

Family Handbook



Early Education and Haddonfield Campus Elementary and Secondary Education Program

Bancroft 
NeuroHealth

Nurturing abilities and independence

Mission Statement

The Mission of Bancroft NeuroHealth is to provide a spectrum of individualized services for children and adults with neurological and related disabilities to help them achieve greater independence and fulfillment in their lives, while improving their function, activity and participation in society.

Bancroft's Core Values

Compassion

Bancroft NeuroHealth — made up of the people we serve, their loved ones, and all of the staff — is a family in which the abilities, talents and skills of all of its members are shared to enhance the quality and dignity of life for all. Bancroft treats people with dignity and respect and is committed to creating a world in which all people with disabilities are accepted as full, contributing members of the human family.

Independence

In service to people with neurological disabilities, Bancroft NeuroHealth promotes the research, development and dissemination of best practices based on validated scientific evidence. Bancroft provides services in home, school, work and community environments to foster the achievement of independence and self-fulfillment.

Teamwork

At Bancroft NeuroHealth, the people we serve, their family members, staff and financial supporters are integral members of the service delivery team. Bancroft staff are its most precious resource and all members of the staff should receive just compensation, effective support and continuous training leading to career advancement.

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Introduction

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

An active and satisfying quality of life for the people we serve has always been at the heart of Bancroft's programs and services. Margaret Bancroft taught us well that the uniqueness of each person and the special circumstances that impact the totality of his/her life must be appreciated. Families are an important part of the lives of those we serve and, therefore, positive family involvement is supported and encouraged.

Bancroft's programs and services are based on a person-centered philosophy of care. Person-centered care is respectful of the life dreams of the individuals we serve. It emphasizes the strengths of the individual and looks at all the supports that are available to help those we serve meet their life goals. Traditional models of care emphasize deficits and assume that organizations can provide all the services needed to reduce these deficits. Person-centered planning looks to community and the individual's circle of support to meet life goals. Person-centered planning emphasizes relationships.

Rights and Responsibilities

Those served by Bancroft NeuroHealth are treated with dignity and respect. Bancroft staff members will inform, affirm and protect the rights of each student, encouraging the positive involvement of parents/ guardians/advocates throughout the process. As an approved private school, The Bancroft School follows the New Jersey Department of Education guidelines, as outlined in the Parental Rights in Special Education handbook (PRISE). Copies of the PRISE handbook are provided to parents at least annually, and are available upon request (to the school district) or through the New Jersey Department of Education web site at <http://www.nj.gov/njded/specialed/info>.

If it is felt that certain rights would be clinically inappropriate, proposed restrictions would require review and approval by the Interdisciplinary and/or Individualized Education Program (IEP) Team and the Bancroft Human Rights Committee.

Confidentiality/Privacy Regulations

It is the policy of Bancroft NeuroHealth that staff members and all other persons who are authorized to have access to files, records, and electronic data respect the confidentiality of this information, particularly individually identifiable financial and medical information concerning the people served and their families. Verbal discussion about an individual's clinical/behavioral/personal information in a public setting (on or off Bancroft properties) is strictly prohibited, as well, and only those staff directly involved in care or treatment of an individual should discuss or share information about him/her. Please refer to page A-3 for a full copy of our HIPAA Privacy Regulations.

Important Program Expectations

Bancroft must institute certain rules that are necessary in order to manage the program in the best interests of all students. Therefore, the following rules are considered unconditional for the guardian in order for the student to remain enrolled at The Bancroft School:

- Attend or provide input in the development or updating of the Individual Education Plan (IEP). If that is not possible, support and follow the Team's recommendations.
- Follow Bancroft safety and security procedures routinely (sign students in and out, avoid going directly to

classroom, wear visitor badge, among others).

- Assure up-to-date contact information is on file at the school in the event of an emergency.
- Treat school staff and other students with respect. If there is a disagreement with a particular staff person, bring the matter to the attention of his/her supervisor as soon as possible.
- Advocate through the proper channels of communication at Bancroft and the school district; take an issue to the supervisor closest to the situation, and if necessary, up to and including the Bancroft executive leadership and Family Advocate.

Individual Program Planning

Each student in The Bancroft School has an IEP, which specifies the programs and/or services needed to maximize his/her developmental potential. Services provided are in accordance with generally accepted professional standards, and are provided in a setting and a manner that is least restrictive of personal liberty. The services requested by the individual and/or his/her guardian shall be identified and addressed by the Interdisciplinary Team and/or IEP Team)¹ as appropriate, through the individualized planning process, and provided within available resources.

An IDT/IEP Team is established for each student to develop a comprehensive plan for the delivery of services. The composition of the IDT/IEP Team is determined by the needs of the student, and includes the student and his/her legal guardian, school district representatives, and Bancroft staff. The Team will assess, develop, monitor, and address the student's program on a regular basis, based on his/her needs and desires.

Parents/Guardians may expect that The Bancroft School will...

- Work with the Team, including the student, guardian, and school district to develop and implement the IEP;
- Send Progress Reports to guardian consistent with New Jersey Administrative Code requirements; and
- Review the proposed IEP goals and objectives with the guardian prior to the meeting where approval will be requested.

Behavior Intervention

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

Parents/Guardians may expect that The Bancroft School will...

- Notify the guardian within 24 hours of any unusual disruptive behavioral incident, including when some form of emergency restraint is required.
- Require and ensure staff are trained on behavior intervention procedures to prevent injury and assure appropriate interventions.

1 Please note: The word "team" used throughout this Handbook refers to the individual's Interdisciplinary Team and/or Individualized Education Plan (IEP) team.

The parent/guardian is expected to...

- Support direct care staff when they are implementing a plan.
- Participate in parent training on Behavior Intervention Plan (when appropriate).
- Follow the plan when visiting the school.

Procedures and Guidelines

Parent/Teacher Conferences

A formal parent/teacher conference will be scheduled in late November or early December each year; however, when necessary a conference may be scheduled at any time by contacting the appropriate Director/Supervisor or School Social Worker by telephone or in writing. Attempts will be made to arrange parent/teacher conferences when the Teacher does not have classroom responsibilities or other obligations.

Progress Reports

Progress Reports will be sent to the parent/guardian and the sending school district three times each school year, with one additional report prepared for students attending Extended School Year (ESY). Any questions regarding the Progress Report are to be directed to the Teacher.

Wellness/Nutrition Guidelines

Bancroft has developed a School Wellness Policy, consistent with the guidelines set forth by the New Jersey Model for School Nutrition and Wellness. The Bancroft School provides a school environment that promotes and protects its students' well-being, ensuring their ability to learn by encouraging healthy eating and physical activity routinely.

Parents/Guardians may expect that The Bancroft School will...

- Engage in the development, implementation, monitoring and review of nutrition and physical activity policies in a collaborative manner;
- Provide all students with opportunities to be physically active on a regular basis;
- Require that all foods and beverages sold or served at school meet the nutritional recommendations of the U.S. Dietary Guidelines for Americans 2005.
- Provide students a variety of affordable, nutritious and appealing food at lunchtime that meets their health and nutritional needs through the qualified child nutrition professionals in Bancroft's Food Service Department;
- Upon request, provisions are made for alternate lunches, due to religious, ethnic and cultural preferences;
- Provide meals in a clean, safe and pleasant setting, with adequate time provided to students to eat;
- Participate in available federal school meal programs, such as the School Lunch Program; and
- Provide nutrition education and physical education to foster lifelong habits of healthy eating and physical activity.

For a complete copy of The Bancroft School Wellness Policy on Physical Activity and Nutrition, please contact the School Office.

School Nursing Services

In support of The Bancroft School's philosophy to encourage an environment that promotes health and wellbeing, the School Nurse is committed to improving and protecting the health status of each student. In helping to ensure a quality education for each student, the school nurses are strong advocates for the students and their health needs.

The School Nurse ensures that all students admitted to The Bancroft School have health records that comply with

the standards of the Camden County Health Department and the New Jersey State Department of Health. It is extremely important that parents/guardians inform the School Nurse of any medical problems so they may provide the appropriate health services.

The following are health services provided routinely by the School Nurse:

- reviews and maintains immunization records for every student;
- conducts vision and hearing screenings;
- conducts other annual health screenings (e.g., scoliosis, blood pressure, height and weight);
- provides prompt medical attention for students who are injured or become ill;
- provides specialized care for special needs students; and
- administers medications.

If a child needs to receive medication during the school day, the parent/guardian should contact the School Nurse. A medication packet will be given to you for completion and return. Please remember, the School Nurse must follow strict state regulatory guidelines when administering medications during the school day. Never allow a student to carry medication to school. If a parent is unable to deliver the medication to the Nursing Office personally, the bus driver or another responsible adult should deliver it to the School Nurse. When necessary, the bus driver can give it to the staff on bus duty, who will deliver it to the School Nurse, thus ensuring its safe arrival to school.

Illnesses/Medical Emergencies

In the event that your child becomes ill or receives a minor injury at school, you will be contacted by the School Nurse or another member of the staff by telephone, or a note will be written in the log (for more minor injuries). If it is determined that your child cannot remain in school, he/she should be picked up as soon as possible to protect and ensure the wellbeing of your child and his/her classmates. In the event parents are unable to pick up their child when he/she has a contagious illness, other resources may need to be called (e.g., school district, DYFS). Therefore, it is extremely important to have a back-up plan in place in the event parents are unavailable when an emergency occurs. In addition, the School Nursing Office must maintain up-to-date emergency contact information at all times, so parents are expected to notify the School Nursing Office or Education Office when contact information changes during the school year. In support of that, please make certain to complete and return the Emergency Information and the Confidential Health Information forms when requested.

Any medical and behavioral life-threatening emergencies are handled expeditiously and appropriately by direct care and medical/nursing staff, who are trained in First Aid and CPR. In the event of a life-threatening emergency, staff are trained to call 911 immediately, before contacting nursing, medical, or supervisory staff, in accordance with Danielle’s Law. As defined in the law, “Life-threatening emergency means a situation in which a prudent person could reasonably believe that immediate intervention is necessary to protect the life of a person receiving services at a facility for persons with developmental disabilities or a facility for persons with traumatic brain injury or from a public or private agency, or to protect the lives of other persons at the facility or agency, from an immediate threat or actual occurrence of a potentially fatal injury, impairment to bodily functions or dysfunction of a bodily organ or part.” Further, a behavioral/psychiatric life-threatening emergency exists if the behavior of the individual served jeopardizes the safety of him/herself or others and is beyond the safe control of available staff support. The parents/guardian will be contacted at the earliest possible opportunity once appropriate medical care has been provided.

Please note the following guidelines for keeping children home from school:

- **Vomits twice or more over a 12-hour period.** Needs to be vomit-free for at least 24-hours before returning to

school.

- **Diarrhea.** 3 or more watery stools in a 24-hour period. Needs to be diarrhea-free for at least 24-hours before returning to school.
- **Fever greater than 100 degrees.** Needs to be fever free for at least 24-hours (without fever-reducing medicine such as Tylenol or Motrin) before returning to school.
- **Pink eye- redness, irritation, and itchiness of the eye.** Following a diagnosis of pink eye, the child may return to school 24-hours after the first dose of medication. A Physician's note is required before the student can return to school.
- **Lice, Scabies.** May not return to school until they have been treated and are free of lice and nits (eggs). A Physician's note is required before the student can return to school.
- **Chicken Pox.** Children must stay at home for five days after the onset of blisters or until all pox marks are scabbed over and dry. A Physician's note is required before the student can return to school.

Upon return to school, a signed written note should be sent to the teacher stating the reason for the absence. If a student is absent for three or more days, he/she must also have a note signed by a physician stating that he/she may return to school. The school district is also notified when a child is out of school for three consecutive days or five or more days within any one month.

If you have health related questions or need help finding an appropriate community health resource, please feel free to contact the School Nurse or Social Worker. There are services that are free and available to families (e.g., immunizations, glasses, dental, and eye services), and this information can be provided based on specific circumstances upon request.

Attendance Policy and Procedure

On any day a student will not be in attendance, please notify the School between 7:00 and 8:30 a.m. The contact numbers for the schools are as follows:

- Haddonfield Campus: (856) 429-5637, ext. 222
- Early Education Program: (856) 354-2966

If the parents do not call, a member of the staff may contact the home to inquire as to the child's health status. It is the responsibility of the parent to also contact the bus company if a child is going to be absent from school.

Late Arrivals/Leaving Early

Medical and other personal appointments should be made after school hours whenever possible, but when necessary, written notification should be sent to the school the day before a scheduled appointment. The student must be signed in and/or signed out with the school receptionist. Unless they have received permission from the Education Office, teachers will not allow a student to leave the classroom except in the care of another staff, parent or other authorized adult.

Arrangements for anyone to pick up a student from school must be made in advance. A signed note is required in advance, and the person picking the student up must come to the receptionist to sign the student out of school. Parents should not go directly to the classroom to pick their child up. Early dismissal should only occur for very important reasons. Bancroft reserves the right to check the identification for any person picking up a student.

If a student is going to be late for school due to unexpected reasons, please notify the School and upon arrival, sign the child in at the school reception area. Parents should also notify the bus company that the child will be going home on the bus.

School Visitors

All visitors **MUST REGISTER** with the receptionist upon entering the school building. A visitor's badge will be issued and must be worn during the length of your visit.

Classroom Visitations

Parents are welcome to come in and observe the classroom, but are asked to make appointments through the appropriate Education Program staff so this can be arranged at an appropriate time due to classroom scheduling and activities. We appreciate parents' understanding the importance of maintaining a normal routine for students. Therefore, families are requested to follow the guidelines listed below when arranging a classroom observation:

1. Contact the Program Director/Supervisor or Teacher (for Haddonfield Campus programs), or the Family Specialist (for Early Education Program) to set-up a date and time.
2. Do not bring other children and/or siblings to the school.
3. Do sign in and out at the Education Office.

Given the impact of having guests present in the classroom, visits are limited to 30 minutes in duration and guests are limited to one to two visitors per classroom.

