



CLIENT RIGHTS HANDBOOK

FOSTER CARE AND BEHAVIORAL HEALTH



Table of contents

Mission Statement & General Rights and Policies	1
Foster Care: Service Hours, Client Rights, and Youth Orientation	6
Behavioral Health: Service Hours and Client Rights	11
Additional Resources	15
Grievance Rights and Forms	19
Behavioral Support Management	21
Definitions	25
Directory and Crisis Numbers	27
Client Signature and Receipt Forms	28
Contact Information	30



Mission Statement



Improve lives by providing trauma-responsive foster care, adoption, and behavioral health services that promote permanency, safety, and well-being for youth and families.

"Every client is entitled to be treated with dignity and respect, and each individual must be aware of their rights."



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

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

A list of holidays that are observed by Focus on Youth is below. On these dates, the office is closed. However, 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.)



- | | |
|---|---|
| <input type="checkbox"/> New Year | <input type="checkbox"/> Fourth of July |
| <input type="checkbox"/> Martin Luther King Day | <input type="checkbox"/> Labor Day |
| <input type="checkbox"/> Presidents Day | <input type="checkbox"/> Veterans Day |
| <input type="checkbox"/> Good Friday | <input type="checkbox"/> Thanksgiving |
| <input type="checkbox"/> Memorial Day | <input type="checkbox"/> Day After Thanksgiving |
| <input type="checkbox"/> Juneteenth | <input type="checkbox"/> Christmas (Eve & Day) |

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.

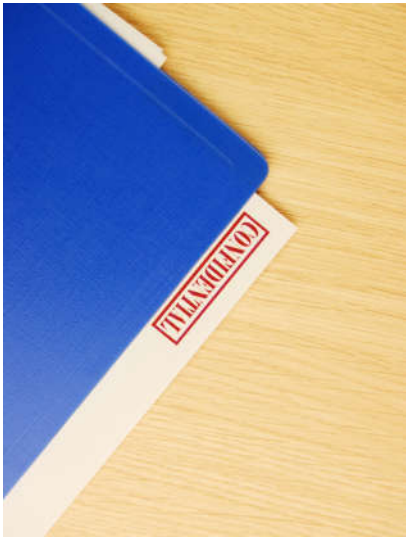
Rights of Persons with Developmental Disabilities



- Focus on Youth will work in partnership with the person and his or her team, according to the person's wishes, to develop a service plan that promotes self-determination. The shared goal will be to enable the individual when they are developmentally appropriate to fully function independently.
- 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 experiences, restrict personal freedoms, or cause personal discomfort.
- An intervention will be discontinued immediately if it produces adverse side effects or is deemed unacceptable according to professional standards.
- Persons with developmental disabilities will be treated with dignity and respect and interventions that are against agency policies will be prohibited.
- 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.
- 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 needs will be facilitated.
- Focus on Youth provides or arranges for communication assistance for persons with special needs who have difficulty making their service needs known and considers the person's literacy level.
- Services and support systems are to be developed to meet the individual's needs to achieve community involvement and participation.
- Caregivers are supported and provided information to strengthen care, prevent inappropriate placements, and maintain family unity.
- Persons with intellectual and developmental disabilities will receive support and education regarding sexuality and relationships that has been tailored to their needs, capacity, and learning style that includes sexual health and development, family planning, prevention of sexually transmitted diseases/infections, sexual abuse, and exploitation including giving and receiving sexual consent.



Rights of 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 to all matters about 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 of legal age), a 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, before releasing such information, Focus on Youth will:

- determine if the reason to release information is valid;
- obtain the client's informed, written authorization to release the information; and
- 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 written consent from the client, and legal guardian, before recording, photographing, or filming.



FOSTER CARE CLIENT RIGHTS

Service Hours: Foster Care



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 at **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 on all holidays. It is recommended that on-call be utilized for crisis situations only. Examples of crisis situations:

- AWOL
- 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 a 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



Client Rights for Foster Youth



FOSTER YOUTH BILL OF RIGHTS A Guide to Your Rights in Foster Care



Personal Rights

- The right to be free from physical verbal and emotional abuse and inhumane treatment.
- The right to be protected from all forms of sexual abuse and exploitation.
- The right to have your own money:
 - Earn your own money
 - Have a bank account
 - Be provided with guidance on how to save and spend money
- The right to receive guidance, support, and supervision from adults in your lives, including parents, resource caregivers, agency staff, mentors, youth advisory boards, and others.
- The right to participate in age-appropriate extracurricular, enrichment, and social activities.
- The right to protection from discrimination or harassment based on race, sex, gender, gender identity, sexual orientation, disability, religion, color, or national origin.
- You have the right to privacy and personal belongings.
- You have the right to receive timely and consistent access to:
 - Housing that is clean and safe
 - Food, including special food considerations
 - Clothing appropriate for your age and gender identity, including the right to choose clothes



Religious Rights

- You have the right to enjoy freedom of thought, conscience, and religion, including the right to not practice religion.



