Our Mission

Bancroft provides opportunities to children and adults with diverse challenges to maximize their potential.

Our Vision

A community where every individual has a voice, a purpose, and a rightful place in society.

Our Core Values

Compassion
Accountability
Respect
Empowerment
Safety
Table of Contents

Family Engagement ................................................................. 6
Introduction .............................................................................. 8
Philosophy of Support ............................................................... 9
Individual Program Planning ................................................... 10
Program/Treatment ................................................................. 11
Rights and Responsibilities ...................................................... 13
Confidentiality/Privacy Regulations ........................................ 13
Recreation, Socialization and Leisure Activities ....................... 14
Behavior Intervention ............................................................... 15
Health/Medical/Nursing Services ............................................. 16
Safety ........................................................................................ 20
Nutrition Guidelines ................................................................. 21
Bancroft’s General Social-Sexual Principles ............................. 23
Religion .................................................................................... 24
Financial ................................................................................... 25
Communications ....................................................................... 26
Program Contact Hours ............................................................ 26
Phone Contact .......................................................................... 26
Urgent Communications (Non-Medical) ........................................ 27
Visits to the Program ................................................................. 29
Home Visits ................................................................................. 29
Relationships Between Families and Staff .................... 30
Tips for Avoiding and Resolving Conflicts With Staff ............... 31
Grievance Process ................................................................. 33
Anonymous Reporting Line ......................................................... 35
Investigations ........................................................................... 35
Discharge Policy ....................................................................... 38
Family Support/Involvement ....................................................... 40
Family Communications ............................................................. 40
Advisory Committees ................................................................. 41
Family Satisfaction Surveys ......................................................... 41
Legislative Educational Advocacy ............................................... 42
Resources .................................................................................. 42
Volunteerism .............................................................................. 42
Contact Us ................................................................................. 43
Family Engagement

Bancroft embraces family involvement knowing the importance for the growth and development of the children and adults we serve and support. As a licensed residential service provider, we want to provide a better understanding of our goals to best manage the program and those we serve and how you can assist.

- Participation and attendance in planning meetings or provide input in the development or updating of your son or daughter’s Service Plan is strongly encouraged. You will be expected to support and follow the Interdisciplinary Team’s recommendations for treatment in the development of the Service Plan.

- Routinely share information that would be helpful in meeting the needs of your son or daughter with your primary contact at Bancroft.

- Make sure the program has up-to-date contact information for you and all approved visitors at all times. Notify Bancroft when you will be unreachable for a certain period of time (based on individual situation), and provide guidance in the event of an emergency.

- Communicate with primary contact at least 48 hours in advance to schedule visits to the family home (unless emergency).

- Advise the program of when you expect to bring your son or daughter back to program (time and day) and follow-through as specified (or call if a change needs to be made).

- Unless special arrangements are made in advance, please return your child back to the program no later than 8:30 p.m.
- When medications are taken for home visits, unused medications must be returned to the appropriate staff (Nursing Office in Haddonfield Campus Program and Senior Associate in Community Programs) upon return to program.

- Please respect the privacy and rights of others living in the home/apartment at all times, taking guidance from the staff on what is best for all individuals in the home.

- Understand that in a residential program — unlike a typical family home — the needs of the group sometimes must take precedence over the preference or interest of an individual.

- When your son or daughter is on a prescribed diet while at Bancroft, it is important to follow the same diet when he/she is with the family.

- Our staff is there to provide support and guidance for your loved one, please be sure to treat staff members with respect. If you have a situation with a staff member that requires attention please contact the supervisor/manager as soon as possible.

- Advocate for your family member through the proper channels of communication at Bancroft; take an issue to the supervisor closest to the situation, and if necessary, up to and including the executive leadership or Family Advocate.

- Support requirements related to disability programs (e.g., SSI, Medicaid), funding or insurance and other processes required on behalf of your son/daughter.

- Ensure prompt payment of moneys owed to Bancroft for provision of services.

- If you expect to manage your son or daughter’s healthcare while he/she is in a Bancroft community-based program, the following will also be required:
- Initiate and follow-through on healthcare appointments within required timeframes.

- Provide copies of healthcare examination reports to Program Manager as they occur. Ensure physician recommendations are clearly outlined on reports.

- Follow all licensing requirements for medication management (e.g., prescriptions to match labels, all required information on label, etc.), and provide updated prescriptions and over-the-counter medication records to the program when changes occur.

- Provide medication at least seven days prior to depletion of supply at program(s).

- Notify Program Manager of scheduled appointments two weeks in advance.

**Introduction**

When we reflect on what’s important in our lives, we tend to think of the things that bring us meaning and fulfillment — the love of family and friends, the feelings of accomplishment we get at work, the joy of knowing that who we are makes a difference. One’s “quality of life” depends on having an abiding sense of self-satisfaction and fulfillment.

An active and satisfying quality of life for the people we serve has always been at the heart of Bancroft’s programs and services. Margaret Bancroft taught us that the uniqueness of each person and the special circumstances that impact the totality of his/her life must be appreciated. Families are an important part of the lives of those we serve and, therefore, positive family involvement is supported and encouraged.
Bancroft’s programs and services are based on a person-centered philosophy of care. Person-centered care is respectful of the life dreams of each person. It emphasizes the strengths of the individual and looks at all the supports that are available to help him/her meet his/her life goals. Traditional models of care emphasize deficits and assume that organizations can provide all the services needed to reduce these deficits. Person-centered planning looks to community and the individual’s circle of support to meet life goals. Person-centered planning emphasizes relationships.

