It is the policy of Chesapeake Integrated Behavioral Healthcare (CIBH) to conduct its personnel activities and staff services in an objective and non-discriminatory manner and with skill and respect. All activities and relationships shall demonstrate fairness, integrity, and the highest ethical standards. This policy and procedure applies to staff, volunteers, and members of CIBH Board of Director (BOD) as applicable.

I. The integrity of the services and the individuals served shall be preserved by:

A. Recognizing the community’s social, economic, and political conditions which may threaten the freedom and personal growth of persons served, as well as, the provision of services, CIBH shall attempt to moderate and abrogate such harmful conditions.

B. Protecting the confidentiality and dignity of all those persons CIBH serves, complying with the Rules and Regulations to Assure the Rights of Individuals Receiving Services in community programs and other similar standards.

C. Complying with federal, state, and local codes and laws in creating awareness of policies and laws in order to foster the public’s confidence in CIBH.

D. Offering only those professional services for which CIBH and its staff are qualified and authorized to provide and seeking for staff that training, experience or validation which may enhance each provider’s qualifications.

E. Supporting the personal and family lives of staff so that the quality of services being provided to individuals served may be protected.

F. Assisting staff to connect family members and/or friends to treatment services in a manner which would not compromise the staff member’s integrity and/or ability to provide unimpeded program services.

G. Assuring that staff abides by the codes of ethics of their various professional organizations by using the supervisory process to assist staff to develop personally and professionally while balancing home and career commitments.
II. Interpersonal relationships shall be regulated by:

A. Refusing a personal business relationship or a professional relationship outside the Agency program with an individual served or other recipient of CIBH services (past or current recipients) up to five years beyond their discharge from services. This includes, but is not limited to, prohibiting employees from hiring current recipients of service to engage in personal work, and/or prohibiting CIBH staff from having intentional social or business contact with service recipients.

B. Strictly prohibiting CIBH staff from engaging in sexual intimacy with an individual being served or other recipient of CIBH services or former service recipient within five years of their discharge from CIBH services.

C. Assuring that employees are aware that they must refrain from imposing religious or political beliefs on individuals receiving CIBH services.

D. Prohibiting CIBH staff from discriminating against service recipients based on race, color, religion, ethnicity, age, sex, disability, ability to pay, marital status, gender identity and sexual orientation.

E. Assuring CIBH staff shall treat each other in a respectful manner in the workplace.

F. Undertaking efforts to reduce existing or potential personal or professional conflicts within CIBH.

G. Ensuring that employees within the same chain of command are aware that they shall refuse any relationship that would compromise the chain of command. Marital relations, sexual relations, and/or dating within the chain of command are prohibited. Other relationships that compromise the chain of command are defined as, but not limited to, friendships/other work associations that result in preferential treatment to one or more employees over others in the supervisory chain.

H. Requiring employees to seek assistance for their own problems / conflicts that may impair their work performance and/or their judgment with individuals receiving services and/or coworkers.
III. Integrity of the Board and the Agency shall be preserved by

A. Discouraging individual gratuities, gifts, and favors in any form from persons or organizations that might have a working relationship with the Board; ensuring that the aforementioned, if received, will be shared equitably; and refusing participation in any activity which might be construed as a conflict of interest (see policy 3.9 Staff Conflict of Interest).

B. Prohibiting employees from presenting personal gratuities, gifts, and favors in any form to any individuals served and/or other recipients of CIBH services.

C. Safeguarding the reputation and enhancing the community’s perception of CIBH through well considered and professional public (or potentially public) statements, records and positions.

D. Conducting all CIBH programs and activities related to individuals receiving services with personal honesty in order to place CIBH above reproach legally and ethically.

E. Supporting the Agency’s accountability to those political and professional entities which oversee, fund, and regulate its operations.

IV. The property of CIBH shall be protected by:

A. Respecting the facilities, furnishings, and materials of CIBH, and avoiding the removal of such from the premises without special authorization.

B. Avoiding the undue personal use of CIBH premises or equipment.

C. Safeguarding the fiscal integrity of CIBH through diligent accounting for all funds and honest reporting of all claims.