Educational Rights

- The right to go to school.
- The right to have input in selecting the school you attend.
- The right to participate in educational and school-related activities.
- Youth ages 14 and over have the right to access information about vocational and college education classes and financial aid to pay for those.



Communication Rights

- The phone numbers for CASA, GAL, attorney, custodial agency worker, custodial agency hotline, probation officer, and any other professionals involved must be available to you.
- The right to visit and communicate with your parents, siblings, other family members, non-related kin, friends, and significant others that you are not living with, in accordance with your plan.



Legal Rights

- The right to contact your attorney, CASA, GAL within 24 hours of the request.
- The right to have your opinions heard and/or be included when any decisions are being made affecting your life.
- The right to be invited to and prepared for meetings and court hearings and provided with information about your permanency options.



Medical Rights

- You have the right to receive:
 - Medical care
 - Dental care
 - Vision care
 - Mental Health Services
- You have the right to schedule appointments or have appointments scheduled for you.
- You have the right to be taken to these appointments.

There are times when an agency can temporarily restrict these rights, for your or others' health and safety. If you feel your rights have been violated unfairly, you can talk to your foster parent, your caseworker, your GAL or CASA, or another trusted adult. **You can also reach out to the Youth Ombudsman by calling 1-877-649-6884 (OH-YOUTH) or completing the online complaint form at: youthombudsman.ohio.gov.** They cannot change court-ordered decisions, respond to emergencies, provide legal advice, or investigate allegations of child abuse or neglect. The Youth Ombudsman will work with you to resolve complaints and advocate for your rights to be protected while in foster care.



Youth Orientation

We will provide a safe foster home 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 property. If you are not permitted to use the property of others, you will leave it alone.
6. You must request permission from your foster parent(s) to use the phone.
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).

Youth Orientation



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, if you follow a religious practice.
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 who 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.





BEHAVIORAL HEALTH CLIENT RIGHTS

Service Hours: Behavioral Health



- Focus on Youth, Inc. office hours are:
Monday - Friday 8:00 a.m. to 4:30 p.m.
- Mental Health Services are provided:
Monday – Friday 8:00 AM to 6:00 PM.
- There is opportunity for night appointments as scheduled individually Monday – Thursday to 8:00 PM with your assigned therapist, based on availability.
- Behavioral Mental Health Services are available throughout southwest Ohio.
- In the event that you are in crisis and at risk of harming yourself or others, please call 911 immediately and seek immediate attention at the nearest hospital.
- For crisis situations only, it is recommended that you seek assistance immediately. Examples of crisis situations:
 - serious injuries
 - significant behavior outburst
 - youth engaging in risky behaviors.
 - illness or death of child, parent, or foster parent.
 - traffic accidents involving a foster child or foster parent, etc.
 - suicidal or homicidal ideations or attempts



Client Rights for Youth Receiving Behavioral Health Services



Focus on Youth adheres to the following list of client's rights as written in the Ohio Administrative Code 5122:2-1-02 and 5122:26-18.

Any allegation of neglect and/or abuse by agency staff of a person served, regardless of the source, shall be investigated. The written results of an investigation into an allegation of neglect and/or abuse of persons served shall be reviewed by the executive director of the agency. Focus on Youth will report any allegation of staff neglect or abuse to the community mental health board within twenty-four hours of the event occurring and communicate the results of the investigation to the community mental health board. In situations that involve child abuse or adult abuse, any notification required by law shall be made to the appropriate authorities. Focus on Youth maintains policies and procedures that are consistent with state law.

All who access mental health services are informed of these rights:

- The right to be treated with consideration and respect for personal dignity, autonomy and privacy;
- The right to reasonable protection from physical, sexual or emotional abuse, neglect, and inhumane treatment;
- The right to receive services in the least restrictive, feasible environment;
- The right to participate in any appropriate and available service that is consistent with an individual service plan (ISP), regardless of the refusal of any other service, unless that service is a necessity for clear treatment reasons and requires the person's participation;
- The right to give informed consent to or to refuse any service, treatment or therapy, including medication absent an emergency;
- The right to participate in the development, review and revision of one's own individualized treatment plan and receive a copy of it;
- The right to freedom from unnecessary or excessive medication, and to be free from restraint or seclusion unless there is immediate risk of physical harm to self or others;
- The right to be informed and the right to refuse any unusual or hazardous treatment procedures;

