



July Staff Meeting

Joining Hands Visitation

2018

New Beginnings Contract

Key points to remember and emphasize importance

- ▶ Request Temporary Changes
 - ▶ At **MINIMUM** 24 hour notice and can only be granted if plausible and in compliance with referral guidelines
- ▶ Holidays
 - ▶ DCFS Offices, Libraries, & JHV Offices are closed
- ▶ Cancellations
 - ▶ Parent **MUST** contact the Agency 24 hours prior to visit for it not to count against them
 - ▶ Call the offices and leave a message if no one answers
 - ▶ 3 No Shows and/or Cancellations with less than 24 hours notice, the case is referred back to DCFS
- ▶ Behavior and Conduct
 - ▶ **No** false promises
 - ▶ **No** inappropriate conversations
 - ▶ **No** swearing or speaking ill of others
 - ▶ Child endangerment or inappropriate behavior leads to immediate **TERMINATION** of the visit
- ▶ Visitation Rules
 - ▶ **RESPECT** the office space and company property
 - ▶ Be **CONSIDERATE** of others utilizing the facility and the other companies in residence
 - ▶ Parents are **NOT** allowed to leave the visit
 - ▶ Parents are **NOT** to make phone calls during the visit

New Beginnings Contract

Continued...

- ▶ Transportation
 - ▶ The Agency **ONLY** provides transport for the children
 - ▶ Parents **CANNOT** ride in the same vehicle as the children
- ▶ Comprehension of visitation
 - ▶ This includes children attending, dates, times, and location
- ▶ Criminal charges
 - ▶ Provide them with a sheet of paper if they answer yes, **READ** what they wrote
- ▶ Authorized Visit Participants
 - ▶ To be **VERIFIED** by social worker prior to attending
- ▶ Initial, sign, & date where specified
 - ▶ **BOTH** parents are to do this
 - ▶ If they have separate visits then they will have separate contracts
 - ▶ If a parent refuses to do so, indicate on the form that fact along with your name, signature, and date
 - ▶ Offer to provide a copy of their completed contract
- ▶ Review that all sections have been filled out, initialed, and signed
 - ▶ If you leave it with them to fill out, make sure to bring an extra copy to the next visit if they lose or forget it
- ▶ This contract is 2 **FULL** pages; front and back

Calendar

New cases and changes to current cases

Receipt Confirmation Form



Calendar Receipt Confirmation

I, _____, acknowledge that by signing this, I have received a calendar detailing my foster child's agreed upon set visit schedule with his/her parents. Agreement to this pre-established schedule includes pick-up and drop-off locations and times. I also, consent to not scheduling appointments that would conflict with these days and times unless unavoidable. Secondly, I will not ask for changes to the pre-established schedule with less than 24-hour notice unless it is an emergency.

Signature: _____ Date: _____
(Foster Parent)



Calendar Receipt Confirmation

I, _____, acknowledge that by signing this, I have received a calendar detailing the agreed upon set visit schedule with my child(ren). I also, consent to not scheduling appointments that would conflict with these days and times unless unavoidable. If a conflicting appointment arises I will inform the Agency no less than 24-hours prior to visit.

Signature: _____ Date: _____
(Birth Parent)

