in the reporting of fraud, waste or abuse.

The law in Florida protects employees from retaliatory or adverse personnel action for disclosing certain information including, but not limited to, violations of laws which create and present a substantial and specific danger to the public's health, safety, or welfare and suspected acts of gross mismanagement of gross waste of public funds. These protections are detailed in Sections 12.3187-112.31895 of the Florida Statutes.

Purpose:

This directive provides instruction and guidance for implementing the Fraud Waste and Abuse Policy adopted by JAFCO.

Scope:

This directive is applicable to all JAFCO employees.

Definitions:

- **Fraud.** The term fraud refers to but is not limited to, any dishonest or fraudulent act to include forgery or alteration of any document; misappropriation of funds, supplies, etc., improper handling or reporting of money or financial transactions; profiting by self or others as a result of inside knowledge; destruction or intentional disappearance of records, furniture, fixtures or equipment; accepting or seeking anything of material value from vendors or persons providing services or materials to the County for personal benefit; and/or any similar or related irregularity.
- **Waste** refers to the unnecessary incurring of costs as a result of inefficient practices, systems or controls.
- **Abuse** refers to violations and circumventions of department or agency regulations which impair the effective and efficient execution of operations.

Investigative Audit Responsibilities:

JAFCO'S Internal Corporate Compliance Program has the primary responsibility for investigative audits of all suspected inappropriate activity as defined in this policy. If the investigative audit substantiates that a fraudulent act has occurred, Internal Audit will notify the executive director as applicable. If the substantiated fraudulent act has criminal implications Internal Audit will consult with law enforcement agencies as necessary to assist in the preparation and presentation of criminal findings in a court of law.

Internal Audit, through the Corporate Compliance program is hereby authorized to make investigative audits into the agency's affairs and for that purpose may administer oaths and compel the production of books, papers and other evidence material to said inquiry.

Confidentiality:

Internal Audit treats all information received confidentially to the extent allowed by law. Any employee or other interested party who has observed or suspects dishonest or fraudulent activity should notify the Fraud Hotline immediately. Persons observing or suspecting dishonest or fraudulent activity should not attempt to personally conduct an investigation related to such activity.

Corporate Compliance

COR-3

Fraud, Waste and Abuse Policy (continued)

Procedures:

1. A current or former JAFCO employee who suspects fraud, waste or abuse, and does not desire anonymity, should:
 - Report the suspected fraud to the Fraud Hotline
 - If requested, furnish a detailed written statement, under oath, outlining the suspected fraud.
 - Cooperate with the investigate audit process through the furnishing of written statements, interviews, etc.
2. A current or former JAFCO employee who suspects fraud, waste, or abuse, and wishes to remain anonymous, should:
 - Contact the Fraud Hotline and provide as much detailed information as possible regarding the suspected fraudulent conduct.
 - The caller, through anonymous, must be willing to share specific information regarding the suspected fraudulent conduct.
3. A member of the public suspecting fraud, waste, or abuse, is encouraged to contact the Fraud Hotline with specific and detailed information regarding the suspected fraudulent conduct.
4. A supervisor or higher authority receiving a fraud allegation should:
 - Compile all information relayed by the reporting individual.
 - Contact Internal Audit with all compiled information.
 - Cooperate with the investigative audit process.
5. Internal Audit will:
 - Maintain a Fraud, Waste and Abuse Hotline, and attempt to secure as much information as possible from the reporting individual.
 - Contact appropriate law enforcement, as appropriate in the circumstances and provide fraud, waste and abuse information for consideration as to their involvement in the case.
 - Evaluate reported conduct pertaining to any and all departments of the agency and such other activities/entities engaged in the expenditure of agency funds.
 - Report any significant findings to the Executive Director as applicable, in a final report.
 - Work with law enforcement authorities as determined necessary during the course of the investigative audit, and refer applicable findings to appropriate authorities upon completion.
 - In those instances where internal Audit believes it to be in the best interests of the investigative audit, Internal Audit has the authority and duty, after consulting with the Executive Director.
 - a. Take Control/limit employee access, and/or gain full access to all premises utilized by JAFCO whether owned or rented, and
 - b. Examine, copy, and/or remove all or any portion of the contents of any document.

Management Responsibilities:

1. Great care must be taken in the investigative audit of suspected improprieties or irregularities so as to avoid mistaken accusations or alerting suspected individuals that an investigative audit is underway.
 - All inquiries from suspected individuals and their attorneys or representatives should be directed to Internal Audit. Proper response to such an inquiry is: "I am not at liberty to discuss this matter."
 - Under no circumstances should any reference be made to "what you did," "the crime," "the fraud," "the forgery," "the misappropriation," or any other specific reference.
 - No promises should be made.
2. Management/employees should not contact the suspected individual in an effort to determine facts or demand restitution.
3. Management/employees are encouraged not to discuss the case, facts, suspicions or allegations with anyone outside the organization or those within the organization that do not have a legitimate need to know unless specifically asked to do so by Internal Audit or law enforcement.
4. Management/employees are to cooperate with the investigative audit process through answering questions, furnishing of written statements, volunteering information important to the investigative audit, etc.
5. All JAFCO employees are required to comply with this policy.

Corporate Compliance

COR-3

Fraud, Waste and Abuse Policy (continued)

Limitation:

Nothing in this directive or policy shall be construed to interfere with, limit, restrict, or otherwise impair JAFCO'S ability to manage, train, assign, or discipline their employees.

Signature:



Executive Director

04/04/08

Date

Health & Safety

Revision Signature Page

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SF-14	Infection Control
SF-15	Community Based Service Provider Safety Plan
SF-16	Safety Regulations for all Hazardous Equipment

The above mentioned policies and plans have been reviewed and or revised by the executive director

Signature:

Executive Director

Date

Health & Safety

SF-1

Emergency Information Dissemination

Original Date: 4/8/08

Revision Date: N/A

Policy Number: SF-1

Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to ensure that persons served, staff members, and visitors are aware of information to assist them in responding to emergency preparedness and situations that may occur on the premises of the organization's administrative and service delivery facilities.

Procedures:

1. The Safety Officer is responsible for the oversight of emergency information dissemination, planning, and evaluation of the effectiveness of the information.
2. The safety manager or designee shall receive bi-annual emergency disaster training at Health and Safety Committee meetings to ensure the agency has representation that is fully informed and up to date on all emergency policies and procedures.
3. Emergency information plans, and practices will be clearly communicated within the organization's employee orientation process and will contain the following components:
 - a. A comprehensive review of the Emergency Drill and Disaster Policy and Procedure, with evidence of the staff member understands of their role and responsibilities in the procedures.
 - b. A comprehensive review of all related health and safety policies and procedures.
 - c. Program Participant Emergency Plan Education:
 - All persons served in the residential programs will be orientated and informed of JAFCO emergency plans upon entry into the program as part of their orientation.
 - All persons served will participate in emergency drills at the facility locations and will be oriented to facility safety at each location in which they are involved in services.
 - d. Posting of Emergency Plans:
 - The location of exits, first aid kits, and fire extinguishers shall be clearly posted at all locations.
 - Emergency exit plans will be adequate in number and specific to the location of the posting.
 - Emergency exit plans will include both diagrams and written instructions.
 - Emergency exit plans will indicate the safest and quickest way out of the facility and to the "Severe Weather Safe Place."
 - Emergency exit plans will indicate the location of the fire extinguishers and the first aid kit.
 - All of the above requirements will be checked for compliance during the monthly self-inspection of the site.

Signature:



04/04/08

Executive Director

Date

Health & Safety

SF-2 External Inspection

Original Date: 4/8/08
 Revision Date: N/A
 Policy Number: SF-2
 Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to obtain outside expertise for assistance in assessing the overall safety of our facilities to ensure that our services are conducted in an environment that is safe for person served, employees, and visitors.

Procedures:

1. The facility Safety Officer is responsible for ensuring that external safety inspections occur at all locations annually by directing the following processes:
 - Scheduling all external safety inspections in accordance with the month noted on the safety grid/schedule.
 - The Safety Officer for each facility will be responsible for facilitating the actual external inspection, obtaining a copy of the inspection report along with the criteria used for the inspection (if not included on the inspection report), clarifying with the inspector all recommendations for improvement made on the report, placing a copy in the facility safety binder, making a copy of the report for presentation at the appropriate management team meeting, and reporting the results at the management team meeting.
 - The designated site Safety Officer will work in coordination with the Management Team to ensure that all recommendations that result from the external safety inspection reports are followed-up and corrections of deficiencies are completed.
 - All inspection reports and correction activities will be reviewed by the Management Team and noted in meeting documentation. The Safety Officers will report to the management team the results of the inspections, follow-up activities, and issues that will need to be addressed through the management team process or by the facility ownership to ensure the organization is utilizing the information to increase the level of safety throughout its operations.
 - The Safety Officer will maintain a record of the inspection report, including recommendations and corrections made, and management team minutes that correspond with the specific inspection and resulting activities. This record will be maintained in the safety book/binder at each facility location.
2. External inspections will be conducted by entities that have a broad and experienced approach to safety issues. The local fire safety inspector and/or a safety inspection expert from the organization's insurance carrier will be sought for such inspections.
3. Local regulatory guidelines may require specific external safety inspections on a yearly basis by the fire department. If the required inspection does not provide a comprehensive review of safety issues within each facility's physical environment, an additional inspection by an entity other than the fire department will occur.

Signature:



04/04/08

Executive Director

Date

Health & Safety

SF-3

Weapons, Illegal Drugs, Alcohol and Prescription Medication

Original Date: 04/08/08

Revision Date: N/A

Policy Number: SF-3

Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to ensure the safety of persons served, staff members, and visitors through the prohibition of weapons and illegal drugs within any of the organization's facilities.

1. Employees that need prescription medications and/or over the counter medications must keep the medications under lock and at no time share them with other employees, persons served and visitors.
2. Weapons permitted on the premises are only of law enforcement acting in an official capacity.
3. Persons served receiving services any program at JAFCO who bring medication(s) prescribed or over the counter must immediately give the medication to JAFCO assigned staff who will ensure safe keeping. The medication will be logged and kept in accordance with agency policy on storage of medication. All medications will be stored behind two separate locks at all times.
4. Under no circumstances are illegal drugs or alcohol permitted on the JAFCO campus.
 - Staff violating this policy shall be immediately terminated.
 - Persons served in violation of this policy will face severe consequences. Each case is handled individually as deemed by the Director of Operations and Clinical Services and in accordance with the law.

Procedures:

1. Program supervisors shall be responsible for oversight to ensure that the weapons, illegal drug (s) and prescription and /or over the counter medications policy is strictly adhered to and that any violations be addressed appropriately and reported through the Critical Incident process.
2. For the purposes of this policy, a weapon is defined as any object capable of inflicting bodily harm and/or which is used or worn in a threatening manner if deemed so by staff.
3. Should staff members detect a person served or visitor in possession of a weapon or illegal drug (s) on the property, they will advise the person of the weapons/drugs policy prohibiting possession of such items and instruct them of the need to remove the weapon/drug from the property.
4. Failure of anyone to comply with the request for removal of a weapon and or drug(s) from the agency shall result in the removal of the individual from facility property. Assistance with the removal of the individual will follow JAFCO's policy and procedures on workplace threats and violence.
5. Staff members who do not comply with this policy may receive disciplinary action consistent with Human Resource policy and procedure, including termination of employment.
6. Signs will be posted on campus indicating that no weapons are allowed in the building, with the exception of law enforcement personnel.

Signature:



Executive Director

04/04/08

Date

Health & Safety

SF-4

Power Failures

Original Date: 4/8/08
Revision Date: N/A
Policy Number: SF-4
Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to protect persons served, staff members, visitors, and property in the event of a power failure. All potential emergencies cannot be anticipated; therefore, emergency plans shall provide for adaptability to multiple situations.

