DEVELOPING POLICIES AND PROCEDURES

FOR A COMMUNITY BASED NON-PROFIT

SOCIAL SERVICES AGENCY SERVING OLDER ADULTS

by

Donna Mitts Hasemeier

A Master's Research Project in Partial Fulfillment of the Requirements for the Degree

Master of Arts

OTTAWA UNIVERSITY

January 1991

LIBRARY - OTTAWA UNIVERSITY OTTAWA, KANS,

DEVELOPING POLICIES AND PROCEDURES

FOR A COMMUNITY BASED NON-PROFIT

SOCIAL SERVICES AGENCY SERVING OLDER ADULTS

By St.

Donna Mitts Hasemeier

has been approved

APPROVED:

Chairperson

Supervisory Committee

Man

maa

ACCEPTED:

Director of Graduate Studies

Research literature and human resources management standards were reviewed concerning two major issues: 1) Utilizing human resources management principles in procedures for non-profit preparing policies and social services agencies; and 2) Whether or not there exists model policies and procedures for such agencies. nationwide solicitation of 33 non-profit social Δ services agencies serving older adults yielded an array of vastly divergent policies and procedures manuals and materials. Targeting a community-based volunteer agency in Sun City, Arizona, a set of policies and procedures was produced for use within the human resources and areas of the agency. A panel of services program department heads and administrators provided on-going input and formative evaluation of the final product. Results of the project were two-fold in nature. First, it seems evident that the literature and field of human resources management has avoided or neglected the area of non-profits, particularly those which depend heavily on volunteer manpower. Secondly, by utilizing sound human resources principles, agencies of this sort could very likely improve the utilization of their most valuable asset, the volunteers and staff who provide their services. A third resultant factor is that this project will most likely serve as a starting point from which increasing use of sound human resources principles could be initiated within the area of community-based volunteer agencies.

iii

LIBRARY - OTTAWA UNIVERSITY OTTAWA, KANS,

DEDICATION

Dedicated to Jack for his help, understanding, support, encouragement, perseverance, faith and belief in me, even during those times when I didn't believe in myself.

... And to Skip for granting me a wish. He made my lifelong dream a reality.

. .

Table of Contents

	age
ist of Exhibits	/i
Chapter	
I. Introduction	. 1
Long Term Care and Human Resources	, 2
Introduction to the Study	, 3
Background of the Problem	, 6
Limitations of the Study1	0
Relevance to Human Resources Management1	12
II. Review of Pertinent Literature	14
Introduction	14
Published Materials	14
Summary and Conclusion	22
III. Methdology	24
IV. Results of the Study	27
Material Currently in Use at Target Agency	27
Review of Material from Responding Agencies	28
References	35

V. Model Policies and Procedures Manual

Exhibits

Exhibit

Page

Chapter I

Introduction

Community-based non-profit social services agencies tend to "fall between the cracks" of regulation in many states, including Arizona. Left to their own devices, they are free to set policies and procedures as they see fit. Often they have only limited data to identify optimum techniques (procedures) or the personnel best suited to perform certain tasks (Applebaum, 1989). This fact, combined with the nature of their functions ("Helping others to help themselves"), makes them especially vulnerable to deficits in effective management of their human resources.

This problem is compounded for agencies serving the elderly by the incredible increase in the number of persons over the age of 65 and increased aging-related diseases that accompany this. Such agencies are often inclined to be "non-structured", and problems tend to be handled on an ad hoc basis by the person "on duty" when a crisis arises (Stupak & Warren, 1986). Put another way, the impetus and focus becomes providing social services in any way possible as soon as possible.

Long Term Care and Human Resources Issues

Long-term care services for the elderly has become one of the fastest growing segments in the human services field. "Long-term-care" is the operational term for a continuum of health and social services that encompass a wide array of services offered in a variety of settings (Hart & Spofford, 1986). These range from institutional settings (e.g., nursing homes) to non-institutional settings such as Adult Day Centers and the individual's home. The latter may include community-centered volunteer services, and are termed "non-traditional."

Human Resources Management (HRM) tools such as clearly defined policies and procedures can help to provide the standardization and consistency so necessary to insure quality care in such agencies (Rock, 1987). They can also serve to facilitate appropriate selection and placement, performance evaluations, promotions and terminations. Ironically, however, agencies of this type tend to avoid such HRM input.

This raises certain questions, including:

- What specific needs for policies and procedures could be addressed in a particular social services agency?

- What existing policies can be utilized and integrated with new and improved methods?

- Is there a model for developing policies and procedures in such agencies?

- What methods do similar agencies employ?

This project answers some of these questions and then presents a model and subsequently developed Policies and Procedures Manual which can be used in such an agency.

Introduction to the Study.

The targeted subject of this study is a non-profit, community-based social services agency ency providing long-term-care support services. The client population consists primarily of retirees in a suburb of a large Southwestern city. The agency was created to fill the unmet needs of elderly residents. Services are provided in the form of Adult Day Centers, Counseling, Home Support Services, Service Coordination, and Information/Referral. Approximately 70% of all services are provided by volunteers.