D. Prohibiting the use of any CIBH materials/property by CIBH personnel for the personal/financial gain of that person or any other individual.

E. Accepting responsibility for helping to maintain the security and safety of the workplace.
V. Violation of Ethics Policy

Any violation of the above outlined ethical standards by CIBH employees may result in disciplinary action up to and including termination per City of Chesapeake Disciplinary Policy #2.11.

VI. City of Chesapeake Code of Ethics

All elements of the City of Chesapeake Code of Ethics are hereby incorporated into this policy.


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Approved                      Date
The overriding goal of Chesapeake Integrated Behavioral Healthcare (CIBH) is to receive individuals to be served openly and without discrimination of any kind, to provide those services required based on the individual's needs, and to represent the best informed treatment procedures available. It is the policy of CIBH to propose a staffing pattern which enables the fulfillment of these principles within the parameters of authorized guidelines and available resources.

I. CIBH shall periodically examine its programs, goals and objectives in the light of client and community needs, state-of-the-art mental health, developmental disability, and substance use disorder programs, and the Department of Behavioral Health and Developmental Services (DBHDS) and other funder priorities.

II. The Executive Director, Program Directors, Administrators, and any other appropriate staff shall continually assess those conditions within the community and CIBH, which affect staffing needs, including:

A. The needs of the individuals being served
B. The hours and days the facility operates
C. Assessment, therapeutic, and follow-up functions
D. Intensity and kinds of treatment
E. The program needs
F. Nature of the disabilities of the individuals served
G. Review of evaluations of consumer services, peer review, and utilization reviews
H. City growth factors
I. Program balance and comprehensiveness
J. Expressed community expectations and requirements
K. The current DBHDS emphasis as expressed by state authorities, and by respected spokespersons for the various fields of service and
L. Budget constraints
III. The staff, as requested by the Executive Director, shall prepare the staffing priority recommendations for each program. These will be projected and justified to the Board, City authorities and the DBHDS.

IV. CIBH shall adhere to the state and local schedules for presenting staffing requests.

V. When extraordinary funding is made available through any source, CIBH shall make its staffing recommendations and appeals on the basis of the above guidelines, and the prescribed schedule, as well as upon the extent of the new resources available.

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Approved                              Date
A program of Chesapeake Integrated Behavioral Healthcare (CIBH) may accept volunteers or students to supplement staff in the conduct of the work of the program. A decision to use students or volunteers will be decided based upon the actual need for such services and the availability of staff to supervise volunteer/student activities, and upon the knowledge, skills, and abilities of the volunteer/student available. No volunteer worker will be accepted unless there is an appropriate level of supervision. For students, no one will be accepted unless staff is available to meet the qualifications of the required institution, the individual, and a thorough plan of training, particularly in the areas of confidentiality and clients' rights. For a complete review of the policies and procedures governing the use of students and volunteers (See the CIBH Volunteer Manual):

I. A Program Director/Administrator or designee, Staff, Individuals, Schools, Universities, and Human Resources may submit a proper request for such a service to the Volunteer Coordinator (or the person within the CIBH assigned to coordinate volunteer activities, hereafter referred to as the Volunteer Coordinator).

II. The Volunteer Coordinator shall promote the CIBH Volunteer Program, recruit volunteers/students, maintain a list of available CIBH positions for volunteers/students, and refer volunteers/students to programs making application with available training/work opportunities.

III. To be considered for a volunteer/student position with the CIBH, an applicant shall submit an application to the Volunteer Coordinator.

IV. Volunteer/student applicants shall be screened through interviews with the Volunteer Coordinator and a representative of the Program seeking volunteer/student services.

V. The volunteer/student acceptance and placement will be determined if both parties agree the work assignment will meet their interests and the educational agency’s requirement.

VI. Each volunteer will be provided with a position description during the interview process. Position descriptions shall be periodically reviewed by the Volunteer Coordinator and Program staff.
VII. All volunteers whether new or reinstated, shall participate in an orientation program.

