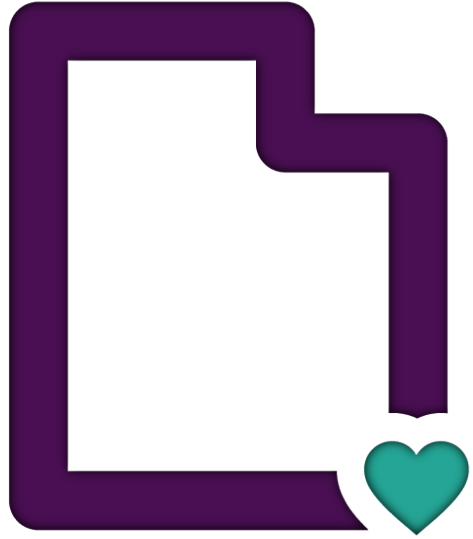


BEHAVIOR

Management



Utah Department of
Health & Human
Services

Code of Conduct

Our **DUTY** to Clients

- **PROTECT THE CLIENTS HEALTH & SAFETY**
- **REPORT ABUSE OF ANY CHILD, DISABLED OR ELDERLY TO APPROPRIATE AUTHORITIES/AGENCIES**
- **DOCUMENT ANY ABUSE, NEGLECT, EXPLOITATION AND MISTREATMENT**
 - **PROVIDE TO APPROPRIATE AGENCY UPON REQUEST**
- **COOPERATE FULLY IN ANY INVESTIGATION CONDUCTED BY DHHS, LAW ENFORCEMENT OR OTHER AGENCY**
- **DOCUMENT & REPORT EACH CRITICAL INCIDENT TO THE DHHS OFFICE OF LICENSING + CM, CMS, COO, CEO**
- **IMMEDIATELY REPORT ANY CLIENT DEATHS TO DHHS, COO, CEO, CMS, CM**

Provider Code of Conduct

- Accurately represent services, policies & procedures to clients & the public
- Create, maintain and comply with a written policy that address the appropriate treatment of clients and protects client rights
- Do not abuse, neglect, harm, exploit, mistreat or act in a way that compromises the health and safety of clients in ANY way
- Maintain health and safety of clients in Shelter program
- Shall NOT commit Fraud
- Maintain a DRUG FREE work environment
- Provide services commensurate with the skills, abilities, behaviors, and needs of each client

Clients Rights

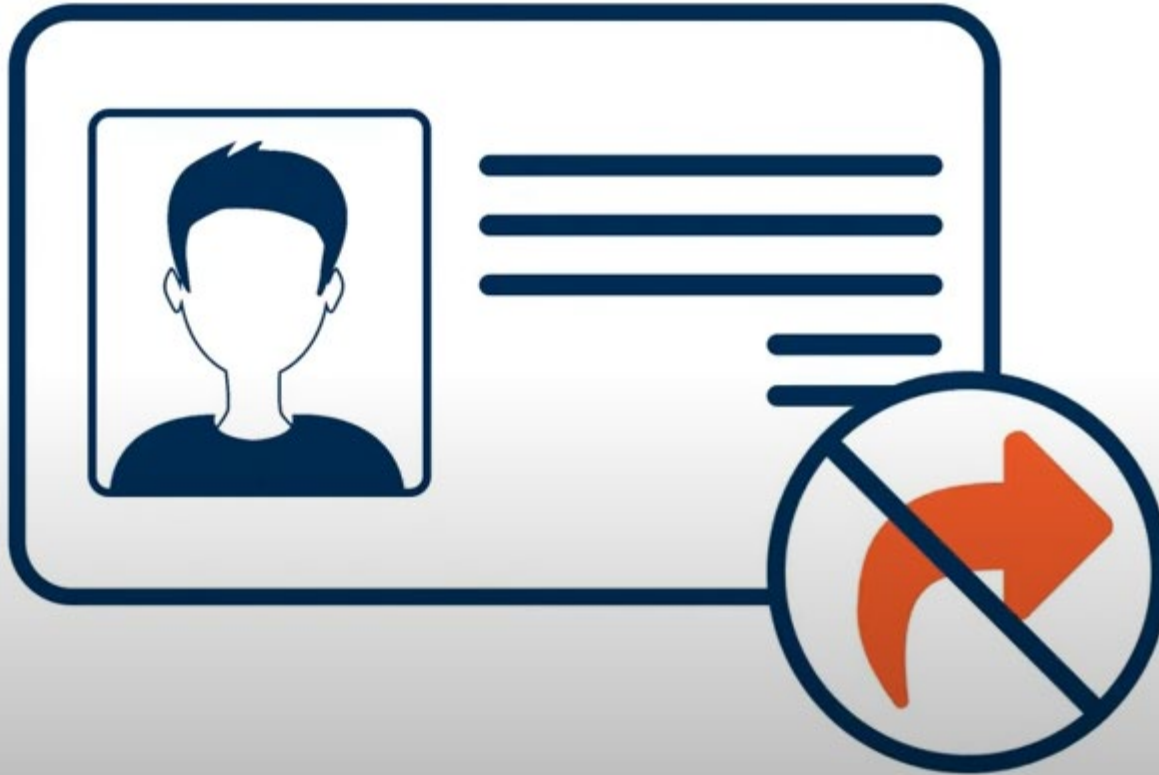
- **Be treated with Dignity**
- **Be free from potential harm or acts of violence**
- **Be free from discrimination**
- **Be free from abuse, neglect, mistreatment, exploitation and fraud**
- **Privacy of current and closed records**
- **Communicate & Visit w/family, attorney, clergy, physician, counselor or Case Manager**
- **Be informed of agency policies and procedures that affect client**
 - **Program expectations, requirements (mandatory or voluntary)**
 - **Consequences of non-compliance**
 - **Reasons for termination from program and criteria for re-admission**