Procedures:

1. The Safety Officer is responsible for oversight of emergency disaster plans and drills and ensuring that all of the organization's facilities are well prepared to respond effectively to any emergency.
2. Specific procedures will be maintained for power failures. In addition, power failure drills will be conducted at all group homes on an annual basis. They are not necessary in the main administrative building due to the presence of a full capacity stand-alone generator which will turn on and power the entire building within 30 seconds of a power failure.
3. The following are the overall components of JAFCO's power failure plans. These serve as basic approaches to responding to power failures; however, individual service sites may have additional components due to the nature of the physical layout of the facility, types of programs and service, and local regulatory requirements. It is the responsibility of the Executive Director to ensure that the special needs and characteristics of each facility are addressed in additional policy and procedure if required, and that these special needs and characteristics are communicated to all affected persons and the health and safety committee. The overall components of the JAFCO's power failure emergency plan is as follows:
 - a. A power failure is defined as a full or partial power outage that affects the ability of the agency to provide a normal range of services and operations and may compromise the safety of occupants of the agency.
 - b. In the event of a power failure, remain calm. If in an interior office without natural light or emergency lighting, utilize the personal flashlight provided for safe egress to evacuate to a hallway area. Assist persons served to the lighted area, if necessary. If emergency lighting is not available, in hallway areas, continue to utilize your personal flashlight.
 - c. If using a computer, turn it off to prevent damage due to power surges, prior to leaving your work area.
 - d. The facility manager shall check circuit breakers and the main breaker panel and, if the power outage is not attributed to the internal system, will turn off all breaker switches and call the local utility company to report the outage.
 - e. If it is deemed necessary by the Executive Director or Safety Officer evacuate the building by following evacuation procedures.
 - f. If evacuation occurs, lock the entrances to the agency to prevent re-entry.
 - g. The Executive Director or designee will determine whether the site will be shut down and, in consultation with utility company employees and/or other staff, will determine when the building is ready for occupancy.

Health & Safety

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Power Failures (continued)

- h. Prior to re-entry, the agency's Executive Director, Safety Officer, Maintenance Manager and Communications Manager in consultation with the utility company, will ensure that the agency is in ready for occupancy by completing the following tasks.
- Ensure generator is off
 - Switch all breakers back to position
 - Turn on each a/c unit and check for power code
 - Turn on each computer to check function
 - Turn on all security monitors and check cameras are working Check elevator functioning and call for maintenance check
 - Once all of the above have been completed the executive director or designee shall schedule a debriefing within 48 working hours via e-mail a report shall be sent to all staff.

Signature:



Executive Director

04/04/08

Date

Health & Safety

SF-5

Safety Drills & Procedures

Original Date: 4/8/08
 Revision Date: N/A
 Policy Number: SF-5
 Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to protect persons served, staff members, employees, visitors, and property in the event of an emergency or disaster through an active and organized system of practicing and analyzing the organization's safety drills and procedures.

Procedures:

1. The Safety Officer(s) is/are responsible for oversight of emergency disaster plans and drills and ensuring that all of the organization's facilities are well prepared to respond effectively to any emergency.
2. JAFCO will maintain policies and procedures that outline specific guidelines for addressing emergency situations that may affect the health and safety of persons served, staff members, and visitors. Emergency drills will be conducted, at a minimum, on an annual basis for each of the designated areas of potential emergency:
 - Severe Weather and Natural Disasters.
 - Fire and Facility Evacuation.
 - Workplace Threats and Violence -Lockdown
 - Power Failure.
 - Medical Emergency.
 - Bomb Threats and Campus Evacuation
 - Other Emergency Situations (biohazard emergency, terrorism)
3. The Safety Officer(s) will be responsible for the following emergency preparedness activities at their respective facilities:
 - Conducting all required emergency drills at their respective site locations.
 - Conducting drills in a manner and with the necessary precautions to not unduly disturb persons served or the ongoing provision of services.
 - Completing the Emergency Drill Reporting Forms.
 - Educating and informing staff members following drills as to response patterns and improvements in responses.
 - Reporting the results of emergency drills and providing a copy of each report to the appropriate team, committee, or designated authority.
 - Utilizing team, committee, or the designated authorities' recommendations and directives, based on the drill outcome and reports, to improve safety at the clinics.
 - Maintaining a record of all drills at each site in the safety book/binder.
4. Actual emergencies at any organizational site will be reported as per the Critical Incident Policy and will follow procedures included in that policy in addressing safety and quality improvement activities following an actual event. Actual emergencies will not serve or be substituted for the required emergency preparedness drills.
5. The Safety officer will be responsible for the development and revision of emergency preparedness policies, procedures, and plans based on results of ongoing drills, actual events, and recommendations contained in drill and critical incident reports.
6. All staff members are responsible for maintaining a working knowledge of emergency procedures through education, training, and simulated emergencies/drills. Competency-based safety training during new employee orientation will include emergency procedures. Specific responsibilities of staff members with regard to emergency procedures will be defined in job descriptions and job site orientation and training through supervisory structures.

Health & Safety

SF-5

Safety Drills and Procedures (continued)

7. JAFCO policies and procedures outline basic approaches for responding to various types of emergencies; however, each service location and individual building may have additional components due to the nature of the physical layout, special populations, and local regulatory requirements. It is the responsibility of the facility designated Safety Officer to ensure that the special needs and characteristics of each service site are addressed in addendum policy and procedure, and that these special needs and characteristics are communicated to all affected persons.

Signature:



Executive Director

04/04/08

Date

Health & Safety

SF-6

Self Inspections

Original Date: 4/8/08

Revision Date: N/A

Policy Number: SF-6

Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO that regular comprehensive self-inspections of the overall safety of our facilities are conducted on a monthly basis, and that recommendations resulting from self-inspections are corrected to ensure the safety of the person served, employees, and visitors.

Procedures:

The facility Safety Officer is responsible for oversight that will ensure safety self-inspections are completed a minimum of once every quarter, and will facilitate the following processes:

- The Safety Officer is responsible for completing self-inspections at the main administrative building including the shelter, the grounds of the facility, the pool and the six group homes.
- The Safety Officer is responsible for completing quarterly self-inspection reports and submitting/presenting the reports and results at the quality improvement council meeting.
- All self-inspection reports and correction activities will be reviewed by the management team and noted in meeting documentation. The safety officers will report the results of the self-inspections, follow-up activities, and their recommendations for improvements to the quality council to ensure the organization utilizes the information to increase the level of safety throughout its operations.
- The safety officers will maintain a record of the self-inspection reports, including recommendations and corrections made. This record will be maintained in the safety book/binder in one location the main building and will be reviewed by management to ensure the agency's overall documentation of safety practices and outcomes.

The Self Inspection Checklist/Report Form will contain a review of the following areas related to environmental safety: Entrances/Exits, Evacuation Maps, Fire Extinguishers, Fire and Smoke Alarms, First Aid Kits, Blood borne Pathogens, Phones, Emergency Lighting, Evacuation Diagrams, Room Temperature, Plumbing, Chemicals and Potentially Hazardous Materials, Restrooms, Hot Water Heaters, Kitchen, Dining, and Break Areas, Equipment, Appliances & Machinery, Extension Cords, Electrical Closet, Storage Areas and Closets, Windows and Mirrors, Trash Receptacles, Walls and Ceilings, Floors and Floor Covering, Furnishings, Air Quality, Stairways and Docks, Pictures and Signs, Worksites, Exterior, Building, Fences and Outbuildings, Grounds, Parking.

Signature:



04/04/08

Executive Director

Date

Health & Safety

SF-7

Bomb Threats

Original Date: 4/8/08
Revision Date: N/A
Policy Number: SF-6
Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to provide prompt attention and appropriate assistance to persons served, staff members, and visitors in the event of a bomb threat, and the need for evacuation. All potential emergencies cannot be anticipated; therefore, emergency plans shall provide for adaptability to multiple situations.

Procedures:

1. The Safety Officer shall be responsible for oversight of emergency disaster plans and drills and ensuring that all of the organization's facilities are well prepared to respond effectively to any emergency.
2. Specific procedures will be maintained for bomb threats.
3. The following are the overall components of the organization's bomb threat and emergency plans. These serve as basic approaches to responding to bomb threats. The overall components of the organization's bomb threat emergency plans are as follows:
 - a. In the event of a bomb threat received by telephone (a call in which an individual indicates a bomb has been placed within or near the facility):
 - The staff receiving the call shall obtain as much information as possible from the caller, noting details of voice, speech patterns, and any background noise.
 - Ask where the bomb is and when it will go off, and document any information that is provided by the caller and will signal to another staff for assistance.
 - b. If the threat is received by letter or note:
 - Do not handle the letter or note any more than is necessary so evidence is not compromised.
 - c. If you notice a package, container, briefcase, or other object that is unattended and is out of place within the facility, does not have common identifiable markings or labeling, and is not recognized as belonging to an employee, person served, or visitor, proceed as follows:
 - Upon the discovery of a suspicious object/package/container, do not touch or move it.
 - Ask people in the area the object was discovered if they know what it is or if it belongs to someone.
 - If no one claims the object or cannot identify what the object is, notify the facility safety officer, or facility manager/director, who will determine if the facility should be evacuated and law enforcement authorities summoned, based on further investigation within the facility regarding the ownership of the suspicious package, container, briefcase or other type of unattended object.
 - If the object/package cannot not be identified, or is not claimed and identified by someone within the facility, evacuate the building and summon/contact law enforcement authorities.
 - Wait for the arrival of law enforcement authorities outside the building and turn over management of the unidentified object to law enforcement upon their arrival.
 - Re-enter the building and resume services only after clearance is obtained from the public officials managing the situation.

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Bomb Threats (continued)

- d. In all situations involving the threat of a bomb, follow these procedures:
- Remain calm and do not alarm persons served, visitors, or other staff members.
 - Immediately seek the Executive Director/designee or Safety Officer to report the situation.
 - The executive director or designee, or the safety officer, are responsible for contacting the police and activating the evacuation procedures.
 - Evacuation will be handled as per the organizational/facility evacuation policy and procedures.
 - In situations where the building/facility has been evacuated, agents of the police or other authorities will assess the situation and, if the present danger is terminated, will then inform the facility manager/director, or designee. Only the police authority may activate the "all clear" and only then may anyone enter the building.
 - Following the all clear, crisis debriefing procedures will be followed, within 48 hours a report shall be sent to all staff via e-mail.

Signature:



Executive Director

04/04/08

Date

Health & Safety

SF-8

Emergency Equipment and First Aid

Original Date: 4/8/08

Revision Date: N/A

Policy Number: SF-7

Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to ensure that appropriate equipment is available to assist and support the health and safety of persons served, employees, and visitors should an emergency occur at the agency.

Procedures:

1. The Safety Officer is responsible to ensure that all appropriate equipment to support the health and safety of occupants is available and properly maintained. Through the use of the self-inspection checklist and procedures contained in the Self-Inspection Policy.
2. The group homes, shelter and the administrative building shall have the following safety equipment and supportive aids available:
 - ABC type fire extinguishers mounted and/or placed at easily identifiable and accessible locations throughout the building.
 - Signs clearly indicating the placement of fire extinguishers.
 - Smoke detectors that are battery powered and have both audible and visual alarm indicators.
 - Clearly posted exit signs.
 - Clearly posted emergency exit plans for evacuation and fire safety that also include location of fire extinguishers and first aid kit.
 - A first aid kit that contains, at a minimum, the following:

CONTENTS	QUANTITY
Alcohol Towelettes (Wipes)	1 Pack
Band aids	1 Box/50 Ct/Butterfly-2 pkgs
Elastic Bandage	1
Gauze 4X4	1 Box
Neosporin (First Aid Cream)	1
Latex Gloves	2 pair
Tweezers	1
Instance Ice Pack	1
Peroxide/Saline Solution	1
First Aid Tape/clear	1 roll
Biohazard equipment	Appropriate for children

- Signs indicating the location of the first aid kit.
- A posted first aid emergency response guide located in close proximity of the first aid kit.
- The biohazard equipment appropriate to the services provided.

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Emergency Equipment and First Aid (continued)

- A spill kit that contains, at a minimum:

CONTENTS	QUANTITY
Disposal Bio-Bags w/ Ties	1
Disinfectant Spray, 2oz	1
Non-Latex Protective Gloves	2 pair
Heavy Duty Towelettes	1 package
Antimicrobial Hand Wipes	1 package
Apron	1
Eye Cover with loop mask	1
Shoe Covers	1
Spill Absorbent	12 oz.
Instructions in English and Spanish	1 each

- Readily available emergency data for person served and employees that can be accessed promptly in the event of a medical emergency.

