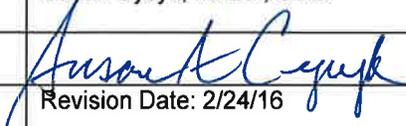




Division of Prevention and Behavioral Health Services
Department of Services for Children Youth and Their Families
State of Delaware

ADM 013		COMMUNICATION POLICY	
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Signature:		Date Adopted: 1/9/15	
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I. PURPOSE

This policy further clarifies the responsibilities of Division staff regarding DSCYF Communications Policy #115.

II. POLICY STATEMENT

The Division of Prevention and Behavioral Health Services (DPBHS) seeks to ensure that communications from and about the Division or the Delaware Children's Department are well coordinated, effectively managed and responsive to the diverse information needs of the public.

The following points clarify DSCYF Communications Policy #115 and are not stand alone policies and procedures. All Division staff are expected to review and comprehend DSCYF Communications Policy #115.

A. Out of Office Voice Mail and Email Script

DSCYF Policy requires each Division to establish and maintain a policy to assure that the public is provided alternative phone and email contact information when staff is on leave, out sick, or when a position is vacant.

This procedure applies to phones that are not transferred to a live answering point. Telephones that are not transferred to a live answering point must follow the Out-of-Office procedure for:

- All planned absences and planned out of office activities of a full work day or more, or
- All vacant positions.

The following establishes specific DPBHS procedures and minimum standards for out of office voicemail and email script:

1. Desk Phone Voice Mail Greeting for Out of Office Absence:

"Hello, you have reached the voice mail for [*Your Name and Your Title*] with the Division of Prevention and Behavioral Health Services. I am unable to take your call. If this is regarding a child's behavioral health emergency, please hang up and dial 911, visit your local emergency room, or contact our Child Priority Response/Crisis Services at 1-800-969-4357.

I will be out of the office beginning [Day/Date] and returning [Day/Date]. Please call [Referral Name(s)] at [Referral Number(s)] for immediate assistance or leave a brief message and I will respond to you within 24 hours following my return. Thank you for calling.

2. Email Greeting for Out of Office Absence:

"Thank you for your email. I will be out of the office beginning [Day/Date] and returning [Day/Date]. During this time, if you require immediate assistance, please phone [Name(s)] at [phone number(s)]. I will respond to your email within 24 hours following my return."

B. Division Media Liaison (ML)

The DPBHS Director has designated two Division Media Liaisons (MLs). The MLs work with the DSCYF Community Relations Coordinator (CRC) to assist with external Division communications and activities.

1. In general, the responsibilities of the Division MLs are to ensure that Division communication:
 - Complies with DSCYF Communications Policy #115; and
 - Reflects the Division's high standards for quality.
2. The following activities require Division ML review and approval prior to sharing the informational material or communication plan beyond the boundaries of the Division:
 - Development or revision of informational or marketing materials, including annual reports, brochures, policies, procedures, etc.
 - Newsletters,
 - News releases,
 - Planning of events, including media events and use of social media,
 - Revision to Division webpages, including content and webpage design,
 - Responding to media requests for visits or interviews, and
 - Any such projects or activities by contracted service providers relative to the contracted services they are authorized to provide to the children we serve.
3. Following the review, the ML will coordinate approval from the Division Director, if appropriate, and review by the CRC.

C. Materials Produced by Contractors

1. Section III. A. of DSCYF Communications Policy #115, provides guidelines regarding materials produced by contractors. This section states:
 - Any new materials (i.e., informational, instructional, or public awareness) produced or revised as a result of a contract with the Department for the purposes of external communication, must attribute DSCYF or the Division as the funding source, unless either has waived that requirement.

- If the service is fully funded by DPBHS, the contractor material shall state, **“Funded by the Division of Prevention and Behavioral Health Services, Delaware Children’s Department”**, or
 - If the service is partially funded by DPBHS, the contractor material shall state, **“Provided in partnership with the Division of Prevention and Behavioral Health Services, Delaware Children’s Department”**.
 - Any print materials, video or audio produced by a contractor that feature any youth in the Department’s care must be reviewed and approved by the CRC before being publicly shared. Division staff will ensure that contracted providers follow the steps outlined in Section D. of this policy.
 - The CRC reserves the right to require a review of any contractor materials, whether print, audio, video or internet prior to their distribution.
2. In addition to the requirements outlined in Section III. A. of DSCYF Communications Policy #115, service providers contracted by DPBHS must follow the same requirements established in Section B. 2. of this policy.
 3. Within forty-five days of the issuance of this policy, the DPBHS Provider Services Unit shall deliver written notification to all existing service providers of the requirement to have contractor material reviewed as specified in Section B.2. The written notification shall also specify the requirement to acknowledge the Division and Department as the funding source as specified in Section C.1.
 4. Following written notification to the contracted providers, forthcoming monitoring visits shall incorporate a review of service provider materials to ensure compliance with the DSCYF and DPBHS requirements.