In an effort to establish some priority of needs, agency operations were observed over a twelve week period. Additionally, interviews were conducted with administrators, department heads, paid staff, and volunteers. The result was that some conclusions were

reached regarding ways in which the agency might benefit from improved methods of managing its human resources.

One major area identified as needing attention was the lack of a standardized policies and procedures manual which could be used agency-wide. This was based on the following findings:

-Without the direction and structure of clearly defined and documented policies and procedures, some workers tend to impose their own individual ideas and methods for solving problems and addressing the needs of clients. This supports findings by Albrecht (1983) that individuals may adopt their own individual standard of operation, and refine, cherish, and defend it.

- This, in turn, could lead to confusion and dilute the quality of service provided by the agency, thereby raising questions from funding sources, referral sources, consumers, etc.

- Workers need something in writing to substantiate their reasons for using certain methods in performing job tasks. This substantiates, to some degree, findings by Wilson (1984) that people want their time and commitment to make a difference. Taking workers seriously and asking for their best, while expanding opportunities for improvement and utilization of skills, is vital.

- If legal questions arise, the agency has limited documentation stating its standard operational guidelines.

- Those with responsibility for seeing that adequate and appropriate services are delivered, unanimously express a need for consistent policies and procedures within the agency's system.

- Administrators specifically requested that a policies and procedures manual be developed and implemented.

Additionally, there was consensus opinion that policies and procedures need to be in place and operational in anticipation of possible future licensure. Recent experience illustrated this graphically: in order to comply with licensing requirements, the Adult Day Centers had to expend much time and manpower to produce a manual of policies and procedures in a relatively short time.

Also of note is the fact that the agency has no Human Resources or Personnel Department per se, and no one person is designated to address such issues. (In most instances, it falls upon the Executive Director or the Assistant Executive Director to deal with Human Resource issues.) Where they are present, policies and procedures have been written by several individuals in various positions, using different criteria, at various points in the agency's history. Since the majority of staff positions are in the "exempt" category (that is, they are not covered by the Fair Labor Standards Act due to the nature of the work), staff members may be vulnerable to certain inequities. For example, job descriptions are not uniform and procedures for functions such as performance appraisal are essentially non-existent. Such a situation presents some definite challenges for the Human Resources professional.

Background of the Problem.

An ancient Hebrew blessing promises "The years of thy life shall be many" (Proverbs 4:10). Fulfillment of that prophesy is evidenced by the rapidly increasing numbers of elderly in our communities. For the first time in our history, there are now more people age 65 and over than teen-agers (Wilson, 1984). The number of persons over 85 is the fastest growing segment of the older population (Health Futures Institute, 1984; Merriam, Aronsen, Gaston, Wey and Katz, 1988). These elderly citizens suffer from problems such as isolation, frailty, physical disabilities, dementia and grief.

Human services professionals are scrambling to bridge the gap in care created by aging related problems. Inevitably, whenever services must be provided on an urgent basis, issues of quality service delivery follow. Rock (1987) points out that social service agencies need structure, including policies, procedures and appropriate staffing, if quality assurance is to be achieved.

In the fields of gerontology and geriatric social services, an emphasis has been placed on the critical needs of clients. Structure and the needs of workers may lag woefully behind. Consider the following hypothetical incident in a non-profit agency providing long term care services to the elderly:

A volunteer intake worker turns to his colleague and asks, "What are we supposed to do if a suicidal Alzheimer's patient calls?" His colleague replies, "I'm not exactly sure, but there must be some procedure for that sort of thing. Hey, Joe, do we have a procedure for taking suicide calls?" Joe responds, "I think so, but I don't know where it would be; better ask the supervisor."

This scenario might seem extreme but such situations may, in fact, be a reality in communitybased non-profit social services agencies. This is especially true in organizations which utilize older volunteer workers. Accustomed to performing at optimum levels, older workers not only appreciate clear direction, they expect and require it in most cases (H.R. Bohling, personal communication, March 10, 1990).

The retirement community which is the setting of this study was opened in 1960. At that time, no provisions were included for the day when residents could no longer participate in an "active retirement lifestyle." The concentration of 60,000 older adults in one geographic area has resulted in ever expanding needs for services and assistance. Indeed, the need for programs such as Adult Day Centers, Counseling, Home Support Services, and Service Coordination has rapidly surpassed their availability.

In its effort to meet these overwhelming needs, the agency in this study has experienced incredible growth in a relatively short time. From one employee and 25 volunteers providing one day of service to a handful of participants, it has mushroomed to 25 full-time equivalent (FTE) positions and over 400 volunteers working five days a week at five locations to serve over 3000 individuals a year. This phenomenal growth provides the medium for the problem herein stated. As is common to such agencies, providing service is the first priority. HRM issues, such as updated policies and procedures, take a back seat to caring for those in need. Often, such issues are addressed in a rather haphazard manner, whenever time and manpower are available (which they seldom are).