Professional boundaries

DO NOT CROSS



CONFIDENTIALITY



- **ALL CLIENTS NAMES & INFORMATION ARE TO REMAIN & BE KEPT CONFIDENTIAL!!**
- **ANY INFORMATION LEARNED ABOUT INDIVIDUALS AT SWITCHPOINT ARE NOT TO BE SHARED WITH ANY OTHER PERSON or PARTY!!**

CLIENT INTERACTION

BE WISE



Use **DISCERNMENT** – Avoid
manipulative tactics from clients

**PERSONAL or SOCIAL
RELATIONSHIPS WITH
CLIENTS/RESIDENTS ARE
STRICTLY PROHIBITED!!**



Do not procure alcohol, illegal drugs or unauthorized prescription drugs from or for clients, volunteers or staff members.



Avoid physical contact... especially with someone of the opposite sex.



Do not give rides or money to any client.



Do not share personal information about yourself.

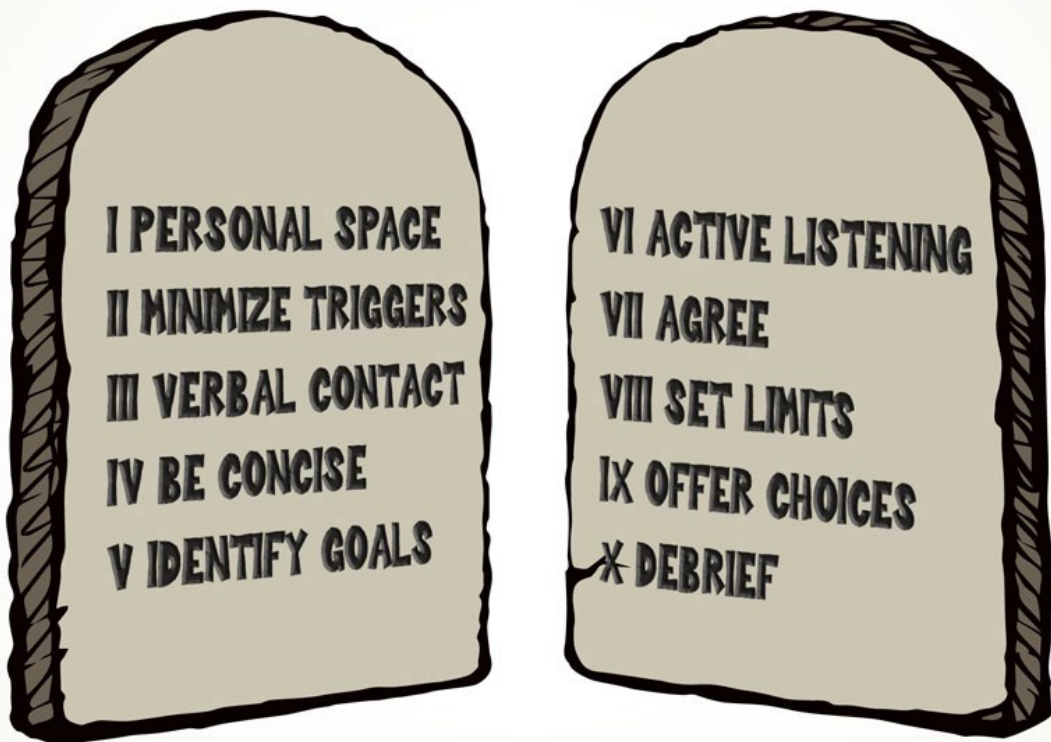
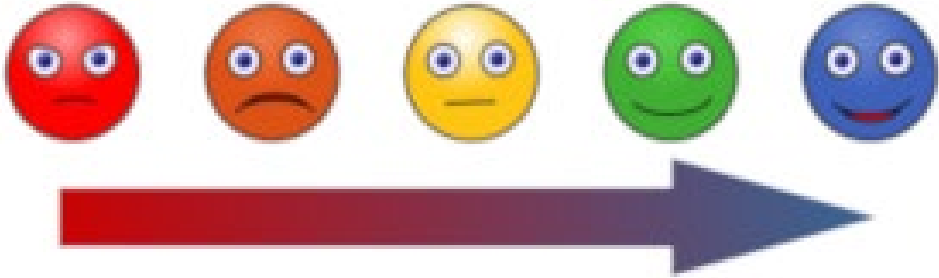