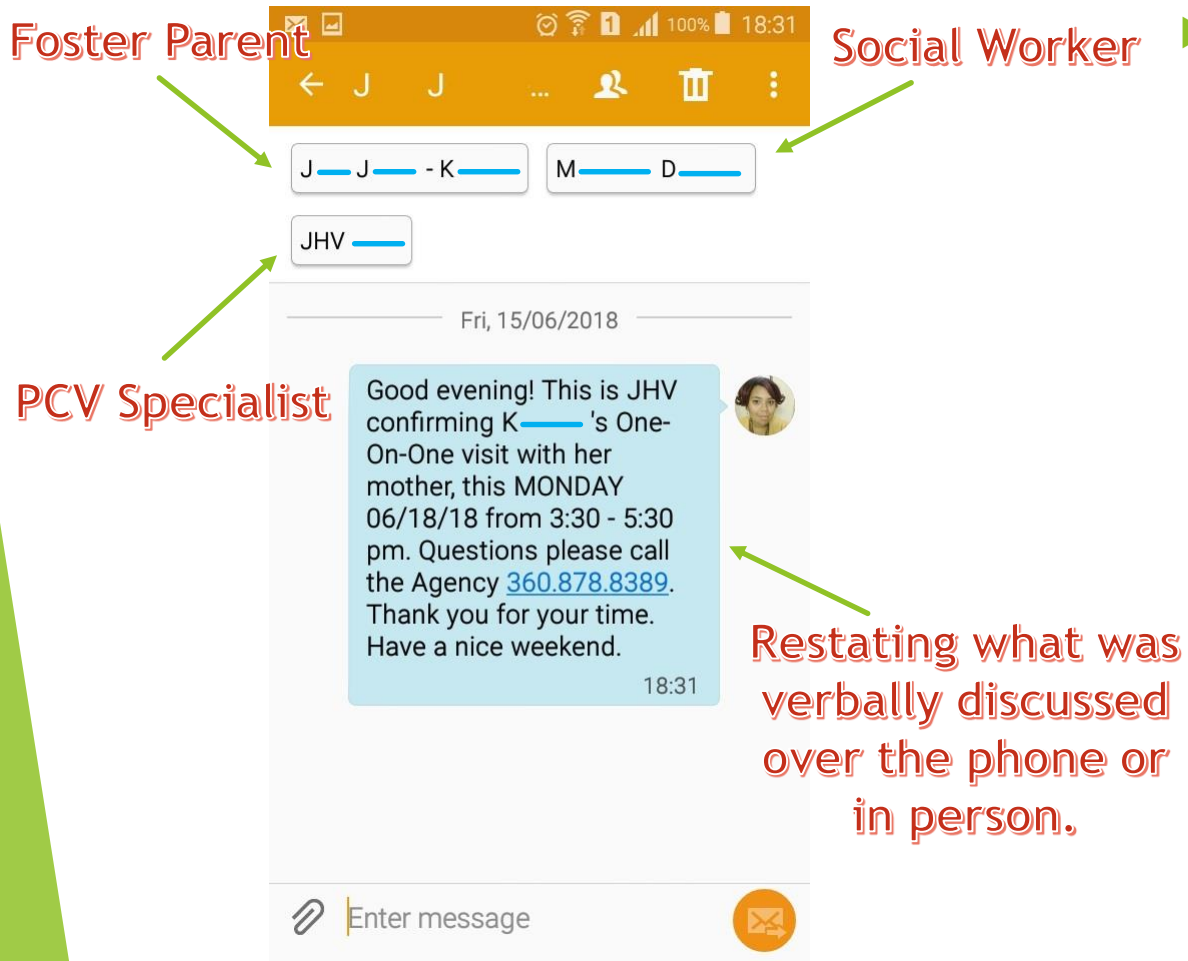
Visit Schedule

July						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				
Notes						

- These forms are to be turned into the office, copies may be made upon request.

Communication

Verbal confirmation and follow up text message



► Whenever possible get it in writing

- When texting add the appropriate people to the conversation
 - Agency Executive Director, PCV Lead Coordinator, and/or PCV Team Lead
 - Foster Parent and Birth Parent are **NEVER** to be apart of the same conversation for confidentiality and safety reasons
 - **NEVER** contact the Social Worker unless instructed to
- Take screenshots and submit with reports as documented proof
- Be professional and polite

Office Usage

Respecting the Office Space

- ▶ Parents are responsible for cleaning up after themselves
 - ▶ Wipe up spills and vacuum is available
- ▶ Employees are the only ones allowed back behind the reception desk
 - ▶ Visit attendees are to use the catalogs to check out books and movies
- ▶ **NO** Food or drinks in the visitation rooms
- ▶ Arts and crafts projects are to be done in the cafeteria for ease of clean up
- ▶ This is an office building with other companies in residence
 - ▶ **NO** running, **NO** screaming, indoor activities **ONLY**

Monitored Visits

Different levels of monitoring

Established cases

- ▶ Remain on site
 - ▶ You must be within reasonable distance to do your check-ins
 - ▶ Time between check-ins should **NOT** exceed 30 minutes
- ▶ If any issues or concerns level a supervision **CAN** increase.

New cases

- ▶ Remain on site
 - ▶ You must be within reasonable distance to do your check-ins
 - ▶ Be within sight and hearing distance
- ▶ Checking in every 10 minutes
 - ▶ As visits progress and visits continue to go well time between check-ins may increase by 5 minute increments

Grey Areas

What to do when uncertain

- ▶ 15 minute NO SHOW Rule
 - ▶ New Case
 - ▶ Established Case
 - ▶ Repeat Cases
- ▶ Bathroom Supervision
 - ▶ Opposite Gender Visit Supervisor
 - ▶ Alcohol/Drug Use Concerns
- ▶ Cellphone Usage
 - ▶ Babysitter vs Activity
 - ▶ Commemorating Moments
 - ▶ Social Media
 - ▶ Phone Calls/Text Messaging
 - ▶ Emergencies

Boundaries


What is ACCEPTABLE and UNACCEPTABLE

- ▶ Boundary
 - ▶ Know your values. Understanding your values helps you figure out where you'd like to set boundaries.
 - ▶ Communicate clearly. Lay out your limits very clearly.
 - ▶ Bring up a boundary or violation right away.
- ▶ Professional and Unprofessional conduct
 - ▶ Practice beyond the scope of practice as defined by law or rule;
 - ▶ Misrepresentation or fraud in any aspect of the conduct of the business or profession;
- ▶ Conflict of Interest
 - ▶ Accepting a favor or a gift from a client above the amount specified by the company
 - ▶ Accepting consulting fees and providing advice to another company for personal gain.
 - ▶ Sharing information in an interview about your employer's activities or plans.
- ▶ Confidentiality