Community-Based Instruction/Class Trips

It is recognized that community activities and trips have an important place in the educational curriculum. Teachers will use community-based instruction opportunities to help with the generalization and application of IEP goals and objectives. No student will be taken on a community trip that is outside the normal curricular routine, without the written/verbal permission of parent/guardian. In addition, parents of children who are scheduled to receive medication during a class trip will be required to complete and return a permission slip for that purpose two days prior to the scheduled trip.

Student Records

The Bancroft School compiles and maintains records on each student in accordance with New Jersey Administrative Code regulations. Although the students are enrolled in The Bancroft School, the records remain the property of the sending school district. All requests to review information in a student record must be directed to the School Office. (Upon graduation or disenrollment, all records are returned to the local school district.)

Confidentiality/Privacy Regulations

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

Personal Property

School rules prohibit students from bringing radios, portable music devices, hand held games, I pods, cell phones, pagers and any other personal property to school unless requested by the child's teacher. If a student brings personal property to school for the bus ride, it should be stored in the child's backpack during the school day. The Bancroft School will not be responsible for replacing lost or damaged personal property items that are brought to school.

Lost and Found

All students' personal property should be labeled with his/her name. This will help in locating missing possessions. Lost items are centrally located in the School Office. Families may ask classroom staff to check Lost and Found, or may contact the School Office directly. At the end of the school year, those items not claimed will be donated.

Communications

Teachers will communicate with the parent or guardian routinely, as well as provide regular updates, on a schedule as determined by the Teacher and parent/guardian (at least monthly). It is important that telephone contact with classroom staff occur only before or after school hours. Parent Training is provided once a week (or other schedule based on parent need), with a home visit occurring on a monthly basis.

The Education Programs also utilize the Honeywell Instant Alert communication system for schools for urgent matters. The Honeywell system enables us to contact all our families simultaneously using whatever means requested — phone, cell phone, e-mail, pager, among others — in the event of an emergency, but also in the event of an unexpected school closing or early dismissal, for example.

In order to participate in this service, please go to the Honeywell Instant Alert for Schools web site at: <https://instantalert.honeywell.com>, and register. It is easy to do. Click New User Parent; Select State NJ; and District Bancroft. If you need assistance or if you do not have a computer, please contact The Bancroft School Business Manager, at (856) 429-5637, ext. 615 for assistance.

Parents/Guardians may expect that The Bancroft School will...

- Provide families with contact information for key staff.
- Communicate with the parent/guardian when something significant happens that could have an effect on the student (e.g., unusual incident, change of teacher or his/her one to one aid, loss of job, etc.).
- Return parent/guardian's non-urgent telephone calls as soon as possible, but no more than 24 hours or first school day following receipt of message.

The parent/guardian is expected to...

- Communicate routinely with the Teacher to ensure accurate and timely information is shared.
- Notify the School if a home/school collaborative meeting or interdisciplinary meeting is needed.

Emergency School Closing

Communications will be sent by way of the Honeywell Messaging System. In addition, please listen to KYW Radio (1060), or watch television channels 3, 6, 10 or 29 for information on school closings. The Bancroft School emergency closing number is "622." Please also note that if you rely on school district transportation, they have a separate closing number.

Evacuation Drills

Fire evacuation drills are held twice each month. The school staff will assist all students to appropriate fire exits, and to specific designated safe areas. “Lock down” procedures are also in place to prepare for and respond to bomb threats and other breaches of security.

Transportation

Any questions regarding bus transportation (e.g., pick-up and drop off times, lateness, etc.) should be directed to the bus company providing service to the school district. If a student needs to leave school early or must deviate from his/her normal transportation schedule on a given day, parents should provide prior notice to the bus company and to the School Office.

School Bus Regulations

School Bus regulations vary from district to district but, in general, bus safety rules require that each student stay in his/her seat and refrain from aggressive behavior. ; Aggressive or dangerous behavior may/could result in the suspension of bus privileges. Bus Incident Reports are written by bus personnel when bus safety is a concern. As per New Jersey Administrative Code regulations, the Bancroft Principal is responsible for disciplinary action when warranted.

Bus Accidents

If a bus accident should occur on the way to or from school, the bus company is responsible for notifying the police and the parent/guardian. The decision whether to send the students to school or have them transported to a local hospital will be made by emergency response or other authorities on the scene. If the accident occurs on the way to school and there appear to be no injuries, the bus will generally proceed on to school. The decision whether to send the students to school or have them transported to a local hospital will be made by emergency response or other authorities on the scene. Upon arrival at school, each student will be seen by the School Nurse and parents will be contacted and alerted regarding the accident. If such an incident occurs, parents are encouraged to have their child seen by their personal physician for further evaluation. The Bancroft School shall not be responsible for injuries arising during the course of an accident during transport to school.

Early Detection of Missing and Abused Children

All schools are required to establish policies designed to provide for the early detection of missing and abused children. The policies require notification of the appropriate law enforcement and child welfare authorities when a potential missing or abused child situation is detected. For this reason it is essential you contact the Education Office when your child is absent from school. In addition, if your child is injured at home, please notify the Teacher or School Nurse, so they are aware of the nature of the injuries. Please call the Principal if there are questions or concerns about such policies.

Each staff member is responsible for reporting all signs of possible abuse to the appropriate school administrators, the Division of Youth and Family Services and/or Institutional Abuse, as well as following internal abuse, neglect, and exploitation reporting guidelines. All Bancroft staff have the responsibility to act to protect the health and wellbeing of students and, therefore, have no choice but to report concerns.

It should be noted that any person who reports abuse or neglect, pursuant to the law or testifies in a child abuse hearing resulting from such a report, is immune from any criminal or civil liability as a result of such action as provided by applicable law. Reports will be made to the authorities whether or not substantial evidence is available.

Investigations

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

Bancroft's policies and procedures related to the UIR and investigative processes are based on New Jersey Department of Human Services (DHS) regulations, and are coordinated at Bancroft through the Quality Management (QM) Department. DHS sets definitions of what is reportable as an unusual incident, and establishes the types of investigation conclusions that can be reached. All allegations are taken seriously, but considered to be unproven unless the matter is substantiated by a preponderance of credible evidence following a proper investigation. To substantiate an allegation, there must be sufficient evidence to believe the allegation is more probable than not. There does not need to be evidence beyond a reasonable doubt.

Not all UIRs will be investigated, but investigations are required for all allegations of abuse, neglect and exploitation that involve Bancroft staff or persons served. Bancroft does not investigate allegations of abuse related to family members or others. Other types of events may be investigated by Bancroft at the discretion of the Vice President of Quality Management.

How the process works...

- If a family member, staff member or anyone else suspects some form of abuse, neglect or exploitation at school, he/she shall report this to a Bancroft representative immediately.
- Once reported, it is the responsibility of Bancroft staff to report the allegation or suspicion to his/her supervisor and file a UIR.
- The UIR is reported to state officials as well as Bancroft program leadership, with types and numbers of incidents tracked for performance improvement purposes.
- When an unusual incident occurs, immediate action is taken to ensure the safety and welfare of those served, such actions may include adjusting the person's level of supervision, taking the individual involved for a medical examination, reassigning or suspending the alleged person(s) responsible, and/or other protective measures.
- The family/guardian is notified of the incident by program staff as soon as possible — usually by telephone.
- QM conducts interviews (sometimes in concert with the appropriate state entity) and reviews evidence related to the unusual incident, determines an outcome, and sends an investigation report to the appropriate state entity.
- Once a Bancroft investigation is completed, QM sends the guardian a letter explaining the type of allegation and the investigation outcome. In some situations, this may occur some time several months after the incident occurred, due to the time required for a proper investigative process.
- The Human Resources Department is notified of the investigation and conclusions when an incident relates to staff member(s), so that corrective action can be taken, if warranted.
- It is important to note that QM and program leadership may also make programmatic recommendations in this process to improve the quality of care for persons served, regardless of the outcome of the investigation.