VIII. Before a student can begin their service there must be an Agency Affiliation Agreement and Business Agreement (if needed) approved by the City Attorney and on file.

IX. Included in the application requirements in item III, the volunteer/student must: Acknowledge receipt and understanding of the Volunteer Handbook and Corporate Compliance/HIPPA. Also, CIBH must receive Clearance of the Criminal History Records Check and clearance from the Child Protective Services Central Registry Search before a volunteer/student service commences. He/she shall sign a Contract of meet all the requirement a volunteer Code of Ethics, Confidentiality and Behavioral Expectations, Corporate Compliance/HIPAA, and a Work Schedule Agreement.

X. CIBH Volunteer Manual shall contain procedures for the discipline, dismissal and reinstatement of volunteers.

XI. The Volunteer Coordinator is responsible for gathering, compiling, and disseminating Volunteer Program statistics.

XII. Provisions shall be made for the proper recognition and honoring of CIBH volunteers.

XIII. CIBH may utilize the services of students from regional colleges and universities. Orientation, training, and supervision will be provided by the Agency's assigned supervisor. CIBH supervision of students will reflect the regulations of the sponsoring school.

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Approved                      Date
It is the policy of Chesapeake Integrated Behavioral Healthcare (CIBH) to establish a methodology by which all applicants for positions with CIBH will compete fairly and justly; provide a consistent method of documenting personnel selection procedures; and substantiate that CIBH is an Equal Opportunity Employer, with staff selection being objectively accomplished. All CIBH employments selections are done in accordance with City of Chesapeake Administrative Regulation 2.41: Employee Selection Policy and Procedure. [http://www.cityofchesapeake.net/Assets/documents/departments/human_resources/administrative_regulations/AR241.pdf](http://www.cityofchesapeake.net/Assets/documents/departments/human_resources/administrative_regulations/AR241.pdf)

Procedures for filling a CIBH vacancy can be found in section 14.1 of the CIBH Fiscal Administration Policies and Procedures.
It is the policy of Chesapeake Integrated Behavioral Healthcare (CIBH) that the responsibilities of staff supervision and staff performance evaluation are accepted as mutually complementary actions. Each should be conducted so as to provide to staff clear and constructive information which may be used for professional growth of the persons and enhancement of the program.

I. Within each program of CIBH, there shall be a regular schedule of meetings between supervisor and staff developed, with the frequency of sessions, the structure, and the methodology of such sessions left to the discretion of supervisors and program directors/administrators, but at a minimum of monthly individual supervision.

II. While the content of any supervisory session will be discretionary in part, these sessions shall regularly reference the needs and goals of the program and CIBH, and will assist the staff person in gauging his/her progress in program goal-achievement.

III. Supervisory sessions which identify, in a substantial way, the staff person’s performance in program goal-achievement, shall be recorded and documented by the supervisor, so that these job measures may be presented and utilized in the evaluation process.

IV. The supervisor of any program shall design supervision to reflect and reinforce job descriptions and performance criteria. During the first twelve (12) months of employment, the supervisor is required to complete the CIBH Monthly Probationary Progress Review Form each month during the first through eleventh months of a new employee’s probationary period and shall complete the City’s Performance Evaluation Form by the 12th month of the employee’s employment. These progress review forms shall be filed in the employee’s personnel file kept centrally by CIBH. In accordance with City of Chesapeake Administrative Regulation 2.10, probationary employees shall receive a performance evaluation and counseling session after serving approximately one half of the probationary period.

V. Each employee of CIBH shall adhere to the evaluation procedure of the City of Chesapeake which includes a required annual written performance evaluation.
VI. When the supervisor is completing any staff evaluation, he/she shall deliberately discuss with staff being evaluated the nature and reasons for the score assigned by the supervisor.

VII. Each staff performance evaluation shall honestly reflect both strengths and opportunity areas of the staff and shall provide recommendations for improved performance. This includes goals and expectations written in the developmental activities section of the evaluation. If a performance improvement plan is needed, this section must be reviewed and approved by City Human Resources because it is given to staff.

