



# HOFFMAN

• PROGRAMS FOR HEALING •

*Together toward tomorrow*

## PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY 2026 SERVICE DESCRIPTION

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# LEADERSHIP

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Accredited by  
 The Joint Commission

Administrative office is open 8:00 AM until 4:00 PM, Monday through Friday, except on holidays. There is 24-hour phone coverage at 717-359-7148.

# BOARD OF DIRECTORS

The Board of Directors serves without compensation and consists of up to twenty (20) members elected for three-year terms and up to two Advisors: each for a one-year term. Members are eligible to serve two consecutive terms. When possible, four (4) members are elected from related conferences of the United Church of Christ and the Board elects up to sixteen (16) members-at-large. The Board and its five standing committees (People & Culture, Finance, Nominating & Stewardship Committee, Programs, Building & Grounds) meet quarterly.

The Board appoints a Chief Executive Officer through which it employs all other personnel, develops policies, manages finances, and assures that sufficient resources are available to provide services.

# MISSION & VISION

Hoffman Homes, Inc. (HH) is committed to promoting personal growth and achievement of those we serve through continuous quality improvement, education, staff development, and the use of evidence-based practices.

We want to be the leading choice for providing innovative human services to the communities we serve.

# ETHICS & PURPOSE

The core values of honesty and integrity drive the ethical conduct of HH. Quality, excellence, and continuous improvement are essential elements to our practices and services. We stake our reputation on adherence to the highest ethical standards, which surpass the letter of the law and embrace open and honest communication with employees, youth/young adults, and families we serve, communities, governments, suppliers, contractors, and competitors. We insist that our employees not only act ethically, but they must also be perceived as acting ethically by those with whom we do business.

**Hoffman Homes, Inc. is a private, not-for-profit Pennsylvania 501(c)3 Corporation related to the United Church of Christ. Our purpose is to provide comprehensive psychiatric care, treatment, and education to youth/young adults and their families. We are committed to providing services that are cost effective and responsive to the unique needs of each youth/young adult; always in close cooperation with the parents/guardians, referring agencies, managed care organizations, school systems, and funding sources.**



## CORE VALUES

We expect all youth/young adults and employees to adhere to a trauma informed and healing centered culture to make our community a great place to receive treatment and a great place to work.

Our core values that we strive to represent are:

- Honesty & Integrity
- Commitment to Excellence
- Dignity & Respect
- Safety & Well-Being

## AFFILIATIONS & LICENSING

**Professional affiliations and relationships include:**

**Commonwealth University, Harrisburg Area Community College, McDaniel College, Millersville University, Shippensburg University, Wilson College, and York College of Pennsylvania.**

**Our employees serve as members of the following organizations:**

**Association of Fundraising Professionals (AFP)  
Gettysburg/Adams Chamber of Commerce  
Hanover Area Chamber of Commerce  
Hanover Area Human Resources Association  
Joseph K. Mullen Training (JKM)  
New Oxford Chamber of Commerce  
PA Child Welfare Council and OMHSAS Planning Council  
Pennsylvania Association for Supervision and Curriculum Development (PASCD)  
Pennsylvania Council of Children, Youth, and Family Services (PCCYFS)  
Rotary Club of York  
S & T Bank Advisory Board  
Shippensburg University School of Social Work and Gerontology Advisory Board  
Society for Human Resources Management (SHRM)**

Hoffman Homes PRTF is licensed by the Office of Children, Youth and Families (OCYF) and accredited by the Joint Commission.

Hoffman Academy is a school located on our campus, licensed by the PA Department of Education (PDE) to operate a Private Academic School (PAS) 1-12 for Special Education and Regular Education grades 1-12. Hoffman Academy is a Tier II accredited School-wide Positive Behavior Intervention and Support (SW\_PBIS) school.

Full compliance with fair employment practices is monitored annually by appropriate agencies of the Commonwealth. We encourage parents, guardians, and referring agencies to make on-site review and evaluation visits.

# POPULATION SERVED

Hoffman Homes has 6 licensed PRTF facilities with a total capacity of 80 beds. We admit youth/young adults with mental health treatment needs (boys ages 6-12 and girls ages 6-17) without regard to race (to include hair type, hair texture, or hair style), color, religious creed (to include all aspects of religious observances and practice, as well as belief), disability, ancestry, national origin (including Limited English Proficiency), age (40 and over), or sex (to include pregnancy status, childbirth status, breastfeeding status, sex assigned at birth). Program services shall be made accessible to eligible persons with disabilities through the most practical and economically feasible methods available. These methods include, but are not limited to, the use of translation devices/services, equipment redesign, additional training of employees who may be working with an individual, the provision of aides and the use of alternative service delivery locations. Structural modifications shall be considered only as a last resort among available methods.

Most of the youth/young adults admitted have experienced significant trauma that may include neglect, physical abuse, sexual abuse, or emotional abuse. Youth/Young adults are referred to us by psychiatric hospitals, case management organizations, local education agencies, Managed Care Organizations, county agencies, and private practitioners.

Many of the youth/young adults are admitted to HH directly from psychiatric hospitals. Some of these youth/young adults may require much more direct supervision than others. For some of them, we utilize a protocol known as Intensive Supervision (I.S.) to try to maintain these youth/young adults in residential care and avoid psychiatric hospitalization. I.S. is staff-intensive and includes one-on-one supervision. The consulting psychiatrist makes the determination if a youth/young adult is placed on the I.S. protocol if the youth/young adult is an imminent threat to themselves or others.

The youth/young adults admitted must be able to benefit from the wide range of therapeutic activities provided, such as recreation therapy and physical activities, including off campus outings. Youth/Young adults must also be able to actively engage in cognitive discussions that are part of the milieu, group therapy, individual therapy, and family therapy. Youth/Young adults with serious cognitive impairment would have difficulty participating in, and benefiting from, most of the treatment modalities implemented here at HH.

Although we do admit youth/young adults with a history of aggression toward themselves or others, those who are currently extremely aggressive or dangerous, or actively suicidal, are not admitted. We expect each youth/young adult admitted to make a commitment to non-violence through engaging in behaviors that are physically, socially, morally, and psychologically safe.



# CULTURAL COMPETENCE

Our treatment program is based on Child and Adolescent Service System Program (CASSP) principles. CASSP is based on the philosophy that youth/young adults with serious emotional disturbance have multi-agency needs and that new systems of care and service need to be developed to meet their needs. The systems of care need to be centered around the youth/young adult, community-based, and bring cultural values and ethnicity into greater focus than was true under former systems of care.

Providing culturally competent care can only take place through a multi-level systems approach that examines all aspects of the organization: the clinical care, the physical surroundings, toys/activities, and books available to youth/young adults, documents, recreational and cultural events, and most importantly, staff knowledge and attitudes. We are committed to a culturally competent program that provides our employees with the knowledge, skills, and tools to provide the most appropriate care possible.

**While youth/young adults are in our care, they will be exposed to an environment that will affirm their own uniqueness, while broadening their understanding of the multi-cultural community in which they will live. We consider this a vital part of their treatment program. Youth/Young adults need the tools to be good citizens of the world through developing tolerance, conflict resolution skills, and cultural knowledge appropriate to their age and cognitive abilities.**

# TRAUMA INFORMED CARE

Hoffman Homes is recognized by the Department of Human Services as a Trauma-Sensitive organization. We embrace a trauma informed and healing centered approach to treatment. This is an organizational and treatment intervention based on the tenets of trauma theory and an understanding of systems theory. The trauma informed approach addresses the ways in which trauma, adversity, and chronic stress influence individual behavior as well as the ways in which entire organizations can be influenced by trauma, adversity, and chronic stress. This is based on a set of guiding principles as well as some specific tools that reinforce the philosophy when practiced by the employees and youth/young adults daily. A trauma-informed culture has an organizing structure for thinking about how people heal and what they need to grow and change, rather than an eclectic and disjointed way to provide services.

The percentage of youth in the U.S. who have experienced significant trauma is extremely high; up to 80% and higher for at-risk youth and those living in urban settings and in poverty. Many of those youth have multiple exposures to trauma. At-risk youth with high levels of trauma include those involved in public systems: child welfare, juvenile justice, drug & alcohol, mental health, and those who are homeless.

Gaining the trust of a youth/young adult who has experienced trauma can be very difficult. Life has taught them that they are less likely to be hurt by remaining guarded and withholding trust. As a result, the youth/young adult may challenge even a caring adult, and "test" the adult to find out if the person perseveres in the relationship or gives up.

# ADMISSIONS

All referral materials are reviewed by the Director of Admissions. The VP of Programs for Healing, Director of Clinical Programs, Director of Residential Programs, VP of Medical Services, consulting physician, and Medical Director also review admission referrals as needed.

Admissions decision factors include, but are not limited to, the following: psychiatric evaluation, psychological evaluation, social history, trauma history, medical history, cognitive skills, previous placement history, family resources, aggressive behaviors, self-injurious behaviors, substance abuse, sexualized behaviors, and legal history.

Although Hoffman Homes primarily treats youth/young adults diagnosed as mental health clients, youth/young adults with a FSIQ under 70 are considered for admission but may be better suited for programs specializing in treating Intellectual Disabilities.

Consideration will be based on cognitive ability and intensity of aggression and self-harm. The youth/young adults admitted have a psychiatric diagnosis and family and community resources have been exhausted. Most youth/young adults are currently under the care of a psychiatrist and are usually prescribed psychotropic medication. Residential treatment must be recommended by a psychiatrist as medically necessary and the least restrictive treatment alternative. Typically, treatment considerations include improving coping strategies, processing trauma and loss, reducing aggression, self-harm, or running away responses and improving relationship skills.

**Referrals to the PRTF programs should be made to:**

**Angela Post, LSW**  
**Director of Admissions**  
 apost@hoffmanhomes.com

Employees from the Admissions department will contact the referring agency to schedule an interview with the youth/young adult and members of the clinical and residential team at Hoffman Homes. Once a decision is reached following the interview, the Director of Admissions will reach out to the team with the admission decision, and if the youth/young adult is accepted for admission, an intake packet is provided. The packet includes a checklist of documents necessary for admission. All youth/young adults being admitted must have a current immunization record. If necessary, we will schedule the necessary immunizations (DPT, polio, MMR, hep B, chicken pox) to ensure the youth/young adult is immunized. Whenever possible, recommendations for alternative programs will be provided to the referring agency if the youth/young adult is not accepted to HH.

The youth/young adult's guardian is given a parent handbook and policies to include information on Safe Crisis Management (SCM), Emergency Safety Physical Interventions (ESPIs), Time Out Procedure and Disabilities Rights Network.

Phone inquiries, as well as campus visits, are encouraged. It is important for the youth/young adult and guardian to have first-hand knowledge of the HH campus, the various services offered, and the way services are presented. Please contact the Director of Admissions to schedule a tour or with questions about our program.

Based on the information in the referral materials, a Safety Plan is developed for each youth/young adult to address significant concerns in five areas (medical/physical, suicide/self-harm, aggression/violence, substance abuse, sexualized behavior). A treatment plan is also developed with the initial goals in the areas of clinical treatment, medical, and discharge planning. Upon arrival, the youth/young adult is assigned to one of our residences based on their gender, age, and similarities in the psychiatric diagnosis and symptoms of the other youth/young adult currently in each residence. Intake occurs with the Admissions Department, Education Services, and Medical Services.

# BEHAVIOR MANAGEMENT

As Hoffman Homes continues with its implementation of a trauma informed and healing centered treatment approach and looks for ways to adapt the understanding of trauma and culture into our community and programs, a behavioral management and incentive system (known as the Color System) has been developed.

While this system may be appropriate for most of the youth/young adults admitted, we understand that some youth/young adults, specifically those diagnosed with Fetal Alcohol Syndrome Disorder or Autism Spectrum Disorder, and youth/young adults with Intellectual Disability Disorder may benefit from a more individualized system. This may involve a variation of the system outlined below, or an entirely different system. When a youth/young adult is identified as needing an alternative, the Therapist will work with the Directors and VP of Programs for Healing and the youth/young adult's treating Psychiatrist to develop a plan that is appropriate to that youth/young adult.

**Based on admission referral materials, all youth/young adults that appear appropriate for the Color System will be placed on SILVER Level (description to follow) to be assessed for a minimum of 30 days. During this time, the Therapist will work with the direct care staff in identifying the youth/young adult's needs, behaviors of concern, appropriate treatment approaches, and appropriate intervention methods. This may be done by:**

- Providing admission information to direct care staff for review prior to the youth/young adult's admission.
- Providing documentation associated with the youth/young adult's treatment, to include their treatment plan, safety plan, restrictive procedure plan, high-risk behaviors, etc. to the direct care staff for review once the youth/young adult is admitted.
- Team Building and/or Full Team Building meetings within the youth/young adult's first 30 days of admission where their case will be discussed with the entire treatment team.
- Clinical consultation as needed via face-to-face or phone conversations between the Therapist and direct care staff, Director of Clinical Programs, VP of Programs for Healing, and treating Psychiatrist.

Additionally, Therapists, in consultation with the Directors of Clinical and Residential Programs, and the VP of Programs for Healing, may also develop individual protocols for individual youth/young adults to address specific areas of need.

The Color System allows for youth/young adults to change color levels based on safety and leadership, which thereby provides for additional privileges and incentives. The system also provides opportunities for learning through Restorative Tasks when a youth/young adult engages in behavior that is hurtful to themselves, others, or the community.

# BEHAVIOR MANAGEMENT

Each month the youth/young adult may petition their treatment team to advance a color level. There are specific steps the youth/young adult must follow to petition their team. If approved for color advancement, the youth/young adult is required to maintain a level of safety and responsibility, both at HH and at home during Therapeutic Leaves or day passes, to remain on that level. Specific incidents or patterns of behavior may cause the youth/young adult to change color levels. Prior to a change in color level, a meeting of the treatment team will be held to discuss whether the change will occur.

"You get to go on outings and be able to participate in more activities when you make safe choices."

**There are four (4) color levels:  
BLUE, SILVER, GOLD, and PLATINUM.**

**BLUE** provides the greatest amount of supervision by staff and includes youth/young adults who have been unable to consistently demonstrate the use of their Coping Skill Plan, positive decision-making skills, and positive communication. These youth/young adults have created unsafe situations for themselves or others.

**SILVER** is a step toward greater independence and more opportunities to engage in social activities. Youth/Young Adults on the SILVER level are either new admissions or have demonstrated an ability to be safe on campus. They have demonstrated an ability to make positive decisions, utilize their Coping Skills Plan, and openly communicate their needs. At times these individuals may struggle and still engage in maladaptive behaviors, causing safety concerns for themselves or others. A youth/young adult will remain on SILVER level for at least 30 days before they can request a move to the GOLD level.

**GOLD** is one of the highest levels a youth/young adult can earn. These individuals have demonstrated a consistent ability to be successful on campus for at least 30 days. They use their Coping Skill Plan effectively, have positive decision-making skills and communicate to their support system when they need help.

**PLATINUM** is the most difficult to achieve. These youth/young adults have consistently demonstrated positive decision-making, positive use of communication, positive use of their Coping Skills Plan and have contributed to the overall improvement of the HH community. They have demonstrated leadership skills among their peers.

**Youth/Young adults are also provided an opportunity to earn "Hoffman Bucks" which allows them to purchase items and activities through the on-campus store known as "Hoffman General". Hoffman Bucks can be earned in four different ways:**

- A standard weekly amount based on their color level
- By earning Resident of the Week
- By earning Resident of the Month
- C.L.A.S. (Community, Life Skills, and Assistance Services)

Youth/Young adults do not earn Hoffman Bucks for behavior they are expected to display daily.