The definitions of abuse and neglect are so broad that many events that may be considered typical in many American homes are reportable as unusual incidents. For example, giving directions in a raised authoritative tone to a person served who is refusing to complete a daily hygiene may be considered verbally abusive. Preventing a person from running in front of an on-coming car by grabbing his arm or jacket is a reportable unusual incident.

The Parents/Guardians may expect that The Bancroft School will...

- Notify the parent/guardian as soon as possible when an unusual incident has occurred or allegation is made.

- Take immediate and effective action to prevent re-occurrence.
- Submit the UIR to report what happened to Bancroft leadership and state officials.
- When appropriate, conduct a proper investigation to determine what happened, and take action based on findings.
- Notify the parent/guardian in writing of the outcome of the investigation as soon as the investigation is complete.

The parent/guardian is expected to...

- Alert the Teacher or supervisory staff immediately if he/she ever has a suspicion of abuse, neglect or exploitation occurring at The Bancroft School (related to his/her own child or others).
- Allow the investigative process to happen, and avoid questioning staff and others to determine what happened.
- Offer helpful information if parent/guardian has firsthand knowledge, but avoid sharing hearsay or suspicions.
- Understand that Bancroft is not able to share confidential information related to an incident, due to employee protection laws and other privacy regulations (e.g., HIPAA).

Drugs and Alcohol

Possession or use of any dangerous and/or controlled substances (drugs, alcohol) are prohibited by law in schools. The School is required to report all verified occurrences to the local Police Department. The School is also responsible to help prevent substance abuse by providing educational programs that will aid each student in being successful in school and also by providing students with counseling when needed. The parent/guardian will be notified in all cases of suspected drug/alcohol usage.

Search and Seizure

The Principal (or designee) has the right to search a student's bag/belongings when there is probable cause that he/she is in violation of the school policy regarding drugs, alcohol or weapons. If drugs, alcohol and/or weapons are found, these items will be seized ceased immediately and police and parents will be contacted.

Smoking

All Bancroft School buildings and properties are smoke-free.

Family Support/Involvement

From the outset, the family is encouraged to participate in the development, follow-through, and support of their son/daughter's IEP. The family/guardian and, when appropriate the student, is considered part of the treatment team responsible for seeing that his/her needs are met. The Bancroft School encourages and welcomes family involvement in a variety of ways.

Parents/guardians will receive notices of special activities for the students and for the family, and families are encouraged to attend often. A calendar of events is also available on the Bancroft web site (www.bancroftneurohealth.org). Please communicate with the school if there are questions, concerns or if there are additional resources needed to enrich your child's experiences at The Bancroft School.

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

Bancroft's Family Advocate offers an additional line of communication within the organization for the families and guardians of those served who need assistance. In addition to serving as a resource to individual families in need of assistance, the Family Advocate supports other initiatives that encourage partnerships between staff and families on behalf of those served. To contact the Family Advocate, call (856) 429-5637, ext. 372.

Family E-mail Communication List

A Bancroft NeuroHealth Family E-mail List is one way the organization communicates with families routinely. This list has become a very helpful tool for Bancroft to use to communicate organizational matters with family members in a faster, more efficient and cost-effective manner. Although communications to those on this list are not always school-specific, families of day students are encouraged to add their name to the e-mail list so that they will receive e-mails from Bancroft on a wide range of topics (e.g., urgent announcements, time-sensitive issues, upcoming events, or other routine matters). To sign up, please contact the Office of the Family Advocate at (856) 429-5637, ext. 279 or by e-mail at scrouse@bnh.org.

Parents and Associates/Advisory Committees

The Bancroft Parents and Associates meets regularly throughout the school year to support the Education Program — its students, families and staff — in many ways. The Bancroft School Parents and Associates offers an opportunity for parents to work in partnership with other parents and staff in support of various school projects or events. Families interested in playing an active role in the Parents and Associates should contact the Social Worker or School Office.

In addition, each Bancroft program has an advisory committee that may consist of Bancroft staff members, persons served, guardians, family members and others interested in supporting the program. Program advisory committees work closely with management staff and support the program's Performance Improvement Committee to help make the program the best it can be for all those served in the program. Those interested in becoming more involved in this manner, should contact the Principal.

The Bancroft Family Council serves as important resource to the Bancroft NeuroHealth leadership on general family matters. The Family Council works closely with Bancroft's Family Advocate and other executive staff and includes parents, guardians, or other close family member of children and adults served by the Bancroft organization.

Family Buzz Newsletter

Bancroft's "Family Buzz" electronic newsletter keeps families informed of things happening at Bancroft, as well as other matters pertinent to the disability community. This newsletter is e-mailed bi-weekly and is available on Bancroft's web site (www.bancroftneurohealth.org). It can also be mailed upon request (856-429-5637, ext. 279).

Workshop Series

Seminars and workshops are offered routinely covering a wide range of topics. These free seminars are designed to provide information related to care, disability laws, services, and other topics of interest to families. The schedule of upcoming seminars is available on the Bancroft web site (www.bancroftneurohealth.org).

Family Directory

The Bancroft Family Directory is published every other year to help families get to know one another. Participation in the Family Directory is completely voluntary, but only those families who sign up to be included in the Directory will receive a copy. Therefore, families are encouraged to sign up so the information will be available when it is

wanted. For further information, please contact the Corporate Administration offices at (856) 429-5637, ext. 279.

Family Satisfaction Surveys

Requesting the opinions of the people we serve and their families is one of the best ways Bancroft can evaluate the quality of its services. Therefore, surveys are conducted to determine the level at which those served and their families are satisfied. Families have a valuable perspective on services and their participation is critical to this process. The data is used in organizational planning to help determine performance improvement priorities, resource allocation, and staff training needs, among others.

In addition, the Office of Family Advocate maintains data on contacts to that office and presents a report for Performance Improvement purposes twice a year. This report includes information ranging from grievances, to the number of calls received from families associated with each program, as well as topics of concern being raised.

Relationships Between Families and Staff

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

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

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

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

Tips for Resolving Conflicts with Staff

Be specific and accurate when raising concerns.

In order to understand and address a family's concerns, program management will need specific information upon

which to act. If a family has general concerns, it would be helpful to provide specific examples when reporting the concerns so the supervisor can better understand the problem and take effective action.

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

It is a good idea to talk with the staff person directly about the concern, since it may be a simple misunderstanding, or he/she may be following a procedure or regulation about which the family may be unaware.

Be sensitive to the situation, and target concerns appropriately.

The staff member involved in a difficulty could very easily be an innocent party who has found him/herself in a predicament. Avoid criticism while he/she is attempting to address the problem. In this situation, the concern should be brought to the attention of the manager or director.