**Philosophy of Support**

Bancroft’s philosophy of support is to provide and promote person-centered supports that are specifically geared to each individual’s unique strengths and needs, and encourage greater fulfillment and participation in life.

- We support individual choices that are achieved through positive supports and compensatory techniques that can vary with levels of independent functioning and self awareness.

- We embrace families as an integral part of our treatment team.

- We utilize applied behavior analysis (ABA) as the theoretical foundation and main methodology of our behaviorally and cognitively based, biopsychosocial interventions.

- We provide outcomes-based therapies, which are supported by data-driven decision models that allow for the development of comprehensive, functionally relevant goals that maximize independent living skills, choice-making, and encompass lifelong learning.
Our goal is to help each individual participate in community activities, social relationship development, religious, recreational, and cultural opportunities throughout his/her lifetime.

It is through our combined efforts that we will achieve our mission to support those with intellectual and developmental challenges and acquired brain injuries in achieving their life goals while being recognized as valued and respected members of our world.

**Individual Program Planning**

Each person supported by Bancroft has a Service Plan that specifies the programs and/or services needed to maximize his/her developmental potential. These plans are known as Individualized Habilitation Plans (IHP) for residential services and Individualized Education Plans (IEP) for educational programs. Services provided are in accordance with generally accepted professional standards, and are provided in a setting and a manner that is least restrictive of personal liberty. The services requested by the individual and/or his/her guardian shall be identified and addressed by the Interdisciplinary Team (IDT) as appropriate, through the individualized planning process, and provided within available resources.

An IDT is established for each person to develop a comprehensive plan for the delivery of services. The composition of each team is determined by the needs of the individual, and includes him/her and his/her legal guardian (as appropriate). The team will assess, develop, monitor, and address the person’s program on a regular basis, based on his/her needs and desires.

Please note: The word “team” used throughout this Handbook refers to the individual’s Interdisciplinary Team.
Program/Treatment

Bancroft will provide services in accordance with the individual’s Admissions Agreement and Service Plan (e.g., IHP, IEP).

*Families may expect that Bancroft will…*

- Work with the IDT, including the individual and guardian, to develop and implement a Service Plan.

- Discuss proposed goals and objectives in the Service Plan, with the understanding that changes will be made only when agreed upon by the Team.

- Send Progress Reports to guardian regularly.

- Upon request of the guardian, provide a copy of the draft Service Plan prior to the meeting where approval will be requested.

- Plan effectively in advance of significant program changes (transfers, moves, housemate changes, etc.). Exceptions to this may occur when changes must be made due to safety issues within the program. In those cases, Bancroft will notify the family/guardian within 24 hours.

- Assist the individual in maintaining good personal hygiene (including bathing or showering, toileting, washing hair, brushing teeth, shaving, nails clipped, haircuts, etc.), as well as assistance as required to care for clothing, linens, and other personal possessions.

- Work with individual (and others as necessary) to keep home/apartment clean and in good repair.
- Provide staff training to maintain safe conditions and prepare staff and children for emergencies.

The guardian is expected to…

- As a member of the team, participate in initial and annual program planning meetings in person or by teleconference and support the team’s decisions.

- Attend or provide input at or prior to the Pre-IHP (Individual Habilitation Plan) IDT meeting.

- Once the Service Plan is approved, support and follow the Team’s recommendations for treatment. When there is disagreement after the Service Plan has been finalized, the Team shall meet to discuss the proposed modification; however, changes will be made only when approved by the Team. (Please note: Due to licensing requirements, refusal to sign the Service Plan will not preclude the implementation of the Plan; disagreements may be appealed, but cannot delay the implementation of the Plan.)
Rights and Responsibilities

The children and adults served by Bancroft are treated with dignity and respect. All individuals supported by Bancroft have the fundamental right to be free from abuse, neglect, exploitation, or other mistreatment. Bancroft staff members facilitate an ongoing process (regularly and upon request) of informing, affirming and protecting the rights of each person served, encouraging the positive involvement of parents/guardians/advocates throughout the process. If, at the discretion of the Program Director, it is felt that certain rights would be clinically contraindicated, proposed restrictions would require review and approval by the Interdisciplinary Team, Bancroft Behavior Management Committee, and the Bancroft Human Rights Committee. (Refer to New Jersey State Rights Statement for people in licensed residential programs in the Appendix.)

Confidentiality/Privacy Regulations

It is the policy of Bancroft that staff members and all other persons who are authorized to have access to files, records, and electronic data respect the confidentiality of this information, particularly individually identifiable financial and medical information. Verbal discussion about an individual’s clinical/behavioral/personal information in a public setting (on or off Bancroft properties) is strictly prohibited, as well, and only those staff directly involved in care or treatment of an individual should discuss or share information about him/her. Please refer to the Appendix for a full copy of our HIPAA Privacy Regulations.
Recreation, Socialization and Leisure Activities

Bancroft will request the child’s preferences in terms of recreation/socialization activities upon admission and annually (with assistance of family member/guardian, as requested), and will support active participation and attendance in preferred activities as appropriate.

*Bancroft will*...

- Encourage/support the child to participate in his/her preferred recreational/social activities, in accordance with the individual’s preference survey and Service Plan.