VIII. Supervisors must utilize the performance evaluation instrument designed by the City of Chesapeake which requires the signature of both the employee and the supervisor. Evaluations are required to be reviewed by the designated “reviewing authority” before delivery to staff. Either party may add interpretive notes. Evaluations are discussed with the particular staff member before they are finalized.

IX. A PDF copy of each completed performance evaluation shall be kept centrally by CIBH, with the file also being uploaded to the City of Chesapeake Department of Human Resources site. A copy of this evaluation shall be available upon the employee’s request. The supervisor may also provide a copy of the signed document to the employee after the processing of each evaluation.

Related City Administrative Regulation 2.10

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Approved                                     Date
Chapter III  
3.6 Guiding Staff Development

It shall be the policy of Chesapeake Integrated Behavioral Healthcare (CIBH) to prepare employees for their positions, clarifying the purposes of the program, and presenting information about the position the staff member is to fulfill. It is anticipated that a benefit of employment by this Board shall be the personal and professional growth of employees, and that its policies shall contribute to this end.

I. New employees shall, within fifteen (15) working days of employment, be provided orientation regarding their assigned positions. A CIBH orientation checklist is used with each new employee to assure coverage of specific factors for this orientation (See Policy 3.11 Orientation of New Employees, Volunteers and Students).

II. Within one month of employment, all staff persons shall be properly informed of personnel practices and of their essential job responsibilities.

III. Staff development may take the form of group or one-on-one supervision and instruction, formal academic education, in-service sponsored by the Board, or other growth or education experiences approved by the supervisor.

IV. Subject matter of orientation or in-service training shall be varied enough to represent those areas of staff needs that are expressed by staff, observed by the supervisor or emphasized by other agencies and authorities.

V. An employee's participation in educational/training opportunities shall be reported to the CIBH Payroll Technician II/designee and recorded in the centralized staff file/personnel record/CIBH training database.

VI. When possible and useful, core contents of training events may be shared with the Board staff at large, in order to expand the usefulness of the training opportunities.

VII. When completing Performance Evaluation Forms, Supervisors shall utilize the portion calling for Developmental Activities. This section will be used to specify projected staff training in-service goals as applicable to the particular employee's needs.
Chesapeake Integrated Behavioral Healthcare (CIBH) shall employ and counsel staff in a manner that promotes quality treatment to the individuals served by the Board and fulfills all staff criteria promulgated by the City of Chesapeake and any other organizations or entities that pay for client services.

I. Staff who are employed as physicians, nurses, or other practitioners of the healing arts or behavioral sciences shall be duly licensed pursuant to Title 54.1 of the Code of Virginia unless the City of Chesapeake class description does not require a license.

II. All other personnel, as required for employment by CIBH, along with any persons engaged in a contractual relationship with the Board, shall meet all licensure and certification requirements of the law and relevant regulations as well as CIBH policies for particular positions.

III. As existing personnel seek licensure or certification, CIBH may provide support for related staff development opportunities.

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Approved                      Date
It is the policy of Chesapeake Integrated Behavioral Healthcare (CIBH) to conduct a reasonable, responsible, and systematic means for determining and providing a level of reimbursement to staff who engage in work-related travel. All CIBH regulations and procedure shall generally be compatible with the travel regulations: 1.16- Department of Finance Official Travel Regulations set by the City of Chesapeake.

I. Selection of the mode of travel, the method for applying for reimbursement, and the systems and amounts for staff reimbursement shall be guided by City of Chesapeake Administrative Regulation1.16: Department of Finance Official Travel Regulations.


II. Reimbursements for mileage, meals, lodging, and associated travel shall not exceed limits that have been established in the CIBH Workshop/Conference Guidelines.

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Approved                              Date
It is the policy of Chesapeake Integrated Behavioral Healthcare (CIBH) that its employees and former employees refrain from any actions that might result in benefit for a business, service, agency, or organization within which an employee may perform roles of production, policy formulation, service provision, support, or consultation. Further, employees shall refrain from bearing any kind of influence upon any part or person of CIBH which might, through his/her involvement in such entities and roles as those named above, bring benefit to the CIBH employee or his/her family.