Client Rights for Youth Receiving Behavioral Health Services



- The right to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies, photographs, or other audio and visual technology. This right does not prohibit an agency from using closed-circuit monitoring to observe seclusion rooms or common areas, which does not include bathrooms or sleeping areas;
- The right to confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of client information under state and federal laws and regulations;
- The right to have access to one's own client record unless access to certain information is restricted for clear treatment reasons. If access is restricted, the treatment plan shall include the reason for the restriction, a goal to remove the restriction, and the treatment being offered to remove the restriction;
- The right to be informed a reasonable amount of time in advance of the reason for terminating participation in a service, and to be provided a referral, unless the service is unavailable or not necessary;
- The right to be informed of the reason for denial of a service;
- The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws;
- The right to know the cost of services;
- The right to be verbally informed of all client rights, and to receive a written copy upon request;
- The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations;
- The right to file a grievance;
- The right to have oral and written instructions concerning the procedure for filing a grievance, and to assistance in filing a grievance if requested;
- The right to be informed of one's own condition; and,
- The right to consult with an independent treatment specialist or legal counsel at one's own expense.



ADDITIONAL RESOURCES



Grievance Policy

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 have 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:

**Client Rights or Civil Officer
Focus on Youth, Inc.
8904 Brookside Avenue
West Chester OH 45069
Phone: 513-644-1030
Email: clientrights@focusonyouth.com**

Grievance Policy

Filing A Formal Grievance

If the complaint is against the **Client Rights Officer** or they are unavailable, to assure prompt accessibility to the grievance process, using the same address and phone number, you may contact Focus on Youth's Executive Director.

Response Guidelines:

- A written acknowledgement of receipt of the grievance will be provided to each grievant within three business days from receipt of the grievance. An acknowledgment of receipt shall include, but not be limited to, the following:
 - The date the 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 decided to review will be completed.
- The total length of time for resolving the grievance will be 21 days or less from the date of filing the grievance



Grievance Policy



Filing Other Complaints

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

Ohio Department of Mental Health and Addiction Services Board

30 E. Broad St.
36th Floor
Columbus, Ohio 43215
(614) 466-2596

US Department of Health & Human Services

200 Independence Ave.
SW Washing, DC 2020
(800) 696-6775

Butler County Mental Health Board

5963 Boymel Drive
Fairfield, Ohio 45014
(513)860-9240

Counselor and Social Worker Board

77 S High Street
24th Floor, Room 2468
Columbus, Ohio 43215
(614) 466-0912

Ohio Legal Rights

50 W. Broad Street, Suite 1400
Columbus, OH 43215
(614) 466-7264

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.



Grievance/ Complaint Form

Client Information and Concerns

Name

DOB

Date

Complaint is against:

Foster Parent

Name(s)

Employee

Name(s)

Other

Name(s)

Please provide a detailed description of the problem. (Attach additional pages if necessary.)

Behavior Support and Management

Behavior Support and Management Procedures:

- 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.
- 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.
- Client preferences regarding the use of physical restraint will be determined and considered and documented in the ICR.
- 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.
- Focus on Youth approves the use of physical restraint according to the Use of Physical Restraint Policy and Procedures (Policy BSM 2)
- Focus on Youth will collaborate with the service recipient and/or parents or legal guardian to assess for: the individual's perception of emotional and physical safety; past experience with restrictive behavior management interventions; antecedents, emotional triggers, and the resulting challenging behaviors; previous successes in utilizing strategies and coping skills to mitigate need for restrictive behavior management interventions; psychological and social factors that can influence use of such interventions, including trauma history; and medical conditions or factors that could put the service recipient at risk.
- 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.
- The Behavior Support Plan/Crisis Plan is based on assessment results, identifies proactive interventions to prevent the potential need for crisis interventions, and identifies strengths-based strategies that will help the person de-escalate their behavior and prevent harassing, violent, or out-of-control behavior; specifies interventions that may or may not be used, taking the individual's trauma history into account; is modified as necessary; and is developed in collaboration with the service recipient and is signed by the person, his/her parent or legal guardian, and personnel, as appropriate.