- Notify guardian in advance of plans for overnight trips, or other extraordinary activities and communicate with guardian ahead of time, whenever possible, if plans change. When feasible, the guardian shall be informed in advance of any extraordinary costs expected in association with an opportunity (activity).

*The guardian will*...

- Notify program staff in advance of any activities in which the individual must not participate due to medical or religious reasons. A physician’s note for the restriction shall be provided by the guardian at the time of making the request to excuse an individual from activities for medical reasons. The IDT shall also be advised of the request, and the Team’s agreement shall be documented in the Service Plan.

- If not in agreement with the types and/or frequency of recreational/socialization activities, review preference survey completed by the child and discuss specific disagreements with the Program Advocate or Manager.
Behavior Intervention

Every individual has the right to the most humane and effective education and treatment intervention available. Our approach is individualized, least restrictive and positive and evidenced based. For those children whose behaviors are injurious and detrimental to themselves and/or others, our approach is to use positive procedures prior to using any restrictive procedures to reduce inappropriate behaviors. It is acknowledged that for some individuals served by Bancroft, appropriately selected and implemented Behavior Intervention Plans are critical to their progress. These plans maximize the effects of skill building programs by decreasing the frequency and/or duration of problem behaviors. All individually prescribed behavior programs are designed in accordance with professional ethical standards and currently accepted best practice. Plan authors supervise and monitor the effectiveness of all intervention procedures through the collection and review of quantitative data. (Refer to the Appendix for an overview of behavioral interventions.)

Families may expect that Bancroft will…

- Notify the guardian within 24 hours of any unusual behavioral incident.
- Require and ensure staff are trained on behavior intervention procedures to prevent injury and assure appropriate interventions.

The guardian is expected to…

- Support direct care staff when they are implementing a plan.
- Participate in parent training of Behavior Intervention Plan.
- Follow the plan when visiting the program and during home visits.
Health/Medical/Nursing Services

Bancroft is committed to providing outstanding healthcare services. In our community-based programs, registered nurses provide nurse case management, assisting in the coordination of healthcare services. For our campus and Lindens programs, nurses are available 24 hours a day and are supported by advanced practice nurses, a board-certified psychiatrist and pediatric neurologist.

Bancroft will initiate, follow-through and communicate with the guardian about appointments for physicians, dentists and other healthcare professionals (or as otherwise agreed to in advance) for routine and other physical care. Basic preventative healthcare services include: one physical examination per year, two dental examinations per year, and one eye exam per year.

Healthcare services clinicians will communicate regularly with parents/guardians. Nursing services for our campus and Lindens programs include medication administration, physical assessment and ongoing care of your loved one. A licensed nurse practitioner is available for children living in the campus and Lindens programs. Along with the nursing team, the advanced practice nurse (APN) is available for consultation and provides evaluation as needed and care coordination with the primary care provider.

On admission to the campus and Lindens programs, the APN will complete a comprehensive evaluation and contact the parent/guardian to establish goals for healthcare treatment. A board certified psychiatric advanced practice nurse will provide on site medication management in collaboration with a board certified psychiatrist and the clinical team, and will work closely with the parent/guardian to establish goals for psychotropic medication management if needed.
Families may expect that Bancroft will…

- Assign a Nurse Case Manager to oversee medical care for each child served residentially.

- Schedule and follow-through with annual examinations and follow-up visits in a timely manner.

- Schedule and follow-through with non-routine appointments in a timely manner.

- Ensure that each individual is provided with an adequate supply of medications at all times.

- Communicate with guardian on non-routine health issues and medication changes in a timely manner.

- Forward copies of reports on non-routine matters (e.g., special tests, evaluations, etc.) to the guardian upon request and completion of proper consents if appropriate.

- Respond to medical emergencies by calling 911, and providing all information needed and available to help the individual get appropriate care.

- Support the individual during his/her time in the hospital emergency room. After admission to the hospital, Bancroft is not able to provide staffing coverage. However, Bancroft will communicate regularly with the hospital staff, will visit the hospital to ensure that your family member’s needs are being met, and will assist in communication of special needs to hospital staff.
• Proactively review needs/expectations with the team in advance of a medical problem (annually), to confirm whether there would be any special needs during a hospitalization.

**The guardian is expected to…**

• Provide appropriate health insurance for son/daughter and make sure nursing and program staff have up-to-date health insurance information including pharmacy coverage.

• Avoid cancelling medical appointments, and make sure deductibles, co-pays, and co-insurance (as applicable) are paid on a timely basis.

• Consent to and support clinician’s recommendations for medical treatment.

• Provide needed support to the individual while he/she is hospitalized, and if this is not possible, seek additional support from hospital administrators, if required.

• Review needs/expectations with the team annually to determine whether there would be any expected special needs during a hospitalization.

In special situations where the guardian chooses to manage the individual’s healthcare (in community based programs only), the following will clarify the responsibilities, which must be followed due to licensing requirements:

**In these special situations, Bancroft will:**

• Communicate promptly with guardian when healthcare issues need to be addressed. If a medical problem is not an emergency, but requires immediate attention and the guardian cannot be reached in a timely manner, Bancroft will seek medical treatment as appropriate.
In these special situations, the guardian will:

- Initiate and follow-through on healthcare appointments within required timeframes.

- Provide copies of healthcare examination reports, etc. to the Program Manager as they occur. Ensure provider recommendations are clearly outlined on reports.