The following are examples, not intended to be exclusionary, of the application of the above policy:

I. If a CIBH employee conducts a private practice in any of the fields for which the CIBH itself exists, such an employee shall not refer, explicitly or by suggestion, an individual served by the CIBH either to himself/herself or to a partner within such a practice.

II. An employee shall not make any direct or indirect referral to another practice or agency performing mental health, developmental disability or substance use disorder services in which another CIBH employee may be engaged.

III. Should a CIBH employee serve another private or public agency or organization of any type as a part of its board or similarly influential entity, that employee shall not in any way attempt to influence CIBH to conduct any activity that might result in benefit for that agency or organization.

IV. Upon leaving the employ of the CIBH, no individual shall knowingly attempt to influence any current or former individual served by CIBH to become a consumer or paying participant in any organization or agency in which the former employee has any role.
Chapter III

3.10 Criminal Background Check

It is the policy of Chesapeake Integrated Behavioral Healthcare (CIBH) to ensure that a criminal history and background check is performed per City of Chesapeake policies and procedures for all new employees, students and volunteers. Contracted providers are also required to implement such a policy in accordance with City of Chesapeake guidelines.

For all employees providing “direct consumer care,” as set out in Section 37.2-416 of the Code of Virginia, verification must be provided that the prospective employee has not committed any “barrier crimes” as described in the Code and that their name is not listed with the Central Registry maintained by the Virginia Department of Social Services indicating they have perpetrated any child abuse or neglect.

I. All employees shall complete and sign a Statement of Certification and Background Check Authorization form upon acceptance of employment and prior to their start date. Their signature indicates they are aware that their employment is conditional based upon the outcome of their background check investigation.

II. The designated CIBH Human Resources employee will obtain and document the outcome of the State Police and FBI investigation upon completion and notify the Executive Director, Program Supervisor/Administrator and Program Director if further action is deemed necessary.

III. In addition, on an annual basis a FBI Criminal Background Check is performed on all direct care staff. This is in accordance with City of Chesapeake Administrative Regulations 2.52: Criminal History Records Check. 


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Approved                      Date
It is the policy of Chesapeake Integrated Behavioral Healthcare (CIBH) to ensure that all full and part-time employees, volunteers and students/interns are appropriately oriented to the mission, objectives, practices, rights and confidentiality requirements of all individuals served by CIBH and all other applicable City, State and Federal regulations governing services provided by CIBH.

I. New Employee Orientation

A. All full-time and regular part-time CIBH employees must attend the New Employee Orientation offered by the City of Chesapeake Department of Human Resources. This will occur on the first day of their employment. Any exceptions to this will be cleared through the City of Chesapeake’s Department of Human Resources.

B. New employees will also be provided an orientation to CIBH specific information regarding all appropriate and applicable state and federal regulations. This orientation will be commensurate with the employee’s function or job-specific responsibilities and will be initiated on the employee’s first day at his/her respective service site. Orientation shall be conducted and documented by the employee’s immediate supervisor / designee using the CIBH Orientation Checklist. The supervisor will be responsible for reviewing Part A of the Checklist. During CIBH New Employee Orientation session (generally conducted on a monthly basis) Part B of the Checklist
Policy 3.11 Orientation of New Employees, Volunteers, and Students / Interns

will be completed. Orientation to the following policies and procedures shall occur within the first fifteen (15) business days of a new employee’s employment and submitted to the CIBH Payroll Technician immediately upon completion:

1. Mission, vision, and values of CIBH

2. Agency Corporate Compliance Program

3. HIPAA Privacy / Security regulations for confidentiality on information including access, duplication, and dissemination of any portion of an individual’s service record

4. Orientation to CIBH practices that assure an individual served is informed of his/her rights as a service recipient including Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers of Licensed, Funded or Operated by the Department of Behavioral Health and Development Services