"It motivates me to do better."

"It's super important to my treatment and progress at Hoffman Homes."

"It helps the youth with their behaviors."

"The Color System leaves room for self-improvement."

"I like being able to go on different outings, they're a lot of fun."

# RESTORATIVE TASKS

At Hoffman Homes, we promote healing and recovery through the treatment process. When youth/young adults participate in an inappropriate coping skill that is hurtful to peers, self, or the community in general, they will be expected to complete a Restorative Task (RT). Youth/Young adults who have been hurt in relationships need to learn how to heal within the context of a relationship. The purpose of the RT is not to control behavior but to build reparative relationships. Youth/Young adults will be assigned a task to help facilitate this. The task should provide an opportunity for the youth/young adult to learn from what they did, not punish them. Staff will select the task, with the youth/young adult's input. A youth/young adult's privileges freeze until 24 hours after the RT is completed. After the 24 hours, the youth/young adult will return to full privileges.

# MILIEU

The milieu includes employees that provide supervision of the youth/young adults 24 hours a day and who are positive role models of care, concern, consistency, and structure. The employees are responsible for the implementation of the daily schedule in the residence including use of Residence Meetings (as needed), wake-up and bedtime routines, personal hygiene, meals, chores, recreation, and free time. The offices for the Therapists and MHW Supervisors are located within the residences to provide clinical and supervisory oversight of the milieu.

Daily interaction between youth/young adults and employees are used to build relationships, trust, and respect. Youth/Young adults can share concerns during regularly scheduled residence meetings or can utilize the grievance process. This is provided to them at admission and is also hung in the residences.

Youth/Young adults can participate in many leisure and physical activities. Each residence has space and equipment (TV, video games, board games, books, magazines, etc.) to provide opportunities for relaxation. A fishing lake, playground, basketball/tennis court, volleyball net, baseball field, soccer field, etc. provide plenty of opportunities for outdoor recreation. There is also a gymnasium, cardio fitness room, and indoor recreation center. In addition, residence groups plan trips to surrounding communities including the local YMCA for swimming.



# TREATMENT CONSIDERATIONS

While the average length of stay at Hoffman Homes is approximately 10 months, the youth/young adult's length of stay, along with treatment intensity and comprehensiveness, is continually monitored to assure best treatment efficacy. *Minimizing the length of stay is a priority of each youth/young adult's treatment team and the Utilization Review Committee.*

Youth/Young adults and families identify individualized goals and evaluate treatment progress in terms of achieving those goals. Employees offer immediate feedback to the youth/young adult and reinforce positive behavior. We support youth/young adults and families in processing through past trauma experiences and mental health behavioral symptoms.

We embrace the concept of family-driven and client-guided care so that youth/young adults and families are integral partners and have primary decision-making roles in service delivery decisions and agency functioning. We are committed to youth/young adults and families and make clinically sound discharge recommendations, strive to provide continuity of care, support transitions, promote individualized and culturally competent service delivery and goals, eliminate blame, and support the strength of each family member.

We ensure that youth/young adults, families, and employees feel safe and have a sense of belonging. The youth/young adults have a developmentally appropriate role in their care and in creating rules, regulations, and policies that govern their living arrangements.

Recognizing the importance of family involvement to the youth/young adult's progress, we are pro-active in encouraging the participation of available family members in the total treatment process. Family members are encouraged to be active participants in the youth/young adult's treatment team meetings. Education and training regarding the youth/young adult's mental health needs is available to family members and a plan for family therapy is developed in the treatment process. Family visitation is encouraged and is coordinated through the youth/young adult's therapist. Therapeutic leaves to home and day passes are also part of the treatment process. HH may be able to assist with transportation if no transportation resource is available. There is an on-campus area designated for private family visits, including overnight accommodations that allow for frequent and intensive family involvement. Telephone calls and letter writing with family members are also encouraged (stationery and postage are provided).

# QUALITY OF CARE TEAM (QCT)

The QCT functions facility-wide and is designed to improve the services and care provided to children and their families. The flow of information and decision-making from the QCT is coordinated by the leadership team, consistent with the overall HH strategic plan.

The specific methodology used by the QCT is based upon the **FOCUS-PDCA** (Find a process to improve; **O**rganize a team that knows the process; **C**larify current knowledge of the process; **U**nderstand causes of process variation; **S**elect the process improvement; **P**lan; **D**o; **C**heck; **A**ct) format. Every improvement opportunity encountered will not lend itself to the **FOCUS-PDCA** methodology. To the greatest extent possible, we will use the **FOCUS-PDCA** methodology to structure and document process improvement efforts. This approach will create a common set of documents and data that can be understood and shared by all HH employees.

# UTILIZATION REVIEW

Utilization Review (UR) is a committee of HH employees that deals solely with the appropriateness of service utilization, including the development of admission standards and length of stay based upon the child's level of functioning. The UR committee consists of:

- Psychiatrist
- Director of Clinical Programs (Chair)
- VP of Programs for Healing
- Quality Assurance & Compliance Specialist
- VP of Medical Services
- Director of Residential Programs
- Vice President of Education
- Chief Executive Officer (if available)

The Therapist will present to the UR Committee, an individual's case, when appropriate, and as determined by policy. This may include reporting on progress in treatment, discharge disposition, or unique situations for which the committee should be aware of (behavior concerns, requests for discharge/transfers, etc.) The youth/young adult may also be asked to attend while their case is presented, in special circumstances. The UR Committee meets weekly and examines over/under utilization. Each case is reviewed at admission and upon request for extension of length of stay to assess the appropriateness of decisions, determine trends, and determine future training needs and program development.

# PHYSICAL RESTRAINTS

As part of our commitment to non-violence, it is our goal to reduce or eliminate restraints. If an employee is unable to de-escalate a youth/young adult by using prescribed individualized protocols and interventions, and the youth/young adult is an immediate threat to themselves or others, Safe Crisis Management (SCM) techniques known as Emergency Safety Physical Interventions (ESPI) are used. Employees are required to submit a written report of all ESPIs and the report is reviewed by supervisors and department heads. ***Use of restraint devices or chemical restraints are prohibited.***

# CAMPUS COUNCIL

The Campus Council is a representative body of youth/young adults and staff that meets regularly to discuss issues that affect campus life and programs. Through this commitment to shared governance, youth/young adults can make contributions to programs, activities, and policies. Campus Council members also demonstrate social responsibility by participating in service projects on campus and in the local communities. Recommendations from Campus Council that require follow-up are forwarded to the leadership team for review and consideration.

# PRIVACY

Recognizing the importance of written records and confidentiality, we have developed procedures for maintaining up-to-date, complete, and accurate records for each youth/young adult that are HIPAA compliant. The records are reviewed semi-annually by a certified independent medical records consultant. Any information we release must have the approval of the Chief Executive Officer (CEO) to protect the confidentiality rights of each child.

The Medical Records Committee maintains the accuracy and best practice standards for the records of each youth/young adult. Specific functions include creating new forms, solving problems related to record-keeping, and monitoring usefulness and quality of documents. The committee is chaired by the VP of Medical Services and recommends changes to the committee for approval.

# CUSTOMER SATISFACTION SURVEY

The consumer satisfaction survey is mailed to each youth/young adult's guardian and referring agency when the youth/young adult is discharged. These surveys provide the consumer the opportunity to evaluate the overall performance of various program components. The results are compiled and evaluated to assess our strengths and needs.

# TREATMENT TEAMS

The assigned psychiatrist is the leader of each youth/young adult's treatment team that is formed at the time of admission. The psychiatrists approve admission and discharge plans, provide diagnosis and treatment services, prescribe, and monitor medications, direct treatment teams, and provide clinical direction and training to the therapists and treatment team members. Other treatment team members include: the youth/young adult, parent/guardian, discharge resource if not parent/guardian, agency representatives, home school district representative, MCO representative, and others as deemed appropriate. Additionally, the employees from HH would include: Mental Health Worker (MHW), MHW Supervisor, Therapist, and Nurse. Other consulting services are provided by a Registered Pharmacist, family physician, school psychologist, dentist, and Registered Medical Records Consultant.