D. Photo, Video and Interview Policies Regarding Youth

Appropriate consents must be obtained before conducting any interviews, or taking any videos or photographs of youth served by the Division if sharing any of the above with a public audience outside of the Department. The consent form is attached (Appendix A).

1. Division staff shall ensure that the following steps are taken in obtaining a signed Consent Form:
 - Ensure that the biological parent(s)/relative caretaker, guardian or custodian has a reasonable understanding of consent,
 - Ensure proper completion of the form, including the signatures of the youth (if unable to sign, the youth’s printed name will be sufficient) and parent/relative caretaker, guardian or custodian.
 - Immediately transmit the completed form to the ML.

The ML will review and, if appropriate, approve the request for further consideration by the Division Director or Deputy Director.

Upon Division-level approval, the ML will forward the request to the CRC for review.

Upon CRC determination, the ML will inform all reviewers, approvers and requesters.

2. Verbal consents are allowed when the timeframe of the request does not allow for the acquisition of written consent.

Verbal consents will be documented as follows:

- Completion of the Consent Form by the DPBHS employee with the words "Verbal Consent" written in the parent signature line along with the name of the parent, and
- The DPBHS employee signs the form under the parent signature line and sends the form to the Division ML.

Photos or Videos: If written or verbal permission is not obtained, all video or pictures must be taken from the neck down or from behind. Photographing or videotaping the face of a youth in DSCYF custody who is not your own child and whose image you intend to share publically or through educational materials with an audience outside of the Department, requires written permission from the biological parent(s)/relative caretaker or guardian, the child, appropriate DSCYF staff, and the CRC. (See Section D.1. of this policy for consent approval process.)

Interviews: Interviews (written, radio, TV, video, digital) with youth may be conducted after appropriate consents have been obtained as specified above. In cases where interviews do not identify the face or name of the child beyond the first name, or provide any other personally identifiable information, only the approval of the Division ML and the CRC are required. This type of request may be transmitted via an email message.

E. Reporting Possible Media Exposure/Media Alerts

1. DPBHS staff are required to inform the Division ML and the CRC of incidents involving:
 - A child or youth currently in our care,
 - A Division employee, or
 - A contracted service provider.

The Media Alert form (Appendix B.) is used for initial reporting of the incident. Division staff complete as much of the information as they can at the moment, and then notify the Division ML and/or Division Director's office via email.

Notification shall occur as soon as possible but no later than 24 hours of learning of the incident. The Director's Office or ML will immediately notify the CRC after receipt of the media alert, forward the initial draft and work with the initiating staff member to update any incomplete information.

2. Incidents involving the following circumstances, require an **immediate telephone contact to the Division Director's Office:**
 - Child death or Near death (due to abuse/neglect/domestic violence),
 - Security threat, or
 - Suicide.

The Cabinet Secretary and the CRC will be immediately notified by the Division Director.

4. Institutional Abuse (IA) reports that have been accepted for investigation and Serious Injury (SI) reports are typically received by the DPBHS Quality Improvement (QI) Manager from the Division of Management Support Services - Office of Case Management (OCM).

Upon the receipt of IA or SI reports that involve child death, child near death, or suicides, the QI Manager shall:

- Immediately notify the Division Director's Office,
- Immediately complete and send a media alert form (see Section E. 3.), and
- Immediately forward the IA or SI report and the completed media alert form to the Division ML.

The Cabinet Secretary and the CRC will be immediately notified by the Division Director.

F. Media Requests to Visit DSCYF Facilities

All requests for media visits to a DPBHS facility must be approved in advance by the Division Director, or Division ML, and the CRC.

No member of the media will be granted access to a DPBHS facility without prior approval and an escort by the CRC or person designated by the CRC, ML or Division Director.

The Department welcomes visits from the media as long as it does not violate client confidentiality.