- Provide medication at least seven days prior to depletion of supply at program(s), and make sure all compliance requirements are met as per instructions from nursing or program management (e.g., prescriptions to match labels, labels include specific required information, etc.).

- Provide updated prescriptions and over-the-counter medication records to the program annually or when changes occur.

- Notify Program Manager or other primary contact person of upcoming appointments at least two weeks in advance, so plans can be made for a staff member to accompany family, when appropriate.
Safety

For any program at Bancroft to achieve its goal of helping children and adults achieve their goals for greater independence, the program must first be safe. The health, safety, and welfare of the children we support is our first priority.

Bancroft will…

- Ensure every staff member has successfully completed a criminal background check and a physical to ensure that he/she can safely perform the duties of the job.

- Provide a thorough seven day orientation program to new staff where they receive state-approved training in Medication Administration, CPR and First Aid, as well as training relating to appropriate interactions and professionalism. Some of these trainings also require an annual recertification.

- Provide site specific training to each staff member before he/she works with an individual, including a review of each person’s service plan and relevant policies and procedures.

- Require all new staff to be mentored by senior staff so they can observe and assist in the performance of duties prior to allowing new staff to perform those duties on their own.

- Conduct a monthly safety check in each program to promptly and proactively address any potential concerns.

- Have Quality Assurance Department conduct an inspection of each site at least twice a year. These inspections will include a review of the condition of the premises, documentation of staff training, as well as medication documentation and practices.
The guardian will...

- Alert the staff or manager of any concerns related to safety of his/her child or others immediately.

Nutrition Guidelines

Bancroft recognizes the importance of proper nutrition in maintaining good health and quality of life for the individuals it serves and, therefore, establishes processes designed to support the provision of a proper diet in all program areas.

Unless otherwise specified by the individual’s medical needs, his/her diet shall be prepared in accordance with the latest edition of the Dietary Guidelines for Americans prepared by the Dietary Guidelines Advisory Committee appointed by the Secretaries of Health and Human Services (HHS) and of the United States Department of Agriculture (USDA). Diets shall be adjusted for age, sex, disability, and activity, when necessary. Any specialized diet must have a prescription. It is suggested that due to the complexity of the gluten-free diet, a documented allergy to gluten along with a prescription for the diet by a gastroenterologist is required. Any diet imposed on an individual based on an allergy, must be documented as such by the provider/specialist.

Families may expect that Bancroft will...

- Ensure the children are provided with a healthful variety of foods in order to promote growth, development and wellness. The organization shall promote proper nutrition as an integral component of programming.
• When indicated by a chronic condition, ensure the children are provided with the required medical nutrition therapy diet as ordered by the physician or advanced practice nurse, and that the IDT is aware.

• Ensure special diets that fall outside of the recommended dietary allowance guidelines, are approved by the physician or advanced practice nurse, and that the IDT is aware.

• Ensure that the appropriate professional provides information to program staff and is accessible to families and guardians related to special dietary needs. Feeding tube responsibilities shall be delegated to nursing personnel.

**The guardian is expected to…**

• When requesting a special diet, provide a prescription from a physician or advanced practice nurse.

• Understand that Bancroft cannot prevent certain food from being in the residence, due to individual preferences and requests.

• Provide any special preferred foods (at guardian’s own expense). Preparation of these foods shall also be the responsibility of the family, unless other arrangements have been approved by program management or the IDT, as appropriate.
Bancroft’s General Social-Sexual Principles

Bancroft recognizes that human sexuality is a natural, integral part of the development, growth, and identity of all people, and something it cannot limit among the adults it serves (over the age of 18). Therefore, Bancroft will promote appropriate social-sexual development for each individual supported through implementation of these guidelines, which are based on current professional literature and data in the field.

1. Provide appropriate opportunities and supports to help the development of fulfilling interpersonal relationships.

2. Promote a culture where attitudes toward sexual expression are objective, positive, and supportive.

3. Respect each individual’s interest and right to engage in risk aware and consensual sexual activity.

4. Provide opportunities for privacy when appropriate.

5. Prohibit the exploitation of individuals supported.

6. Provide social and sexual education that is commensurate with individual needs, developmental level, cognitive ability, emotional maturity, interests, and moral beliefs of individuals we support. Plans will be formulated and implemented through the Interdisciplinary Team (IDT) process with appropriate knowledge and involvement of guardians and, if applicable, family.

7. Provide adequate information to those served to enable them to make informed decisions about social-sexual interaction, appropriate to their needs.
8. Provide information about sexuality and disabilities to families and guardians periodically and when appropriate.

9. Recognize that a state of informed consent does not exist when sexual activities are exchanged for money or other favors.

10. Intervene if an individual supported voluntarily engages in harmful or potentially harmful activity.

11. Provide referrals for professional evaluation and counseling for any individual served in a Bancroft program who is experiencing difficulty with sexuality or social development.

12. Provide staff members with appropriate training in order to implement the guidelines and procedures provided in this manual.

Religion

Bancroft will support the religious or spiritual preferences of each individual served as much as possible, given other program requirements and available resources.

If there is disagreement between the individual and his/her guardian about expectations related to participation in religious services, a discussion by the Team shall be held at a meeting at which both the individual and guardian are present, as appropriate. The Team will attempt to resolve disagreement or come to agreement on a compromise solution. The Team’s recommendations will then be followed.
Financial

Bancroft is committed to protecting the financial interests of the individuals in its programs, and shall assist each individual, as appropriate as defined by the IDT, in managing and accessing his/her funds. Procedures are established to safeguard each person’s funds and guide proper management of funds when they are entrusted to the organization.