When a youth/young adult is admitted, a social history and Individual Assessment Plan (IAP) are developed. The treatment team then completes the IAP from both written records and diagnostic interviews with the youth/young adult and family. Included in the IAP are items such as: youth/young adult's strengths and needs, family's strengths and needs, cultural values and preferences, family supports, community supports, service history, educational history, and interpersonal relationships.

**Hoffman Homes expects its employees to demonstrate, in words and actions, the utmost respect and care for youth/young adults, their families, and to create an environment that values cultural differences, self-examination, listening and learning from each other.**

# TREATMENT TEAMS

We recognize the complex and varied needs of the youth/young adults in our care. The treatment plan is developed and designed to meet the specific individual needs of each youth/young adult. The treatment plan discusses specific mental health symptoms to be addressed, goals for the treatment process, specific objectives for movement toward goals, assignment of employees for carrying out the treatment plan, and method and timetable for goal achievement, including projected discharge date. Hoffman Homes utilizes various assessment tools to assist clinicians in identifying focus areas of a youth/young adult's treatment and potential treatment approaches that will be beneficial to utilize with a youth/young adult during their course of treatment. Such assessments include Drug Abuse Screening Test (DAST), Alcohol Use Disorders Identification Test (AUDIT), Trauma Assessment Tool, SAFE-T Assessment, PHQ-9, and the DSRS. Treatment plan review meetings occur every thirty days. Throughout treatment, each child is maximally included in the treatment plan and discharge planning.

Discharge and aftercare planning begin at the time of admission. Each youth/young adult's treatment team works closely with the youth/young adult, family, and referring agency to develop a plan that will best serve the youth and their family. Youth/Young Adult's are presented to the Utilization Review (UR) Committee at the following intervals, prior to discharge: 90 days, 60 days, 30 days, and 14 days. Once a youth/young adult is in the discharge window, the Admissions and Discharge Coordinator works with the family/legal guardian and external treatment team to solidify aftercare services.

Prior to discharge from Hoffman Homes, a discharge meeting is held with HH staff and the youth/young adult to discuss progress and ensure the youth/young adult knows who to call and what to do in case of an emergency. The discharge meeting is also designed to make sure the youth/young adult is fully aware of the aftercare services.

Hoffman Homes prepares a comprehensive discharge folder for the professionals that will be involved in aftercare treatment. The folder includes treatment progress summaries and specific discharge recommendations from each component of HH. Discharge recommendations usually include continued treatment for the youth/young adult (and often the family) using community based services. Each youth/young adult's treatment team stresses the importance of continued treatment following discharge and requires a strong commitment to the aftercare plan.



# CLINICAL & RESIDENTIAL PROGRAMS

Master's level Therapists, trained in Trauma Focused Cognitive Behavioral Therapy, provide individual, group, and family therapy. Consideration for the therapist role is given to those individuals within their last year of a master's program in a related field. Therapists function as leaders of the youth/young adult's treatment team, under the clinical supervision of the Medical Director or other consulting psychiatrist. Their therapy skills are enhanced by regular consultations with the Medical Director and Director of Clinical Programs, case review meetings, clinical seminars, weekly departmental meetings, and ongoing training and educational opportunities. Their responsibilities include regular communication with treatment team members and their effectiveness is enhanced by their relatively small caseloads (about 7 to 8 youth/young adults per Therapist).

In addition to the implementation of the trauma informed treatment model, the primary theoretical orientation of HH is Trauma-Focused Cognitive-Behavioral therapy (TF-CBT).

**Individual therapy** is provided to each youth/young adult at least once per week, but most youth/young adults are seen several times a week as the Therapists' offices are located in the residences where the youth/young adults live. Therapists can closely monitor the implementation of the youth/young adult's treatment plan. We expect youth/young adults to acknowledge and grow beyond past traumatic experiences and psychiatric symptoms. They learn that successful social and emotional functioning comes through responsible behavior.

It is our goal to conduct **family therapy** nearly once a week/no less than three times per month. Sessions are scheduled to accommodate the family. Family therapy focuses on aiding the transition of the youth/young adult back into the home or other community living resource. Microsoft Teams can be used to conduct family therapy through a HIPAA compliant video conferencing system.

**Group therapy** is provided to each youth/young adult at least two times per week by the Therapist. Additional master's level group therapy is provided through the Specialty Groups, Art Therapy, Animal-Assisted Therapy, and Drama Therapy. Equine-Assisted Therapy is provided by an Equine-Assisted Therapy Professional.

The residence Mental Health Workers lead psychoeducational groups at least three times per week. A variety of modalities are used, including: discussion, activity, fitness, recreation, and off-campus outings. Groups are formed to achieve specific goals. Ongoing groups address specific issues such as emotional management, coping skills, stress reduction, value clarification, sexuality, self-esteem, stimulus control, and social skills.

# CLINICAL & RESIDENTIAL PROGRAMS

**Specialty groups** meet in either 5- or 10-week cycles and are designed for youth/young adults who have specific issues to address. The topics may include:

- **Discharge:** designed for youth/young adults scheduled to be successfully discharged within the next 30 days. It focuses on preparing youth/young adults for their upcoming transition and the transfer of skills to support the youth/young adults in being successful in their next setting. Youth/young adults typically participate for for 4 weeks or less depending on their discharge date in relation to the cycle dates.
- **Drugs and Alcohol Psychoeducation:** psychoeducation about substance abuse and the addiction process is provided. Commonly used substances are discussed. This group may include youth/young adults with a history of substance abuse and/or youth/young adults who have family members with a history of substance abuse.
- **Resiliency:** the primary goal is to process trauma, trauma symptoms, and the healing process in an open, safe, and supportive setting. Youth/young adults in this group may have experienced abuse or other traumatic life experiences.
- **Grief and Loss:** this group is intended for youth/young adults who have experienced significant losses, which may include invisible losses and/or loss through death, and have not yet had the opportunity to process loss in a therapeutic, safe, and productive manner.
- **LGBTQ:** the HERO (Hoffman Education Regarding Orientation) group was developed to increase education and awareness regarding sexual orientation and gender identify in an affirmative setting.

# CREATIVE THERAPIES

Creative Therapy programs include Equine-Assisted Therapy, Animal-Assisted Therapy, Art Therapy, Drama Therapy, Recreational Activities and Seasonal Horticultural Activities.

**Equine-Assisted Therapy** teaches youth/young adults to work safely and appropriately with other youth/young adults and the horses while developing their horsemanship and riding skills. Sessions begin with group activities such as grooming, leading, and ground-work games to allow the youth/young adults to become familiar with the horses. Youth/Young adults can move into mounted activities if they are able to display safe handling techniques from the ground. Youth/young adults suffering from depression can benefit from being outdoors and engaging in the physical activity of haltering, leading, and grooming a horse even before they begin to ride. They can gain self-confidence and assertiveness in getting such a large animal to follow their directions. Abusive and aggressive youth/young adults learn gentleness in dealing with a horse, as it is too large to be forced and does not respond to bullying. The repetitive movement of a horse at a walk can help relax a youth/young adult, while the quick movement of a trotting horse can energize a youth/young adult with a dulled affect. The physical benefits include; improved balance, coordination, and muscle tone, all of which can help self-esteem. While working with the horses, the youth/young adults learn responsibility and social skills while enhancing empathetic skills.