Signature:



Executive Director

04/04/08

Date

Health & Safety

SF-9

Severe Weather and Natural Disasters

Original Date: 4/8/08
 Revision Date: N/A
 Policy Number: SF-9
 Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to protect persons served, employees, visitors, and property in the event of a severe weather emergency or natural disaster. All potential emergencies cannot be anticipated, therefore, emergency plans shall provide for adaptability to multiple situations.

PROCEDURES:

1. The Safety Officer is responsible for oversight of emergency disaster plans and drills and ensuring that the organization's facilities are well prepared to respond effectively to any emergency.
2. Specific procedures will be maintained for severe weather and natural disasters. In addition, emergency severe weather and natural disaster drills will be conducted at each site on an annual basis.
3. The overall components of the organization's severe weather emergency plans are as follows:
 - Severe weather is defined as any weather condition or natural event that has the potential to cause physical harm and/or property destruction. These events include severe thunderstorms, tornados, and flash floods. Procedures for severe weather are as follows:
 - a. If a severe weather or tornado watch is issued, each site shall access radio or television reporting that provides information from the National Weather Service.
 - b. In the event of a "watch," employees on duty will be informed of procedures to be taken in the event a "warning" is declared.
 - c. During "watch" periods, all persons served and employees will be encouraged to limit trips and transportation to and from the site.
 - d. In the event of a severe weather or tornado warning, all persons within the facility will immediately move to the designated areas in the interior of the building that are designated on the posted evacuation routes. Each building on the JAFCO campus contains a safe room which is an interior room with no windows.
 - e. Employees will assist persons served in arriving at the designated safety locations, and if time permits, will close all windows and blinds and all doors.
 - f. The Safety Officer, or designee, will secure the first aid kit, flashlights, and a radio, and maintain them in the area being used for shelter.
 - g. The Safety Officer shall oversee the process of moving to the designated safety location(s) and conduct a head count when this activity is completed.
 - h. The Safety Officer shall announce the end of the need to remain in the designated location when the warning is no longer in effect, according to the national weather service.
 - i. The Safety Officer will be responsible for contacting any emergency entity that may be needed due to injuries or events such as power loss and/or broken utility lines.

Signature:



04/04/08

Executive Director

Date

Health & Safety

SF-10

Workplace Violence

Original Date: 4/8/08
Revision Date: N/A
Policy Number: SF-10
Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to protect persons served, staff members, visitors, and property in the event of threats and violence in and around the organizations facilities. All potential emergencies cannot be anticipated; therefore, emergency plans shall provide for adaptability to multiple situations.

Procedures:

1. The Safety Officer is responsible for oversight of emergency disaster plans and drills and ensuring that all of the organization's homes and building are well prepared to respond effectively to any emergency.
2. Specific procedures will be maintained for workplace threats and violence.
3. Workplace threats and violence drills, to gauge the agency's potential response to an actual event, will be conducted at each site two times per year.
4. The overall components of the agency's workplace threats and violence plans are as follows:
 - Workplace threats and violence is defined as any situation in which there is a perceived threat of violence, or a situation where violence is or has occurred. Procedures to provide the optimal response for safety apply to persons served, staff members, and visitors who may exhibit threats of violence or actual violent acts.
 - Staff members should exercise common sense in any situation with an aggressive person. If a situation involves a weapon, such as a knife or gun, do not attempt to remove the weapon from the individual.
 - If you or anyone else is assaulted or physically threatened by another individual while conducting business, if possible remove yourself from the situation, call for help (vocally or by phone), and/or notify another staff member to summon the police by calling 911.
 - Do not attempt to engage in any type of physical restraint with a person who is threatening violence, unless your life is in imminent danger.
 - If you cannot remove yourself from the situation, follow the guidelines provided through the organizational workplace violence training regarding de-escalation techniques for dealing with such situations.
 - If you are not directly involved in the situation, seek to assist in the evacuation of persons served, visitors, and staff from the building, according to the evacuation policy and procedures.
 - At no time should any staff members put themselves at harm in an attempt to diffuse a situation. Always attempt to remove yourself and seek local law enforcement assistance.
5. The following procedure is to be used to notify staff members of threatening behavior without alarming the aggressor if the situation, such as being alone with the aggressor in a closed office or isolated from other staff who can aid you with the situation, warrants such an approach:
 - If you believe the situation is such that it warrants support and assistance from other staff, indicate to the person in your office or work area that you take their actions, behavior, and/or anger very seriously and that you do not want to be disturbed so you can focus on them. Let them know that you are going to call the front desk or receptionist to have them hold your phone calls. Then call a co-worker, or a person designated by the organization as the point person for violent situations, from your phone and request that they "**hold all your calls.**" This will serve as the "code" or the notification that their presence is needed in your office to assist you with a potentially violent situation.
 - If you believe that the situation is such that it warrants law enforcement intervention, indicate to the person in your office or work area that you take their actions, behavior, and/or anger very seriously and that you do not want to be disturbed so you can focus on them. Let them know that you are going to call the front desk or receptionist, or designated person and have them "**cancel your next appointment.**" This will serve as notification that an emergent situation is occurring and they are to contact local authorities for assistance immediately and assist you with the situation.

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Workplace Violence (continued)

- Example:
 - a. "This is Joe; I am dealing with something very important. Could you hold all my calls"? This is a call for staff assistance.
 - b. "This is Joe, I'm in my office. I'm dealing with something very important. Could you cancel my next appointment?" This is a call for you to summon the police, as well as immediate staff assistance.
- 6. Within 24 hour of the incident a debriefing shall occur as well as a critique of how the incident was handled.

Signature:



Executive Director

04/04/08

Date

Health & Safety

SF-11

Evacuations

Original Date: 4/8/08

Revision Date: N/A

Policy Number: SF-11

Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to protect persons served, staff members, visitors, and property in the event of a fire emergency or in the event that the physical plant in which services are being provided needs to be evacuated. Evacuations can occur for a variety of reasons, including fire emergencies, violence or aggressive behavior, a utility emergency, such as a natural gas leak, or a natural disaster, such as a hurricane, that may leave the structure unsafe to inhabit.

Procedures:

1. The Safety Officer is responsible for oversight of emergency disaster plans and drills and ensuring that the agency is well prepared to respond effectively to any emergency.
2. Specific procedures will be maintained for fire emergency and evacuation of the facilities. Emergency fire and evacuation drills will be conducted at each group home and the main building on an annual basis. The Safety Officer will be responsible for coordination of the drills and completing the Safety Drill Form following the drill. A copy of the form will be maintained in a safety binder at the site location, and distributed during reporting to the Management Team.
 - Fire Procedures: The following are the overall components of the agency's fire emergency plans. These serve as basic approaches to responding to fire emergencies; however, each site may have additional components due to the nature of the physical layout of the facility and local regulatory requirements. It is the responsibility of the facility Safety Officer to ensure that the special needs and characteristics of each group home and main building are addressed in additional policy and procedure, if appropriate, and that these special needs and characteristics are communicated to all affected persons and the management team. The components of the agency's fire emergency plans are as follows:
 - a. In the event of the discovery of a fire, evacuate all individuals from the immediate area.
 - b. Close all doors to contain the fire.
 - c. If the fire is small, attempt to contain it by using a fire extinguisher.
 - d. Announce that there is a fire in the building and the need to immediately evacuate.
 - e. Call 911 and report the fire, providing the name and address of the site.
 - f. Assist in the evacuation process and account for all persons served, employees, and visitors.
 - g. To expedite the evacuation process, all ambulatory persons served and visitors are evacuated first, followed by staff members who will assist all others in evacuation.
 - h. All persons will be evacuated and assembled at a location that is pre-determined by management as the evacuation assembly area. The basketball court has been selected as this area for the JAFCO Children's Village campus. The playground has been selected as this area for the JAFCO Children's Ability Center campus.
 - i. The safety officer or designee will provide any special information to arriving emergency personnel such as size and location of fire and location of any flammable or explosive items, and will relinquish control of the situation to the local authorities.
 - j. The fire department will be the final authority in determining building re-entry.
 - k. If the facility cannot be re-occupied, the designated employee in charge of managing the site will manage, through consultation with the Executive Director, the continuation of essential services, as per those procedures contained in this policy.
 - l. The Executive Director will be notified as soon as possible of the incident and an incident report will be completed and processed as per the Critical Incident Policy.
 - Evacuation Procedures: In the event of an emergency that requires a facility to be evacuated, the following procedures will be as follows:
 - a. Evacuation of the facility shall occur should any of the following events occur:
 - i. Fires: If it is immediately determined that the extent of the fire cannot be contained with quick and direct actions, the building will be evacuated.

Health & Safety

SF-11

Evacuations (continued)

- ii. Violence and/or Aggression: If a crisis situation occurs that involves a direct threat to any persons in the building, the building will be evacuated or the campus will be placed on lock down status until law enforcement can intercede.
 - iii. Utility Disruption or Crisis: Situations that will necessitate evacuation in this area include gas leaks and electrical malfunctions determined to present a health risk.
 - iv. Noxious Odors or Fumes: If it is determined that there are odors or fumes that are a health risk due to eye, skin, or lung irritation, the building will be evacuated.
 - v. Bomb Threat: In the event of a bomb threat made toward the organization, the building and the campus will be evacuated.
- b. In the event it is determined the building should be evacuated, the following procedures will be followed:
- i. The Safety Officer will inform all staff of the evacuation order through (overhead paging system, activation of fire alarm, verbally. Method dependent on the situation).
 - ii. All staff in direct care service areas or in direct contact with persons served will assist the person served(s) in exiting the building through the exits according to JAFCO's emergency exit plan. Staff not in direct contact with persons served or person served areas will immediately exit the building according to the facility emergency exit plan. Staff in person served areas will check the rest rooms to ensure that all persons evacuate.
 - iii. The Safety Officer will exit the building with the safety binder, in order to access information on contacting emergency personnel and staff as needed.
 - iv. All staff and persons served at the JAFCO Children's Village will proceed to the designated evacuation area (Starbucks on University and Springtree drive) as quickly as possible. All staff and persons served at the JAFCO Children's Ability Center will proceed to the designated evacuation area (the Daniel Cantor Senior Center on Nob Hill Road).
 - v. The Safety Officer, or designee, will determine if all staff and persons served are present and out of the building, through surveying staff to determine if all persons served being treated during the time of evacuation are accounted for and determining if all staff are also accounted for.
 - vi. Should it be determined that someone in the building is not present outside the building, the Safety Officer will determine if the nature of the emergency presents a threat to life and/or health to the degree that it would not be prudent to re-enter the building briefly to seek the location of the missing individual or individuals. If it is determined that the situation would allow a quick re-entry to locate the missing individual, the Safety Officer will briefly re-enter and call out the name of the individual. If there is not a response, the Safety Officer will exit the building and wait for emergency personnel to arrive and take control of the situation.
 - vii. Should the building not be of the condition to be re-occupied to provide services, the following essential services will be provided until the current facility or another facility can be brought back into full service operation:
 - Children residing in the building affected will be relocated to another building on the JAFCO property until the affected building is repaired.
 - Outpatient services will be conducted in one of the JAFCO group homes, if the Simon Family Center is affected.
 - Social work staff will work from home if office facilities are affected using remote log in.
 - Files of persons served, if located in affected building will be removed and placed in locked cabinets in a locked room in an alternate building on the campus.
 - Phones will be forwarded to an intact building and be answered from there.

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Evacuations (continued)

- viii. The following emergency phone numbers are for use in the event of an evacuation, and will be maintained on the back-side of the front cover of the Safety Binder:
- Gas Company (Diesel fuel for generator)..... 305 378 8737
 - Electric company FPL: 954 468 8243
 - Ambulance 911
 - Private Ambulance 954 567 4848
 - Hazardous spills..... 911
 - Poison Control 800 222 1222
 - Police..... 911
 - Sunrise Police Department Non-Emergency..... 954 746 3600
 - Air Conditioning 954 599 3926
 - Elevator 954 581 8900
 - Security 954 433 4333
 - Flood 954 584 2323
 - Gate..... 305 696 0419
 - Computer 954 323 2397
 - Generator..... 305 978 0230
 - Roof..... 954 344 4622
 - Fire Sprinklers 786 256 2895
 - Advanced Fire 954 772 1700
- ix. Once an emergency evacuation has occurred, the building cannot be re-occupied until the responding emergency authority grants permission that the health and safety of staff and persons served is no longer compromised. Should an immediate re-occupation not be allowed by the authorities, occupation will be determined through the authority of the entity that is charged to bring the building back into compliance with health and safety standards (Gas Company, fire department, building inspector, etc.)
- c. Once premises are safe and business can be resumed, the executive director shall schedule a debriefing of the incident within 24 hours.