Individuals served by the organization have the right to access their personal funds, consistent with their abilities. Such funds may be spent freely based on the individual’s choice.

The guardian or another individual may be appointed representative payee of the individual’s funds. The representative payee is expected to use the individual’s funds in the person’s best interest and is liable for misuse of funds. The payee is also responsible for resolving any issues regarding the individual’s funds and benefits.

If the representative payee is not acting in the individual’s best interest after several requests and reminders, Bancroft may be required to contact the State to request another payee be assigned to represent the individual. If the guardian entrusts the individual’s funds to Bancroft, Bancroft will take responsibility for monitoring how the funds are being used and will provide copies of documentation to the guardian, upon request. The IDT shall establish the amount of money an individual is capable of holding independently after an assessment is completed, and this shall be documented and managed in accordance with the IDT’s decision.
Communications

Bancroft staff will contact the guardian to share information as frequently as agreed upon.

Due to the nature of programming within the Pediatric Residential Program, we have established contact hours (incoming telephone calls and visitation) to accommodate the needs of both the children and their families. Families are also provided opportunities to Skype/FaceTime with their loved one upon request.

Program Contact Hours

(Includes telephone calls, visitations, as well as hours to pick-up or drop children off at residential program locations)

Weekdays: 3–8 p.m. Weekends/Non-school days: 9 a.m. – 8 p.m.

Phone Contact

Parents will receive regular phone calls from the Program Manager and/or the child’s direct support team. The frequency of these calls will be based on the individual preferences of the family as outlined in the communications plan developed between the program and the family.

Unscheduled phone contact with direct care staff should only occur if absolutely necessary since spending time on the phone takes them away from other important responsibilities. If contact is necessary, the call should last no more than five minutes and should occur during program contact hours.
Please understand that direct care staff may ask to return your call at a more convenient time when other pressing program duties must be addressed.

Phone contact with staff should only occur by way of the program’s telephone.

**Urgent Communications (Non-Medical)**

An urgent call number has been established for use when a family/guardian is unable to reach a program staff member about an urgent matter (other than medical matters). The number to use for this purpose is 800-971-4944. Please have your family member’s specific program name available to share with the person who answers the call; for example, the name of the individual group home or supervised apartment program.

_Families may expect that Bancroft will…_

- Provide families with contact information for key staff.
- Identify the staff member who should be the primary contact person for the guardian, and advise of any changes in a timely manner.
- Notify the guardian immediately of any emergency health matter, and as soon as possible after any unusual disruptive behavioral incident (but no more than 24 hours).
- Communicate with the guardian when something significant happens that could have an effect on the individual (e.g., unusual incident, disagreement with someone, loss of friend, loss of job, problems with roommate, etc.).
- Communicate with guardian before and after home visits.
• Communicate with guardian when there are pertinent staff or roommate changes.

• Return guardian’s non-urgent telephone calls as soon as possible, but no more than 24 hours or first workday following receipt of message. The primary contact will advise the guardian of his/her regular schedule and who to contact on his/her scheduled days off or vacation in case an emergency arises.

The guardian is expected to…

• Communicate routinely with Bancroft primary contact to ensure accurate and timely information is shared.

• Communicate with staff in a polite and professional manner.

• Communicate with Bancroft primary contact when needed to update contact information, when family circumstances change or something happens that could have an effect on the individual, or when concerns arise.

• Communicate with primary contact at least 48 hours in advance to schedule visits with family (unless emergency).

• Advise program of specific plans to bring the child back to program (time and day) to ensure consistency of, and attention to routines within the home, unless special arrangements are made in advance. Children must be picked up after 9 a.m. and should return to program no later than 8:30 p.m.

• Notify Bancroft when he/she will be unreachable for a certain period of time (based on individual situation) and provide guidance in the event of an emergency.
Visits to the Program

For planning purposes, Bancroft requires at least 24 hours notice for program visits, unless special circumstances prevent this. If a special situation occurs, please contact the Program Manager directly to arrange a visit.

To ensure the safety of your children and others, any siblings or other children brought to the program must be supervised by you at all times.

Pets are not permitted on program grounds and surrounding area.

Since there are other persons living in the home, it is important to respect their privacy at all times (particularly during activities of daily living routines such as showering, toileting, etc.) and maintain their confidentiality, as this will be done for your child. Visitation is limited to common areas and, when appropriate, your child’s bedroom.

Families are asked to be on time and not to attempt to change scheduled outings. The program cannot wait for a child to be picked up by his family if that means the other children must wait or be denied an outing.

Home Visits

Bancroft requires a minimum of 48 hours notice for all visits to the family home. This prior notice shall ensure availability of take home medications when needed.

Parents are expected to advise the program staff of the expected day and time of return from a home visit, and shall return the child as planned (no later than 8:30 p.m.).
Bancroft cannot provide staff support for home visits. However, support can be arranged between a family and an individual staff member privately, when cleared by the Program Director and a Bancroft release form is signed by both parties in advance.

In addition, although Bancroft wishes to support opportunities for home visits and interactions in the family home, Bancroft is unable to provide transportation to family homes. During the annual IHP process, Bancroft will review with individuals and their loved ones special considerations relating to home visits and will work with families and individuals’ funders to facilitate visits. However, Bancroft is not able to transport individuals to or from these visits.

