AspireHope NY, Inc. Mission Statement

To engage individuals, families and communities in improving their own mental and physical health through services that are led and supported by peers who have been through relevant experiences.

AspireHope NY, Inc. Vision Statement

AHNY Inc. will have a reputation for revolutionizing personal growth and will be a true catalyst for changing the way our communities view individuals and families with various abilities and needs. Because of AHNY’s work, our region, and our funders, will prioritize mental wellness more than ever before; making the communities, we serve the safest and strongest in the nation.

Membership in AspireHope NY, Inc.

Members are peers who are Adults, Youth and Parents/Guardians of children who have emotional, behavioral, mental health challenges, and/or cross system needs, who have signed required consents and completed an intake.

AspireHope NY, Inc. Essence

AHNY believes in Supporting and Strengthening Individuals along their Journey by upholding the following values:

- **Respectful** - We accept others for who they are while encouraging growth and positive change

- **Relatable** - We are a peer run, youth driven organization. The personal experience staff possess increase engagement and provides a non-judgmental philosophy throughout our agency

- **Strength-Based** - We believe that every individual is resilient, resourceful, and the expert along their journey

- **Resourceful** - We partner with individuals who develop the tools to come up with creative solutions

- **Integrity** - We believe it is fundamental for everyone to do the right thing even when no one is looking
Services Provided by AHNY:

- Service Planning, FANS and PAMS Assessment
- Family support meetings with or without childcare services
- Youth support meetings, opportunities to give back to the community, and recreational activities
- Advocacy, Information and Referral services, Peer Support, and Education
- In-Home and Out-of-Home Respite
- Group Recreational Activities
- Collaborative Initiatives with other service providers
- Community Outreach
- Community Education
- Adult Peer Services
- Waiver Contract Services
- On Staff Trainers
- Peer Advocates at Elmira Psychiatric Center and Community Residences
- Services vary by county of residence and funding.

Responsibilities of Members:

- Understand and uphold the member procedures.
- Respect and maintain the confidentiality of all members.
- Be aware and use the Quality Assurance Policy as needed.
- Provide staff with updates to medical ins. coverage, and medical information for proper program enrollment and billing.
- Assist staff in completing and updating intake information and consent forms as needed. Screening questions will include medical, mental health and substance abuse. Responses facilitate self-directed goals, referrals to community-based programs and are not in the Individual Service Summary Plan.
- Participate in assessments Family Assessment of Needs Strengths, Patient Activation Measure and other outcome measurement processes
- Actively participate in any of the following: opportunities as able
  - Board of Directors membership
  - Community Boards and Committees
  - Attendance at Educational Events
  - Peer advocacy for families
  - Advocacy for system change as needed
  - Volunteerism within the agency and the community
  - Referring participants
  - Fundraising activities
- Sign up and/or follow cancellation guidelines for activity
- Use resources for transportation to and from activities
- Be respectful by using appropriate language, limiting evening and weekend calls to crises, refrain from using employee’s personal phones and visiting their home
• Be aware that employees are required to act as Mandated Reporters of child abuse and neglect
• Be aware that all employees must comply with Mental Hygiene Law, and will report to the Director of Community Services or Law Enforcement an individual threatening harm to themselves or others. This includes a person's refusal or inability to meet his or her essential need for food, shelter, clothing or health care, if such refusal or inability is likely to result in serious harm if the person isn’t hospitalized immediately.

Responsibilities of Participants in a Support Group:

• Create a welcoming and supportive atmosphere for all members at meetings and activities
• Assist in creating and following group rules
• Keep other member’s personal information confidential
• Support one another by assisting in the following when able:
  ➢ Networking with peers
  ➢ Assisting staff to collect accurate information on services offered in the community
  ➢ Participating in community outreach activities
  ➢ Participating in scheduling speakers
  ➢ Planning and participating in recreational activities
  ➢ Advocating for yourself and other group members

Responsibilities of Caregivers who utilize Respite, Skillbuilding and Childcare Services:

• Children may participate in activities in the county they receive services
• Services provided to the identified child from birth until they transition to adult services.
• When more than one child is receiving respite, whenever possible there will be two workers present at the respite
• Notify staff of any environmental or food allergies
• Fill out forms accurately
• Use sign-up and cancellation procedures
• Provide necessities for children to participate in activities
  ➢ Hats, boots, jackets, etc., and diapers and change of clothing for children who soil
  ➢ Keep required documentation current regarding your child’s physical and emotional health
  ➢ Provide emergency names and complete the Medical Information
• Be prompt in dropping off and picking up children
• Provide written documentation to the staff if someone other than the parent or caretaker is dropping off/picking up a child at an activity or assumes responsibility for the child/children.
• Be aware and follow the Communicable Diseases Policy and Pest Infestation Policy
• Be aware of Medication Policy
Member Confidentiality

The Confidentiality Policy ensures that information regarding our members is confidential. What occurs during group is to remain within that confidential support group. Breach of confidentiality will be considered a violation of our policies and could result in being asked to not attend Support Group.

Consent Forms

All members must sign a Release of Liability, Caregivers must sign a Release of Liability, Community Activity and Emergency Medical Treatment Consent Form (#2027) (one form per child) in order to participate in services. Members will receive a copy of all signed consents.

Quality Assurance

All suggestions and concerns are valued and we make every effort to resolve concerns to the mutual satisfaction of all. Member should discuss concerns with the assigned program staff or document them on the Family & Employee Quality Assurance Form #2085, available at www.AHNY.org. All concerns may be reported to the Executive Director.

- Following consideration and investigation the assigned program staff or Executive Director shall respond to the individual.
- If the individual is not satisfied with the response, they may forward the completed form to the Board of Directors Executive Committee. The Board of Directors will review and identify necessary steps for resolution. In all instances, the Board decision shall be final.

Fire Safety

Each support group will have a written safety plan and practice drills. Fire exit diagrams are at every site as required by the local fire safety laws. Fire drills and safety reviews will generally occur three times per year during the support group meeting in the month in April, July and October. During the month of October (Fire Prevention Month), fire safety information is provided to families.

Communicable Disease

Members with a contagious illness cannot generally receive services. For a comprehensive list of communicable diseases please refer to the following web site: www.health.state.NY.US/diseases/communicable or contact your local health department. A member or staff with fever, rash caused by contagious illness, ringworm or pinkeye cannot participate. If it is determined that a child is ill, the caregiver must immediately return/remove their child.
Pest Infestation

Members who have lice may not receive services until the day following successful treatment. Members who have bed bugs may not receive services in their home or attend AHNY Inc. activities for 7 days following treatment.

It is the responsibility of the member to inform the staff when an outbreak of lice or bed bugs occurs. If a member at support group has lice or bed bugs, they must leave immediately. If lice or bed bugs are discovered at a respite activity, the parent will be expected to return immediately and assume responsibility for their child/children.

Fundraising

Fundraising is an agency-wide event approved by the Board of Directors. All proceeds from the fundraising event submitted by the employee overseeing the event to the Bath Business Office and be placed in the fundraising account. Monies distributed to benefit all members as determined by the Board of Directors, Administration and families. A monthly accounting of the money in the fundraising account and any expenditures and/or disbursements are provided to the Board of Directors, Administration, and Support Groups.

Employee Harassment

It is the expectation of AHNY Inc. that members treat AHNY Inc. employees with mutual respect. Verbal abuse, harassment or other intimidation could affect the ability of the family to receive services. (Harassment is described as profanity, name-calling, inappropriate tone, threats and other demeaning behaviors)

If an employee experiences verbal abuse, harassment or other intimidation from a member, this must be reported to a member of administration.

The following steps will be taken:

• The Peer Advocate will be informed and asked to meet with the member accompanied by an administrator, unless the employee is the recipient of harassment, in which case it is their option to meet and to review the policy regarding treatment of employees.
• If the behavior continues, alternative staff may be assigned.
• Temporary suspension of service for up to 30 days.
• After 30 days if the parent/member would like to resume services and if there is a staff willing and available, services will resume.
• If harassment continues, services will be terminated.