According to Gardner (1987), some of the worst known examples of organizational decay fall into the non-profit agency category. He adds that one of the gravest agents of decay is a sense of moral superiority that afflicts some of these organizations. It seems that people who believe they are doing a noble thing are rarely good critics of their own efforts. Therefore, it becomes even more imperative that some form of internal standards be in place to act as a realistic barometer of performance. Development of HRM tools such as effective policies and procedures can help agencies such as the one in this study combat this tendency.

The goal of this project was to develop a standardized policies and procedures manual for a community-based non-profit social services agency. The ultimate goal of this manual will include the

the following functions:

- To assist in the achievement of the organization's stated mission;
- To establish guidelines for workers to follow, thereby providing parameters for precisely what is expected of them;
- To standardize services to ensure continuity;
- To anticipate future regulatory and licensure requirements;
- 5) To satisfy requirements of donors and grants;
- 6) To aid in more efficient utilization of the agency's human resources.

The methodology utilized to accomplish the goals of this project are discussed in Chapter III of this paper.

Limitations of the Study.

Certain limitations of the project can be anticipated. First, this agency is unique in several ways, including the fact that it receives no direct government funding. Also, it is primarily operated by older volunteers from within the communities it serves. These two facts limit comparisons with other agencies.

Additionally, this project will not measure the

effectiveness of policies and procedures or their impact on the efficiency of agency operation. Service outcome indicators and measurement techniques would need to be developed in order to accomplish this. Such an undertaking could very well be the object of a second study, involving longitudinal measurements.

Strict attention and adherence to policies and procedures could easily divert energy and resources from the primary goal of providing service. Therefore, care must be taken to support development of a tool which increases options for meeting individual client needs and avoids duplication of service.

Also, in order to be a functional tool, policies and procedures cannot remain static. They must be dynamic in order to accommodate agency growth and expansion of services. Therefore, regular continued review of the manual should be mandated. Finally, because this was a first step toward introducing appropriate human resources management concepts to the agency, the final product includes only material pertaining to human resources and program services. The obvious next step would be to develop a manual of policies and procedures for administration and clerical support.

Relevance to Human Resources Management.

Unlike hospitals, nursing home facilities, home health nursing services and other medical models, non-profit social services agencies, in general, are not governed by regulating bodies which help to set standards of service delivery. However, there is growing recognition of a need to address issues such as standards of practice, recruitment, selection and placement, and other HRM concerns in these agencies.

Because human resources functions are most often associated with profit-oriented industries, non-profit social service agencies have historically escaped attention as targets for formal human resources development and management. In addition to being much different from those of business and industry, goals and objectives of social services organizations may be much more difficult to define in measurable terms (Gable, 1972).

Such alternative organizations have a strong inclination not to plan or to recognize the need for planning. The effect of this "fire fighting" mentality is increased personnel burnout and a reduction in efficiency and effectiveness. Conversely, employees who are playing a part in achieving the organization's goals by following standard policies and procedures

experience high worker satisfaction (Stupak & Warren).

bight worker setisfaction (Stuppk & Warron)

CHAPTER II

Review of Pertinent Literature

Introduction

This section contains information obtained from a search for written material pertinent to the development of policies and procedures in agencies serving elderly clients. Of particular interest were, of course, any articles regarding community-based non-profit or volunteer organizations. In general, the material reviewed can be categorized into four major areas: 1) Information pertaining to policies and procedures; 2) Quality assurance and service delivery issues; 3) Material specific to services for the elderly; and 4) Data regarding non-profit organizations.

Published materials

Documents that inform workers of agency policies, and provision of procedures for carrying out those policies are basic to proper operation of any agency. Shaefer (1987) reinforces this and identifies four major areas that need to be considered: 1) Service procedures, which include documents or manuals that govern performance of all service and clinical support tasks; 2) Administrative procedures and manuals, which cover the subjects pertinent to personnel, finance, supply, property control, record-keeping and information processing, and office practice; 3) Communication and referral protocols which provide instructions on how linkages between units and functions of the program are to operate; 4) Evaluation and control procedures, which specify how and when evaluation of individual, work group, and program performance is to be carried out.

In their discussion of implementing strategic human resource development, Hall & Goodale (1986) state: "At the strategic level, the most important influence on development is human resource policies. Unfortunately, many organizations do not have explicit formal policies related to people, even though clear human resource policies, formulated and practiced by top management, are the most important element in developing human resources."

Pepper (1990) states that many smaller organizations often do not face the task of writing a manual until they have lost a wrongful-discharge or similar lawsuit. Additionally, in many agencies, this task is put off because the agency isn't large enough to warrant a full time personnel manager, and other managers are too pressed for time to address it.

However, in these litigious times, it is crucial that all personnel understand what is expected of them and are cognizant of the agency's ground rules.

According to the White House Conference on Aging (1980), a community care system must be appropriate to the community and therefore, any recommended models must have flexible structures which can adapt to unique local factors (Glasse, 1980). Honolulu's geriatric foster care program exemplifies effective utilization of policies and procedures. According to Braun and King (1989), the program's manual is reviewed annually to identify and explore problematic areas. Support data are gathered through retrospective chart review or cross-section surveys, but final policy changes require a consensus of all program staff.