Allow the supervisor time to gather the facts.

Allow at least 24 hours for the supervisor to look into the situation, before calling him/her back or others. Keep in mind that everyone has his/her own perspective on things, and some people attempt to manipulate a situation to achieve his/her own personal goal. Keep an open mind until there is an opportunity to learn the facts.

Treat staff members with courtesy and respect, as you would like them to treat you.

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

Grievance Process

When concerns cannot be resolved through the School Principal, parents should not hesitate to contact their sending school district case manager. The State of New Jersey's PRISE handbook is available to guide parents/guardians through the process to resolve concerns. This document is available on the New Jersey Department of Education web site at <http://www.nj.gov/njded/specialed/info/>.

At Bancroft, we feel that most concerns/complaints can be resolved by the responsible staff member closest to the situation (e.g., teacher). When this is not possible, families are encouraged to speak to the next level staff at Bancroft, and next level, through the program's "chain of command" up to and including the Program's Vice President. A grievance process is available at Bancroft when a guardian wishes to appeal a decision made by a representative of Bancroft, or when they wish to raise a concern that has not been addressed to their satisfaction through other channels.

As stated above, the guardian may also pursue other external avenues for possible resolution; for example, through the school district/Department of Education appeal processes or other remedies offered by other state agencies. It is understood that when the guardian has resorted to external processes, those processes should supersede Bancroft's grievance process. Please refer to the PRISE handbook for specific procedures.

When the family/guardian has unresolved issues related to a specific problem at Bancroft that cannot be resolved by the program, he/she may contact the Bancroft Family Advocate, who will either attempt to resolve the matter or assist the family in filing a grievance. For questions or assistance on the process, please contact Bancroft's Office of the Family Advocate at (856) 429-5637, ext. 372 or by e-mail dkeating@bnh.org. For a copy of the grievance form,

please refer to the Bancroft web site at www.bancroftneurohealth.org.

Expulsion/Disenrollment Policy

As a New Jersey approved private school, Bancroft adheres to the discipline requirements set forth in the New Jersey Administrative Code (NJAC 6A:14). If it becomes necessary to suspend a student up to ten days, Bancroft will notify both the parent and the sending district immediately upon determination of the need for suspension. Parents will be required to meet with Bancroft administration when the child returns to school. Suspensions of ten days or longer will require the parents, district and Bancroft to meet to review the current placement.

When it is determined that expulsion or disenrollment is necessary, the Principal shall initiate an IEP Team meeting as soon as possible, and shall follow all procedural requirements as set forth in NJAC. A decision to expel or disenroll a student from The Bancroft School may need to be made for one of the following reasons.

1. The goals and objectives set forth in the person's IEP have been met, and the individual is no longer in need of Bancroft School services.
2. The guardian or advocate and/or an authorized agency requests the disenrollment.
3. The safety and welfare of the student is at risk as a result of medical, behavioral or psychiatric needs that exceed the capacity of Bancroft's services.
4. The condition or behavior of a student poses a significant risk to the safety and welfare of others.
5. All possible program modifications and alternatives have been exhausted, and the individual is demonstrating a need for services that are not available at Bancroft.
6. The Bancroft School and the school district determine that the school is no longer suitable or no longer meets the needs of the student, provided that substantive evidence is given to the guardian, as appropriate.
7. A student, his/her guardian, advocate or representative interferes with the administration of appropriate and effective medical, behavioral or psychological intervention that allows reasonable risk to health, safety and welfare of the individual served or others.
8. Bancroft is ordered by state, federal, or local government authorities to disenroll the student.
9. Bancroft NeuroHealth ceases to operate a program, closes a program or discontinues a program in which the individual is served.
10. The school is destroyed by natural disaster or other casualty, such as fire and the guardian is refusing temporary or permanent relocation services or such services are unavailable.

Reference Information

Included in the Appendix are a glossary of frequently used terms and a listing of related web sites for your reference purposes.

Volunteerism

We encourage volunteer participation among our families. The volunteers complement the work of paid staff and also provide more opportunities for students to have community involvement, in particular. Aside from family members who assist the program staff on occasion as any involved family would, any regularly scheduled volunteer work should be coordinated through the Volunteer Office to ensure licensing requirements are met. Anyone interested in volunteering should contact the Manager of Volunteer Services at (856) 429-5637, ext. 273.

Fund-Raising

As a private, not-for-profit service provider, donations are always accepted. Bancroft NeuroHealth is a 501(c)(3) non-profit organization and all donations are tax-deductible to the extent of the law. As a private school, however, it

should be clear that Bancroft does not require donations from families to pay for tuition or other required services. There are a number of ways that families can support Bancroft's fund-raising efforts, including purchasing tickets to attend special events. For specific information about giving opportunities, please contact:

Development Office Bancroft NeuroHealth
425 Kings Highway East, PO Box 20
Haddonfield, NJ 08033
(856) 348-1145
kcaputo@bnh.org

Contact Us

We hope this Family Handbook offers enough information and guidance to help make your experience with The Bancroft School positive and successful for your family member. If you have questions or concerns and are unaware of the best person to contact, please contact your child's school directly:

Haddonfield Campus School: (856) 429-5637, ext. 222

Early Education Program: (856) 354-2966

Bancroft's web site is also a resource for families for information on upcoming events, organizational announcements, newsletters, directions, and other information related to programs and services. The web site is www.bancroftneurohealth.org. Thank you for sharing your child with us; we look forward to a great school year.

Appendix

Overview of Behavioral Interventions

According to regulations set forth in the New Jersey Department of Human Services, Division of Developmental Disabilities, Division Circular #34, behavior intervention strategies are grouped into three levels based on a combination of many factors, including risk of physical injury, risk of improper implementation, restrictiveness, and social acceptability. Each level coincides with the necessary approval mechanisms for safeguarding the individual served. Following is a summary of interventions and approval requirements according to each level:

Level I

Includes interventions such as:

- **Extinction:** withholding a consequence that has been maintaining or increasing a target behavior;
- **Noncontingent Reinforcement (NCR):** providing attention, or access to a preferred object/activity, on a predetermined schedule (e.g., every 60 sec.). The staff provides the attention independent of the individual's behavior at the specified time;
- **Differential Reinforcement of Other Behavior (DRO):** a reinforcement procedure in which an individual receives a reinforcer for completely refraining from a specific behavior for a specified period of time regardless of other behaviors demonstrated;
- **Response Prevention:** blocking or using other tactics to make it less likely for an individual to exhibit a response; among others.

The Interdisciplinary Team must approve all Level I techniques, with a review by the Team required every 90 days and annually.

Level II

Includes interventions such as:

- **Response Cost:** removing predetermined reinforcers contingent upon the occurrence of target behaviors;
- **Time Out from Positive Reinforcement:** removing an individual from the presumed source of reinforcement for the target behavior, using only gestured/verbal prompts for a period not to exceed five minutes;
- **Assisted Compliance (for essential demands):** requiring an individual to complete a task/demand using hand over hand prompts and using more than equal and opposite pressure.

The Interdisciplinary Team must approve all Level II techniques, with a review by the Team required every 90 days and annually.