5. CIBH Emergency Preparedness and Shelter Duty procedures

6. CIBH practices and procedures for infection control including blood borne pathogens training

7. Other policies and procedures that apply to the employee’s specific position and duties and responsibilities (e.g. medication management, behavior management, CIBH specific personnel policies, etc)

C. New employees are also required to attend the next scheduled CIBH New Employee Orientation session.

II. Students/Interns/and Volunteers

A. All students/interns and volunteers will be required to participate in a CIBH Volunteer Orientation session conducted and documented by the CIBH Volunteer Coordinator and the Site Supervisor, using the Orientation Checklist contained in the CIBH Volunteer Handbook. Most students/interns and volunteers are also required to attend a portion of CIBH New Employee Orientation when offered, except for medical/nursing students who participate in an observational day with CIBH. These orientations will include, but are not limited to:

1. Overview of CIBH and the services offered
2. Review of the Board’s mission, vision, and values
3. Review of the Volunteer Policies and Procedures
4. Review of the Board’s Corporate Compliance Program
5. Review of the HIPAA Privacy/Security regulations
6. Overview of the Human Rights System
7. Review of CIBH expectations
8. Review of volunteer requirements and expectations
9. Review of specific job descriptions and a job site orientation

B. The Program Supervisor/designee will provide each student/intern or volunteer with a job specific orientation, training and supervisor.

III. Contractors

Contractors and their staff are not employees of the Board. However, employees of CIBH contractors, who work directly with individuals served by CIBH, are required to adhere to all of the contract requirements of CIBH. All CIBH contractors agree to comply with the terms and conditions of CIBH’s Performance Contract with the Department of Behavioral Health and Developmental Services (DBHDS), to the extent that it applies to the services provided under the contract.

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Approved Date
Chesapeake Integrated Behavioral Healthcare (CIBH) supports the development of employees in order to fulfill the goals of its Continuous Quality Improvement and Strategic Plans. Staff development takes the form of those skills and aptitudes that will permit the organization to attain the mission, vision and values established by the Board, administration, and staff. Utilization of resources for staff development is managed and based on the assessment and identification of current and projected needs primarily at the board-wide or divisional levels of CIBH. It is important that the organization’s employees have continuing opportunities to increase their knowledge, skills and abilities to assure that CIBH remains accountable to the individuals we serve, other stakeholders and the Corporate Compliance plan.

Within CIBH, Board members, employee, and volunteers/interns undergo initial orientation as well as ongoing continuing education about the changing environment of a publicly-funded behavioral healthcare provider. Administration must monitor trends in the environment and assist staff in adapting to constant change in a healthy and productive manner. Supervisors must periodically upgrade their skills to conform to a team approach suited to a managed care environment. Line staff must evolve and adapt personal aptitudes and skills within a team approach; while support staff must upgrade their skills in order to assist other staff in delivering services in an efficient and cost-effective manner.

The Leadership Team (LT) is committed to support funding for staff training and development. Each budget year, LT determines how much of the total amount of staff development and training money will be directed to specified training categories. These training categories have been established to classify the various levels of training as follows:

I. Training Required for DBHDS Licensure, by the City, third party payers or by CIBH Policy

This is training for staff who work in programs or have job duties that are required by the Department of Behavioral Health and Development Services (DBHDS), the City of Chesapeake, or CIBH. This includes topics such as CPR, First Aid, Blood borne Pathogens, Medication Management, Behavior Management, Defensive Driving, Red Cross Shelter Training, Emergency Preparedness, Corporate Compliance, HIPAA Privacy/Security, and Human Rights. Training is offered to all designated staff and at regular intervals to ensure that staff is always able to recertify, as needed, to maintain compliance with all hiring requirements.
II. Training Related to Service Delivery Across the CIBH

This training covers areas identified by Leadership Team and program supervisors. This training includes topics such as treatment planning or risk assessment, and these trainings have broad application to service delivery across the agency. Training related to service delivery may be provided by staff or by an outside consultant. Such training will be made available to all CIBH staff as appropriate.