G. Website Updates/Maintenance

It is essential that all of the information available to the public online is current and up-to-date. At least every six months, the Division ML will contact the proper work unit managers to request a review and, if appropriate, an update of information and materials on the DPBHS webpages.

Changes to the Division website content can be requested at any time. Division web content change requests require the review and approval of the work unit manager. Once, the change request has been reviewed and approved by the work unit manager, the manager will forward the request to the Division ML.

The Division ML will review all change requests as specified in Section II B of this policy.

III. APPLICABILITY

This policy applies to all employees of the Division of Prevention and Behavioral Health Services. Failure to comply with any portion of DSCYF Communications Policy (# 115) or this policy may result in disciplinary action up to and including dismissal, or other appropriate action. Legal action also may be taken for violations of applicable regulations and laws.

CONSENT FORM FOR STATEMENTS AND PHOTOGRAPH(S)

I hereby grant permission, and authorize the Department of Services for Children, Youth and Their Families (DSCYF) and the media to take, use and publish my photograph, or a photograph(s) of my minor children; to take, use and publish a video of me or my minor children; and/or to take, use and publish statements by me and/or my minor children for public relations and news media purposes (including newspaper, television or radio stories, documentaries, advertising, reports, Internet websites, displays in state offices or training videos). Additionally I grant permission and authorize DSCYF and the media to share, use or publish any artwork, video or special project completed by me or my minor children for public relations and news media purposes as indicated above.

I will not hold liable, and I release and discharge the Department of Services for Children, Youth and Their Families, the State of Delaware, any of its employees (individually or officially), the photographer/videographer or the media from liability in equity or in law on account of the taking, the use of, or the publication of my photograph, photograph(s) of my minor children, videos or statements in its publications.

I waive any right that I may have to inspect or approve the photograph(s), video(s) or other copy that may be used in and published. I acknowledge that I have read this form and fully understand it.

Youth's Name (please print): _____ **Date:** _____

Signature: _____

Parent's Name (if youth is under 18) Printed and signed:

_____ **Date:** _____

Purpose of photographs/videos/statements:

Printed & Signed

Name of appropriate DSCYF to grant permission: _____

Name of Division ML: _____

Name of Community Relations Coordinator _____

Date: _____

Information Needed Due To:

An Institutional Abuse (IA) Investigation Related to:

*IA staff –

A DSCYF employee:

Name:

Division:

Location:

Position:

Reason for IA:

Were any children or staff injured?

Employment Status (suspended, removed from direct contact with children pending investigation outcome):

Have police been contacted? Which department?

What happens next?

A child care facility or person in a Child Care Facility:

Is this a home day care?

Licensee Name:

Explanation of issue:

What is their violation history? (Contact OCCL):

What is their status (suspended, closed)?

Were any children harmed/injured?

How many children (capacity) are they licensed to hold?

What action if any has been taken against specific employees?

When was our list visit to the facility and what actions if any were taken or violations were noted:

Have police been contacted? If so, which agency?

What happens next?

A Foster Care Provider:

Name of Foster Care Provider:

Is this a DFS or Private Foster Care provider?

Are the allegations against the provider? If no, who? (i.e.: person in the home):

Were any children injured/harmed? If so, their status:

Are there other foster children in the residence?

If so, what is their status (removed?):

How long has the provider been doing foster care for DFS?

Does IA have any initial sense of which way this will go:

Have police been contacted? If so, which one:

What happens next?

A young person against staff or another young person:

Name:

Age:

Facility (YRS or Foster Care):

Nature of IA:

What is their history?

What is their status?

Police agency:

What happens next?

An employee arrest:

Name:

When Hired:

What Division? Have they worked for more than one? :

Job Title (get directly from HR):

Were they hired in that role or did they start in another role:

Current status of employment (suspended?):

When placed on that status:

What lead to the arrest?

When did we learn of the arrest and how:

What happens next?

Child Care Facility Suspension/Closure:

Child Care Facility Name:

Is this a home day care?

Licensee Name:

Explanation of issue:

What is their violation history? (Contact OCCL):

What is their status (suspended, closed):

How many children are they licensed for (capacity):

Were any children harmed/injured?

What action if any has been taken against specific employees?

When was our list visit to the facility and what actions if any were taken or violations were noted:

What happens next?

Involvement of a Minor in Violence and/or Arrest of a Minor:

Name:

Age:

Incident:

How did we learn of it?

History (from YRS):

Does this youth also have DFS and/or PBHS history?

Status: