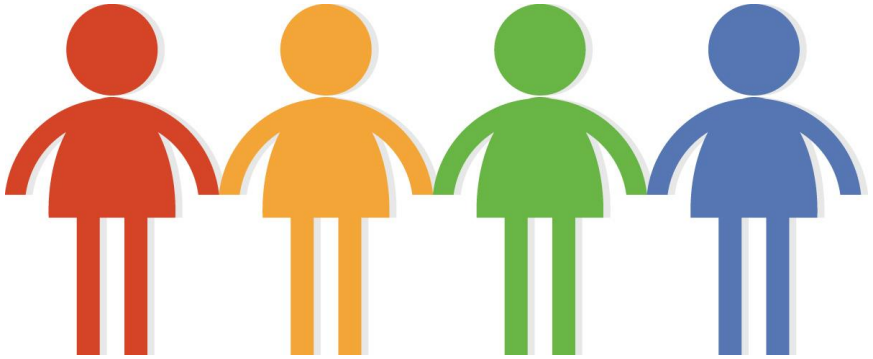


CLIENT RIGHTS HANDBOOK

FOSTER CARE



Everyone deserves to be treated with Dignity & Respect



8904 Brookside Ave
West Chester, Ohio 45069
513-644-1030



CREDIBILITY • INTEGRITY • ACHIEVEMENT



Mission Statement

Our Mission:

To improve the lives of children by providing strengths-based foster care, adoption, and mental health services that promote the permanency, safety, and well-being of youth.



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Service Hours

Focus on Youth provides 24-hour services to our clients in foster care.

- Focus on Youth, Inc. office hours are:
Monday - Friday 8:00 a.m. to 4:30 p.m.
- If you should need assistance after hours, call the Focus on Youth main number **513-644-1030**. Please listen and follow the prompts. A representative of Focus on Youth will return your call within 10 minutes. The purpose of our on-call service is to provide clients and foster families with 24-hour access to support services 7 days per week and all holidays.
- It is recommended that on-call be utilized for **crisis situations only**. Examples of crisis situations:
 - AWOLS
 - Injuries
 - necessary medical attention (notification purpose only)
 - significant behavior problems in the foster home or community
 - youth engaging in risky behaviors
 - illness or death of child, parent, or foster parent
 - traffic accidents involving a foster child or foster parent
 - suicidal or homicidal ideations, gestures or attempts
 - consent for alternative care and respite
 - Police involvement with any member of the foster home





Weather Emergencies

The office will always be considered open unless the Executive Director orders it closed or a weather emergency is declared. If there is a scheduled meeting or training and there is inclement weather, a representative from Focus on Youth should contact you to reschedule your appointment.



Holiday Office Hours

On the holidays listed below, Focus on Youth is closed. If you need something immediately, staff will be available on call should an emergency occur. (If a holiday falls on a Saturday, the office will be closed the Friday before. If the holiday falls on a Sunday, the office will be closed the following Monday.)

New Years Day
Martin Luther King Day
Presidents Day
Good Friday
Memorial Day
Fourth of July

Labor Day
Veterans Day
Thanksgiving Day
Day after Thanksgiving
Christmas Eve
Christmas Day

CLOSED



Children Rights & Foster Care Rights

No agency, foster caregiver or residential facility or any employee of an agency or residential facility shall in any way violate any of the following rights of children:

- The right to enjoy freedom of thought, conscience, and religion or to abstain from the practice of religion.
- The right to reasonable enjoyment of privacy.
- The right to have his or her opinions heard and be included, to the greatest extent possible, when any decisions are being made affecting his or her life.
- The right to receive appropriate and reasonable adult guidance, support, and supervision.
- The right to be free from physical abuse and inhumane treatment.
- The right to be protected from all forms of sexual exploitation.
- The right to receive adequate and appropriate medical care.
- The right to receive adequate and appropriate food, clothing, & housing.
- The right to his own money and personal property in accordance with the child's service or case plan.
- The right to live in clean, safe surroundings.
- The right to participate in an appropriate educational program.
- The right to communicate with family, friends & "significant others" from whom he is living apart in accordance with the child's service/case plan.
- The right to be taught to fulfill appropriate responsibilities to him/herself and to others.
- The right to active and informed participation in the establishment, periodic review, and reassessment of the service plan;
- The right to freedom from unnecessary or excessive medication;
- The right to freedom from unnecessary restraint or seclusion;
- The right to participate in any appropriate and available agency service, regardless of refusal of one or more other services, treatments, or therapies, or regardless of relapse from earlier treatment in that or another service, unless there is a valid and specific necessity which precludes and/or requires the client's participation in other services. This necessity shall be explained to the client and written in the client's current service plan;
- The right to be informed of and refuse any unusual or hazardous treatment procedures.



Right to Participate in Services

Clients will participate in all service decisions and have the right to:

- request an in-house review of their care, treatment, and service plan;
- refuse any service, treatment, or medication, with approval from the legal guardian, unless mandated by law or court order;
- be informed about the consequences of such refusal, which can include discharge;
- the right to receive information in language and terms appropriate for the client's understanding, and

A Focus employee cannot be a client's guardian or representative if the client is currently receiving services from Focus on Youth, Inc.





YOUTH ORIENTATION

We will provide a foster family setting during your placement and you will be able to participate in your support plan goal setting. You will have a support team to help you achieve your goals. It is the purpose of Focus on Youth to help you make good choices for yourself and help you realize your potential.

Program Rules:

1. You will be setting goals for yourself and making a continuing effort to meet these goals. These goals will be developed in cooperation with your foster parent(s), your youth specialist, and your referring agency.
2. You will have a youth specialist working with you very closely, and you are expected to cooperate with your youth specialist. You and your youth specialist will meet together at least once per month or up to once each week to help you in any way possible. Also, you have the right to call your youth specialist if you feel it is necessary.
3. It is your responsibility to follow all local, state, and federal laws.
4. You will be informed of the rules that you are to follow while in the foster home. It is your responsibility to follow these house rules.
5. You will care for your own property. If not given permission to use the property of others, you will leave it alone.
6. You must request permission of your foster parent(s) to make a long distance phone call.
7. If you cause any damage to someone else's property, you will be responsible to develop a plan for repayment or make restitution.
8. You are to attend school regularly and obey the rules.
9. It will be your responsibility to obtain permission from your foster parent(s) when leaving the foster home and to inform them at all times as to your whereabouts.
10. You will receive routine medical care as recommended with the help of your foster parent(s).



Program Privileges:

1. You will have an opportunity to develop your goals and share your ideas. Your foster parent(s) and youth specialist will support and help you in meeting these goals.
2. You may attend the church of your choice.
3. You have the privilege of earning a weekly allowance, the amount of which will be determined by your foster parent(s).
4. You will receive health care, education, mental health services, and recreational opportunities, as appropriate.
5. You have the right to a reasonable amount of privacy.
6. You have the right to be in communication with your family and any significant others by letters, telephone, and visits as approved by the referring agency and your youth specialist.
7. Your personal needs, such as clothing, toiletries, and school supplies will be taken care of.
8. You have the right to a nurturing, caring home and foster parents that will work with you to help you through your difficulties, and help you achieve your goals.
9. You have the right to express your own opinions and thoughts.





Client Rights of Persons with Developmental Disabilities

1. Procedures for working with persons with developmental disabilities are client specific and include following treatment recommendations of mental health and health care professionals. Focus on Youth assists in coordinating services needed for clients and monitors families who implement interventions that may limit physical movement, diminish sensory experience, restrict personal freedoms, or cause personal discomfort.
2. An intervention will be discontinued immediately if it produces adverse side effects, or is deemed unacceptable according to professional standards.
3. Persons with developmental disabilities will be treated with dignity and respect and interventions that are against agency policies will be prohibited.
4. All persons receiving services will receive such services in a manner that is non-coercive and non-discriminatory and protects the person's right to self-determination. Clients are the primary source of information about the need for services and the information gathered for assessments. When services are needed that are not provided by Focus on Youth, a referral will be made to obtain those services.
5. To those eligible and receiving its services, Focus on Youth provides assistance, as appropriate to the person's needs, appropriate telecommunication devices or other assistance (i.e., interpreters fluent in the first vernacular language of the person served). This service is provided, at no additional cost to persons served, as well as, to their families or significant others. If Focus on Youth is unable to accommodate this level of service, a referral to a resource that is better able to meet the person's need will be facilitated.
6. Focus on Youth provides or arranges for communication assistance for persons with special needs who have difficulty making their service needs known considering the person's literacy level.
7. Persons with a developmental disability will receive appropriate support and education regarding sexuality and relationships



Right to Confidentiality

Confidentiality Policy: Client records are the property of Focus on Youth and are maintained for the benefit of the consumer, staff, and the agency. Confidentiality and/or access of all matters pertaining to the identity, physical, mental or emotional conditions of the consumer and his/her treatment is safeguarded against loss, defacement, tampering, or use by unauthorized persons. All information is kept in the strictest confidence and is not released, except as required by law, without the express written consent of the client (if legal age), parent or responsible agency representative.

When Focus on Youth receives a request for confidential information about a client, or when the release of confidential information is necessary for the provision of services, prior to releasing such information, Focus on Youth will:

- a. determine if the reason to release information is valid;
 - b. obtain the client's informed, written authorization to release the information; and
 - c. obtain informed, written authorization from a parent or legal guardian, as appropriate.
1. Focus on Youth offers a copy of the signed and completed release of information form to the person or parent authorizing the disclosure of confidential information and places a copy in the case record.
 2. A consent form is signed by the client and/or legal guardian regarding the locations of video and audio equipment.
 3. Focus on Youth informs a client and receives a written consent from the client, and legal guardian, prior to recording, photographing, or filming.

CONFIDENTIAL



Grievance Rights

Client Grievance/Complaint Procedure:

You have the right to file a complaint about the services you have received or if you feel your rights may have been violated in any way. Assistance in filing the grievance, if needed by the grievant, investigation of the grievance on behalf of the grievant, and agency representation of the grievant at the agency hearing will be provided to the grievant, if desired. No interference or retaliation will be taken by Focus on Youth, Inc. in response to the filing of such a complaint or grievance.

Step I: If you have a difference with a foster parent, youth specialist, therapist or another service provider associated with Focus on Youth, Inc., first try to work out the problem directly with this person.

Step II: If this does not resolve the difference, speak directly to your youth specialist, therapist, or an appropriate Focus on Youth, Inc. staff member about the problem. If you are having a difference with your youth specialist or therapist, you or your designated representative may ask to speak directly to the supervisor.

Step III: If the grievance is not resolved by the supervisor, or you are having a difference with a supervisor, you or your designated representative may ask to speak directly to the Executive Director.

Step IV: If this does not resolve the difference, you may put the complaint in writing using the provided form. You may request a grievance/complaint form from any Focus on Youth Staff member. If you are unable to read or write, a staff member who is not directly involved in the situation will be assigned to assist you in filing your complaint. **To file a written grievance, the grievance must be made within 90 days of its occurrence.**

Step V: During regular office hours of M-F, 8:00 AM to 4:30 PM, you may deliver the written grievance/complaint to:

Jeanie Kleiber, Client Rights Officer
Focus on Youth, Inc.
8904 Brookside Avenue
West Chester OH 45069
Phone: 513-644-1030
Email: jkleiber@focusonyouth.com



Or at any time, the complaint may be emailed to:
clientrights@focusonyouth.com

In the event that the complaint is against the Client Rights Officer or if Jeanie Kleiber is unavailable, to assure prompt accessibility to the grievance process, using the same address and phone number, you may contact:

Bryan Forney, Executive Director at bforney@focusonyouth.com

- A written acknowledgement of receipt of the grievance will be provided to each grievant within three business days from receipt of the grievance. An acknowledgement of receipt shall include, but not be limited to, the following:
 - Date grievance was received
 - Summary of grievance
 - Overview of grievance investigation process
 - Timetable for completion of investigation and notification of resolution
 - Treatment provider contact name, address and telephone number
- The grievant will be provided a face to face meeting, if appropriate.
- A review that does not involve the person about whom the complaint has been made or the person who reached the decision under review will be completed.
- The total length of time for resolving the grievance will be 20 days or less from the date of filing the grievance.





Filing other complaints

The grievor also has the option to initiate a complaint with outside entities including the following:

Ohio Department of Mental Health &
Addiction Services Board
30 East Broad Street
Columbus, Ohio 43215
(614) 466-2596

CSWMFT Board
50 West Broad Street, Suite 1075
Columbus, Ohio 43215-5919
(614) 466-0912

Ohio Legal Rights Service
50 West Broad Street
Columbus, Ohio 43215
(614) 466-7264

Office of Families & Children, Field Office
6680 Poe Avenue, Suite 350
Dayton, Ohio 45414
FAX (937) 264-5752

US Department of Health & Human Services
200 Independence Ave SW
Washington, DC 20201
(800) 696-6775

Butler County Mental Health Board
5963 Boymel Drive
Fairfield, Ohio 45014
(513) 860-9240

The grievant has the right to request Focus on Youth to provide all relevant information about the grievance to one or more of the organizations specified should the grievant initiate a complaint.

A copy of the grievance procedure is posted in the main office and annex of Focus on Youth and provided to each client at the initiation of services and anytime upon request. Any staff member has the responsibility to immediately advise a client who is articulating a concern of the name and availability of the agency's client rights officer and the grievant's right to file a grievance.





Client Grievance/Complaint Form

Client's Name	DOB	Date
Name of person completing form		

Complaint is against:

☐ **Foster Parent(s):**

Name(s) _____

☐ **Youth Specialist:**

Name(s) _____

☐ **Therapist:**

Name(s) _____

☐ **Other:**

Name(s) _____

Please provide a complete description of the problem. Attach additional pages if necessary. _____

What steps have you taken already to resolve this difference?

☐ **Addressed with foster parents: Date of contact _____ Outcome:**



☐ Addressed with youth specialist/therapist: Date of contact _____

Outcome: _____

☐ Addressed with supervisor/clinical director: Date of contact _____

Outcome: _____

How would you like to see the problem resolved? Attach additional pages if necessary. _____

Client's signature

Date

.....
This section to be completed by Focus on Youth, Inc.

Date complaint received	Date reply must be provided to complainant (within 3 working days)
Staff member signature receiving complaint	



Behavior Support & Management

Behavior Support and Management Procedures:

1. All service recipients and their parents or legal guardians will be provided an explanation for and offered a copy of the written behavior support and management policy and procedures and restraint policy and procedures at admission, which includes strategies used to maintain a safe environment and prevent the need for restrictive behavior management interventions.
2. Focus on Youth will obtain the written consent of service recipients, parents, or legal guardians for the use of interventions to be utilized, including restrictive behavior management interventions as identified in the client's ISP. This consent will be reauthorized on an annual basis.
3. Client preferences regarding the use of physical restraint will be determined and considered and documented in the ICR.
4. The service recipient, and/or parent or legal guardian has the right to refuse consent to treatment, including the use of restrictive behavior management interventions. Focus on Youth may determine that the individual cannot be served as a result of refusal.
5. Focus on Youth approves the use of physical restraint according to the Use of Physical Restraint Policy and Procedures (Policy BSM VIII.2)
6. An Initial Behavior Support Plan will be completed for each service recipient at admission as part of the initial intake process. Each service recipient will participate in a screening of the potential risk of harm to self or others to determine the need for behavior support and management interventions. A follow-up Functional Behavior Support Plan/Crisis Plan will be completed on each individual for whom it is indicated in need of such planning. This will be included as part of the client's ISP and review.
7. Each client's history will be reviewed, prior to placement and throughout placement, to determine if there are reasons that particular behavior interventions, behavior management techniques, or aversive procedures would be contraindicated. If such a condition(s) exists, all persons working with the client will be



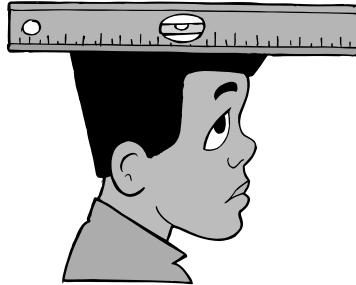
so informed and the condition and resultant contraindication recorded in the client's Individualized Service Plan. Consideration of contraindications shall take into account a client's gender; age; developmental issues; culture, race, ethnicity, and primary language; history of physical and/or sexual abuse, or psychological trauma; medical and other conditions that might compromise physical well-being (e.g. asthma, epilepsy, obesity, lung and heart conditions, an existing broken bone, pregnancy, and drug/alcohol use); and physical disabilities.