Levine & Fleming (1986) give some good examples of job descriptions of various level case management workers, but focus specifically on Chronically Mentally Ill clients.

Several authors address the roles of volunteers and paraprofessional workers and how responsibilities should be defined and divided (Ritchie & Stitsworth, 1987; Baker, 1983; Wilson, 1984; McAdam & Gies, 1985; Stupak & Warren, 1987).

A gap exists in the literature when it comes to

information and guidance about the various phases of the service delivery process. Brubaker (1987) validates this and further states that approaching service delivery from a social systems perspective is both appropriate and more effective. She bases this on the idea that such an approach directs the service provider to examine the various systems with which the client interacts and to acknowledge the relationships the client has formed in these systems.

Brubaker goes on to explain that the purpose of service delivery is derived from the values of the service provider. Matching client needs to available resources involves: 1) Attention to service delivery priorities that have been set; 2) Determination as to whether those priorities continue to be appropriate; 3) Ensuring that services provided are consistent with priorities; and 4) Enabling appropriate client utilization of available resources.

The "self-policing" tradition of the social services professions is essential to assuring quality service delivery. Thus, in the absence of external regulation, it behooves members of these professions to develop and implement policies and procedures that will assure the most effective care at their disposal. Katz (1985) cautions that service providers must be

flexible in their approach to client services, and able to amend methods of meeting clients' needs.

Defining quality is the first step in assuring quality care. That is, before developing and implementing procedures, it is vital to determine the purpose, objectives and goals of program elements (Arnold, 1986). Hughes (1989) states that methods used to assure or regulate the quality of social services for the elderly should vary depending upon the vulnerability of the client and the technical complexity of the service provided.

According to Atchley (1989), the basic approach in quality assurance is to compare current services (what does happen) to practice standards (what should happen) and then take action to prevent or minimize differences between the two. Obviously, there must first <u>be</u> some standards if this is to be accomplished.

Gwyther (1988) addresses the importance of tools or procedural aspects in assessment of elderly clients. She identifies the goal of these as individualizing a plan of care for the elderly client or family. She states that, although the goal of services to the elderly may be individualization, there is, nonetheless, a concomitant need for standardized procedures to ensure validity and reliability. Procedures such as assessments should be suitable and acceptable to the provider and client, reliable, valid, and keyed to thresholds of significance for quality of life.

Steinberg (1983) sites several characteristics of successful programs for dealing with elderly clients. These include:

- Defined goals and target groups appropriate for the level of skill of staff members and capacity of the organization;
- Orderly procedures for case finding and screening clients;
- Recognized expertise (within the social services community) in mobilizing services and other resource options needed by clients;
- A systems approach to client needs;
- Well-defined, comprehensive assessment procedures;
- Care plans derived from assessments which reflect the unique needs, conditions and participation of the aged client;
- Interorganizational linkage with other service providers.

Reliability requires that service providers be organized in their work with older clients. One of the major tasks of policies and procedures is to ensure that services are provided in a manner that enhances and maintains the elderly client's dignity (Brubaker). Service provision also calls for: 1) Knowledge about delivery of services to elderly clients; 2) Knowledge about establishing and maintaining linkages with resource systems; and 3) Knowledge about how to interact with other resource systems as an advocate for the elderly client.

The needs of elderly clients in rural settings present rather unique challenges to services providers. Gunter (1987) discusses this and suggests some ways to address policies and procedures in these settings. Stone (1986) provides specific procedural information on the in-home management of frail elderly clients at the time of discharge from hospital. This involves a systems approach, and is geared toward the professional caregiver (presumably employed through a health services agency).

According to McCarthy (1985), most of what human service workers do involves the collection, assessment, communication, or use of specialized information. Included in this process are four steps: assessment, planning, implementation, and evaluation. Sound, sensitive human resource management is critical to effective organizational performance, according to McAdam and Gies (1985). They further state that, in non-profit organizations, this is often an area to which attention is forfeited in order to address more immediate human crises. They caution that non-profits are not immune from legal action (presumably by persons alleging negligence, or disgruntled employees). Fuchs (1989) reinforces this and adds that non-profit organizations must run tighter ships by adapting "for-profit" management techniques. This includes, of course, well-defined policies and procedures.

Among the reasons for developing a policy and procedure manual in voluntary agencies, Klein (1988) lists the need for training, information, and a ready reference for both staff and volunteers.

Nadler (1984) states that human resource management (such as development of effective policies and procedures) in voluntary organizations can play a vital role in identifying, developing, and achieving organizational goals. In this respect, human resource management does not differ from that of larger for-profit organizations. He adds that the status and role of all volunteers and staff are influenced by agency policy statements.

Quinn (1989) declares that defined goals and procedures are quality "musts" in care management of

the elderly. It is vital that workers, both volunteer and paid, in non-profit agencies know precisely what they are expected to do, and also what those working with them are doing, according to Stringer (1985). He adds that, particularly in non-profits that rely heavily on volunteers, flexibility is a must. However, workers need direction; therefore, the principle of flexibility should not be absolute. Goal statement, job descriptions, structure charts, evaluations and other basic HRM tools are also necessities. Schneider (1988) concludes that, in many long-term-care programs care plans tend to focus on control of service costs and timeliness of plan completion.

Summary and Conclusions.

This review of literature revealed the rather predictable conclusion that it is difficult to discuss policies and procedures without including quality assurance issues. There does appear to be a lack of pragmatic information regarding the subject. Authors tend to focus on the importance of quality assurance, how best to deal with elderly clients, or various problems encountered by non-profit organizations. Rather surprisingly, material pertaining to volunteer management comes closest to providing usable information regarding policies and procedures.

seems evident that a better source of such Tt. information might be found in a review of policy and procedure manuals from agencies similar to the subject of this study.

CHAPTER III

Methodology

This project involved four major phases:

1. A twelve week observation and interview period. This was the initial step in determining the specific needs of the agency being studied. It involved observing agency operations and interviewing personnel and administrators regarding strengths and needs in the area of policies and procedures. This resulted in the formation of certain conclusions as to how the agency might benefit from improved methods of managing human resources. A complete discussion of this process can be found in Chapter I of this paper, under the section titled "Introduction to the Study."

2. Having established a definite need for a policies and procedures manual, letters were sent to 33 similar agencies throughout the United States, protectorates, and foreign countries. These letters requested copies of policies and procedures, or examples of same (See Exhibit 1). Return postage was included to expedite response, and follow-up letters were sent to those not responding (See Exhibit 2). Material received was reviewed and applicable examples were included in the final product for the agency. 3. Policies and procedures currently in use at the target agency were examined and reviewed. This involved collecting all policies and procedures currently being used by the various departments and compiling them into a manual of sorts. This facilitated the determination of which material could be used, which needed minor alterations, and which were totally lacking in usable content.

4. The final step was the development and presentation of the actual manual. Formative evaluation was used to determine which material to include in the final product. For this purpose a committee was selected from within the agency to provide critical analysis of material produced. In this instance, the committee was comprised of representatives from Administration, Counseling, Home Services, Intake and Support Staff.

After reviewing material received from other agencies, as well as that being used by the target agency, a proposed format for the manual was presented to the committee for evaluation and recommendations. Throughout the process of producing the manual, input was elicited from this committee. As each section was developed, the committee was consulted for final approval.

To help ensure success of the project, the support and cooperation of line managers and staff was sought before the process began. Continuous solicitation of their input and clarification of project progress enabled workers to participate in the process. Chapter Five of this paper consists of the manual that was developed as a result of this study.

CHAPTER IV.

Results of Study

Material Currently in Use at Target Agency.

As anticipated, policies and procedures currently available in written form at the target agency vary widely in content and format. Some departments have the bare essentials such as: Who is eligible for services and who provides the service. Other departments have more extensive information. The only area in which there is a measure of consistency is Adult Day Centers. Here, again, it must be pointed out that this is the only area of operation which is currently subject to state licensure, and operations must comply with regulations.

Human resource (or personnel) policies appear to have been well organized for the size agency in which they were designed to be used. However, the agency has grown rather extensively and these policies must also be expanded. Since this agency does employ Title V workers and has a 501C3 tax exempt status, these policies must comply with equal employment opportunity laws Gatewood & Feild, (1987). In this sense, personnel policies are lacking rather glaringly. Generally speaking, in order to create a usable, more practical manual, policies and procedures from various departments must be more consistent. In some areas, this would require a simple "cleaning up" of current material. In others, whole procedures needed to be composed.

One area that appeared to be adequately covered is the description of agency operations, composition of its House of Delegates and Board, Philosophy and Background. Although these are not actually policies and procedures, they are generally included in some part of most policies and procedures manuals.

Review of Material from Responding Agencies

Twenty five agencies responded to the letter of request for policies and procedures manuals. This represents a surprisingly high return rate of 83.33%. Of that number, four were "regrets." That is, a letter was received from the agency stating they were unable to comply with the request.

A review of the materials received reveals a wide variation in approaches to policies and procedures. Some, of course, reflect the requirements of funding and regulatory sources. Many agencies had no actual manual and very abbreviated policies and procedures; others were quite informal and appeared to have been hastily composed. Still others were handwritten. It must be noted that no two agencies operate identically, therefore it seems appropriate that policies and procedures be specific to needs of the individual agency. Nonetheless, the degree of response may reflect a desire to participate in efforts to create improved methods of operation. (Indeed, several agencies included a request for copies of the final product of this project). The following is a review of materials received.