# CREATIVE THERAPIES

**Animal-Assisted Therapy** gives youth/young adults the opportunity to learn about and interact with a variety of animals. Each session begins with an activity to help facilitate discussion and includes caring for the animals, such as feeding and cleaning cages. Sessions end in “free time” with an animal the youth/young adult chooses to help promote bonding. During this time, youth/young adults often feel relaxed and comfortable enough to share more about their history, behavior, and treatment goals. Animals and their behavior are used as metaphors for the youth/young adult's real-life situations. We address the fight/flight response, freeze response, and herd instinct; how humans and animals are alike and different in their responses to dangers and safety. The youth/young adult is asked to create a safe environment for themselves and the animals that encourages social interaction and problem solving. The goals of animal-assisted therapy are to help the youth/young adults develop respect toward other living things, learn how to maintain safe and appropriate behavior around animals, develop coping and relaxation skills, to enhance communication and social skills, to cooperate with others, and to develop a sense of self-worth.

**Art Therapy** provides youth/young adults with knowledge about art in a non-threatening environment. Using their individual creativity, youth/young adults learn responsibility and enhance their empathic skills while expressing themselves artistically. By doing so, they enhance their self-esteem, manage stress, and promote overall well-being. Youth/Young adults also learn various skills that they can use in life after returning to their home community.

**Drama Therapy** uses theatre, storytelling, embodiment, and play to offer youth/young adults opportunities to engage in an experiential, action-oriented approach to group therapy. Activities such as theatre warm-ups, improvisation, and role-play can help participants enhance relationships, improve their ability to express themselves in new ways, develop insight, and work through difficulties in a more suitable way. Each session contains a check-in, warm-up, main activity, and closure. Early sessions typically contain activities designed to acclimate youth/young adults to playful interaction and character work. As participants become more comfortable and develop their skills, they are guided through scene work and psychodrama enactments to explore and work through difficulties from within their personal lives. Drama therapy also helps youth/young adults enhance global functioning, such as creativity, executive functioning skills, and sensory integration.



# CREATIVE THERAPIES

**Recreational Activities** help youth/young adults develop and use leisure in ways that can enhance their health, functional abilities, independence, and quality of life. These activities can be used in enhancing self-esteem, increasing their communication skills, and to heighten their sense of self-awareness. Youth/Young adults will learn how to utilize recreation to help manage their anger as well as to learn teamwork and cooperative skills.

**Recreation Groups** may include sports, board games, card games, physical exercise, fishing, and off-campus activities. There are also special events such as field days, corn toss tournaments, game nights, and various assemblies.

**Seasonal Horticulture Activity** includes the use of gardening and nature related activities to work on treatment goals related to self-esteem, personal responsibility, personal achievement, motivation, socialization, self-expression, relaxation, and sensory stimulation. Activities may include planting, plant care, harvesting, cooking, nature walks, and creating nature related crafts.

# EDUCATION

We are located in the Gettysburg Area School District (GASD). GASD is the Local Education Agency that oversees education services provided to the students residing at Hoffman Homes. Education is provided either at Hoffman Academy (our on-campus licensed Private Academic School) or through GASD or Lincoln Intermediate Unit classrooms.

The overall purpose is to provide an individualized educational program to each student in the least restrictive environment possible. In addition to meeting the educational needs of each student, the program is designed to provide a positive experience that will meet each student's social and emotional needs. These individual needs are addressed through the development and implementation of an Individualized Education Program (IEP) for students eligible to receive special education services. IEPs must include input from the student's guardian. For students that are not eligible for special education services, school administration works closely with school districts and families to provide the best education service possible. Hoffman Academy provides standards-based instruction in all core content areas, as well as a variety of online elective classes and social emotional learning focused on a trauma-informed learning environment for all students. Hoffman Academy also has specialized classes to meet more intensive needs for identified students.



# HOFFMAN ACADEMY

Hoffman Academy is a licensed Private Academic School (PAS) located on the Hoffman Homes campus. The Academy includes 13 classrooms, a library, cafeteria, mindfulness room, five student break rooms, and gymnasium. As the Academy incorporates a blended approach to learning, each student is issued an Apple iPad to help facilitate individualized academic instruction. All Academy teachers and staff are trained in mindfulness and Restorative Practices. This allows the Academy to provide a continuity of trauma informed care in the educational environment. All facilities (indoor and outdoor) located on our 192-acre campus are also available for use as part of the educational experience a child receives in the Hoffman Academy. Creative and flexible methods of meeting the needs of each student are a vital part of our PAS curriculum.

Individual and group instruction methods are utilized to best meet the needs of all learners.

**In addition, students attending the Hoffman Academy can have easy and frequent contact with their Psychiatrist, Therapists, Mental Health Workers, Nurses, and visiting families and referring agencies (as applicable).**



# MEALS

Monday-Friday (except holidays), all lunches are served in our cafeteria. All other meals (breakfast, dinner, weekend & holiday meals) are served in the residences where the youth/young adults live.

The employees in the Culinary Department are responsible for planning, purchasing, preparing, and serving the daily meals for youth/young adults and the employees that work directly with the youth/young adults. All meals are planned under the direction of The Food Operations Manager and meet the Recommended Daily Allowances (RDA) as outlined by the Food and Nutrition Board of the National Research Council. Breakfast, Lunch, and After-School Snack must also meet the National School Lunch Program requirements.

Youth/Young adults who require special diets, as ordered by the attending physician, receive meals that are prepared and served to accommodate their dietary needs. Follow-up contacts and nutritional assessments are conducted by Medical Services on a regular basis.

# MEDICAL SERVICES

Each youth/young adult has specific needs that change over time. We provide services 24 hours a day to assist youth/young adults with these changes. The process includes assessment, diagnosis, planning, treatment, and evaluation. Quality care is provided based upon a continual assessment of the child's physical and psychosocial needs. Standards that identify the critical elements of quality care are in place. The performance of our employees and program is measured against these standards.

Within 24 hours of admission, each youth/young adult receives a complete nursing assessment that includes an ECG, nutritional assessment, abnormal involuntary movement scale (AIMS), Alcohol use disorders identification test, and drug abuse screening test. Within the first 15 days of admission the youth/young adult also receives a physical examination conducted by a family physician and Laboratory studies. Within 30 days of admission, each individual will receive a vision screening, hearing screening, and dental examination in accordance with the 3800 regulations. Pharmaceutical supplies are provided via a contract with a JCAHO approved Long Term Care and Infusion Pharmacy. Nursing care is available to all individuals in the program.

A family physician comes to our campus 3 days a week and a dentist comes to our campus monthly. Services from medical and dental specialists from the community are provided as needed. Pharmacy supplies are provided via a contractual relationship. The VP of Medical Services is responsible for infection control issues. Each month buildings are inspected for infection control compliance.

Nurses, available 24 hours a day on-site or on-call, assess and treat sick and injured youth/young adults. The guardian is notified of any changes in the youth/young adult's medication, or medical condition, regardless of the age of the youth/young adult. Illnesses and injuries are also triaged for emergency or physician care. Nurses are on site throughout the day from 5am-11pm however, they are on call from 11pm-5am and will come to campus as needed.

A registered nurse conducts a nursing assessment of the youth/young adults within one hour of an Emergency Safety Physical Intervention (ESPI). A brief interview is conducted with the youth/young adults to discuss the ESPI, and to target other coping skills to help the youth/young adult in behavior modification. Information regarding the youth/young adult's condition is provided to physicians, treatment teams, and the guardian.

Health education for the youth/young adults and their families is provided. At admission, each youth/young adult is given written information on HIV/AIDS and personal hygiene. Screening for sexually transmitted disease (STD) is provided to youth/young adults at their request. Guardians and youth/young adults are provided with written information about the youth/young adult's medication when the medication is started and at the time of discharge from HH. They are also given instructions about any upcoming medical appointments. Nurses are available to answer questions.



# SPIRITUALITY

A religious perspective of love and service to others was the basis for the establishment of the Hoffman Orphanage in 1910, and it is the basis for our existence today. We are related to the United Church of Christ, but we function as an autonomous 501(c)3 non-profit organization. The religious services offered are inter-faith and participation is voluntary. In accordance with our commitment to cultural competency, we respect the religious preferences of all youth/young adults and their families.