**Relationships Between Families and Staff**

It is Bancroft’s policy that staff members shall not have a position or interest that conflicts, or may reasonably appear to conflict, with the proper performance of his or her duties and responsibilities. Therefore, staff members are not permitted to work on a private basis with a family of an individual unless advance notice of the activity is provided to the Program Director and a proper release form is signed.

It is understood, however, that some families need assistance with their son or daughter, and often cannot rely on other family members or others who are not trained to support them in the home when needed (e.g., babysitting, tutoring, companion services, etc.). Therefore, families may hire Bancroft staff privately for these purposes, after the staff member’s scheduled (Bancroft) work hours. In these situations, the commitment is between the family and the staff member, and the family is responsible for payment and supervision, as they would do for anyone else the family might hire for these purposes. Bancroft staff are, however, expected to notify their supervisor in advance, and a proper release form must be completed.
by the staff member and family regarding any such activities. If, in the judgment of Bancroft, the proposed activity creates an irreconcilable conflict of interest or jeopardize the health and welfare of the person, the family will be notified.

Bancroft does not restrict a staff member from attending family events (e.g., dinner, birthday party, etc.) upon invitation of a person and/or family, as an unpaid guest on such staff member’s own time. In these situations, staff may offer to help with the individual, but shall not be expected to be the primary caregiver, and so shall not stay alone with the individual.

It is recognized that families/guardians may from time to time wish to offer a token of appreciation or other inconsequential gift to staff on certain holidays or other special occasions and this shall be permitted, but staff are expected to disclose such gifts to their supervisor.

**Tips for Avoiding and Resolving Conflicts With Staff**

*Be specific and accurate when raising concerns.*

In order to understand and address a family’s concerns, program management will need specific information upon which to act. If a family has general concerns, it would be helpful to provide specific examples when reporting the concerns so the supervisor can better understand the problem and take effective action.

*It is helpful to address issues in a respectful but straightforward manner with the staff member directly, before going to a higher level.*

It is a good idea to talk with the staff person directly about the concern, since it may be a simple misunderstanding, or he/she may be following a procedure or regulation about which the family may be unaware.
Be sensitive to the situation, and target concerns appropriately.
The staff member involved in a difficulty could very easily be an innocent party who has found him/herself in a predicament. Avoid criticism while he/she is attempting to address the problem. In this situation, the concern should be brought to the attention of the manager or director.

Allow the supervisor time to gather the facts.
Keep in mind that everyone has his/her own perspective on things, and some people attempt to manipulate a situation to achieve his/her own personal goal. Keep an open mind until there is an opportunity to learn the facts.

Avoid micromanaging.
Remember that no staff member could or should ever replace the parent. Supervisory structures are in place to monitor staff performance and provide training and counseling, and discipline when necessary. When parents take on the role of supervisor, it creates confusion and added pressure on the direct care staff and could impede effective resolution.

Treat staff members with courtesy and respect, as you would like them to treat you.
Even when there is a disagreement, it is important to discuss the issue in a calm and respectful manner. Rest assured that if you cannot resolve a conflict with a particular person, there are other avenues for resolution available to you at Bancroft. A successful advocate utilizes the system to resolve his/her issues.

Allow professionals to do their jobs; stay vigilant, but allow the supervisor to supervise.
Bancroft program staff are deemed competent to do their jobs as assigned, but ongoing monitoring and support by supervisors are required. Families can assist supervisors by drawing their attention to perceived problems, but should allow the supervisor to address any problems, and refrain from getting involved.
Grievance Process

It is believed that most concerns/complaints can be resolved by the responsible staff member closest to the situation (e.g., supervisor, program manager). When this is not possible, families are encouraged to speak directly with staff and to request to speak with the next level staff, escalating up through the program’s “chain of command,” up to and including the Program’s Senior Director. A grievance process is available if a parent/guardian feels that his/her complaint is not receiving an appropriate response from program leadership. Filing a grievance is a means of appealing within Bancroft a decision made by a representative of Bancroft. Following is a summary of the grievance process:

When the family/guardian or individual has unresolved issues, he/she should be encouraged to contact the Senior Program Director who will either attempt to resolve the matter or assist the family in filing a grievance.

The grievance form shall be completed and submitted to the

Director of Risk Management at:

Bancroft
1255 Caldwell Road
Cherry Hill, NJ 08034

For a copy of the grievance form shall be provided upon admission, annually and upon request.

Grievances requiring urgent attention due to timing issues must be identified as such by the person filing the grievance (including specific required timeframe).
The Director of Risk Management will confirm the level of urgency, taking into consideration the rationale provided by the parent/guardian and other circumstances. When a grievance is considered urgent, the process is expedited and includes the possibility of a temporary resolution. Please note: safety concerns or other concerns related to the health or well-being of a person supported by Bancroft shall be addressed by program leadership, and should not be addressed through the grievance process.

An Executive Review Committee is established to review grievances that cannot be resolved by program leadership or others at Bancroft with authority over a given situation. The Executive Review Committee shall meet to consider a grievance at the request of the Director of Risk Management. The Executive Review Committee consists of the senior and executive leadership. The person filing the grievance will be invited to meet with the Executive Review Committee at the earliest opportunity.

After the meeting, a written notification of the Executive Review Committee’s decision will be sent to the person filing the grievance. If the person filing the grievance remains dissatisfied, the matter will be forwarded to the President (or designee) for final resolution.

Bancroft representatives shall make all reasonable attempts to resolve the grievance to the satisfaction of the person who filed the grievance. However, it is recognized that not all grievances can be resolved to the satisfaction of the party initiating the grievance. Factors that may impact upon the decision include requirements related to federal and state regulations (including licensing requirements), confidentiality/privacy concerns, Interdisciplinary Team approvals, medical and other professional recommendations and ordered treatments, etc.

The guardian may pursue external avenues for possible resolution; for example, appeal processes or other remedies offered by the Department of Education or other state agencies. It is understood that when the guardian has resorted to external processes, he/she shall confirm whether continued pursuit of the grievance is desired or practical.
Anonymous Reporting Line

Families and staff who are concerned about a potentially unethical act or unsafe practice may use the “Compliance Line,” to report concerns anonymously. The Compliance Line is available on a 24 hour-a-day, seven day-a-week basis, and the toll free number to be used is (800) 385-4652. Callers can also follow-up later to check on the status of a concern. Please note that this additional reporting process should not replace our typical communication or routine reporting processes (through program staff and up through the chain of command), but is available to families who are reluctant to voice concerns for one reason or another.

Investigations

Bancroft’s highest priority is to ensure the health, safety and welfare of those we serve. The unusual incident reporting (UIR) and investigative processes are ways in which this priority is upheld at Bancroft in regard to Bancroft’s New Jersey programs.

Bancroft’s policies and procedures related to the UIR and investigative processes are based on NJ Department of Human Services (DHS) regulations, and are coordinated at Bancroft through our Legal, Risk and Compliance Department. DHS sets definitions of what is reportable as an unusual incident, and establishes the types of investigation conclusions that can be reached. It should be noted that the definitions of abuse and neglect are broad and many interactions that may be considered typical in many American homes are reportable as unusual incidents in the formal setting of a residential program.

Investigations are required for all allegations of abuse, neglect and exploitation. Other types of events may also be investigated at the discretion of the Director of Risk Management.
All allegations are taken seriously, but considered to be unproven unless the matter is substantiated by a preponderance of credible evidence following a proper investigation. To substantiate an allegation, there must be sufficient evidence to believe the allegation is more probable than not. There does not need to be evidence beyond a reasonable doubt.

How the process works…

- If a family member, staff member or anyone else suspects some form of abuse, neglect or exploitation, he/she shall report this to a Bancroft representative immediately.

- Once reported, it is the responsibility of Bancroft staff to report the allegation or suspicion to his/her supervisor and to electronically enter the incident in Bancroft’s Co-Centrix Incident Management program.

- Through Co-Centrix Incident Management, the UIR is generated and Bancroft’s UIR coordinator submits the UIR to state officials. The type of incident and number of incidents is tracked for performance improvement purposes.

- When an unusual incident occurs, immediate action is taken to ensure the safety and welfare of the individual, such actions may include adjusting the person’s level of supervision, taking the individual involved for a medical examination, reassigning or suspending the alleged person(s) responsible, and other protective measures.

- The guardian is notified of the incident by program staff at the time of the incident — usually by telephone.

- Bancroft’s Continuous Quality Improvement (CQI) specialists, under the supervision of the Director of Risk Management, conduct interviews (sometimes in concert with the appropriate state entity) and reviews evidence related to the
unusual incident, determines an outcome, and sends an investigation report to the appropriate state entity.

- Once the investigations are completed, the CQI specialist sends the guardian a letter explaining the type of allegation and the investigation outcome. In some situations, this may occur several months after the incident occurred, due to the time required to complete the investigative process.

- The Human Resources Department is notified of the investigation and conclusions when an incident relates to staff member(s), so that corrective action can be taken, if warranted.

- The CQI specialist and program leadership may also make programmatic recommendations in this process to improve the quality of care for each person, regardless of the outcome of the investigation.

_Families may expect that Bancroft will…_

- Notify the guardian as soon as possible when an unusual incident has occurred.

- Take immediate and effective action to prevent re-occurrence.

- Submit the UIR to state officials when an incident meets state reporting UIR criteria.

- Conduct a proper investigation to determine what happened and take action based on findings.

- Notify the guardian in writing with investigation outcome as soon as the investigation is complete.
The guardian is expected to...

- Alert the program manager or other supervisory staff immediately if he/she ever has a suspicion of abuse, neglect or exploitation (related to his/her own child or others).

- Not hamper the investigative process and refrain from questioning staff and others to determine what happened.

- Offer helpful information if guardian has firsthand knowledge.

- Understand that Bancroft is not able to share confidential information related to an incident, due to employee protection laws and privacy regulations (e.g., HIPAA).

Discharge Policy

A decision to transfer or discharge an individual from the program may need to be made for one of the following reasons:

1. The goals and objectives set forth in the person’s Service Plan have been met, and the individual is no longer in need of Bancroft’s services.

2. The individual, the parent/guardian or advocate and/or an authorized agency requests the discharge.

3. The safety and welfare of the individual is at risk as a result of medical, behavioral or psychiatric needs that exceed the capacity of Bancroft’s services.

4. The condition or behavior of an individual poses a significant risk to the safety and welfare of others.
5. All possible program modifications and alternatives have been exhausted, and the individual is demonstrating a need for services that are not available at Bancroft.