Level III

Includes interventions such as:

- **Positive Practice Overcorrection:** requiring the individual to overcorrect the environment or social effects or other consequence of the target behavior;
- **Response Cost:** removing predetermined reinforcers contingent upon the occurrence of target behaviors;
- **Physical Restraint:** restricting the individual's freedom of movement either partially or totally by means of personal control techniques.

All Level III interventions must be approved by the IDT, as well as the Bancroft Behavior Management Committee, Human Rights Committee, Chief Executive Officer (or designee), and informed consent by the guardian. Physician approval may also be required, as appropriate. In addition, the Team and the Behavior Management Committee shall review the situation every 30 days for the first 90 days, and every 90 days thereafter. The Human Rights Committee shall review at least annually.

For further information on these and other behavior intervention techniques used in Bancroft programs, please consult your Program Director, behavior specialist, or other clinical member of your son or daughter's Team.

Notice of Privacy Practice

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Effective Date: April 14th 2003

Understanding Your Health Record/Information

While you are at Bancroft NeuroHealth, we are required by law to keep a written record of the services you are provided, no matter what program or programs you are in. This record contains what is known as your Protected Health Information, or “PHI” for short, which we are legally required to protect. We are providing you with this Notice in order to assist you in understanding what is in your record and how your health information is used.

This helps you to:

- ensure its accuracy
- better understand who, what, when, where, and why others may access your health information
- make more informed decisions when authorizing disclosure to others

Bancroft's record of your PHI may generally be used in the following ways:

- as a basis for planning your care and treatment
- as a means of communication among the program/programs you are in so that all members of the team can assist in your care. This includes education, medical records from your doctors, residential records, vocational and others.
- as a legal document describing the care you received
- as a means by which you or a third-party payer can verify that services billed were actually provided
- as a tool in educating health professionals
- as a source of data for medical research
- as a source of information for public health officials charged with improving the health of the residents of this state or the United States
- as a source of data for facility planning and marketing
- as a tool with which we can assess and continually work to improve the care we render and the outcomes we achieve

Your Rights:

Although your health record is the physical property of the healthcare practitioner or facility that compiled it, the information belongs to you. You have the right to:

- Request a restriction on certain uses and disclosures of your health information as provided by 45 CFR 164.522. We are not required to agree with your request.
- Obtain a copy of our Notice of Privacy Practices upon request. Inspect and request a copy of your medical and treatment records. We may charge you a reasonable cost-based fee to cover copying and postage costs. Under certain circumstances, we may deny your request. If denied, you may have the denial reviewed by another official designated by us. We will honor the results of that review.
- Request an amendment to your health information in the six years prior to your request as provided in 45 CFR 164.528. We are not required to change your health information and will provide you with information about our decision.
- Obtain an accounting of disclosures of your health information made by us as provided in 45 CFR 164.528. The

accounting will not include the allowed common uses and disclosures, or the uses and disclosures that you authorized.

- Receive confidential communications of your health information by an alternative means or location. An example of an alternative means of communication is e-mail.
- Revoke your authorization to use or disclose health information in writing except to the extent that action has already been taken.

To exercise any of your rights listed above, you may contact the Bancroft Privacy Officer at (856) 429-5637, ext. 250 or e-mail at privacy@bnh.org.

Our Responsibilities:

With regard to your health information, we are required by law to have the following responsibilities:

- To maintain the privacy of your health information.
- To provide notice of our legal duties and privacy practices.
- To abide by the terms of the Notice of Privacy Practices currently in effect.
- To notify you if we are unable to agree to a requested restriction
- To accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

Changes To Our Privacy Practices:

We reserve the right to change our privacy practices at any time in the future and to make the revised practice effective for all protected health information we maintain (health information we already have as well as health information that we create or receive in the future). Each time there is a material change to uses or disclosures, your rights, our legal duties, or other privacy practices outlined in our Notice of Privacy Practices, we will provide you with a copy of the revised notice, if you are still being served at Bancroft. If you are no longer being served, you will be able to view the amended Notice on our web site at www.bancroftneurohealth.org. It will also be posted in public areas of our facility. We will also provide you with a copy of our Notice of Privacy Practices, at anytime, upon request.

Uses and Disclosures Of Your Health Information Without Specific Authorization:

Certain uses or disclosures of your PHI are permitted by law without specific authorization, in the manner we list below. We have not listed every use or disclosure in each category, but have provided some examples for the purpose of increasing your understanding.

Treatment. We may use and disclose your health information to our staff and others who are involved in your case in order to provide your treatment and services at Bancroft NeuroHealth. We may also provide your physician and other health care providers with copies of your health information that may assist in your care after you are discharged from Bancroft NeuroHealth. For example: Information obtained by a member of your team will be recorded in your record and used to determine the course of treatment that should work best for you. This information is shared with other members of your health care team so that your care is coordinated among the providers. In that way, the team will know how you are responding to treatment.

Payment. We may use and disclose your health information so that the treatment and services you receive at Bancroft NeuroHealth may be billed to an insurance company or a third party payer on your behalf. We may also provide your health insurer with information to obtain prior approval for coverage of diagnostic and treatment services. We may also disclose your information to family members, guardians, or other individuals who pay for

your care. For example: A bill may be sent to your health insurance company or another third-party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures, and the medications and supplies used in your care.

Health Care Operations. We may use and disclose your health information for routine health operations necessary to run Bancroft NeuroHealth, which ensure that our persons served receive high quality care. For example: Members of the medical staff, the risk or quality improvement manager, or members of the quality improvement team may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the health care and service we provide.

Business Associates. There are some clinical, business or quality management services that Bancroft NeuroHealth provides through contracts with business associates. Examples include radiology and laboratory services, physical and speech therapy providers, quality management experts, our billing services, and our consultants and attorneys. When these services are contracted, we may disclose your health information to the extent necessary to our business associates so they can perform the job we've asked them to do. To protect your health information, however, we require our business associates to sign a contract stating that your health information will be appropriately safeguarded.

Directory. If you consent and have signed an authorization, we will list your name, home address, phone number, e-mail address, full name of the individual served and their program in the directory. This directory gets sent to all families/guardians who participate in this directory service.

Individuals Involved In Your Care. Unless you tell us in advance not to do so, we may disclose your health information, using our best judgment, to a family member or friend who is involved in your care. Upon inquiry, we may disclose to others that you are being served in one of Bancroft NeuroHealth's facilities, and we may provide a summary of your condition or status if requested.

Research. We may use or disclose your health information for medical research purposes. However, for most uses or disclosures for research, your written authorization will be required.

Appointment Reminders. We may use and disclose health information to contact you to provide an appointment reminder for services at Bancroft NeuroHealth.

Treatment Alternatives. We may use and disclose your health information to inform you about possible treatment alternatives or other health-related benefits and services that may be of interest to you.

Fund Raising and Marketing. We may contact you or your family as part of a Bancroft fund-raising effort. But we shall only utilize general demographic information such as your name and address in any such communications.

Worker's Compensation. We may disclose your health information to the extent authorized by and to the extent necessary to comply with laws relating to worker's compensation or other similar programs established by law.

Public Health. As required by law, we may use and disclose your health information for public health activities including: disease, injury, or disability prevention or control; disease or infection exposure reporting; birth and death reporting; child abuse or neglect reporting; domestic violence reporting; medication reactions; problems with products or adverse events.