Member has the right to ask the Executive Director to review the incident and appeal the decision.
**Alcohol/Illegal Drug Use Policy**

The use, possession, and/or sale of alcohol/illegal drugs by members during any AHNY Inc. sponsored or supported activity is strictly prohibited. Staff may not leave child/children in the care of individuals suspected to be under the influence of alcohol/illegal drugs or inhibiting prescription medication use. If an individual, suspects staff to be under the influence they must immediately notify an administrator and/or a supervisor.

**SERVICES IN THE HOME/COMMUNITY** If a member is under the influence of alcohol/drugs in their home/community while meeting with AHNY Inc. Staff, services are rescheduled. If the individual is uncooperative or dangerous, 911 is called.

**CHILDCARE IN THE HOME** If the parent/caregiver responsible for the immediate care of the child/children is suspected to be under the influence of alcohol/ drugs, staff will attempt to make supervision arrangements as identified by parent/caregiver. If alternate childcare is unavailable, 911 is called.

**AT AHNY SPONSORED/SUPPORTED EVENT** If a member is suspected to be under the influence of alcohol/drugs at a AHNY sponsored/supported event, staff will request the car keys (when applicable) and when possible, staff will separate the individual(s) from the rest of the group. Staff will request that the member arrange to be picked up from the event. If alternate transportation is unavailable or the individual is uncooperative or dangerous, 911 is called.

**YOUTH PARTICIPANT** A youth is suspected to be under the influence or in possession of alcohol/illegal drugs at a AHNY sponsored/supported event, staff will notify their parent/caregiver immediately. The parent/caregiver will need to return or remove the child immediately. If the parent/caregiver or emergency contact is not available, or the youth is threatening or dangerous, 911 is called.

**De-Escalation and Crisis Avoidance**

If a child or youth exhibits acting out behavior, de-escalation techniques in accordance with OMH and OPWDD regulations. According to OMH and OPWDD regulations, staff is not to use physical restraint.

- Staff will use techniques that relate to child’s behavior
- If de-escalating techniques are not successful and behavior continues, family will be notified and requested to return
- A Reportable Occurrence Form (#2179) is completed and a member will receive a copy.
- If a child appears to be in danger to self or others, call 911.
- As soon as possible the staff will notify their Direct Supervisor and the Executive Director

**Incident Report and Review**

An incident is an unusual happening or an injury that occurs during an activity, involving a member, adult non-employee or employee e.g. a youth who runs away, threatens suicide or makes threats of violence, member who may slip and fall causing a bruise or other injury, a medical emergency, sexual contact between
children or between an adult and a child, a physical confrontation between children or adults, action necessitating a call to the police or outside agency for help. The Executive Director, Assistant Director or Medicaid Compliance/HR Manager will oversee all reportable occurrences to determine if additional reporting is required.

- The Incident Report Form (#2179) is filled out and signed by the member and the employee involved prior to the end of service.
- Assigned Administrative staff will review, sign and take appropriate action(s).
- Completed copy is mailed to the member.

**Mandated Reporting of Child Abuse and Neglect:**

**Definitions**
The following definitions are summaries from the Child Protective Services Act, the Family Court Act and the Summary Guide for Mandated Reporters published by NYS Office of Children and Family Services.

- **Abused Child:** An "Abused Child" means a child less than 18 years of age, whose parent or other person legally responsible for his care has inflicted serious physical injury on the child, created a substantial risk of physical injury or committed a sex offense against the child. Abuse can also include situations where the parent or person legally responsible knowingly allows someone else to inflict harm on the child.

- **Neglected or Maltreated Child:** A “Neglected or Maltreated Child” means a child less than 18 years of age, whose parent or other person legally responsible for his care has failed to exercise a minimum degree of care and placed the child’s physical, mental or emotional condition at imminent danger or impairment. This includes failing to provide adequate food, clothing, shelter, medical treatment or education; failing to provide proper supervision; inflicting excessive corporal punishment, abandoning the child or misusing alcohol and drugs to the extent that the child was placed in imminent danger. Poverty or other financial inability to provide adequate food, clothing, shelter and medical treatment is not maltreatment.

**AHNY Employees Training on Mandated Reporting**

All employees who are direct care providers are mandated reporters (Section 413 - Child Protective Act)

Each mandated reporter is provided with the Summary Guide for Mandated Reporters in New York State (pub. #1159)

Each employee will receive training during their orientation and will be required to take the online training through the NYS Office of Child and Family Services Mandated Reporting Resource Center

All cases of suspected child abuse or maltreatment is ordinarily orally reported first to the Executive Director or other Administrative Staff then to the New York State Mandated Reporters Hotline at 1-800-635-1522

Additional information that may be helpful.
AspireHope NY, Inc.  |  Member Procedural Handbook  —  February 2021

If a child appears to be in imminent danger call 911, and if the employee is unable to contact an administrator, the employee must follow through by calling the hotline immediately and leave a message notifying the administrator of the current status of the situation.

Families are encouraged to initiate their own report. The family will be notified by the Family Peer Advocate and/or reporting staff of a hotline report unless it places a child or staff in imminent danger.

The assigned Administrative Staff and the Executive Director will review all reports.

**In-Home Respite Provider Status**

To provide in or out of home respite all employees
Must be certified in OMH Respite/Skill Builder Training within 6 months and complete additional individual program requirements.
Complete OMH modules.
Read and sign documentation of understanding the Employee Procedural Manual, meet with HR Manager and demonstrate a working understanding of agency policies and procedures.
Attend individual and group supervision meetings.
Satisfy all clearance requirements.

**Skillbuilding and Respite Staff Ratio**

The staff to child ratio in a group childcare setting is generally 1 to 3. This ratio is modified for specific groups and activities with the approval of the Services Coordinator depending on activity and the acuity of the group.
When more than one child is present in the home and community, service will occur with two staff, exceptions may apply. Exceptions are considered if a contracting agency requests services for more than one child using only one worker.

**Caregiver Late Return**

If a family does not return on time, the staff must provide for the safety of the child/children in their care.
A staff must not leave until a designated or primary caregiver or another staff assumes supervision of the children. If a family is 15 minutes past due, the staff will attempt to reach the family. If the family is not reached, the staff will call the emergency numbers listed and ask the emergency contact to supervise the children. If after 1 hour, the caregiver has not returned and an emergency contact cannot be reached to supervise child/children, the staff will contact the police.

**Medication Administration**

Employees may not administer or assist in the administration of prescription or over the counter medication including sunscreen or insect repellent. Prescription and over the counter medication may not be self-administered by a child during an activity. The only exception is an EPIPEN or a Rescue Inhaler, given to the worker to keep. The EPIPEN and/or Rescue Inhaler are given to the worker to keep readily available. If required, the child will self-administer. After the EPIPEN is used, the worker will contact 911 and the caregiver. If a Rescue Inhaler is used, the caregiver is contacted. If symptoms persist, 911 and the caregiver must be contacted.
**Swimming**

Swimming can take place in a swimming pool or fresh water if a lifeguard is on duty. Staff must accompany all children in the changing area in compliance with facility regulations. Staff and children should come dressed in swimwear.

**Fresh Water**

A 1:1 ratio is required. Staff must be in the water within arm’s length of the child. Children must remain in water where they can touch the bottom. Staff and children must wear protective footwear. If allowed by the site, children ages 5 years old and under must wear a flotation device.

**Pool**

Staff must be in the water with the children. If the water in the shallow end is over the child’s head, they must have a 1:1 staff within arm’s length. Staff must request an evaluation by the lifeguard for children swimming in the deep end. If the lifeguard cannot provide an evaluation, the child must remain in the area where their feet can touch. Staff supervising children in the deep end must be capable swimmers. Children ages 5 years old and under must wear a flotation device if allowed by the facility. In a group setting, 1 staff must remain on deck to oversee the group.