Lok (meaning "peaceful, happy abode" in On Cantonese) Center in San Francisco has provided social services to the elderly since 1975. It is considered an innovator in the field and has been the prototype and inspiration for many agencies throughout the country. Not only has On Lok compiled a massive detailed manual, they have developed a model policies and procedures manual for Adult Day Centers (ADC). This model contains almost every conceivable policy and procedure, and could be adopted by virtually any ADC simply by "filling in the blanks" with the agency name. On Lok is a "true" Adult Day Health Care Center (ADHCC) in that the program provides abbreviated social services as an extension of ADC. This differs from the full array of services provided by the target agency of this study, in which ADC is but one segment.

Nonetheless, many of the target agency's ADC procedures were originally molded after On Lok.

Senior Adult Independent Living (SAIL) Coordinated Service System is the Area Agency on Aging (AAA) network of social services and health related agencies in Maricopa County. Their policies and procedures manual is heavily weighted toward policies and the major focus is on eligibility, reporting requirements, monitoring clients and billing procedures. Typical of state subsidized systems, it devotes one and one-half pages to subjects such as "valid client signatures." The emphasis is on the service provider rather than the client.

One agency's manual contains 18 pages of policies and procedures and 26 pages of forms. Community Care for Elderly Program of Tallahassee is under the auspices of Florida's Department of Health and Rehabilitation Services. Their manual is similar in nature to those under A.A.A. Many agencies (Kentucky's Center for Aging; Mesa, Arizona's Senior Services; Oregon's Office of Elderly Affairs, etc.) are under the funding umbrella of A.A.A. and follow similarly more formal guidelines to which they are required to subscribe.

Although it is not a social services agency,

Salvation Army (a religious organization) does provide some social services. Typical of its limited budget, hands-on approach, policies and procedures for this organization's community services use a no-nonsense, no-frills format. They are abbreviated and simplistic.

Small community organizations (such as Meals on Wheels) tend to be quite informal, and have few, if any, policies and procedures. Indeed, some of the smaller "grassroots" type ADC's sent two to three pages of handwritten material that they called policies and procedures.

Programs operated by religious organizations tended to focus on one particular type of service (e.g., Lutheran Social Services of Minnesota's "Share-A-Home" program) and to be much less formal than those contracted by A.A.A.

A few respondents were unable to send policies and procedures because their manuals are too voluminous. One can only speculate as to what these manuals contain.

Alaska's Older Alaskans Commission provided a very concise, to-the-point set of policies and procedures for its Case Management Services. The Division of Senior Citizens on the Island of Guam contracts for social services with Catholic Social Services and Interfaith Volunteer Caregivers. Their manual was accompanied by a notation that current procedures are being re-written. Though brief in nature, nonetheless their policies and procedures were straightforward and easy to follow. Their focus is on case management and specific tasks of the caseworkers. Although it's limited (13 pages in its entirety), the information flows well and is quite pragmatic. This helps to lend credence to the thought that policies and procedures need not be complex and wordy.

The protectorate of Puerto Rico responded by sending several documents in Spanish and several issues of "Age Pages", a publication of the National Institute of Aging (a U.S. public information agency). It could be that a language barrier lead to misunderstanding of the request for information. On the other hand, the political status of the island may be such that social services for the elderly is in a state of flux.

Several other organizations (including Oregon's Office of Elderly Affairs; Phoenix, Arizona's Beatitudes; American Association of Retired Persons; Chandler Meals on Wheels; Sun City Meal on Wheels) sent brief brochures describing their services. One might speculate that these agencies either do not have formal policies and procedures, are loathe to share their

32

information, or have such a shortage of manpower and resources that they cannot reasonably respond to requests from outside their agencies.

In summary, this review of material from various social services agencies appears to verify, to a large degree that there is no one standard approach to addressing policies and procedures. These agencies show a wide variance in the way they deal with policies and procedures and the degree of importance they apparently place on this area of operation.

Certain trends and/or patterns did emerge among the agenices that responded. For example, many emphasized the importance of maintaining the elderly client's dignity and sense of self-worth. Also, of note was an absence of emphasis on human resource or personnel matters. For some, if not all, non-profit agencies this could prove to be disastrous if they receive any government funding or a tax-exempt (501C3) status. Such agencies are required to follow Equal Employment Opportunity laws (Gatewood & Feild).

Unlike the more general literature discussed earlier, however, this material can be put to more practical use. Many of the services offered by the agencies that responded are quite similar. Therefore, such material will be incorporated into the project

33

that is the subject of this paper.

Finally, as a result of researching the material heretofore discussed, it seemed even more appropriate (if not imperative) to develop a functional manual for use within the target agency. The initial decision to focus on the areas of Human Resources and Program Services was further reinforced. It is anticipated that, with a few minor changes, the final product of this project could be utilized by other similar agencies.

By no means are these findings conclusive. Undoubtedly more research needs to be done with a much larger sample size to establish definite trends as well as deficits in the management of human resources among social service agencies.