As Required By Law. We may use and disclose your health information in other ways when required by federal, state or local laws. Also, when state law concerning protecting health information provides you with more protection than the federal laws, we will follow those laws.

Governmental and Accreditation Body Oversight. Your health information may be released or disclosed to an authorized federal, state, or local licensing, public safety, investigative agency, or to an external accrediting body. Such agencies may review PHI during the course of their investigations, surveys, licensure inspections, and other related activities to ensure the health and safety of our premises and services.

Averting Serious Threat To Health Or Safety. We may use and disclose your health information when necessary to prevent a serious health or safety threat to you or others. We will only disclose the information to someone able to help prevent the threat.

Funeral Directors, Coroners, And Medical Examiners. We may disclose your health information to funeral directors, coroners, and medical examiners to identify a deceased person or determine the cause of death. We may also disclose your health information to funeral directors as necessary to comply with applicable law and to carry out their duties.

Military. If you are a member of the armed forces, we may disclose your health information as required by military command authorities.

Law Enforcement. We may disclose your health information for law enforcement officials or federal security agencies for purposes such as: responding to a valid court order, subpoena, warrant or similar process; identifying or locating a suspect, fugitive, material witness, or missing person; reporting a death that we believe may be the result of criminal conduct; and other law enforcement purposes, including national security activities.

Uses And Disclosures Of Your Health Information With Your Authorization:

We will make other uses or disclosures of your health information only with your written permission (called “authorization”). When you provide authorization for use or disclosure of your health information, you may revoke that authorization in writing at any time.

For More Information Or To Report A Problem

If you have questions and would like additional information, you may contact the Privacy Officer by writing to: Bancroft NeuroHealth, P.O. Box 20, 425 Kings Highway East, Haddonfield, N.J. 08033, or e-mail at privacy@bnh.org.

If you believe your privacy rights have been violated, you can register a complaint with us or the Department of Health and Human Services (DHHS). You can register a complaint with us by calling our Compliance Line 24 hours a day, 7 days a week at 1-800-385-4652. Your anonymity will be protected and your confidentiality will not be compromised. There will be no retaliation for filing a complaint. You may contact DHHS at: 1-866-627-7748.

This Notice of Health Information Practices is also available on our web page at www.bancroftneurohealth.org.

Glossary of Terms

A

Activities of daily living (ADL) - The instructional area that addresses the daily tasks required to get along in life. They encompass a broad range of activities including personal hygiene, preparing meals, managing household chores, etc.

Advocate - A person who stands up for the interests or rights of another person. A person who stands up for his or her own rights or interests is a “self-advocate.”

Alternate living arrangements (ALA) - Residences in the community are provided when available for individuals who can no longer live with their families. Residences are screened, funded, and licensed by the Division of Developmental Disabilities (DDD). Residences may be available in many forms including apartments, duplexes, condominiums and single family homes. The following types of residential arrangements may be included:

- Skill Development Homes, which enable a person needing ongoing supervision to live with a care provider who provides a specific training program to meet personal care, social behavior and health needs;
- Group Homes, which are small congregate living arrangements shared by individuals who receive guidance and personalized training from full-time staff;
- Supervised Apartments, which are monitored by staff who visit daily and often live in the same residential complex;
- Supportive Living, in which people live in apartments without supervision on site but are offered needed services and on-call assistance;
- Independent Apartments, which provide monthly monitoring services and 24-hour emergency assistance.

Appeal - A request by an authorized person within the established time frames for a review of a disputed decision of the DDD that involves eligibility, placement, or the provision of services.

C

Case Manager - The case manager is a member of the child study team who coordinates meetings with you and appropriate school staff members. The case manager also serves as your contact when you have questions regarding your child’s program and services.

Case Management - A DDD service for people with developmental disabilities who are eligible for services of the Division. Case managers assure that an individual has a plan of services tailored to meet his or her individual needs and abilities; finds, arranges and evaluates the needed services; and adjusts the services as the individual’s needs change.

Child Study Team - The child study team consists of a psychologist, a learning disabilities teacher-consultant, a social worker and others from the school district working in support of the student. For preschool pupils, a speech language specialist is also included. The team evaluates your child and meets with you and professional staff from the school to develop the (IEP) and to review and revise the (IEP) at least annually.

Community Integration - Living, working, socializing with people in community environments not designated solely for people with disabilities.

Community Services of DDD - DDD is composed of four regions. Each region is managed by an assistant regional director who is responsible for both the community programs and the developmental centers located in their regions. Oversight of all community programs within the region is done by the Regional Administrator.

D

Developmental Disability - Any serious disability that occurs before age 22 and means that a person is going to have serious difficulties in at least three of the following areas: self-care, language, learning, mobility, self-direction and independent living. The disability has to be serious enough to require special services for life or for a long time.

Division of Developmental Disabilities (DDD) - A New Jersey State agency within the Department of Human Services (DHS). It is the lead provider of services to assist people with developmental disabilities. The Division offers family support, community services, case management, residential and day programs, and guardianship.

E

Evaluation Plan - The evaluation plan is a written plan that will be used to decide if your child is eligible for special education. This plan must include the name of the case manager, the specific information to be collected, the assessments to be performed, the evaluation procedures to be used and the language (or method of communication) to be used in the evaluation. The requirement for an evaluation plan applies only to the districts participating in the Plan to Revise Special Education. Your consent is required before the first assessment by the child study team can begin.

G

Goal - A major end toward which the activities of an Individualized Habilitation Plan (IHP) are directed, as opposed to an “objective,” which refers to the various specific landmarks that have to be passed to meet a goal. A goal might be to use the telephone to call home. An objective related to this goal might be to recognize the numbers 1-9.

Group Home - A small congregate living arrangement shared by individuals who receive guidance and personalized training from full-time staff.

Guardian - A person or agency appointed by a court to make personal decisions for a person who is incapable of making the decisions independently. Relatives, parents, friends, or certain agencies (i.e. PLAN/NJ) can be appointed guardians by the courts.

Guardianship - A legal relationship; a method by which the law deals with the issues of mental incompetence and consent. A court determines if the person in question has complete or partial mental competence. If the court finds the person has partial competence or complete incompetence (the finding is called an adjudication), a competent person (a guardian) is empowered to give or withhold consent on behalf of the adjudicated person (the ward).

Guardianship of the Estate - A legal arrangement in which a person (the guardian) has authority to give or withhold consent on behalf of another (the ward) in decisions relating to the ward’s financial matters.

Guardianship of the Person - A legal arrangement in which a person (the guardian) has authority to give or

withhold consent on behalf of another (the ward) in decisions relating to the ward's choices of where to live and where to work, among other personal choices.

- Limited Guardianship - A situation in which a court recognizes that a person (the ward) has partial mental competence in one or more areas of decision-making and can thereby consent to some kinds of decisions. The court gives the guardian authority to give consent on the ward's behalf only in those areas in which the ward is determined mentally incompetent. The court specifies the scope and extent of the guardian's authority. Sometimes referred to as partial guardianship.
- Natural Guardian - The parent(s) of a child who is under 18 years of age are "natural guardians."
- Permanent Guardianship - A situation in which the court subjects a ward to guardianship for an indefinite period. The guardianship remains in effect until someone successfully petitions a court to remove it. There can be a temporary or interim guardianship — one for only a limited period of time.
- Plenary Guardianship - A situation in which a court gives the guardian full, complete and unlimited authority to act on the ward's behalf (for all matters, personal and financial). The guardian is a "substitute decision maker."