**The religious affirmations upon which our program is based are broad and inclusive:**

- human beings have a basic need to look beyond themselves for sources of spiritual strength and truth
- a belief in God is often a foundation for a sense of purpose and meaning in life
- each human being is a person of worth that is not diminished by irresponsible behavior
- each person has the freedom to choose and to change
- every person is called to exercise that freedom with responsibility
- human beings are relational
- the goodness of each life is enhanced through positive, caring, and responsible relationships
- no problem or situation is without hope or beyond redemption or reconciliation

# FACILITIES & SAFETY

The VP of Safety & Facilities Management assures compliance with regulatory agencies. These include OSHA (Occupational Safety & Health Administration), The Joint Commission, the Department of Human Services (DHS), the Department of Environmental Protection (DEP), the Department of Agriculture (DOA), and others.

We believe that providing a safe and comfortable environment is crucial to the youth/young adult's treatment. The maintenance employees are responsible for general repairs, the potable water system, the wastewater treatment system, the utilities, and grounds keeping for our 192-acre property.

Each facility is equipped with cameras throughout the facility's main rooms and hallways to ensure the safety of youth and staff. There are no cameras in the bedroom or bathroom areas.

**A Safety Committee meets monthly and strives to increase the level of safety for the youth/young adults, employees, and visitors through accident investigation and hazard identification. Committee members conduct monthly inspections to identify safety issues. At least 50% of the members of the safety committee are non-supervisors; this allows for open communication between employees and management and improves workplace morale.**

## INTENSIVE SUPERVISION & SAFETY TRANSITION PROTOCOL

Intensive Supervision (I.S.) is an order from the consulting psychiatrist that helps ensure the safety of any youth/young adult who is identified as being an immediate risk for harm to self (including elopement) or to others. The order for I.S. can only be discontinued by the consulting psychiatrist.

All youth/young adults returning to HH from an inpatient psychiatric unit during their placement with us will be placed on I.S. and will remain on I.S. until they are assessed by both the consulting psychiatrist and the Therapist.

Staff assigned to provide I.S. will keep the youth/young adult within arm's length so they can intervene if the youth/young adult attempts to harm themselves or others. The staff will provide constant visual supervision of the youth/young adult 24 hours a day. During their placement on I.S., the youth/young adult will have limited access to any items that could be used to self-harm.

Any time a youth/young adult is removed from I.S. a Safety Transition Protocol (STP) will be developed. This protocol will identify additional safety measures that will be put into place to continue monitoring the youth/young adult's safety prior to them returning to full programming. The protocol will have restrictions identified based on the behavior(s) that warranted placement on I.S. Such restrictions may include: ongoing I.S. monitoring during bathroom and shower, restriction of certain articles of clothing or items, and/or ongoing I.S. monitoring during certain routines, such as school, outside activities, etc.

There may be times when the STP may be put into place, even though a youth/young adult was not placed on I.S. This will allow for use of another level of supervision and safety precautions based on the youth/young adult's behavior.

## SPECIAL BED PLACEMENT

If a youth/young adult has a history of sexualized behaviors, the consulting psychiatrist may write an order that the youth/young adult is placed on Special Bed Placement (SBP).

**Youth/Young adults placed on SBP are always supervised once the youth/young adult transitions into the bedroom area to begin their bedtime routine. A staff member is in the room as soon as the youth/young adult goes into that bedroom area and will remain there throughout the night until the youth/young adult leaves the room the next day. Staff document updates on the youth/young adults in this room on an hourly basis and will note any behavior concerns that are presented. The SBP doctor's order is assessed throughout the youth/young adult's treatment by the youth/young adult's therapist and consulting psychiatrist for consideration of discontinuation.**

# COMPLAINT PROCEDURE

If a youth/young adult has a complaint of any type of alleged abuse, the staff member that received the report of alleged abuse will immediately call in the allegation to the DHS Child Abuse Hotline. The VP of Programs for Healing and VP of Medical Services will also be notified. Medical Services will conduct a nursing assessment when appropriate of the child and inform the consulting Psychiatrist.

A youth/young adult that has a complaint about a staff member violating a policy or procedure may register their complaint with the employee's supervisor (the HH organizational chart is made available). The youth/young adult making the complaint is instructed that they may simply express their feelings about the issue or may make a formal complaint. If the youth/young adult chooses to make a formal complaint, the supervisor hearing the complaint will include the employee against whom the complaint is made. Bi-monthly meetings occur to review the chain of command for all departments so that the youth/young adults are aware.

When a formal complaint involves a specific policy, the conference begins with a reading of that policy. The youth/young adult registers their complaint, and the employee has an opportunity to respond. The supervisor will then determine the validity of the complaint and any action to be taken, if necessary. If the youth/young adult or the employee is not satisfied with the supervisor's decision, an appeal may be made to the next higher level of supervision.

Any referring agency, case management organization, youth/young adult, family member, or other stakeholder who believes that services are not being provided as agreed upon, are encouraged to contact the CEO.

# STAFFING RATIOS

The Department of Human Services (DHS) requires a staff to client ratio of 1:8. Based upon the needs of the youth/young adults we serve, we make every effort to maintain a ratio of 1:5. Staffing is assessed daily, and additional staff may be assigned depending on several factors.

DHS requires a ratio of 1:16 during sleeping hours. Additional staff (beyond the stated ratio) may be assigned to residences during sleeping hours based on supervisor and clinical assessments.

In addition to the staff assigned to directly supervise the youth/young adults while they sleep, there is also a Night Shift Supervisor present on campus and a Nurse (either on site or on call depending on the hour).

All direct care staff (and their supervisors), therapists, and nurses carry a walkie-talkie so there can be immediate communication in case of an emergency, enabling staff to respond as needed.

# STAFF TRAINING

In addition to the experience and education acquired prior to being hired, a two-week orientation training is provided to all employees before they begin working with the youth/young adult. The training includes 3 full days of Safe Crisis Management (SCM) training. At approximately 3 months of employment, a SCM refresher course is provided. Another full 3-day SCM training is conducted within 6 months of employment and reviewed within every six months thereafter. In addition, staff benefit from additional SCM training either via supervisory referral or staff request.

The orientation program also includes training on additional topics such as the Trauma informed treatment approach, psychiatric diagnoses, behavioral and crisis intervention, suicide prevention, child development, CPR/first aid, infection control, confidentiality (HIPPA), mandatory reporting of suspected child abuse, safety, professional boundaries, Restorative Practices, and cultural competence.

A strong emphasis is placed on treatment team development and on the education of employees in the skills needed to deal effectively with the youth/young adults in our care. Clinically published articles are shared by our consulting psychiatrist and by other Licensed professionals on topics such as ADHD, PTSD, bipolar disorder, sexual behaviors, borderline personality, RAD, and trauma informed care. Hoffman Homes utilizes Relias, which contains hundreds of seminars/trainings that staff members can view, many of which have continuing education credits for licensed individuals. Opportunities are available for staff to attend off-campus seminars and conferences.

In addition, supervisors meet regularly with their employees to address issues, questions, or concerns. The use of Self-Care is discussed and strongly encouraged for all employees so that they can be the most effective as possible when working with the children. Performance evaluations and development guides are completed for all employees and reviewed on a regular basis.

# STAFFING

## Leadership

- The **Chief Executive Officer (CEO)** is responsible for the overall management and functioning of the facility and provides direct supervision to the leadership team.

## Finances

- The **CFO** is responsible for the day-to-day operations of the business office.
- The **Medical Billing Coordinator** is responsible for billing for services provided.
- The **Supply & Inventory Clerk** is responsible for ordering and delivering all paper products, cleaning supplies, and food items to the residences as needed.
- The **Business Office Coordinator** is responsible for managing the window, mail, securing authorization for services and entering data.