References

- Albrecht, K. (1983). <u>Organizational development, a</u> total systems approach to positive change in any <u>business organization</u>. Englewood Cliffs, New Jersey: Prentice-Hall.
- Applebaum, R. (1989, Winter). What's all this about quality? Generations, <u>13</u> (1), 5-7.
- Arnold, D. (1989). The politics of assuring quality of care for elders. <u>Generations</u>, <u>13</u> (1), 34-37.
- Atchley, S.J. (1989). The Ohio quality assurance project. Generations, <u>13</u> (1), 57-59.
- Baker, M. (1983). The 1982 Sun City long term care survey: A statistical profile of resident characteristics, attitudes and preferences. (Report to Administration on Aging of U.S. Health and Welfare Department on grant #90-At2166). Tucson, AZ: Arizona Long Term Care Gerontology Center.
- Barrowclough, C. & Fleming, I. (1986). <u>Goal planning</u> with elderly people. Liverpool: Manchester University Press.
- Biegel, D., Shore, B., & Gordon, E. (1984). <u>Building</u> support networks for the elderly: Theory and applications. Beverly Hills: Sage Publications.
- Braun, K. & King, R. (1989). Assuring quality in foster care. Generations 13 (1), 57-59.
- Brubaker, E. (1987). <u>Working with the elderly: A</u> <u>social systems approach</u>. Newbury Park, CA: Sage Publications.
- Fuchs, B. (1989). Getting better at doing good: Strategic planning for non-profit organizations that serve the elderly. <u>Perspective on aging</u>, <u>18</u> (2), 21-24.
- Gable, F. (1972). <u>Excellence in leadership</u>. New York: American Management Assn.
- Gardner, J. (1987). <u>Choosing effective development</u> programs: An appraisal guide for human resources and training managers. New York: Quorum Books.

- Gatewood, R.D. & Feild, H.S. (1987). Human resource selection. Chicago: Dryden Press.
- Glasse, L. (Chair). (1980). Organization in longterm-care. <u>White House Conference on Aging Mini-</u> <u>Conference on Long-Term-Care</u>. (pp. 17-18). Reston, VA: Author.
- Gunter, P. L. (1985). Four rural centers use nontraditional delivery. <u>Perspective on Aging</u>, <u>14</u> (6), 24-26.
- Gwyther, L. (1988). Assessment: Content, purpose, outcomes. <u>Generations</u>, <u>12</u> (5), 11-15.
- Hall, D. & Goodale, J. (1986). <u>Human resource</u> <u>management: Strategy, design, and implementation</u>. London: Scott, Foresman & Company.
- Hart, M. A. & Spofford, M. (1986). Long-term-care links are forged by Boise center. <u>Perspective on</u> aging, 15 (4), 7-11.
- Health Futures Institute. (1984, September). <u>Elder</u> <u>trends: A profile of Minnesota's elderly</u>. <u>Minneapolis: Author</u>.
- Hughes, S. L. (1986). Long-term-care: Options in an expanding market. Aspen, CO: Aspen Publications.
- Katz, K. S. (1985). A description of three "unique" ADC centers. Perspective on aging, <u>14</u> (6), 24-25.
- Klein, L. (1988). Volunteer manual development. Journal of Volunteer Administration, <u>6</u> (3), 4-9.
- Levine, I. & Fleming, M. (1986). <u>Human resource</u> <u>development: Issues in case management</u>. Rockville, <u>MD: National Institute of Mental Health</u>.
- McAdam, T. W. & Gies, D. L. (1985). Managing expectations: what effective board members ought to expect from non-profit organizations. Journal of Voluntary Action Research, <u>14</u> (4), 77-88.
- McCarthy, M. (1985). Information needs, information resources, and program management. In A. Monk (Ed.),<u>Handbook of gerontological services</u>. (pp. 592-627). New York: Van Nostrand Reinhold.

- Merriam, A. E., Aronson, M. K., Gaston, P., Wey, S. & Katz, I. (1988). The psychiatric symptoms of Alzheiner's disease. Journal of American Geriatric Association, <u>36</u>, 7-12.
- Nadler, L. (Ed.). (1984). <u>Handbook of human resource</u> <u>development</u>. New York: John Wiley & Sons.
- Pepper, J. (1990, March). Write your own policy handbook. Nation's Business, p. 53.
- Proverbs 4:10.
- Quinn, J. (1989). It's hard work setting standards. Perspective on aging, <u>18</u> (4), 8-9.
- Ritchie, R. & Stitsworth, M. (1987). The role of the paraprofessional: A whole new ball game. Journal of Volunteer Administration, <u>6</u> (1), 25-29.
- Rock, B. (1987, September-October). Goal and outcome in social work practice. <u>Social Work</u>, <u>32</u>, 393-398.
- Roland, A. L. (1983). Multi-purpose senior centers: Community-private sector marketing. <u>Generations</u>, <u>7</u> (4), 40-41.
- Schneider, B. (1988). Care planning: the core of casemanagement. <u>Generations</u>, <u>12</u> (5), 16-18.
- Shaefer, M. (1987). <u>Implementing change in service</u> programs. Newbury Park, CA: Sage Publications.
- Steinberg, R. & Carter, G. (1983). <u>Case management</u> and the elderly. Toronto: D. C. Heath.
- Stone, D. (1986). Maintaining and improving the functional status of the frail elderly. In Pelham, A. O. & Clark, W. F. (Eds.), <u>Managing home care for</u> the elderly: Lessons from community-based agencies. (pp. 13-30). New York: Springer.
- Stringer, G. E. (1985). Volunteer relationship perceptions. Journal of Volunteer Administration. Spring, 1985. pp. 7-10.
- Stupak, R. & Warren, J. (1987). Non-traditional organizations in the 1980's: The power and poverty of alternative organizational systems. Journal of Volunteer Administration, <u>4</u> (4), 1-11.