III. Training Related to Service Delivery in a Division

This training covers areas identified by Leadership Team and supervisors as relevant to service delivery across a division, but are typically open to other CIBH divisions as well. Examples of this type of training include topics such as clinical interventions with individuals who are personality disordered, basic motivational enhancement training, etc. It is also anticipated that supervisors and other managerial staff will provide systematic follow-up after each training / workshop in order to facilitate transfer of learning to service delivery.

IV. Training Related to Organizational Goals and Delivered Outside CIBH

This training covers identified priority areas at the program or divisional levels by Leadership Team and supervisors. The training is related to organizational goals and is available only outside CIBH. Supervisors are to ensure that requests for training address identified priority areas when approving individual staff requests to attend training outside the Board. Occasionally, more than one staff member may be approved to attend a particular training in order to encourage transfer of learning back to the work setting within a team approach.

V. Other Staff Training

All other training that is not included in the above categories will be considered on a case by case basis. Staff may attend other training, with supervisory approval, in order to address the staff’s objectives in the Developmental Activities section of the performance evaluation and any other areas that supervisors deem of assistance to their program or the agency.

VI. Accessing Staff Development and Training Opportunities

A. In view of the scarcity of resources, administrative and supervisory personnel will assure that resources are used for activities that will further the goals of the Continuous Quality Improvement Plan; therefore, leadership team and supervisors develop and refine
approaches to the selection, planning, arrangement, provision and follow-up of training and related activities.

B. Where there is a divergence between the staff development needs of the organization and those of the individual staff member, the needs of the organization will take precedence.

C. Leadership will hold discussion of upcoming training and conferences will be held in Leadership Team and then forwarded, via e-mail, to appropriate staff. This process will allow for better board-wide allocation of training resources. Staff is encouraged to both post and enroll in on-line training with CIBH’s e-Learning System or other partners (ie. Insurers, DMAS, VACSB etc.). CIBH Administration staff will also disperse available information on any known staff training opportunities (particularly those offered through the City of Chesapeake’s Human Resources Department), via e-mail, in order to make CIBH staff better aware of these opportunities.

D. In order to minimize loss of direct service time and staff travel, a number of staff training topics are being made available on-line from any CIBH desktop computer through CIBH’s e-Learning System. These may be accessed by staff at their convenience and can be completed as time permits. Additionally, some of the training may also be available through various electronic media.

VII. Documentation of Staff Development and Training Opportunities

All staff and their supervisors are responsible for ensuring that all completed staff development and training opportunities are reported to the Payroll Technician II and the Quality Assurance staff responsible for e-Learning in order to be documented in the CIBH e-Learning System. Supervisors will periodically review a Staff Training Report informing them of training completed and needed by their respective staff members. Any discrepancies should be reported immediately to the Payroll Technician II to ensure that CIBH e-Learning System is accurately maintained.

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Approved                    Date
It is the policy of Chesapeake Integrated Behavioral Healthcare (CIBH) to encourage open communication between supervisors and their employees. This is especially important in order to effectively accomplish the work of CIBH. The intent of this policy is to provide a formal method of open communication for the resolution of problems which may arise in the workplace. Employees are always encouraged to resolve any work disputes through their work chain of command. This generally begins with the employee’s direct supervisor. If an employee is not satisfied, then the issue would move to their Supervisor’s Supervisor, then to their Program Director and finally to the Executive Director.

However, all CIBH employees (with the exception of the Executive Director) have access to and are required to follow the City of Chesapeake Administrative Regulation 2.07: Grievance Policy and Procedure
Chapter III  3.14 Equal Opportunity Assurances

It is the policy of Chesapeake Integrated Behavioral Healthcare (CIBH) to establish a methodology by which all applicants for positions with CIBH will compete fairly and justly by providing a consistent method of documenting personnel selection procedures and by substantiating that CIBH is an Equal Opportunity Employer with staff selection being objectively accomplished. CIBH strictly adheres to the City of Chesapeake Administrative Regulation 2.09: Department of Human Resources Equal Employment Opportunity and Affirmative Action Policy http://www.cityofchesapeake.net/Assets/documents/departments/human_resources/administrative_regulations/AR209.pdf.

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Approved                      Date