Signature:



Executive Director

04/04/08

Date

Health & Safety

SF-12

Medical Emergencies

Original Date: 4/8/08

Revision Date: N/A

Policy Number: SF-12

Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO to provide prompt attention and appropriate assistance to persons served, staff members, and visitors in the event of a medical emergency. All potential emergencies cannot be anticipated; therefore, emergency plans shall provide for adaptability to multiple situations.

Procedures:

1. The Safety Officer is responsible for oversight of emergency disaster plans and drills and ensuring that all of the organization's facilities are well prepared to respond effectively to any emergency.
2. Specific procedures will be maintained for medical emergencies. In addition, medical emergency drills will be conducted at each site on an annual basis.
3. The overall components of the JAFCO's medical emergency plan are as follows:
 - a. A medical emergency is defined as an incident that requires interventions beyond simple first aid available at the facility in order to stabilize a condition that may result in a serious medical outcome. Conditions include, but are not limited to, excessive bleeding which is unable to be controlled, accidents involving serious injury, failure or obstruction of the respiratory system, failure of the circulatory system, chest pain or severe abdominal pain, loss of consciousness unrelated to predictable seizure activity, or any type of distress that is determined to seriously limit an individual's normal level of daily functioning.
 - b. When an event occurs that is determined to be an emergency health care incident, 911 will be immediately called to access emergency personnel to assist and transport the individual to medical services.
 - c. The organization's critical incident policy will be followed for all medical emergency events.
 - d. If determined to support the stabilization of a serious and acute medical condition, staff members who hold current certification in CPR and First Aid will implement CPR and/or First Aid procedures, when appropriate, to stabilize a condition prior to the arrival of external emergency personnel.
 - e. If the individual is a person served, the Emergency Medical Treatment Form will be accessed, contact made with the emergency contact names, and pertinent information will be given to the transporting emergency technicians. All Emergency Medical Treatment Forms will include:
 - Name, address, and telephone number of the physician to be called.
 - Name, address, and telephone number of a relative or other person to be notified.
 - Medical insurance company name and policy number, or Medicaid/Medicare number.
 - Information concerning the use of medication, medication allergies, and significant medical problems.
4. Employees will not transport individuals in their personal vehicles and/or the organization's vehicles in emergency health care situations.
5. Following containment of the emergency, a progress note will be completed in the record of the person served and a Critical Incident Report form will be completed.
6. If the emergency involves an employee, the designated staff responsible for the sited human resource files will access the Employee Emergency Contact Form. Employee emergency medical forms will include the following information:
 - a. Name and number of primary care physician
 - b. Name and number of emergency contact person
 - c. Allergies and blood type
 - d. Any medical conditions that the employee may deem important and voluntarily disclose on the form that could assist emergency responders, such as medications and physical health conditions.
 - e. Preferred medical treatment location.
7. Contact will be made with the emergency contact person named, if requested to do so by the staff member. A contact will always be made if the staff member is incapacitated and unable to request or deny the contact.
8. The telephone number of the local poison control center will be posted throughout the organization. All staff members and persons served will be orientated to the location of this information.

Health & Safety

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Medical Emergencies (continued)

9. In the event of poisoning or drug ingestion that has caused an acute medical emergency, staff members will call **poison control at 1800-282-3171** and provide the following information: age and weight of the person, names of the substance(s) ingested, strength, and amount ingested if known, and the general condition of the person. Vomiting or the use of Ipecac syrup will not be used unless specifically directed by personnel of the poison control center.
10. Medical clearance must be obtained in writing from the treating physician prior to persons served returning to services, or staff members returning to employment duties, if a medical emergency required a response from emergency responders.

Signature:



04/04/08

Executive Director

Date

Health & Safety

SF-13

CPR and First Aid Training

Original Date: 4/8/08

Revision Date: N/A

Policy Number: SF-13

Department of Origin: Health & Safety

Policy:

It is the policy of JAFCO that all direct care staff, clinical staff, maintenance /housekeeping staff and facility manager are trained in CPR. At least one individual is available during all hours of operation that is trained in basic first aid and cardiopulmonary resuscitation (CPR), and that the presence of trained personnel is available at outpatient site and the residences. A trained staff shall be present when accompanying persons served on community outing.

Procedures:

1. The Safety Officer will be responsible for ensuring that the CPR and First Aid Training Policies are fully integrated in the safety practices of the organization.
2. All staff members who work in positions with direct consumer contact are required to receive CPR and First Aid training.
3. Human Resources will be responsible for maintaining and monitoring the training records and training updates for all staff members who are required to be CPR and First Aid certified. All position descriptions of staff members who are required to receive training and maintain certification will reflect this requirement.
4. All new staff members will be notified at orientation if CRP and First Aid training is required of their position, and the HR manger shall coordinate and notify staff of training dates. JAFCO facilitates in-house training sessions by a certified instructor (CPR and First Aid training will be provided free of charge when taken at JAFCO. In the event the staff member prefers to take the training off-site, the staff shall be responsible for finding and paying an organization or certified trainer that provides training.
5. All staff members are responsible for receiving the necessary continuing education/training and providing Human Resources with a current record of training.

Signature:



04/04/08

Executive Director

Date

Health & Safety

SF-14

Infection Control

Original Date: 4/8/08

Revision Date: N/A

Policy Number: SF-14

Department of Origin: Health & Safety

Policy:

1. It is the policy of JAFCO to provide a plan to minimize occupational exposure to communicable disease or infection that spread through the following routes of transmission: (1) Direct contact as a result of close contact to skin and body secretions/fluids; (2) Indirect contact that occurs when organisms from an infected host are transmitted to a susceptible host via an inanimate object; (3) Droplet transmissions that occurs when infectious agents in droplets are expelled from respiratory secretions by coughing, sneezing, or talking; (4) Airborne spread that usually results from organisms spread from a distance of more than several feet between the source and the receiver.
2. JAFCO shall adhere to standards and procedures in the area of direct contact/blood borne pathogens that are in strict compliance with the Occupational Safety and Health Administration's (OSHA) Blood borne Pathogen Standard 29CFR1910.1030. Compliance with OSHA standards assist in promoting guidelines and training to minimize or prevent, when possible, the risk of occupational exposure to disease-causing microorganisms transmitted through human blood.
3. All staff members who are exposed to blood and other potentially infectious materials as part of their job duties are included in this program. Implementation and monitoring of education and training requirements of this program will be the responsibility of the Human Resource Department. The Executive Director will be responsible to ensure that the organization's exposure control plan is reviewed and updated annually, or whenever necessary to include new or modified procedures.

Procedures:**A. The basic components of JAFCO exposure plan are as follows:**

1. Methods of Compliance.
2. Exposure Determination and Guidelines.
3. Hepatitis B Vaccination Policy.
4. Procedure for evaluation and follow-up of exposure incident.
5. Staff Member Training.
6. Record Keeping Procedures.

B. Methods of Compliance:

1. Universal Precautions and Sanitary Procedures:
 - a. Rules of Universal Precautions: All JAFCO staff members will observe the rules of universal precautions. All blood or other potentially infectious materials shall be considered infectious regardless of the perceived status of the source individual. Under circumstances in which differentiation between body fluid types is difficult to detect, all body fluids shall be considered potentially infectious materials.
 - b. Hand Washing: Hand washing is the number one method of infection control. Hands shall be washed before and after all tasks involving potential occupational exposure to blood borne pathogens. Hands will be washed when gloves are removed after performing each task that involves contact with blood or body fluids, mucous membranes, or non-intact skin. Antiseptic towelettes will be provided to mobile staff members that do not have hand-washing facilities immediately available. Hand washing facilities are available in bathrooms at each site and office. When other skin areas or mucous membranes come into contact with blood or other potentially infectious materials, the skin shall be washed with soap and water, and the mucous membranes shall be flushed with water as soon as possible.
 - c. Facility Cleanliness: Special care will be given to facility cleanliness. Bathrooms, lavatories, examination, and eating areas should be disinfected regularly with a fresh daily solution of one part household bleach to ten (10) parts water.
 - d. Spills: All body fluid spills (regurgitation, diarrhea, urination, bleeding, sputum, etc.) will be cleaned promptly and the contaminated area disinfected. The area will be cleaned with a fresh solution of one (1) part bleach to ten (10) parts water. A spill kit will be maintained at all locations providing direct services or contact, and in all vehicles used in the provision of community-based services.

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SF-14

Infection Control (continued)

- e. Sharps: All staff members shall take precautions to prevent injuries by needles and other sharp instruments or devices during procedures that are likely to generate droplets of blood or other body fluids and prevent exposure to mucous membranes of the mouth, nose, and eyes. Broken glass is to be picked up using mechanical means such as a brush and dust pan, tweezers, tongs, or other devices that reduce the risk of accidental puncturing of the skin during the clean-up process.
 - f. Laundry: Laundry contaminated with potentially infectious materials will be handled as little as possible using gloves. Items will immediately be washed in hot water on the regular wash cycle and dried on the hot cycle. If the contaminated laundry is wet, it is to be placed in a plastic bag to prevent possible soak-through and/or leakage of fluids to the exterior. Gloves will be used to handle contaminated laundry and handling will be kept to a minimum. No one will leave the area with potentially contaminated items or clothing. Community-based staff will remove clothing with any bodily fluids as soon as possible and travel to the nearest facility or office to dispose of laundry clothing. Contaminated clothing is not to be taken home to be laundered.
 - g. Hairnets: shall be used in all kitchen areas
2. **Work Practice Controls:**
 - a. Staff members will decontaminate working surfaces and equipment with an appropriate disinfectant (one part bleach to ten parts water) after completing procedures involving exposure to blood. Staff members will clean any surface that becomes obviously contaminated, after any spill of blood or other potentially infectious materials, and at the end of each work shift if contamination might have occurred.
 - b. If surfaces or equipment are draped with protective coverings such as plastic wrap or aluminum foil, these coverings should be removed or replaced if they become obviously contaminated.
 - c. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in all work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials.
 - d. Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets, or counter-tops where blood or other potentially infectious materials are present.
 3. **Barrier Protection:**
 - a. Gloves are to be worn for touching blood and body fluids, mucous membranes, or non-intact skin of all consumers if performing vascular access (medication injection) procedures. Gloves are for single use only. Gloves will be available at each work site for use by staff members. Hands are to be immediately washed after the gloves are removed.
 4. **Collection and Processing of Samples:**
 - a. If urine is collected for urine drug screens it will be collected in a special plastic wide-mouth bottle and the person served is given the bottle, which has been labeled prior to the collection. The person served is asked to void into the bottle and place the leak-proof lid tightly on the bottle. The person served then places the bottle in a three-section Ziploc bag with the biohazard on it and seals the bag securely. A staff member checks the seal on the container through the bag and places it in a refrigerator where it is kept until pick up.
- C. Exposure Determination and Guidelines:**
1. All job categories in which it is reasonable to anticipate that a staff member may have skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials will be covered by the guidelines of the exposure control plan. Parenteral contact is defined as piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions. Other potentially infectious materials include body fluids (semen, vaginal secretions, cerebrospinal fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, any body fluid visibly contaminated with blood, all body fluids in situations where it is difficult or impossible to differentiate between body fluids), any unfixed tissue or organ from a human (living or dead), HIV/HBV containing cell or tissue cultures, organ cultures and culture medium, blood, and organs or other tissues from experimental animals infected with HIV or HBV.
 2. OSHA has outlined three major categories that classify job assignments according to expected or potential exposure to blood and other body fluids and tissues. The exposure categories are as follows:
 - a. Category I: Tasks that involve exposure to blood, body fluids, or tissues.
 - b. Category II: Tasks that involve no exposure to blood, body fluids, or tissues, but employment may require performing unplanned tasks.
 - c. Category III Tasks involve no exposure to blood, body fluids, or tissues and risk is minimal that employment would require performing unplanned tasks.

Health & Safety

SF-14

Infection Control (continued)

D. Tuberculosis Testing Program

1. All JAFCO staff members will participate in tuberculosis (TB) testing at the time of hire. Staff members who can produce documentation of a completed TB test within the previous year of their hiring will be exempt from this requirement.
2. Staff members who are unable to receive TB testing for medical reasons will be required to complete an evaluation by a chest x-ray.
3. JAFCO will provide TB skin testing and chest x-rays, if necessary, for staff members. Staff members who do not complete the cycle of testing and reading necessary for valid results will be required to pay for a second series of tests.
4. Annual testing will be required of staff members who are considered at high risk for exposure. Staff members working in the following program and/or services are considered at high risk:
 - JAFCO Children's Emergency Shelter
 - JAFCO Group Home Program
 - Food Service Staff
 - All PCM Certified Staff
5. Staff members working in the following programs and/or service areas are considered at low risk for exposure and are not required to participate in annual testing:
 - Administrative Staff
 - Development Staff
 - Outpatient Program Staff
6. Annual TB testing will require tuberculosis skin testing as outlined by the Center for Disease Control. Chest x-rays will be required only if exposure and/or symptoms exist.
7. Staff members who test positive for tuberculosis will have the option of seeking treatment through their personal medical provider or may seek care through the municipal health department.
8. Any staff member who suspects they may have been exposed to tuberculosis will immediately notify his/her direct supervisor. Supervisors will refer the staff member to US Health Works Medical Group for testing and medical intervention/follow-up, if necessary.
9. If a staff member is receiving medical follow-up as a result of a positive skin test or chest x-ray, the staff member will submit a report from the provider to his/her supervisor that states whether the staff member is an exposure risk in the workplace.
10. Any staff member who presents an exposure risk will be placed on medical leave until medically cleared to return to work by a physician.
11. All documentation related to TB test results and medical intervention will be contained in the staff member's confidential health records in the human resource department.

E. Procedures for Evaluation and Follow-up of Exposure Incidents

1. An exposure incident is a specific eye, mouth, or other mucous membrane, non-intact skin or parenteral contact with blood or other potentially infectious materials that results from performance of a staff member's duties.
2. Any staff member who experiences an exposure incident will immediately report the incident to his/her immediate supervisor and complete a Critical Incident Report form. The supervisor will follow the incident reporting procedures contained in organizational policy.
3. Staff members will be immediately offered a confidential medical examination and follow up including the documentation of the route(s) of exposure, the circumstances under which the exposure incident occurred, and identification and documentation of the source individual unless identification is not feasible.
4. The source individual, if known, will be requested to have his/her blood tested for HIV/HBV/HCV antibodies, unless he/she is known to be infected with HIV/HBV/HCV. If the source individual declines testing and his/her status is unknown, the staff member will be advised of legal avenues that may be pursued under state law.
5. The HR MANAGER will forward documentation of the exposure incident information that will include a copy of the OSHA 1910.1030 blood borne pathogens standard, a description of the exposed staff member's duties as they relate to the exposure incident, documentation of the route of exposure and circumstances under which the exposure occurred, results of the source individuals blood testing, if available, and all medical records relevant to the appropriate treatment of the staff member including vaccination status.
6. The staff member will receive the medical evaluation within 24 hours of the exposure incident.

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Infection Control (continued)

7. The organization will obtain and provide the staff member with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation. The written opinion will be limited to the following information:
 - a. That the staff member has been informed of the results of the evaluation.
 - b. Whether the Hepatitis B vaccine is indicated and if the staff member has received the vaccine.
 - c. That the staff member has been informed about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.
8. The organization will maintain the staff member's medical record as directed in the OSHA Regulation for Protection Against Blood borne Pathogens.
9. If a staff member develops an illness that might be attributed to the exposure incident, the physician will evaluate each incident, and follow-up and treatment related to the exposure incident will be provided at no cost to the staff member.
10. The critical incident review and management process, as defined in organizational policy and procedures, will support a review of the circumstances of the exposure and consider engineering controls, work practices, protective equipment used, procedures performed, and the staff member's training, and will make recommendations for appropriate changes in this policy.

F. Preventing and Limiting the Spread of Airborne Communicable Diseases

1. For staff members and persons served who have known airborne communicable diseases such as TB, influenza, and colds, the following precautions should be taken:
 - a. Wash hands frequently, especially after coughing or sneezing.
 - b. Avoid meal preparation for other people.
 - c. Avoid small, enclosed areas where close continual contact with others occurs.
 - d. Cover mouth when sneezing or coughing.
 - e. Use disposable tissues and remove from them from the area frequently.
 - f. Do not share glasses, cigarettes, or other items that could spread germs upon direct contact.

G. Employee Training

1. All staff members will be trained upon hire and annually thereafter in infection control. The training will contain the following elements:
 - a. The OSHA standards for Blood bore Pathogens.
 - b. Epidemiology, symptomatology, and the methods of transmission.
 - c. The Infection Control Policy/Plan.
 - d. Procedures and events that might cause exposure.
 - e. Personal protective equipment, how it is used, where supplies are kept, and disposal methods.
 - f. Post-exposure evaluation and follow-up.
 - g. Signs and labels used.
 - h. The Hepatitis B vaccine program (safety, benefits, efficacy, methods of administration and availability).
2. Training records will include the date, a summary of training, names, and qualifications of persons conducting the training and names and job titles of all attending. The organization's designated Blood borne Pathogens Trainer will conduct trainings, using handouts, discussion, and hands on training.
3. Training records shall be provided upon request for examination and copying for all staff members, staff member representatives, and the appropriate legal authorities.

H. Record Keeping Procedures

1. The HR manager will maintain all records required by the OSHA standard. Medical records will be accurate, include the staff member's name and social security number, a copy of the HBV vaccination status, a copy of all exams, tests, follow-up, and the health care professional's written opinions. Medical records, separate from the staff member's personnel record, will be maintained for the duration of employment, plus 30 years.
2. Confidentiality will be ensured at all times. Medical records are provided upon the request of the staff member or anyone having written consent of the staff member within 15 working days. Such requests should be addressed to the HR manager.

Signature:



Executive Director

04/04/08

Date

Health & Safety**SF-15****Community Based Service Provider Safety Plan**

Original Date: 4/8/08

Revision Date: N/A

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Department of Origin: Health & Safety

Introduction

1. Safety is of paramount importance in community-based services. It is important to do what we can to minimize risks to our person served as well as ourselves. Over the years we've become more aware of on-the-job risks to ourselves and the day-to-day living risks to our person served. We've also become aware of risks to us involved in getting to and from our person served homes and schools. This manual is an overview of safety/risk issues. It is a response to the broadest range of risks that we could encounter. Some are very unlikely to occur, yet we have included some unlikely items because they have been known to occur and we want community-based human service workers to be prepared.
2. Please read this safety manual and, as you are reading it, remember that our employees are not expected to take undue risks. If the risk to you appears to be high, it is a good idea to consult with your supervisor and do whatever you need to do in order to maintain your safety. It is always important to trust your instinct. If you have a "feeling" that something isn't right, act on your instinct and maintain a cautious and conservative approach to the situation.
3. This manual is intended to be a resource for maintaining your safety in community-based care. Please read it carefully and always make safety a priority in your daily activities.

Approaching the Home

1. As you approach the home, note:
 - Location of doors and windows
 - Are any neighbors around?
2. Listen before you knock or ring doorbell.
3. Adapt your eyes to light conditions inside the home.
4. Stand to the side of the door-someone may come out quickly.
5. Wait for the person served to come to the door to invite you in.
6. Don't walk in if the door is open.
7. Don't walk in if a voice calls out "come in" and you can't see anyone.

Entering the Home

1. Choose a "safe place" to sit.
2. Leave yourself an exit; sit near a door.
3. It is best to have your back to a wall.
4. Living rooms are the safest places to meet.
5. Bedrooms are where most guns are kept.
6. Kitchens are full of all kinds of potential weapons.
7. If possible, leave the door open.
8. When meeting in inside rooms, it is especially important to leave the door open.

When In The Family's Home

1. Notice exits and possible escape routes.
2. Sit nearest the door, if possible
3. Sit with your back to the wall.
4. If you feel unsafe, be alert for physical cues signaling danger.
5. At all costs, avoid confrontations:
 - Be respectful, calm, and agreeable.
 - Leave or change directions in the conversation.
 - Go to a safety spot (car, room with other family member, outside, neighbors).
 - Call supervisor and/or police if situation warrants and allows.
 - Have the address of person served home available or memorized.

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Community Based Service Provider Safety (continued)

6. Carry an I.D. at all times on your person.
7. If police raid the person served home while you are there:
 - Stay as calm as possible.
 - Do exactly what the police say.
 - Don't reach in pockets/purse/or briefcase for I.D.
 - Establish who you are later, when things are calm.

In Your Car

1. Keep your car mechanically maintained.
2. Know how to change a tire.
3. Carry a can of tire sealant
4. Make sure your spare tire is full
5. Make sure your trunk is equipped with a flashlight, blanket, city map, and jumper cables.
6. Make sure your gas tank is not low.
7. Lock car doors when in car.
8. Stay on main roads in urban areas-especially in poor weather, late at night, or when having car trouble.
9. In rural areas, choose roads you think will maximize the chance you will be helped if your car breaks down.
10. Keep quarters in your car for phone calls or carry a cellular phone.
11. Know where you are going.
12. Take care of personal needs (going to the bathroom) before leaving.
13. Ride around the person served neighborhood and check for safety spots (stores, gas stations, etc.)
14. Have the number of emergency road service in your car.

To And From Your Car

1. Drive around the neighborhood. Note potential dangers such as abandoned buildings, dark streets, noises of fighting, congregations of people indicating gang values or transactions, gang graffiti, drug evidence on the ground, substance impaired persons.
2. Park your car under a light.
3. Do a "360" look around, to and from your car.
4. Have car keys in hand/available.
5. Leave thoughts of the person served/family in the car-once you leave the car, focus all of your attention on the surroundings and be alert.
6. Because driving while preoccupied can be dangerous, after an upsetting and/or difficult session, find a safe spot and call to debrief with your supervisor prior to driving home.
7. If the person served is not at home, assess the risk of waiting in your car versus going to a safe spot to wait and call the person served.
8. Go to a safe spot to write notes and/or use cellular phone after sessions.
9. Ask family members to watch you as you go to your car after dark.
10. Don't go to your car if someone is hanging around it- seek assistance or someone to accompany you.
11. If you suspect you are being followed, drive to the nearest safety spot to get help-don't drive home and possibly provide your home address to someone following you.
12. If being followed:
 - Take the time to observe the vehicle and occupants for descriptions. Stay calm.
 - Note the direction the vehicle travels when you reach a safety spot to call for help.
13. Look in your back seat before getting in your car (even if you locked it!).
14. If your car dies, breaks down, or you are in an accident:
 - Pull to the right side of the road, if possible.
 - Put flashers on.
 - Open hood.
 - Get back in the car, lock doors.
 - Call for assistance, if you have a cellular phone, ask someone to call a wrecker, spouse, or a friend if you don't.
 - While waiting for assistance, review self-protection strategies.
 - Talk through the open window only.

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Community Based Service Provider Safety Plan (continued)

- Don't accept rides without considering the risks to your personal safety.
 - If you leave your car for assistance, leave the car door unlocked so you can re-enter quickly, if needed.
 - Observe the person offering assistance (smell of alcohol, other cues you may be unsafe?).
 - Check out the person's car who is offering assistance. Is there more than one occupant in the car? Is anyone in the back seat? Are the car handles present on the inside of the door? Trust your gut feelings to turn down a ride.
- Embarrassment has no place when considering your safety.

15. Don't ask a group of people on the street for directions.

When Walking

1. Walk fast.
2. Stay on main streets.
3. Face traffic.
4. Don't carry a purse, if possible, or carry it close to your body.
5. Don't carry charge cards.
6. Carry quarters if you don't have a cellular phone.
7. Note safety spots along the way.
8. Be alert, look around, and keep head up while walking.
9. If you sense danger and/or feel unsafe, leave immediately, change directions, go to a safety spot and/or your car.
10. Don't ask groups of people for help or directions.

Prior Episodes Of Violence Toward People Outside The FamilyInitial phone call:

1. Allow plenty of time for the conversation. Use lots of active listening.
2. Talk to the allegedly violent person and try to establish a relationship.
3. Assess whether person served are escalated. If so, use active listening.
4. Ask a family member for their assessment of the potential for violence.
5. Assess whether there are any weapons in the house.
6. If you are still concerned about the potential of violence, consider meeting with the most approachable family members.
7. Ask family members to lock up or remove all weapons.
8. Consider meeting in a neutral place.

Preparation for first session:

1. Call the referring worker for more information.
2. Notify your supervisor of you initial phone call assessment.
3. Notify a supervisor/co-worker of where and when the first session will take place. If necessary, develop a plan of when you will call to confirm your safety including code words or a plan of action if no call is received. If a cellular phone is an option, file the number to the supervisor and keep the phone on.
4. Consider taking your supervisor or a co-therapist with you.

During the first session:

1. Drive around the neighborhood to get your bearings and locate aids and safety spots.
2. Park as close as possible to the home so that accessing your car and leaving is easy.
3. Keep calm, relax, take a deep breath, and use self-talk such as "It is not my responsibility to change this person."
4. Keep your car keys readily accessible such as in your pocket.
5. As you approach the home, note the location of exits, including window.
6. Listen before you knock.
7. Stand to the side of the door.
8. Wait for the person served to come to the door.
9. Choose a "safe place" to sit unless the family directs the seating arrangement.
 - Try to sit near the exit with your back to the wall.
 - Living rooms are safer than bedrooms or kitchens where weapons can be stored or where potential weapons exist.
 - If possible, leave a door open.
 - Think out an escape route.
10. Observe the home for potential weapons.

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Community Based Service Provider Safety Plan (continued)

11. Be alert to household members' physical cues of escalation, e.g., facial expressions, muscle tension, posture, breathing, complexion changes.
12. Respect the family's personal space. Don't crowd them or touch them.
13. Ask the person served' permission-check out everything you do.
14. Meet separately with each family member, if appropriate or necessary.
15. Talk with the most upset person first.
16. If the situation begins to escalate, de-escalate it by giving away your power, e.g., stop teaching, problem solving, or directing and go into active listening mode.
17. Additional options to de-escalate:
 - Distract the issue with creative time-outs, e.g., requesting to go to the bathroom.
 - State your concerns using "I" messages including consequences for use of violence.
 - Consider relocating to a neutral location with one person or more.
 - Leave if you feel in personal danger.
 - Call your supervisor from a phone in a safe location, as soon as possible.

Your Person served Lives in an Unsafe Neighborhood

1. Discuss with your person served the safest time to meet.
 - Consider meeting in a safer location.
 - Ask if they will watch the street for your arrival.
 - Meet during the daylight hours, especially during initial visits.
2. Let your supervisor know your route and destination address and when you anticipate your return home. Develop a check-in contingency plan.
3. On the way, get your bearings or locate aids/safety spots.
4. Travel main streets as much as possible.
5. Leave the area immediately if it appears too dangerous; call your supervisor from a safe phone or cell phone.
6. Park close to the person served home, ensuring easy access to the car and an easy drive out.
7. Keep alert and on the lookout when walking to and from the home.
 - Leave your purse and jewelry in the trunk or at home.
 - Have the car door key in your grasp.
 - Walk erect and briskly.
 - When leaving the home, ask someone to walk you to the car or to watch while you get into your car.
8. Take a cellular phone, if available. Try not to use it in a dangerous neighborhood in order to decrease the possibility that observers misunderstand your job or so observers won't decide they want the phone.

Single Parent With A Jealous Partner Who Has A History Of Violence

1. Sit near an exit.
2. Let the person served know that you think the partner is there: "Do you think () would like to join us or would you like to reschedule?" "May I meet ()."
3. Be careful of your words and how actively listen, e.g., limit complements or levity, be more reserved, reflect primarily content or those feelings actually verbalized-especially if the topic involves the partner. Avoid validating complaints, negative observations about the partner or making inferences.
4. Try to engage the partner.
5. Try to normalize hesitation to meet or examine possible blockages, e.g., "I can understand how hard it might be to meet with someone who you have no reason to trust."
6. Discuss the situation with your supervisor-brainstorm options.

During A Session, Physical Violence Is Threatened Toward A Family Member

1. If, over the phone, there appears to be a potential for physical violence, ask family members to avoid "hot topics" until you arrive and/or ask family members to wait in separate rooms.
2. When violence is threatened during the session, stop what you have been doing and go into active listening mode. Now is not a time for problem solving, reframing, or pointing out irrational thinking.
3. Use "I" messages regarding your concern about the potential for someone getting hurt.
4. Use their names when talking or reflecting.

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Community Based Service Provider Safety Plan (continued)

5. Model calmness in your voice and movements-deep breathe if you are becoming anxious.
6. Think out loud: "It seems like everyone needs some space right now. Maybe we could all use a time out."
7. Attempt to distract the individual:
 - Stand up and say the individual's name in a loud voice.
 - Consider if it might be helpful to make a distracting noise-drop books, make a beeper go off.
 - Send a family member into the kitchen for a glass of water for you.
 - Ask if they could separate while you consult with your supervisor on the phone.
 - Tell them that what they are saying is so important that you want to write down a list of their issues.
9. Talk to the most upset person first-consider taking them for a walk to a neutral location if they are willing and if you think it would be safe.
10. Take the other family member(s) away from the situation if the family member(s) think it's safe to leave the individual.
11. If possible, help the person structure the interim time to facilitate calming.
12. Leave if you assess that your presence is escalating the individual or if you believe the situation will improve if you do.
13. Leave if a family member is telling you to.
14. Arrange a time you will make a check-in call, if appropriate.

If you fear that the parent will subsequently harm the child after you leave:

1. Use an "I" message to state your need to arrange a time-out placement and call the referral worker as appropriate.
2. Call your supervisor as soon as possible from a phone in a safe location.
3. If you believe a family member is in immediate physical danger and you are unable to separate family members, leave the home and call the police before calling your supervisor. Use an "I" message to tell the family of your need to call the police only if you think it would not escalate matter to say so.

If a weapon is involved:

1. Try to get the person to voluntarily put the weapon down-preferably put away in another room or locked in the trunk of a car.
2. Do not try to physically take the weapon from the person.
3. If the person refuses to put down the weapon, request to leave, to call your supervisor if you are not permitted to leave, or to take the person out for a drink/coffee if all attempts to leave fail.
4. If the person refuses to put down the weapon but allows you to leave, call police from the nearest phone before calling your supervisor.
5. Use "I" messages to present alternative behaviors.
6. Try to eliminate challenges or control issues.
7. Model and/or suggest peaceful alternatives and reinforced family members doing the same.
8. Use "I" messages to propose consequences of someone getting hurt.
9. If the weapon is locked away and is no longer an issue, follow other guidelines for threat of physical violence against family members.
10. Debrief incident with supervisor from the nearest phone in a safe location after leaving family.
11. Debrief the incident with team members in the next staff meeting or case consultation.

After the crisis passes and physical violence is no longer threatened:

1. Help the family remove or secure weapons or potential weapons.
2. Help individual family members structure activities which reduce likelihood of conflict, e.g., child staying overnight with a friend, adult engaging in a leisure activity, etc.
3. Encourage family members to stay away from "hot" topics until you have a chance to work further with them.
4. Schedule telephone check-ins between sessions.

Angry Parent That Has Just Hurt Their Child

1. If the injuries need medical attention, call 911.
2. Use lots of active listening.
3. If you think it is safe for the child and yourself, use an "I" message to state your obligation to contact the referral worker and give the parent the opportunity to report first.
4. If you do not think it is safe to discuss a (fill in required reporting mechanism) report in the presence of the parent, call your supervisor from a phone in a safe location.
5. Before leaving the home, help the individual parent or child reduce the likelihood of conflict by:

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Community Based Service Provider Safety Plan (continued)

- Structuring activities such as the child staying overnight with a friend (or in receiving home care), the parent engaging in a leisure activity, etc.
 - Encouraging the family members to stay away from “hot” topics until you have a chance to work further with them.
 - Helping the parent(s) identify calming self-talk and contract to call you when he/she feels the beginnings of escalation.
 - Schedule telephone check-ins between sessions.
6. If you do not think it is safe to leave the home with the child still there:
- Arrange to have the child relocated to a safe place or to go with you and call your supervisor from a phone in a safe location.
 - If the parent will not permit the child to leave or be taken out of the home by a family member nor permit you to leave with the child, call your supervisor from the home (Begin your contact with your supervisor with “I am calling from the home of _____”).
 - If the parent will not permit you to call from the home and if you do not think it will further escalate matters, use “I” messages to state your concerns and the consequences of having to leave the home without being able to ensure the safety of the child, e.g., “I am very worried because you’ve been having a very difficult time and that something might happen again that results in Billy being hurt. If I can’t take Billy with me while I consult my supervisor and you won’t let me call my supervisor from the home, my agency’s policy requires me to call the police.
7. If you still have to leave the child:
- Call the police (911) from the nearest phone to express your concerns. If you feel unsafe, consider asking the police to meet you to accompany you back to the home.
 - Return to the home if you are reasonably sure you are safe. If there’s some doubt, consult with your supervisor first.
 - If returning to the home is unwise, call the parent from a nearby telephone and attempt to keep him/her occupied.
 - Call your supervisor as soon as possible.

Unknown People In And Out, Drug Use Is Suspected and Weapons May Be Present

1. Using “I” messages, discuss concerns with the person served: “I am concerned that so many interruptions may not be helpful to our work together. I don’t feel comfortable with people coming and going. Is there another time we could schedule a meeting that might be more private?”
2. Discuss with the person served your concerns regarding drugs and/or their substance use. Attempt to actively listen to the person served concerns.
3. If the situation appears to be escalating, either because of your concerns of some external element in the home, LEAVE. If children are present, request permission to have a session with the children so you can remove them from danger.
4. From a safe phone, consult with your supervisor.
5. Prior to the next session, explore whether weapons are in the home and negotiate a secure plan, meet outside the home, or meet at a safer time.
6. If weapons are present in the home, review weapons section of this manual.
7. If the person served talks about feeling unsafe with the people in the home:
 - Determine whether the person served feels safe. If not, relocate to a safer place.
 - Mentally review your self-protection skills.
 - Help identify escape routes.
 - Have sessions at safer times or outside the home.
 - Determine the pattern of traffic, e.g., time of day, entrances, relationships, etc.
 - Help the person served get a phone if they don’t have one.
 - Help identify safe neighbors and get to know the neighbors yourself.
 - Help the person served develop a safety plan.
 - Help the person served get a self-protection device.
 - Discuss with person served options regarding moving.
 - Consult with your supervisor and team.

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Community Based Service Provider Safety Plan (continued)

You Find Child Home, But No ParentINTAKE: Finds children under the age of 12 present but no parent.

1. Do not enter home even if the children invite you in, unless the children are so young that you fear for their safety if left unattended.
2. Inquire as to whether the parents had left a message for you with the children, e.g., they called and said they would be ten minutes late or they just stepped out for a couple of errands.
3. Inquire as to how long parents have been gone and kids have been alone.
4. See if the children have a number to call for supervision, e.g., aunt, grandmother, neighbors. Have them call and request someone to supervise them.
5. Assuming the children are old enough to be safely in the home, wait in the car 30 minutes for the parents to arrive. If no show, call and inform your supervisor.
6. If no one can watch the kids and there's no indication of when the parent(s) will return, call () and request possible emergency placement.

REGULAR SESSION: Ongoing relationship with family, but finds children under age of 12 with no parent.

1. Consider the risks of entering the home. Weigh questions like whether you expected parents to be gone, whether danger is present for the child. It can be risky to be in the home without another adult present.
2. Inquire as to whether parents had left a message for you with the children.
3. Inquire as to how long the parents have been gone and the kids have been alone.
4. Take the child to a public place for the session if your agreement with the parent allows for this. Be sure to leave a note for parents including the exact time you'll return. Without prior permission to take the child away from the home for this session, meet on the front porch.
5. When the parents return, address your concerns regarding the child's safety. Assess the child's ability to refuse to answer the door for strangers; ability to call 911; other supervision resources; the child's ability to follow emergency procedures; the child's compliance regarding non-use of oven or other potentially dangerous appliances.
6. Work with the parents to develop a more comprehensive childcare plan if this situation is routine.
7. If the children are very young, consult with your supervisor; report, if necessary, to family services, and/or inform the family of the mandate to report them.

When Weapons Are Present In The Home

1. Discuss with the referring worker whether there have been past reports of violence.
2. Gather information from family members regarding their numbers, use, and storage condition.
3. Consult with your supervisor.

If there are past reports of violence and you feel uncomfortable.

1. Use "I" messages to express your concerns.
2. Provide the person served with alternatives such as:
 - Removing the pin from the gun.
 - Keeping the weapon in a different room.
 - Keeping the gun in the trunk of their car—even if just during sessions.
 - Utilizing the police's safe-keeping storage for the gun.
 - Having a family member monitor mood changes of the person with the weapon and checking by telephone with the family member before going to the home.
 - Asking the person served to come to the door unarmed.
3. Consider meeting outside the home if the person served refuses to reconsider his weapon storage.
4. If an option, carry a cellular phone.

If there are past reports of violence and someone appears impaired.

1. Meet outside the home.
2. Reschedule session.
3. If you are concerned for the safety of other family members, use an "I" message to express your concerns.
4. Discuss a temporary weapon-storage plan and/or possibility of children staying overnight at a friend's homes.
5. If you need to leave and are still concerned regarding the safety of family members, arrange a telephone check-in.
6. Consult with your supervisor from a phone in a safe location.

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Community Based Service Provider Safety Plan (continued)

Immediate Risk of Suicide

1. Stay calm/assess your own safety.
2. Use "I" messages: I'm concerned, I care, I'm taking this seriously.
3. Talk to the person about his/her thoughts/plans.
4. Unless you feel your own safety is in jeopardy, stay with the suicidal person as much as possible.
5. Get help from family members to structure environment (hide car keys, knives, pills, weapons).
6. Continue to talk, show interest and support.
7. Reflect feelings, discuss and emphasize the person served cognitive inhibitors that decrease the risk of suicidal behaviors (Against religious beliefs, etc...).
8. Try to contract a safety plan five minutes at a time until help arrives.
9. Call someone the person served feels is a support like immediate family members or clergy.
10. Consult with your supervisor.
11. If the person served refused all help, call the agency responsible for emergency hospitalization in your area for next steps. If you can't get advice from this agency, call 911.

If an adolescent is at risk of suicide:

1. Same as above.
2. Talk with your supervisor to assess your need to tell the parents.
3. Dispel myths with the parents (see below).
4. Review the warning signs with the parents (see below).
5. Get help from people like your supervisor, the child's family, or the referring social worker.

Warning signs:

1. Suicide threats.
2. Statements revealing a desire to die.
3. Previous suicide attempts.
4. Sudden changes in behavior (withdrawal, apathy, moodiness).
5. Depression (crying, sleeplessness, loss of appetite, hopelessness).
6. Final arrangements (giving away personal possessions).

Myths:

1. People who talk about suicide don't really do it.
2. Talking about suicide encourages it.
3. Only a certain type of person commits suicide.
4. Suicide is a lower class phenomenon or occurs in only certain ethnic groups.
5. Suicide is inherited and runs in certain families.
6. Suicidal people are mentally ill.
7. People under a psychiatrist's care rarely commit suicide.
8. An unsuccessful attempt at suicide is not to be taken seriously.
9. When an adolescent attempts suicide or commits suicide, it usually is an impulsive act.
10. If an adolescent has been depressed and the depression starts to lift, he/she is finally out of danger.

Signature:



Executive Director

04/04/08

Date

Health & Safety

SF-16

Safety Regulations for all Hazardous Equipment

Original Date: 4/25/14
 Revision Date: N/A
 Policy Number: SF-16
 Department of Origin: Health & Safety

Policy:

It is the intent of JAFCO to provide a safe environment to all persons served while maintaining compliance with CHAPTER 65C-14 which pertains to group care.

Scope:

Hazardous equipment refers to; anything that poses a risk to a child's safety or wellbeing. For example, propane gas tank, gallons of chlorine for the pool, buckets of paint, lawn mower, broken chairs, ladders, debris, medication etc. These items must be stored in a safe area where children shall not be able to access. For example in a; locked shed or locked storage room. However, if the children are participating in any activity that requires the use of any of these items, they are to be properly supervised by the direct care staff.

Procedure:

1. Staff shall have separate quarters such as bedroom and bathroom but close enough to allow for proper supervision.
2. The grounds shall be well kept. Indoor and outdoor recreation areas shall be provided with equipment and safety measures designed for the needs of the resident children according to the age, physical and mental ability of the children. The JAFCO Facility Manager shall conduct regular inspections and instruct workers according to maintenance needs. The Facility Manager shall create and enforce safety plans and conduct safety drills on an annual basis. Fire drills shall be conducted on a monthly basis.
3. Safety regulations shall be established for all hazardous equipment and children shall be prohibited from the use of such equipment unless it is included in planned and supervised work experience.
4. Pools shall meet the requirements of Chapter 514, F.S., and the administrative rules promulgated under Chapter 514; F.S. The JAFCO Facility Manager shall have a maintenance personnel monitor the pool area on a daily basis.

Signature:



04/25/14

Executive Director

Date

JAFCO Policy and Procedure Manual
Development

Revision Signature Page

DEV-1	Donor Privacy Policy
DEV-2	Donation of Goods and Services
DEV-3	JAFCO Children's Foundation Gift Acceptance
DEV-4	JAFCO Children's Foundation Investment
DEV-5	JAFCO, Inc. Gift Acceptance
DEV-6	Marketing Goals and Objectives

The above mentioned policies and plans have been reviewed and or revised by the executive director

Signature:

Executive Director

Date

Development

DEV-1 Donor Privacy Policy

Original Date: 08/12/11
Revision Date: N/A
Policy Number: DEV-1
Department of Origin:Development

Policy:

JAFCO is committed to respecting the privacy of our donors. We have developed the following Privacy Policy to ensure you that as a donor, your information will not be shared with any third party outside of JAFCO including individuals, other charities or other corporations.

Types of Information Collected and How It Is Used

When provided voluntarily by the donor in writing, verbally or on-line, JAFCO will collect personal information, such as name, home and business address, phone numbers, and email address. Credit card numbers are used only for donation or payment processing and are not retained for other purposes, unless donor requests to be charged a recurring gift. If you send a JAFCO tribute card contact information about the recipient will also be collected from you in order to process and mail tribute. Donors will receive invitations to events in the mail and via email, direct mail solicitations and newsletters.

Security

JAFCO uses state of the art security measures and password protected software to ensure the security of your personal information on our computer system and to protect it from unauthorized access. Donor information is stored securely within a donor management database with access that is restricted to authorized personnel.

We assure you that all donor information will be kept confidential. Uses of donor information will be limited to the internal purposes of JAFCO and only to further raise awareness and funds for JAFCO programs.

Sharing of Personal Information

JAFCO does not sell, rent, exchange or otherwise share our mailing lists with anyone outside of the JAFCO organization. Any personal information you provide to JAFCO will not be disseminated to third parties.

Removing Your Name from Our Mailing List/Updating Your Personal Information

It is our desire to only mail to our donors who wish to receive it. Please contact us at info@jafco.org if you wish to be removed from our mailing list at any time or click on the unsubscribe link at the bottom of each email. If at any time, you would like to correct the personal information we have about you or if you would like to change your preferences for contacts from us, you can let us know by contacting info@jafco.org.

Links

This website contains links to other sites. Please be aware that JAFCO is not responsible for the privacy practices of other sites. We encourage users to be aware when leaving our site to read the privacy statements of each website that collects personally identifiable information. This Privacy Policy applies solely to information collected by this site.

Emails

JAFCO sends out periodic emails and e-blasts to donors on our mailing list. Every email blast from JAFCO contains an option for the user to unsubscribe should they desire to do so.

Photographs

Photos taken at events may be shared without the expressed written consent of the donor with media, posted on the JAFCO website, or published in the JAFCO newsletter for the purpose of raising funds and awareness for JAFCO.

Participation in photo shoot implies consent for use of photos for purposes expressed above.

Development

DEV-1

Donor Privacy Policy (continued)

Changes to Privacy Policy

If changes are made to this Privacy Policy, we will post those changes on this page so our users are always aware of what information we collect, how we use it, and under circumstances, if any, we disclose it.

Contacting Us

If you have comments or questions about the JAFCO Privacy Policy, please contact us via email at info@jafco.org.

Signature:



Executive Director

08/12/11

Date

Development

DEV-2

Donation of Goods and Services

Original Date: 03/08/11
Revision Date: NA
Policy Number: DEV-2
Department of Origin:Development

Policy:

- Our donors have a right to receive prompt acknowledgement and personal thank you letters for the gifts they make to our organization.
- Our donors are welcome to designate their gifts to specific programs if they choose.
- Our donors have the right to the organization's most recent financial statements including the 990, annual agency report, and most recent audit.
- Our donors can expect that all relationships with individuals representing our organization will be professional in nature.
- Our donors have a right to be ensured that all information will be kept confidential. See Privacy Policy (#DEV-1)
- Our donors have a right to be listed anonymously and be excluded from the donor listing in the agency annual report if they choose.
- Our donors can expect to be treated respectfully.

Signature:



Executive Director

03/08/11

Date

Development

DEV-3

JAFCO Children's Foundation Gift Acceptance

Original Date: 03/08/11
Revision Date: NA
Policy Number: DEV-3
Department of Origin:Development

Policy:

JAFCO is a 501 C-3 non-profit agency and the recipient of a variety of donations. It is the policy of JAFCO to ensure a strong base of ongoing financial support by soliciting donations from a wide range of sources. It is JAFCO's primary responsibility to use any gifts to further the organization's mission, goals and objectives. To fulfill this purpose JAFCO has instituted an organized program for obtaining gift support from individuals, foundations, corporations and organizations.

JAFCO generally accepts charitable gifts in the form of cash or check, pledges, securities, trusts, insurance policies, real estate and other gifts-in-kind and special deferred gifts. All gifts are recorded and acknowledged promptly through the JAFCO office, within 48 hours whenever possible. Gifts of \$500 or more will also be personally acknowledged by the Director of Southeast Development, Executive Director and/or others who deem it appropriate. All records shall be kept strictly confidential in accordance with the JAFCO Donor Privacy Policy.

Current Giving

- Cash Gifts: All checks should be made payable to JAFCO rather than to any individual who represents JAFCO.
- Publicly Traded Securities: readily marketable securities, such as those traded on a stock exchange, can be accepted by JAFCO. Securities will be sold immediately. For gift crediting purposes, the value of the securities is the average of the high and low on the date of the gift.
- Bonds: Gifts of bonds which require a "holding" period will be accepted and cashed when the holding period has expired.
- Gifts-in-Kind: including art objects, equipment, real estate, etc. will be reviewed by the JAFCO Board of Directors prior to acceptance to ensure that acceptance will not involve financial commitments or obligations disproportionate to the usefulness of the gift. When gifts-in-kind are given to JAFCO with the intent of the donor to receive a tax deduction, it shall be the responsibility of the donor, not JAFCO, to obtain an appraisal of the gift for tax purposes. JAFCO shall not be involved in the appraisal process, as this could result in the appraisal's accuracy and objectivity being challenged by the Internal Revenue Service. It is in the donor's best interest that JAFCO neither directly provide nor be responsible for securing the services of appraisers in conjunction with gifts to JAFCO.
- Life Insurance: JAFCO will accept a gift of life insurance policies only when it is named as the owner and beneficiary of the policy.
- Retirement Plans: Gifts of outright cash and marketable securities to JAFCO are encouraged when made through donor retirement programs. Stock, cash, and/or personal property held in a retirement fund must meet agency policies for those types of assets and existing law requirements.
- Real Estate: Real estate may include personal residences, commercial buildings, rental properties, leasehold interests, condominiums, mineral rights, land (residential, timber, farms, etc.), and any other interests in real estate. All gifts of real estate should be sold and converted to cash as soon as possible. The donor shall be responsible for obtaining and covering the cost of an appraisal of the fair market value and an environmental audit of the property. If the property is subject to encumbrances, contact with the party or financial institution will be required. There may be restrictions placed upon the real estate. Moreover, it is important to identify other limitations or restrictions on title for sale purposes and that there are no restriction(s) placed by the donors.

Deferred Giving

The JAFCO Planned Giving Program involves a variety of volunteers, staff and professionals. JAFCO requires that all authorized representatives within the community maintain the highest standards of personal and professional conduct (i.e. they will not grant or accept favor for personal gain).