38

Waldie, J. R. (1980). Strengthening community-based long-term-care for individuals [Foreword]. <u>Final</u> <u>Report White House Conference on Aging Mini-</u> <u>Conference on Long-Term-Care</u>. Reston, VA: Author.

Wilson, M. (1984). <u>The effective management of</u> <u>volunteer programs</u>. Boulder, CO: Volunteer Management Associates.



EXHIBIT #1

Sample of Initial Letter of Solicitation for Master's Project

: Dear

part of a Master's Project for Ottawa As University, I am conducting a study of Policies and Procedures by Social Services agencies which address the needs of older adults.

Specifically, the project will examine the methods used in: Counseling for Older Adults, Service Coordination (Case Management), Home Support Services (Home Companions, Shopping Services, etc.), Intake and Outreach Services.

I would greatly appreciate it, if your agency could provide me with a copy of any policies and procedures you use in these areas of services. I have enclosed one dollar to cover postage and will gladly reimburse any reasonable mailing costs exceeding that amount.

Please send any materials you might have to:

Donna Hasemeier, R.N., B.A., C.A.C. Director, Counseling Services Sun Cities Area Interfaith Services, Inc. P.O. Box 1795 Sun City, AZ 85372

Thank you so very much for your valuable assistance.

Sincerely,

Donna Hasemeier

EXHIBIT #2 Sample of Follow-Up Letter

Dear

:

Recently, I sent you a letter requesting copies of policies and procedures your agency utilizes in delivering services to the elderly.

As of this date, I have not received your response. Your agency is important to this study. Therefore, I am hoping you will be able to provide some type of input for the project.

Since letters tend to get lost in the shuffle sometimes, I am sending a duplicate. Could you please respond in some way?

Thank you so very much.

terester reterest

Sincerely,

Donna Hasemeier

EXHIBIT #3

LIST OF RESPONDING AGENCIES

American Association of Retired Persons Washington, D.C.

Area Agency on Aging Mesa, AZ

Area Agency on Aging Phoenix, AZ

Beatitudes Campus of Care Phoenix, AZ

Bethphage Mission Lincoln, NE

Community Care for the Elderly Tallahassee, FL

Community Council of Sun Cities Area

DATA Control Minneapolis, MN

Division of Sr. Citizens Island of Guam

Elderhaus Ft. Collins, CO

Family Services of San Diego San Diego, CA

Hospice Services of the Sun Cities Area Sun City, AZ

Lutheran Social Services of Minnesota Minneapolis, MN Meals on Wheels Chandler, AZ

Meals on Wheels Mesa, AZ

Meals on Wheels Sun City, AZ

Mesa Sr. Centers, Inc. Mesa, AZ

National Council of Churches of Christ New York, NY

North Shore Sr. Center Winnetka, IL

Office of Aging San Juan, Protectorate of Puerto Rico

Older Alaskans Commission Anchorage, AS

On Lok Sr. Health Services San Francisco, CA

Pima Council on Aging Tucson, AZ

Salvation Army Corps Sun City, AZ

Sr. Services Division Salem, OR

BIOGRAPHICAL SKETCH

Donna Mitts Hasemeier was born in Covington, Kentucky on February 14, 1942. She received her elementary education in the Northern Kentucky and Southern Ohio school systems, completing her secondary education at William Henry Harrison High School in Harrison, Ohio. Between her junior and senior years she attended Indiana University's School of Journalism scholarship for outstanding high school on a journalists. In 1959 she entered The Christ Hospital School of Nursing in Cincinnati, Ohio and was granted her diploma in 1962. In October she was awarded Registered Nurse status with full reciprocity by the Ohio State Board of Nursing. In 1968 she moved with her family to Phoenix, Arizona where she entered Glendale Community College in 1976. She was awarded an Associate of Arts in Social Work degree in 1979, graduating with a 4.0 G.P.A. She entered Ottawa University in 1983, graduating in 1986 with a Bachelor of Arts degree in psychology, again with a 4.0 G.P.A. In 1987 she entered the graduate program in Human Resources at Ottawa University. She is a Certified Addictions Counselor, member of the Arizona Group Psychotherapy Society, and is licensed by the State of Arizona to practice as a Registered Nurse. She resides with her husband and son in Phoenix, Arizona where her three older children and grandson live. She works as a Mental Health Counselor in Sun City, Arizona.