**Member Satisfaction Surveys**

Surveys are distributed annually to members as required by programing. Completion is voluntary, but encouraged. All can self-identify and request follow up communication, or remain anonymous.

“AHNY Member Satisfaction Survey” is mailed to members in January or given at support groups to complete and return to the Business Office by March 1st. for tracking. The results are shared with the Board of Directors and used to identify strengths, needs and areas of improvement. If a member requests follow up, a member of Administration will contact them within 5 business days.

OPWDD Finger Lakes HCBS Waiver Respite Satisfaction Surveys and FAMILY SUPPORT SERVICES – In-Home Respite, Afterschool, Weekday Recreation, Weekend Recreation, and Overnight Respite Programs are mailed to eligible families in the first and third fiscal quarters. Surveys are returned to the Program Coordinator and results will accompany the second and fourth quarter reports and be reported to Administration, relevant staff and the Standards Compliance Bureau of Program Certification for OPWDD. If you request follow up, a member of the Administration will contact you within 5 business days or they can mail the survey Attn: Amanda Bishi LMSW, Family Support Services and Hourly Respite Coordinator, OPWDD Region 1 Community Services, 620 Westfall Rd., Suite 108 Rochester, NY 14620.
**OPWDD Service Prioritization**

The agency will maintain a roster of qualified individuals (as defined by OPWDD). If the roster reaches maximum capacity, individuals applying for services are placed on a waiting list. The Individual Service Plan Model Score or the DDP2 score, participation in other similar services, availability of other services and information provided by OPWDD, the individual and the family input, prioritize the waiting list. Upon referral for services, the Coordinator will notify the family and OPWDD staff regarding service availability and approximate wait list status. The Coordinator will evaluate the list monthly, report to administration and remove inactive individuals. When a service slot is available, the Coordinator will notify the family and OPWDD staff and obtain necessary documentation.

**Conference Attendance**

AHNY Inc. will sponsor a limited number of Parents/Guardians and staff to attend conferences and workshops as funding allows. The total number of individuals AHNY Inc. can sponsor for any event is dependent upon the total cost per person for that event. Once a number is established, several factors are taken into account to select which individuals may attend. Individuals must be willing to share information at Support groups. Event sponsor criteria, if applicable, will be followed. If all factors are equal, a ballot is drawn to determine attendee.

**Parent/Guardian Community Transition**

AHNY Inc. strives to empower individuals to become self-advocates and establish support systems within their community.

An Individual Support Services Summary Plan, which includes intake and discharge information, FANS scores and goals. Based on the FANS Assessment, a Family Support Goal is written into the Individual Service Plan.

The FANS Assessment utilizes a rating system in which a Parent/Guardian identifies the following: general wellbeing, capabilities, perception of their current situation, knowledge of services and rights and satisfaction with services.

Scoring: Parent/guardian utilizes 0-3 rating within a 19-question FANS tool. The initial FANS is administered at admission or within 30 days of meeting the family and every 90 days until discharge. The expected milestones include a FANS score decrease from a 38-57 range at admission to 19-37 during service provision.

Families with scores of **0-1’s on all questions 1-19 on their initial and secondary FANS** are discharged.

Families with scores of **2-3’s will begin transition at 12 months from the initial intake. At 12 months, services will gradually reduce during the next 6 months** unless the contract states otherwise.

Extension: Services after 18 months are based on type of need and agency’s ability to address the need. Extension will require a FANS score above 38 and one of the following:
• The parent/guardian must submit a written request with provider support letters and/or additional documentation to the Business Office for Administrative review within 30 calendar days of the discharge date.

• If a family requests or is referred back to services within a year of discharge, a letter written by the parent/caregiver must be sent to the Business Office for Administrative review.

• Reactivation after 1 year of documented discharge from AWARDS can occur if the individual’s situation warrants.

Administration will send a written response to the parent/guardian within 30 calendar days from receipt of the appeal letter. Decision options are:

• Approval for return to service with new FANS Assessment.

• A Community Transition Plan, with three family visits, no FANS Assessment.

• Declined