Do not leave your belongings unattended.



Report inappropriate behavior to staff.

De-Escalation



1. Respect the **personal space** of the individual; do not get uncomfortably close or block exits.
2. Do not be provocative or respond in anger, be in **control** and measured.
3. Establish verbal contact **calmly** with the individual.
4. Be **concise** and speak in short, easy to understand sentences or phrases. Repeat yourself often.
5. **Listen** closely to what the person is saying.
6. Identify the individual's **wants and feelings** and try to accommodate reasonable requests.
7. **Agree** or agree to disagree with the person's concerns, while avoiding negative statements.
8. Set **clear limits** with expected outcomes, but do not make demands or order specific behavior.
9. Offer **choices** and optimism.
10. Afterwards, **review** the event and look for areas of improvement.



BODY LANGUAGE

- Relaxed facial expression
- Speak softly
- Arms uncrossed, hands open
- Knees bent
- 2x arm's length distance



YOU MIGHT SAY...

- "No harm will come to you."
- "I will help you regain control."
- "I am here to help, not to hurt."
- "This is a safe place."



DO THEY WANT...

- Something to eat or drink?
- A quiet place to go?
- A chance to talk about things?

HARRASSMENT WILL NOT BE TOLERATED!

It is Switchpoint policy to provide a safe environment for ALL. We will not tolerate any form of harassment!

- Verbal Abuse: shouting, yelling, swearing, name calling, vulgarity
- Spreading malicious rumors, gossip and lies
- Threats or physical abuse
- Intentional Isolation: ignoring and excluding co-workers
- Intimidation or Manipulation
- Making false accusations of coworker's mistakes
- Sabotaging or impeding a person's work
- Cruel comments, belittling, and insults
- Unjust, harsh and constant criticism
- Aggressive Behavior
- Sexual Harassment: Unwanted advances, touching, stalking
- Personal and offensive jokes
- Invading a person's privacy, personal belongings or space
- Unequal treatment due to race, gender, age, size, religion, or country of origin
- Taking credit for someone else's work



If it's **UNWANTED**
It's **HARRASSMENT**

Thank you for completing the
**BEHAVIOR MANAGEMENT
TRAINING**

NOW... REMEMBER... IF IT
ISN'T DOCUMENTED... IT
DIDN'T HAPPEN!! 😁 SO...

**PLEASE Complete, Sign and
Return the CERTIFICATE of
COMPLETION to HR for
your personnel file.**

Certificate was emailed to you and
can also be found in the *Resident
Manager Email* and at *Intake Desk*.

CERTIFICATE OF COMPLETION

Employee Name

**BEHAVIOR MANAGEMENT
TRAINING**



Employee Signature *Date*

Trainer Signature *Trainer Printed Name* *Date*