Behavior Support and Management

Behavior Support and Management Procedures continued:

- Each client's history will be reviewed, before 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.
- 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.
- Focus on Youth has procedures that address harassment and violence towards the service recipients, staff, and/or foster parents.
- Focus on Youth adheres to the support of positive behavior by maintaining a trauma-informed environment; 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 Trauma-Competent Caregiver (TCC) curriculum and other evidence-based parenting techniques as primary interventions to accomplish the above stated goals. Direct service staff and foster caregivers will be trained, coached and assessed in the practice of TCC and other techniques that are best practice and/or evidence based.
- All personnel and foster caregivers will be trained in behavioral support and management interventions appropriate to their job responsibilities and/or needs of children they are serving. Behavior support training will promote a safe and therapeutic service environment, be responsive to individual triggers, and take a trauma-informed approach. Such training may include Focus on Youth policies and procedures; Trust-Based Relational Interventions (TBRI); TCC curriculum training; and Safe Crisis Management.

Behavior Support and Management Procedures continued:

- Possible positive behavioral interventions to be utilized are:
 - **Positive Responses:** Ignoring inconsequential behavior; walking away then re-engaging; sharing feelings; self-talk; and recognition techniques.
 - **Secondary Strategies:** Includes Non-verbal intervention; Para-verbal intervention; and Verbal interventions of Encouragement, Discussion, and Direction strategies.
 - **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.
 - **Discussion:** Includes paraphrase techniques; behavior description; reflecting feelings; perception checking; open-ended questions and phrases; and summarization.
 - **Direction:** Includes direct appeal; positive problem-solving; benign confrontation; setting clear expectations; redirection; positive correction; limit setting; consequence reminder; and natural and logical consequences.
- Time-Out/Reset: Directing a child to initiate a time away from his/her current activity to reset behaviors.



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 an 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 noncustodial agency and is certified by the Ohio Department of Job and Family Services).

Attorney: A person who has been admitted to the bar by order of the 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 the 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.



Definitions



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, including 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

ISP- Individual Service Plan

SAR- Semi-Annual Review

GAL- Guardian ad Litem

CASA- Court Appointed Special Advocate





Directory

Adams County Children Services

300 N. Wilson Dr.
West Union, OH45693
T: 937-544-2511 F: 937-544-9724
E: 513-732-7111

Brown County DJFS

775 Mt. Orab Pike
Georgetown, OH45121
T: 937-378-6104 F: 937-378-4753
E: 937-378-4435

Butler County DJFS

300 N. Fair Ave.
Hamilton, OH45011
T: 513-887-4055 F: 513-868-6215
E: 513-868-0888

Clermont County DJFS

2400 Clermont Center Dr.
Batavia, OH45103
T: 513-732-7248 F: 513-732-7216
E: 937-544-2511

HAMILTON CO. DJFS

222 E. Central Parkway
Cincinnati, OH45202
T: 513-241-KIDS F: 513-946-2451
E: 513-241-KIDS

211-United Way

For answers to social and human service
needs 24/7

Clinton County Children Services

1025 S South St. # 200
Wilmington, OH 45177
T: 937-382-0963 F: 937-382-7039

Highland County Children's Services

1575 N High St
Hillsboro, OH 45133
T: 937-393-3111 F: 937-393-3299
E: 937-393-1421

Miami County Children's Services

1695 Troy-Sidney Rd.
Troy, OH45373
T: 937-335-4103 F: 937-339-7533
E: 937-339-6400

Montgomery County Children's Services

3304 N. Main St.
Dayton, OH 45405
T: 937-224-5437 F: 937-277-1127
E: 937-224-5437

Warren County Children Services

416 S East St,
Lebanon, OH 45036
T: (513) 695-1546 F: 513.695.2957

Directory: Crisis Numbers

Hamilton County
(513) 584-5098

Clinton/Warren County
(877) 695-6333

Montgomery County
(833) 580-2255

Clermont County
(513) 528-SAVE (7283)

Butler County DJFS
(844) 427-4747

Preble County
(866) 532-3097



24/7 free and
confidential
support

CALL OR TEXT: 988

CHAT: 988LIFELINE.ORG



Foster Care: Clients Rights Handbook & Behavior 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 the 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
_____	_____	_____
Guardian Name (please print)	Guardian Signature	Date
_____	_____	_____
Guardian Name (please print)	Guardian Signature	Date
_____	_____	_____
FOY Personnel Name (please print)	FOY Personnel Signature	Date

Client is unable to sign due to young age or development



Behavioral Health: Clients Rights Handbook & Behavior 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 the 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
_____	_____	_____
Guardian Name (please print)	Guardian Signature	Date
_____	_____	_____
Guardian Name (please print)	Guardian Signature	Date
_____	_____	_____
FOY Personnel Name (please print)	FOY Personnel Signature	Date


Client is unable to sign due to young age or development

CONTACT INFORMATION



 (513) 644-1030

 contact@focusonyouth.com

 8904 Brookside Ave,
West Chester Ohio 45069

 www.focusonyouth.com