6. Bancroft and the placing agency determine that the residence/program is no longer suitable or no longer meets the needs of the individual, provided that substantive evidence is given to the individual and his/her parent/guardian, as appropriate.

7. The individual, his/her parent/guardian, advocate or representative interferes with the administration of appropriate and effective medical, behavioral or psychological intervention that allows reasonable risk to health, safety and welfare of the individual or others.

8. Bancroft is ordered by state, federal, or local government authorities to discharge an individual.

9. Bancroft ceases to operate a program, closes a program or discontinues a program in which the individual resides or from which the individual receives services.

10. The individual has not resided in Bancroft for thirty (30) days.

11. The facility or home is destroyed by natural disaster or other casualty, such as fire and the person is refusing temporary or permanent relocation services or such services are unavailable.

12. Lack of payment for services rendered after reasonable attempts to facilitate payment.
Family Support/Involvement

Family is encouraged to participate in the development, follow-through, and support of their son/daughter’s Service Plan (e.g. IHP, IEP). The family/guardian and, when appropriate the individual, is considered part of the treatment team responsible for seeing that his/her needs are met.

Family members and guardians are also encouraged to get involved in the organization through membership on various program advisory committees, task forces, or other special project teams. A range of opportunities exists for people with different levels of interest and time availability. Contact the Program Director or the Family Advocate for information on opportunities that meet your interest and schedule.

Family Communications

A Bancroft Family E-mail Communication List is used to communicate with families routinely. This list has become a very helpful tool for Bancroft to use to communicate with family members in a faster, more efficient and cost-effective manner. Having your name included on the e-mail list will enable you to receive newsletters and e-mails from Bancroft on urgent or time-sensitive issues, upcoming events, or other routine matters. Please be sure your email address has been provided during admissions process. If you need to change your email, please contact communications@bancroft.org.

The Education Programs also utilize the Honeywell Instant Alert Communication System for schools for urgent matters. The Honeywell system enables us to contact all our families simultaneously using whatever means requested by you— phone, cell phone, e-mail, pager, among others — in the event of an emergency, but also in the event of an unexpected school closing or early dismissal, for example.
In order to participate in this service, please go to the Honeywell Instant Alert for Schools web site at: https://instantalert.honeywell.com, and register. It is easy to do and the last page of the enclosure provides step by step instructions. Click **New User Parent**; Select **State NJ**: and **District Bancroft**. If you need assistance or you do not have a computer, please contact the Business Manager, at (856) 524-7516 for assistance.

**Advisory Committees**

Each program has an advisory committee that may consist of Bancroft staff members, persons served, guardians, families and others interested in supporting the program. Program advisory committees work closely with management staff and support the Performance Improvement Council to help make the program the best it can be for all those served.

The Bancroft Family Council also works with programs and serves as a resource to the leadership of the organization on general family matters. The Family Council works closely with Bancroft’s Family Advocate and includes parents or guardians (or other close family members) of children and adults supported by Bancroft. Members represent each major program.

**Family Satisfaction Surveys**

Requesting the opinions of the children and adults we support and their families is one of the best ways we can evaluate the quality of our services. Therefore, annual surveys are conducted to determine the level at which everyone is satisfied. Please keep in mind that your participation in this process is critical. The data is used in organizational planning to help determine performance improvement priorities, resource allocation, and staff training needs, among others.
In addition, the Family Advocate maintains data on contacts to that office and presents a report for performance improvement purposes twice a year. This report includes information ranging from grievances, to the number of calls received from families associated with each program, as well as topics of concern being raised.

**Legislative Educational Advocacy**

From time to time, Bancroft will inform and educate families on important legislative matters or other state or federal initiatives that could impact the individual served by Bancroft and his/her family in some manner.

**Resources**

Included in the Appendix is a glossary of frequently used terms for your reference purposes. We also encourage families/guardians to check out our Family Resource Center on our website [www.bancroft.org](http://www.bancroft.org).

**Volunteerism**

We encourage volunteer participation among families. Volunteers complement the work of staff and also provide opportunities for increased community interaction. Aside from assisting the program staff on occasion, any regular or scheduled volunteer work should be coordinated through the Volunteer Office to ensure licensing requirements are met.

All volunteers work directly with the Director of Community and Donor Engagement and the staff member to whom they are assigned. Interviews are conducted and at least two references are checked prior to placement. In keeping with Bancroft policy,
volunteers must take the Mantoux Tubercular Screening Test — either at Bancroft or by a physician of their choice — prior to beginning their assignment. We work with volunteers to match their qualifications and interests and will attend an orientation program and receive training for specific assignments, if necessary. All volunteers must sign an agreement to abide by Bancroft policies regarding confidentiality.

Anyone interested in volunteering should contact the Director of Community and Donor Engagement at 856.348.1160.

Contact Us

We hope this Family Handbook is helpful in making your experience with Bancroft positive and successful for your family. If you have any questions, please do not hesitate to contact the person responsible for your child’s program, the Program Manager, Nurse Case Manager, or the Program Director. If you are unaware of the best person to contact related to a specific issue or situation, contact the Program Manager or Director or other program representative for assistance, or the Bancroft Family Advocate.

Bancroft’s web site is also a resource for families for information on upcoming events, organizational announcements, newsletters, directions, and other information related to programs and services. Please visit www.bancroft.org.