Caregiver Notification

Documenting Properly

- ▶ White top copy is to be returned to JHV Offices
- ▶ Yellow bottom copy is to be given to Foster Parent
- ▶ If there are multiple children and they are going to multiple placements you must fill out a form for each foster home placement
- ▶ Fill out all sections
 - ▶ Case Name is what is on your calendar appointment
- ▶ Turn in white top copy to Kimberly's mailbox
 - ▶ At minimum, within three days of the visit



JHV Child Specific Caregiver Notification

Child(ren)'s Name		Transporter's Name	
Date of Visit	Time of Visit	Case Name	

Was your child in the appropriate car seat?	Yes	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did child eat/drink during the visit? If yes, please list food or beverage and what time child last ate or had a beverage:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time:			

Was child's diaper changed during the visit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time: Time: Time:			

Did child nap during the visit? If yes, for how long?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Did injuries occur during visit? If yes, please describe:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Did any unusual incidents occur that would affect the child's well-being? If yes, please explain below:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Retention Specialist Signature.....Date.....			
Foster Parent Signature.....Date.....			

Visitation Reports

Documenting properly

- ▶ Record the time birth parents arrive in your report, **NOT** just on the mileage log
 - ▶ If the parents are already there waiting upon your arrival
 - ▶ If you arrive early and so do the parents
 - ▶ If the parents arrive late, how late?
 - ▶ If you arrive late and why
- ▶ If parents mention why they are early or late and it is of relevance, notate it in your report. Same goes for CANCELLATION reports.
- ▶ Full sentences, past tense, and referring to yourself in third person
 - ▶ Specify child when there are multiple children present at the visit
 - ▶ Name starts with the same letter, add the next letter
 - ▶ If a child is absent from the visit, notate why in the additional comments, if known.

Mileage

Or is it just drive time

When CAN I charge for and when can I NOT

- ▶ Are you traveling to pick up a child?
 - ▶ Are you transporting the child to a visit?
 - ▶ Are you transporting the child back from a visit?
 - ▶ Is someone else transporting the child to and/or back from the visit?
- ▶ How does this apply to off site training?
- ▶ Driving your own vehicle
 - ▶ Or driving the Company Van
- ▶ In order to be reimbursed
 - ▶ Record your odometer reading
 - ▶ Record the miles per trip and calculate the cumulative miles
 - ▶ Record your start and end time

Mileage

How do I record it

- ▶ Mileage starts the moment you are enroute to pick up a child
 - ▶ Ends when you drop off the child.
- ▶ Full round trip only if you go home between visits
 - ▶ If you are remaining in the area for another visit, start your odometer reading at the time you leave to pick up the child for the next visit.
- ▶ Drive time begins when you depart for a visit
 - ▶ Ends when you have a break between visits
 - ▶ Ends when you arrive at home
- ▶ Follow the Google Map directions
 - ▶ No detours unless road ways are blocked or routes changed
 - ▶ i.e. construction, change in pick-up, drop-off, or visit location
 - ▶ Racking up mileage is **NOT** allowed

Sick Leave


How does Sick Pay work and when CAN I use it

- ▶ Physically unable to attend your assigned visit
 - ▶ You are not required to use sick pay
 - ▶ Does **NOT** include being unable to attend due to but not limited to the following:
 - ▶ Regular and/or routine health checks for yourself and/or family member
 - ▶ Doctor's appointment for yourself and/or family member
- ▶ Become ill while at your assigned visit
 - ▶ Compensated for remainder of visit time and your travel time home
 - ▶ Does **NOT** include child transport time or remaining mileage
 - ▶ Reasons why: Someone else is putting the miles and time in
Someone else receives compensation for it
Company is only compensated once by the state
- ▶ If it is determined that there is founded abuse of the sick leave policy, it is grounds for immediate **TERMINATION**.
- ▶ The above information is in effect as of today, July 15th.

Time Off Request

Policy & Procedure

- ▶ Turn in to Ophelia - either email electronic copy or place hardcopy in her mailbox
- ▶ All Approvals are PENDING, you must do the following:
 - ▶ Schedule make up visits or extension times
 - ▶ Email these changes to PCVLead@JHV.org
 - ▶ Send out an email asking others for coverage
 - ▶ CC all correspondence to PCVLead@JHV.org
- ▶ First come, first served



Joining Hands Visitation

Time Off Request

Time Off Information

Employee Name: _____

Position Title: _____

Executive Director: Ophelia S Nowells


Supervisor: _____

Type of Absence Requested:


☐ Sick ☐ Vacation ☐ Bereavement ☐ Time Off Without Pay

☐ Military ☐ Jury Duty ☐ Maternity/Paternity ☐ Other

Dates of Absence: From: _____ To: _____

 Reason for Absence: _____

You must submit requests for absences, other than sick leave, thirty days prior to the first day you will be absent. It is your responsibility to make sure your shifts are covered in your absence.



Employee Signature Date

Manager Approval

☐ Approved

☐ Rejected

Comments: _____

Supervisor / or Executive Director Signature Date

Parking

- ▶ License Plate #
 - ▶ 123-ABC
- ▶ Make & Model
 - ▶ Toyota Corolla
- ▶ Color
 - ▶ Cobalt Blue