8. Focus on Youth adheres to the principle of "Least Restrictive Alternative", in which a continuum of intervention options moving from least restrictive to more restrictive are utilized. Only the least restrictive alternative necessary to safely manage an individual's behavior will be utilized.
9. Focus on Youth has procedures that address harassment and violence towards the service recipients, staff, and/or foster parents.
10. Focus on Youth adheres to the support of positive behavior by developing positive relationships with service recipients; building on client strengths and reinforcing positive behavior; and responding consistently to all incidents of harassment and violence. Focus on Youth, Inc. will utilize the Nurtured Heart Approach (NHA) as a primary intervention to accomplish the above stated goals. Direct service staff and foster caregivers will be trained, coached and assessed in the practice of the NHA techniques.
11. All persons working with service recipients will be trained in behavioral support and management interventions appropriate to their job responsibilities and/or needs of children they are serving. Such training may include Focus on Youth policies and procedures; The Nurtured Heart Approach; classes on Behavior Support and Management and Crisis Intervention; and Safe Crisis Management.
12. Possible positive behavioral interventions to be utilized are:
 - a. Positive Responses: Ignoring inconsequential behavior; walking away then re-engaging; sharing feelings; self-talk; and recognition techniques as prescribed by the Nurtured Heart Approach.
 1. Secondary Strategies: Includes Non-verbal intervention; Para-verbal intervention; and Verbal interventions of Encouragement, Discussion, and Direction strategies.



2. Encouragement: Includes indicating concern; using a soothing demeanor; encouraging participation and cooperation; changing the environment; using “I” and “We” messages; using clear language; attempting to divert focus; and offering choices.
 3. Discussion: Includes paraphrase techniques; behavior description; reflecting feelings; perception checking; open ended questions and phrases; and summarization..
 4. Direction: Includes direct appeal; positive problem-solving; benign confrontation; setting clear expectations; redirection; positive correction; limit setting; consequence reminder; and natural and logical consequences.
- b. Time-Out/Reset: Directing a child to initiate a time away from his/her current activity to reset his/her behavior.

KEEP A LEVEL HEAD





Definitions

Adoption: To take into one's family through legal means and raise as one's own child. Establishing a legally recognized, lifelong relationship between a parent and child; **OR** legal process that establishes a parent/child relationship; **OR** Adoption is the practice in which an adult assumes the role of parent for a child who is not the adult's birth parent.

Adoption Finalization: when the court allows adoptive parent(s) to adopt a child and takes the necessary action to formally make the child a legal member of their family.

Adoptive Parent: A person who has adopted a child (of other parents) as his or her own child.

Agency: An organization that provides services to children and families. (It can be a private agency or private non custodial agency and is certified by Ohio Department of Job and Family services.)

Attorney: A person who has been admitted to the bar by order of Ohio Supreme Court. This person may represent you in court.

Birth Family: Those who share a child's genetic heritage, blood relations, or extended family members.

Case Plan: A document that identifies strengths of a child, concerns to be resolved, and services to support the child that will result in ensuring permanence for the child.

Caseworker: A protective services worker who is responsible for providing supportive services to a child and his or her parent, guardian, or caregiver.

Child: Any person under 18 years of age or a mentally or physically handicapped person under 21 years of age.



Closed Adoption: An adoption in which birth and adoptive families have no contact and know only non-identifying information about one another

Custodian: A person who has legal custody of a child or an organization that has permanent, temporary, or legal custody of a child.

Developmental Delays: Delays in a child's developmental progress as measured against other children's development at the same age. (Such as walking, toilet training, talking, etc.)

Developmental Disabilities: Any condition of the body, mind, or emotions that interfere with a child's development.

Disruption: An unplanned transfer of a child to a substitute care placement setting.

Family Foster Home: A home where children live for a temporary basis apart from their parents.

Foster Caregiver: adults who are licensed by the state, county, or agency to provide a temporary home for children while their birth parents receive helpful services.