I

Inclusion - The idea that persons with developmental disabilities should be included in community places and activities, not segregated in special places like institutions. Individualized Education Plan, Individualized Habilitation Plan, Individualized Service Plan, Individualized Rehabilitation Plan (IEP, IHP, ISP, IRP, etc.) – A formal written program plan, reviewed and revised annually to ensure the individual receives the services required based on his/her assessed needs.

Interdisciplinary - Characterized by a variety of disciplines that participate in the assessment, planning, and/or implementation of a person's program. There must be close interaction and integration among the disciplines to ensure that all members of the team interact to achieve team goals.

O

Objective - A specific landmark that has to be passed to achieve a goal. A goal might be to use the telephone to call home. An objective related to this goal might be to recognize the numbers 1-9.

Occupational Therapy (OT) - A special therapy that uses work, play and ordinary daily activities to help people become more independent and develop skills to help them live more satisfying lives.

Outcome - Result or end point of care or status achieved by a defined point following delivery of services.

P

Physical Therapy (PT) - A special therapy that uses movement, massage, exercise and other methods to prevent or minimize physical disability.

R

Reasonable accommodations - Modifications or adjustments that assist the person served or staff members to access benefits and privileges that are equal to those that are enjoyed by others. Examples taken from the Americans with Disabilities Act include making existing facilities readily accessible to and usable by people with disabilities; restructuring jobs; modifying work schedules; reassigning people to vacant positions; acquiring or modifying equipment or assistive devices; adjusting or modifying examinations, training materials; policies, and procedures; and providing qualified readers or interpreters.

Related Services - Related services are services that children with educational disabilities require to benefit from their education programs. These may include the following: counseling of the child, counseling or training of the parents about the educational needs of their child, speech-language therapy, occupational therapy, physical therapy, transportation or recreation, as well as other appropriate services which the child needs to benefit from education as required by his/her IEP.

S

Supervised Apartment - An alternative living arrangement in which people with disabilities are monitored by staff who visit daily and often live in the same residential complex.

Supports - Individuals significant to a person served and/or activities, materials, equipment, or other services designed and implemented to assist the person served. Examples include instruction, training, assistive technology, and/or removal of architectural barriers.

Supported Employment - Vocational option in which people with developmental disabilities work in community settings with different degrees of assistance provided by adult service agencies/organizations. Supportive employment may make use of job coaches, work groups and enclave work settings.

Supportive Living - An alternative living arrangement in which people live in apartments without supervision on site but are offered needed services and on-call assistance.

T

Team - At a minimum, the person served and the primary personnel directly involved in the participatory process of defining, refining, and meeting the person's goals. The team may also include other significant persons such as employers, family members, and/or peers, at the option of the person served and the organization.

Transitional IHP - An IHP written at least 30 days prior to transferring a person to a new living situation; a description should be included of how the move will be handled.

Transition - The process of moving from education services to adult services, including living and working in the community. Or, the period of time and the steps involved in transferring a person to a new living situation.

V

Vocational Rehabilitation (VR) - Programs operating in each state that receive federal funds authorized under the Rehabilitation Act. The goals of the Act are to train and support people with disabilities in finding and keeping jobs, preferably in competitive employment. Services provided by the VR include vocational counseling and evaluation, vocational training, job placement services, and other vocationally beneficial services. To qualify for a VR program, the person's disability must be a significant functional impairment to employment and there must be reasonable expectations that the service will enhance the individual's employability. Determination of eligibility for VR is done case by case.

Related Sites

Applied Behavior Analysis

Association for Behavior Analysis

<http://www.abainternational.org>

New Jersey Association for Behavior Analysis

<http://www.njaba.org>

Behavior Analyst Certification Board

<http://www.bacb.com>

Journal of Applied Behavior Analysis

<http://seab.envmed.rochester.edu/jaba>

Autism

Autism Society of America

<http://www.autism-society.org/site/PageServer>

New Jersey Center for Outreach and Services for the Autism Community

<http://www.njcosac.org>

Brain Injury

Brain Injury Association of USA

<http://www.biausa.org>

Brain Injury Association of New Jersey

<http://www.bianj.org>

Developmental Disabilities

American Association on Mental Retardation

<http://www.aamr.org>

American Association of People with Disabilities

<http://www.aapd.com/index/html>

ARC of New Jersey

<http://www.arcnj.org>

The Council for Exceptional Children

<http://www.cec.sped.org>

Division of Developmental Disabilities Regulations

<http://www.state.nj.us/humanservices/ool/regulations.htm>

Division of Developmental Disabilities Circulars

<http://www.state.nj.us/humanservices/ddd/DCs.html>

Exceptional Parent Magazine

<http://www.eparent.com/>

The National Information Center for Children and Youth with Disabilities

<http://www.nichcy.org/index.html>

American Association on Mental Retardation

<http://www.aamr.org>

The Arc of the United States

<http://www.thearc.org>

Disability Rights Education and Defense Fund

<http://www.dredf.org>

National Autism Services
<http://www.autismservicescenter.org>

National Downs Syndrome Society
<http://www.ndss.org>

Office of Disability Employment and Policy (ODEP)
<http://www.dol.gov/odep>

Society for Disability Studies
<http://www.uic.edu/orgs/sds/>

Delaware Homepage
<http://www.delaware.gov/>

New Jersey Homepage
<http://www.state.nj.us/>

ADA Homepage
<http://www.usdoj.gov/crt/ada/adahom1.htm>

ADA Regulations and Technical Assistance
<http://www.usdoj.gov/crt/ada/publicat.htm#anchor523407>

Find Law
<http://www.findlaw.com/01topics/36civil/disabilities.html>

Social Security
<http://www.ssa.gov>

Miscellaneous Sites

Medline Plus
<http://medlineplus.gov>

Community Behavioral Health
<http://www.phila-bhs.org>

DOE Administrative Code Site
<http://www.state.nj.us/njded/code/current/title6a/chap14.pdf>

Ability OnLine Support Network
<http://www.ablelink.org/public/new/index.html>

Epilepsy Foundation of America
<http://www.epilepsyfoundation.org>

Learning Disabilities Association
<http://www.ldanatl.org>

National Association of the Deaf
<http://www.nad.org/site/pp.asp?c=foINKQMBF&b=91587>

National Association for Parents of Children with Visual Impairments
<http://www.spedex.com/napvi/>

National Mental Health Association
<http://www.nmha.org/>

CARF: The Rehabilitation Accreditation Commission
<http://www.carf.org/>

JCAHO: The Joint Commission on Accreditation of Healthcare Organizations
<http://www.jointcommission.org/>



Nurturing abilities and independence

Bancroft Office Support Services (BOSS)

Production assistance was provided by BOSS, an office support business operated by adults served by Bancroft NeuroHealth in Voorhees, New Jersey.

To reach BOSS, call (856) 454-9321 or e-mail boss@bnh.org.