# STAFFING

## Admissions

- The **Director of Admissions** provides leadership and direction to the admissions department, reviews all referrals, coordinates, and oversees admissions and discharge planning. Collaborates with and relays important information to external and internal team members. Supports the youth in identifying their individual treatment goals, completes their initial Safety Assessment and Plan, Individual Assessment Plan, and all other preliminary paperwork for each youth in care.
- The **Admissions and Discharge Coordinator** gathers and tracks valuable information required for a successful admission to HH. Collaborates with the Director of Admissions, referring agencies, hospitals, youth in care, their families, and internal team members to support best practice and full continuity of care. Facilitates and manages the discharge planning process to ensure a successful transition back to the community.
- The **Secretaries** are responsible for providing clerical support to treatment teams.

## Clinical Programs

- The **Psychiatrist** is the leader of each youth/young adult's treatment team that is formed at the time of admission. The psychiatrists approve admissions and discharge plans, provide diagnosis and treatment services, prescribe, and monitor medications, direct treatment teams, and provide clinical direction and training to the therapists and treatment team members.
- The **VP of Programs for Healing** provides overall leadership and direction to the clinical and residential services department, including the Director of Clinical Programs, Director of Residential Programs, Director of Creative Therapies, Program Managers, MHW Supervisors, Night Supervisors, Therapists, Creative Therapists, Mental Health Workers, and their respective supervisors.
- The **Director of Clinical Programs** provides support and guidance to the clinical personnel by ensuring regulatory compliance and implementation of sound and effective therapeutic strategies.
- The **Therapists**, under the clinical direction of the Psychiatrists, provide individual, family, and group therapy, as well as clinical consultation to staff.
- The **Art Therapist** is responsible for the coordination and oversight of art groups and activities.
- The **Director of Creative Therapies/Animal-Assisted Therapy Coordinator** is responsible for the oversight of all creative therapy programs offered and is also in charge of coordination and oversight of the animal assisted groups and activities.
- The **Drama Therapist** is responsible for the coordination and oversight of drama therapy groups and activities.
- The **Equine-Assisted Therapy Professional** is responsible for the coordination and oversight of equine therapy groups and activities.
- The **Barn Manager** provides maintenance and repair to buildings, property, and equipment; maintains equine health; and assists the Therapeutic Horsemanship Coordinator with groups and activities.

# STAFFING

## Residential Programs

- The **Director of Residential Programs** provides support and guidance to the residential personnel and ensures compliance with regulations, policies, and procedures within the residential programs.
- The **Program Managers** maintain appropriate staffing schedules and ratios and assist with the coordination of services within the clinical departments.
- The **Mental Health Worker Supervisors** provide direct supervision to the Mental Health Workers and ensure that trauma informed care is occurring within the milieu.
- The **Mental Health Workers (1st & 2nd shift and Part-Time)** provide support, guidance, and structure in the milieu; they assist the Therapists in providing therapeutic activities and groups.
- The **Mental Health Worker Shift Leaders (2nd shift)** operates as a direct-care component to creating a Trauma Informed environment for youth/young adult admitted to Hoffman Homes. The primary role of the MHW-SL is to care for youth/young adult struggling with symptoms of mental and behavioral health. The MHW-SL serves the youth/young adult-in-care by maintaining their safety, documenting progress, implementing aspects of the treatment plan, facilitating activities, and managing the day-to-day routine. Additionally, the MHW-SL serves as the lead for the MHWs on the team. The MHW-SL acts as the primary contact for supervisors and therapists within that team.
- The **Night Staff Supervisors** are responsible for the Mental Health Workers (3rd shift) schedules and their direct supervision.
- The **Mental Health Workers (3rd shift) and Part-Time** provide direct supervision of the children while they are sleeping and assist with bedtime and wake-up routines.

## Medical Services

- The **VP of Medical Services** provides overall leadership and guidance to the medical services department.
- The **Nurses (RNs & LPNs)** provide the 24-hour care in the Medical Services department including nursing assessments, first aid, and medication administration.
- The **Office Manager** coordinates off campus medical appointments and dental programs and provides direct supervision to the Administrative Assistant and Transcriptionist in the department.
- The **Medical Transcriptionist Secretary** transcribes doctors' notes and evaluations.
- The **Medical Services Administrative Assistant** provides clerical support to the department including maintaining the youth medical charts.
- The **Somatic Coordinator** is responsible for overseeing the day-to-day functions related to the somatic medical condition of each youth/young adult in care.

## Educational Services

- The **VP of Educational Services** is responsible for overall leadership and guidance in the Hoffman Academy and for coordination of educational services with local school districts.
- The **Director of Education** provides support and guidance to the educational personnel, ensuring compliance with PDE Private School Regulations and Chapter 14 Special Education Regulations.

# STAFFING

## Educational Services *(cont.)*

- The **Teachers** and **Teacher Aides** provide classroom instruction and behavior management in the Hoffman Academy.
- The **Personal Care Aides** provide 1:1 support to students that require individualized instruction and support with self-regulation, executive functioning skills, and independence skills.
- The **School Psychologist** provides psychological testing and assists staff in the Hoffman Academy with behavior intervention strategies.
- The **School Counselor** works with students in the Hoffman Academy on career counseling and life skills development, as well as manages all standardized testing coordination, and student records, credits, and transcripts.
- The **School Administrative Assistant** provides clerical support to the Hoffman Academy including coordination of materials and student records with home school districts.
- The **Restorative Support Team** assists the academy during the day-to-day routines, logistical functions, behavior responses with restorative practices for youth/young adults and responding to crisis situations.
- The **Restorative Practice Lead** assists the academy during the day-to-day routines, logistical functions, behavior responses with restorative practices for students, and responding to crisis situations, as well as coach, train, and lead the Restorative Support Staff.
- The **Literacy Aide** assists in the library so that it operates in an organized, efficient, and safe manner.
- The **Administrative Assistant to School Leadership** provides administrative support for the Education Department.
- The **IEP Coordinator** drafts and implements Individual Education Plans for students of Hoffman Academy.

## Human Resources

- The **VP of Human Resources** oversees the processes for payroll, benefits administration, hiring, unemployment compensation, workers compensation, and ensures compliance with regulatory agencies.
- The **Human Resources Assistant** provides support to the VP of HR in personnel records, training, and other HR functions.
- The **Staffing Specialist** provides support to the VP of HR in recruitment and employment.
- The **Quality Assurance & Compliance Specialist**, under the supervision of the VP of Human Resources, improves quality, minimizes risk, and promotes excellence through monitoring compliance with training, evaluating quality with documentation, and reporting on key quality target areas.

## Fundraising

- The **VP of Marketing & Development** is responsible for raising funds to support the organization's budget and building awareness in the community through outreach, events, and marketing. Donors include foundations, individuals, event sponsors and guests, businesses, churches, community organizations, and planned/estate gifts. The Director supervises a 3-person team – Grants Manager, Events Coordinator, and Administrative Assistant.
- The **Events Coordinator** oversees all events held by the Development Department.

# STAFFING

## Fundraising (cont.)

- The **Marketing Administrative Assistant to Development** provides administrative support for the Development Department.
- The **Administrative Assistant (Part-Time and Full-Time)** provides clerical support to the VP of Development and assists with various fundraising functions.

## Safety & Facilities

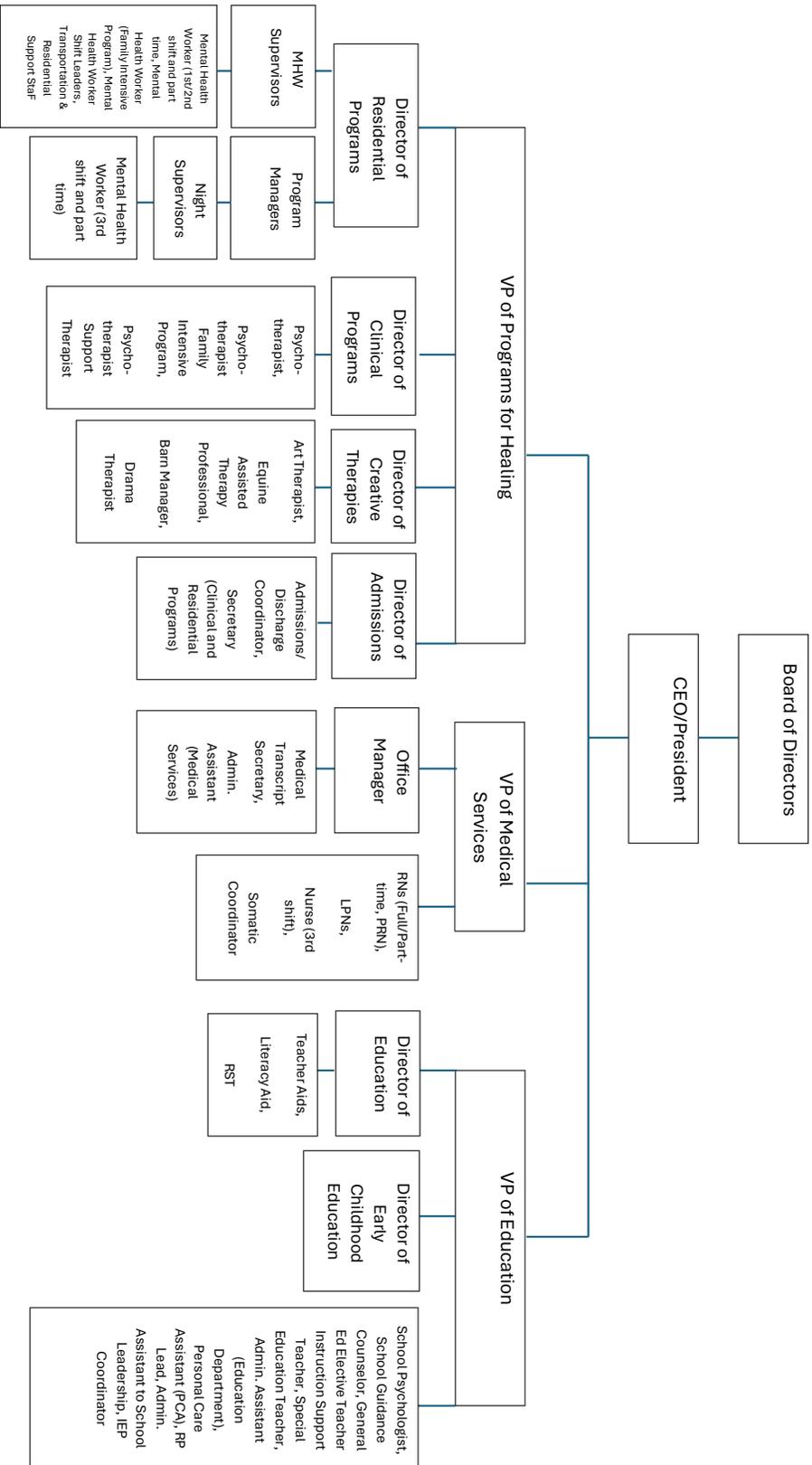
- The **VP of Safety and Facilities Management** provides overall leadership and direction to the maintenance, grounds, custodial, and culinary.
- The **Food Operations Manager** provides leadership in the culinary department.
- The **Culinary Support Staff** helps prepare and serve meals.
- The **Maintenance Supervisor** oversees the maintenance and repair of all buildings, property, and equipment.
- The **Maintenance Staff** are responsible for the upkeep and maintenance of the therapeutic environment including buildings, grounds, and equipment.
- The **Groundskeeper** is responsible for the maintenance and landscaping of the property.
- The **Custodian** is responsible for maintaining the cleanliness of the Academy, Chapel, Medical Services, Administration, and Helb Residence visitation and overnight accommodations areas.

## Technology

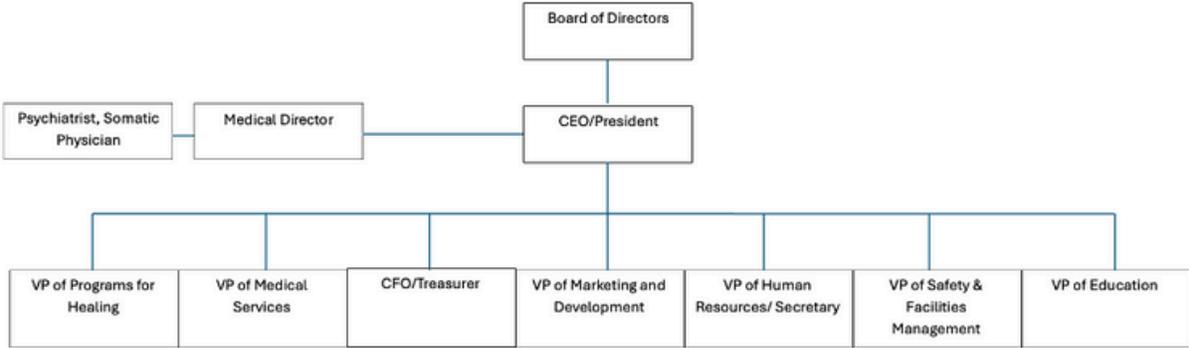
- Technology is outsourced to a company.
- The **IT Supervisor** provides supervision, support, and guidance to the IT Support Specialist as well as oversight of the technology needs for HH in collaboration with an external third-party vendor.
- The in-house **IT Support Specialist** is responsible for providing support for the campus computers, communication, and security systems.



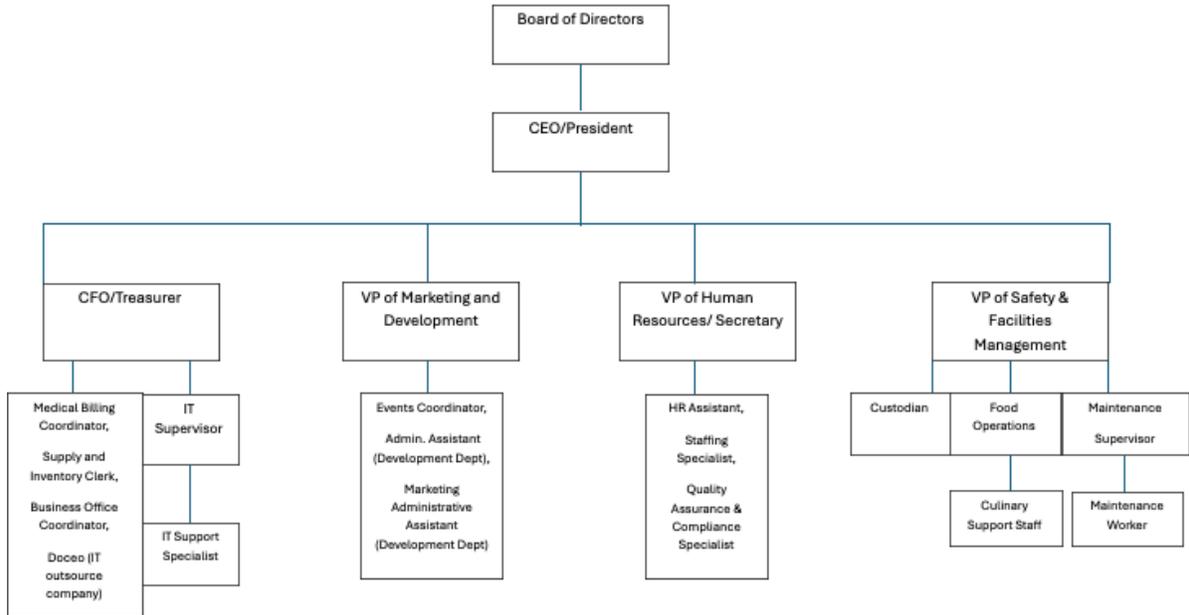
## Hoffman Homes, Inc. Programs Structure Chart (PRTF)



## Hoffman Homes, Inc. Organization Structure Chart



## Hoffman Homes, Inc. Administrative Structure Chart





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