Foster Children: Children who have been placed in the state's legal custody and are cared for by foster parents.

Lifebook: A record of the child's life, which helps identify events in his or her past, includes what happened during the period when he or she was in agency care. The record will include a chronological listing of such event and relationships in the child's life. Photographs may be used to depict events in the Lifebook.

Legal Custody: A decision made in court that allows an adult or adults to be given legal responsibility for a child.

Termination of parental rights (TPR): process of involuntarily taking away the parental rights of a parent who is not able to properly care for their child.

Therapeutic foster home: A foster home where the parents have received special training in parenting a wide variety of children.



Common Abbreviations

ODJFS- Ohio Department of Job and Family Services

CS- Children Service

TC- Temporary Custody

PC- Permanent Custody

Directory

ADAMS CO. CHILDREN SERVICES

300 N. Wilson Dr.

West Union, OH 45693

Director: Jill M. Wright

T: 937-544-2511 F: 937-544-9724

E: 513-732-7111

Wrightj05@odjfs.state.oh.us

BROWN CO. DJFS

775 Mt. Orab Pike

Georgetown, OH 45121

Director: David M. Sharp

T: 937-378-6104 F: 937-378-4753

E: 937-378-4435

Sharpd@odjfs.state.oh.us

BUTLER CO. DJFS

300 N. Fair Ave.

Hamilton, OH 45011

Director: Jerome Kearns

T: 513-887-4055 F: 513-868-6215

E: 513-868-0888

Centej01@odjfs.state.oh.us

WARREN CO. DJFS

416 South East St.

Lebanon, OH 45036

Director: Patti Jacobs

T: 513-695-1546 F: 513-695-2957

E: 513-695-1600

Jacobp02@odjfs.state.oh.us

9-1-1 Emergency Number

CLERMONT CO. DJFS

2400 Clermont Center Dr.

Batavia, OH 45103

Director: Mike Pride

T: 513-732-7248 F: 513-732-7216

E: 937-544-2511

Pridem@odjfs.state.oh.us

HAMILTON CO. DJFS

222 E. Central Parkway

Cincinnati, OH 45202

Director: Moira Weir

T: 513-241-KIDS F: 513-946-2451

E: 513-241-KIDS

Weirm@jfs.hamilton-co.org

MIAMI CO. CHILDREN SERVICES

1695 Troy-Sidney Rd.

Troy, OH 45373

Director: June A. Cannon

T: 937-335-4103 F: 937-339-7533

E: 937-339-6400

cannoj01@odjfs.state.oh.us

CLERMONT CO. JUVENILE COURT

2340 Clermont Center Dr.

Batavia, OH 45103

Director: Ann Arbaugh

T: 513-732-7696

F: 513-732-7695

Dickt@odjfs.state.oh.us

2-1-1 United Way

For the answers to your social and human service needs 24/7.



Notes:



Notes:



Foster Care Client Rights Handbook and Behavior Support & Management Receipt

I have read and understood the rules and privileges and have discussed these with the therapist, case manager, or supervisor. I have received a copy of my Client Rights Handbook. I understand my rights regarding:

- Participation in service decisions
- Denial of services, treatment, and/ or medication, that is not enforced legally, at any time
- A reasonable amount of privacy and confidentiality
- Filing a grievance
- Behavioral Health Services Client Rights

I have reviewed and received a copy of the Behavior Support & Management policy and procedure summary and a copy of the full policy and procedures have been made available to me. I understand I have the right to be treated with dignity and respect. I can refuse consent for treatment at any time and I understand that interventions utilized will not violate state laws or Focus on Youth policies and procedures.

The Client Rights Handbook and Behavioral Support & Management Policy were explained to me by the FOY personnel listed below.

_____ Client Name (please print)	_____ Client Signature	_____ Date
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_____ Guardian Name (please print)	_____ Guardian Signature	_____ Date
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_____ Guardian Name (please print)	_____ Guardian Signature	_____ Date
---------------------------------------	-----------------------------	---------------

_____ FOY Personnel (please print)	_____ FOY Personnel Signature	_____ Date
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☐ Client is not developmentally appropriate to sign

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Visit us on the Web:

www.focusonyouth.com