JAFCO does not pay a "finders' fee" or a commission percentage or other "special compensation" to any individual or parties for gifts received by the agency. All JAFCO Development Staff are salaried employees and do not receive commissions based upon donations made to the agency.

Development

DEV-3

JAFCO Children's Foundation Gift Acceptance (continued)

- Bequests: All bequests received by JAFCO are placed into the JAFCO Children's Foundation. A donor may provide a bequest which may involve cash and marketable securities, real estate or personal property. The liquidation of the non-cash gifts will follow the appropriate policies for these items as outlined in the bequest. Staff and professional advisors will review the marketability, accurateness of appraisal and the capabilities of JAFCO to safeguard all non-cash gift bequests.
- Charitable Remainder Trusts (Unitrust or Annuity Trust): These trusts are irrevocable in nature. A gift placed in an annuity trust provides a fixed income to the donor(s) and a Unitrust pay a fixed percentage of the annual value of the trust fund to the donor. In either trust, the remainder is payable to a charity such as JAFCO upon the death of the donor, as a general rule. Cash and marketable securities are the usual and preferred assets for these trusts. Real estate producing an annual income may also be used to establish a trust. All policies regarding real estate gifts should be followed in such cases.
- Charitable Lead Trust: A Charitable Lead Trust created by a donor naming JAFCO as a beneficiary provides JAFCO with an annuity or Unitrust annual payment rather than the remainder interest. In this trust, the donor irrevocably transfers assets to a Trustee and provides for the trust annual payment be paid to JAFCO for a certain number of years. After such years have elapsed, the trust principal reverts to the donor or to one or more beneficiaries identified in the trust. A Charitable Lead Trust may be funded through cash, securities or income producing real estate. The donor is responsible for any fees required for an appraisal and/or professional consultation (legal, etc.).
- The Charitable Gift Annuity (Life Income Annuity): A Charitable Gift Annuity is an irrevocable contract between JAFCO and the donor. JAFCO agrees to pay the donor (or other person named by the donor) a lifetime annuity in return for a gift of cash or securities. The payment may continue for the life of a second individual, such as a spouse. The annual payment is a fixed sum, the amount of which is based on the size of the gift and the number and ages of the beneficiaries. Upon death of the last beneficiary, the remaining principal is returned to JAFCO. There shall be no more than two beneficiaries for a charitable gift annuity.

Signature:



Executive Director

03/08/11

Date

Development

DEV-4

JAFCO Children’s Foundation Investment

Original Date: 03/08/11
 Revision Date: NA
 Policy Number: DEV-4
 Department of Origin:Development

Policy:

The sole purpose of the JAFCO Children’s Foundation is to support the operational needs of JAFCO, Inc. All funds of the organization are held by the JAFCO Children’s Foundation, with oversight by the JAFCO Board of Trustees, as a fiduciary responsibility. Both restricted and unrestricted funds are held by the agency for the sake of carrying out its mission and purposes. The following investment objectives and policies have been created to further the long term mission of JAFCO.

Delegation: The JAFCO Children’s Foundation Board has delegated supervisory authority to its Finance Committee. The Finance Committee is responsible for reporting on investments to the full board at each board meeting. In carrying out its responsibilities, the Finance Committee and its agents will act in accordance with these Investment Policies and all applicable laws and regulations. The Board reserves to itself the exclusive right to revise these Policies.

The JAFCO Children’s Foundation Board of Trustees and its Finance Committee are authorized to retain one or more Professional Money Managers to assume the investment management of funds and assets owned or administered by the organization. In discharging this authority, the Finance Committee can act on behalf of the Board and may receive reports on, and enter into agreements with such Managers. The Board may also grant exceptions to the Investment Policies when appropriate.

Objectives:

1. The primary investment objective of the organization is to preserve and protect its assets, by earning a total return for invested funds (e.g. operational, endowment, etc.) appropriate to liquidity needs and risk factors.
2. To accomplish the JAFCO investment objectives, the Professional Money Manager is authorized to utilize portfolios of equity securities (common stocks and convertible securities), fixed-income securities and short-term (cash) investments. In order to protect its assets, the JAFCO Board has authorized that no greater than 50% of assets be invested in equities at any time.

Reporting: The Professional Money Manager will provide the monthly written statements containing all pertinent transaction details directly to the President of the Children’s Foundation and JAFCO CFO who will disseminate the information to the Finance Committee. Statements will be provided to the full Board at meetings or upon request.

All endowments, special purpose funds, estate gifts, capital and operational pledges, and non-recurring gifts over \$5,000 shall be deposited into the JAFCO Children’s Foundation for investment. Restricted funds are kept in separate accounts for the purposed that they were established.

Signature:



03/08/11

Executive Director

Date

Development

DEV-5

JAFCO, Inc. Gift Acceptance

Original Date: 03/08/11
 Revision Date: NA
 Policy Number: DEV-5
 Department of Origin:Development

Policy:

JAFCO is a 501 C-3 non-profit agency and the recipient of a variety of donations. It is the policy of JAFCO to ensure a strong base of ongoing financial support by soliciting donations from a wide range of sources. It is JAFCO's primary responsibility to use any gifts to further the organization's mission, goals and objectives. To fulfill this purpose JAFCO has instituted an organized program for obtaining gift support from individuals, foundations, corporations and organizations.

JAFCO generally accepts charitable gifts in the form of cash or check, pledges, securities, trusts, insurance policies, real estate and other gifts-in-kind and special deferred gifts. All gifts are recorded and acknowledged promptly through the JAFCO office, within 48 hours whenever possible. Gifts of \$500 or more will also be personally acknowledged by the Director of Southeast Development, Executive Director and/or others who deem it appropriate. All records shall be kept strictly confidential in accordance with the JAFCO Donor Privacy Policy.

Current Giving

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- Publicly Traded Securities: readily marketable securities, such as those traded on a stock exchange, can be accepted by JAFCO. Securities will be sold immediately. For gift crediting purposes, the value of the securities is the average of the high and low on the date of the gift.
- Bonds: Gifts of bonds which require a "holding" period will be accepted and cashed when the holding period has expired.
- Gifts-in-Kind: including art objects, equipment, real estate, etc. will be reviewed by the JAFCO Board of Directors prior to acceptance to ensure that acceptance will not involve financial commitments or obligations disproportionate to the usefulness of the gift. When gifts-in-kind are given to JAFCO with the intent of the donor to receive a tax deduction, it shall be the responsibility of the donor, not JAFCO, to obtain an appraisal of the gift for tax purposes. JAFCO shall not be involved in the appraisal process, as this could result in the appraisal's accuracy and objectivity being challenged by the Internal Revenue Service. It is in the donor's best interest that JAFCO neither directly provide nor be responsible for securing the services of appraisers in conjunction with gifts to JAFCO.
- Life Insurance: JAFCO will accept a gift of life insurance policies only when it is named as the owner and beneficiary of the policy.
- Retirement Plans: Gifts of outright cash and marketable securities to JAFCO are encouraged when made through donor retirement programs. Stock, cash, and/or personal property held in a retirement fund must meet agency policies for those types of assets and existing law requirements.
- Real Estate: Real estate may include personal residences, commercial buildings, rental properties, leasehold interests, condominiums, mineral rights, land (residential, timber, farms, etc.), and any other interests in real estate. All gifts of real estate should be sold and converted to cash as soon as possible. The donor shall be responsible for obtaining and covering the cost of an appraisal of the fair market value and an environmental audit of the property. If the property is subject to encumbrances, contact with the party or financial institution will be required. There may be restrictions placed upon the real estate. Moreover, it is important to identify other limitations or restrictions on title for sale purposes and that there are no restriction(s) placed by the donors.

Signature:



03/08/11

Executive Director

Date

Development

DEV-6

Marketing Goals and Objectives

Original Date: 03/08/11

Revision Date: NA

Policy Number: DEV-6

Department of Origin:Development

Objective:

- Increase awareness and branding of JAFCO throughout South Florida.
- Position JAFCO as the leading foster care organization in South Florida, vastly contributing to its name recognition and reputation.
- Establish key JAFCO executives, board members and A-list donors as leaders in the communities of Palm Beach, Broward and Miami-Dade counties.
- Generate positive media coverage of JAFCO employees, volunteers, success stories, donors, services, special events, milestones and organization history – to increase public awareness, support, donations and volunteerism.
- Publicize the organization's key events to increase participation, support, community awareness and excitement.
- Identify new corporate relationships and opportunities in the community.

Public & Media Relations:

The coverage created by a consistent media and public relations campaign is vital in raising the visibility of any not-for-profit or community service organization. The exposure borne from such efforts enlighten media and donor communities. The efforts boost exposure, increase fundraising efforts, and enhance the organization's mission. Through strategic media relationships and on-going press initiatives we need to effectively elevate the understanding, knowledge and awareness of JAFCO.

Publicity Strategy:

Publicity Strategy that focuses on two central elements: Press Releases and Trend Stories / Breaking News.

1. **Press releases:** To market and promote charitable organizations, drafting press releases that employ thoughtful, evocative headlines and relevant, newsworthy content is pertinent to the process. For JAFCO, the focus on those programs and news that traditionally have supported the organization in its mission to be a vital part of the local child welfare community: fundraising events, programs, statistics on foster care and human interest stories. This process ensures the message is on target and most likely to receive a welcome response from the media.
 - a. Relationships in the community will ensure messages and outreach are more warmly received than if they were "blasted" blindly to media representatives. Such outreach to a vast media network and contact list ensures the best, most appropriate potential for coverage. Generally speaking, media targets will include:
 - Broadcast assignment editors/producers
 - Community reporters
 - Lifestyle/Society reporters
 - Calendar editors
 - Political and public affairs reporters
 - b. A more specific list will be discussed as media topics are conceived and developed.
 - c. Press releases will be drafted, disseminated and followed up on a timely basis in accordance with the newsworthiness and timeliness of events. Where appropriate, photographs will be included to enhance the news and increase the likeliness of publication.
 - d. The mere distribution of a press release does not always suffice to ensure publication. Follow up to encourage placement, offer interviews or recommend / build a larger story when appropriate. We will call and/or email the writers to gauge their interest, and see how we can help to secure placement.
2. **Special Events:** As with many charities in South Florida, special events drive a majority of the donations and garner the greatest media attention. Promote each special event in two ways: pre-event publicity and post-event publicity.

Development

DEV-6

Marketing Goals & Objectives (continued)

- a. **Pre-event:** Calendar announcements are drafted well in advance of the event to meet deadlines for submission to local newspapers, glossy magazines, Websites, and television community calendars. Additionally, a news release notifying the community of the event is distributed to all local society papers and community publications. Profiles of the key players involved are always used to create a human-interest angle for the event. Furthermore, we always invite the local media, whenever possible, to attend the event and cover it for their publication. Beyond the obvious calendar/event placement opportunities, we work closely with the media to gauge their interest in using the upcoming client event as part of a larger story, whether on the event, a trend, or other newsworthy topic for coverage.
 - b. **Post-event:** Significant opportunities exist for post-event publicity. For private events, we obtain photographs taken by the event photographer. The press release and photos are then distributed to local society sections and other media for post-event coverage.
3. **Human Interest Stories:** An often-overlooked element of effective community and non-profit publicity is human-interest stories centered on, or generated by, the organization's donors, board members and beneficiaries. These can include profiles of board members and major donors, or foster children who have succeeded because of support from the organization. Once people and ideas have been identified, we will conduct an interview to draft a press release or pitch letter about their gift/accomplishment. The appropriate publications and news outlets will then be contacted about the story, based upon city of residence. We will always follow up with reporters, to ensure placement.
4. **Trend Stories and Breaking News:** A second, vital component to any publicity campaign is to tie the client into trend stories and/or breaking news. When events happen, media need spokespeople. We must regularly reviews the local media's editorial calendars and frequently meets face-to-face with journalists, reporters, editors, assignment editors and producers to stay on their radar screens. This ongoing exposure and relationship-building effort translates into media opportunities.
5. **Press Conferences:** There may be instances when press conferences are needed, whether a crisis situation, a new program announcement, or some other event requiring a public forum. We must tap into outstanding relationships with print and electronic media to stage a press conference at a moment's notice, to inform the community about breaking news.

Signature:



Executive Director

03/08/11

Date