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[REDACTED]

CRITICAL INCIDENTS AND RISK MANAGEMENT PLAN

June 2019

Updated May 2020

Updated January 2021

Updated June 2022

Updated September 2022

Updated March 2023

This Critical Incidents and Risk Management Plan (Plan) sets forth the Foundation's procedures regarding Critical Incidents, defined below, and risk management [REDACTED]. The risk management plan is designed to manage risks of loss and reduce the severity of a loss if one were to occur, taking into account the unique nature of the environment, services, capabilities, resources and limitations [REDACTED]. The Plan addresses organizational preparedness, policies and procedures [REDACTED], and will be reviewed annually by the Foundation's Executive Director and Director, and will be updated as needed. Because of the specialized expertise required to handle Critical Incidents and risk management [REDACTED] the Foundation's Executive Director and Director, shall direct and supervise the implementation of the Plan.

CRITICAL INCIDENTS PROCEDURES (CIP)

"Critical Incidents" include: 1) those incidents pertaining to program participants that are required to be reported to the Foundation's grant sources [REDACTED] ("Grant Requirements"); 2) alleged incidents in which [REDACTED] is the subject of an investigation by a governmental authority; 3) alleged incidents in which a staff member [REDACTED] suffers injury; 4) alleged incidents in which a staff member [REDACTED] causes injury; 5) incidents involving vehicular accidents in which a staff member [REDACTED] is involved in the course of their scope of duties; and 6) alleged incidents in which a program participant has a communicable infection or disease that requires intervention by governmental authorities due to risks to other program participants (this specifically does not include HIV status, lice, scabies, hand, foot and mouth, the common cold and flu, or the COVID-19 coronavirus).

In regard to a Communicable Disease that is or suspected to be the COVID-19 coronavirus, the special protocols and procedures set forth in the Coronavirus Emergency Preparedness and Response Plan, supplementing the Foundation's Disaster and Emergency Preparedness and Continuity of Operations Plan ("DEPCO Policy") as the same is updated and amended from time to time ("CV Response Plan"), shall govern including in particular notice to and collaboration with the [REDACTED] and if applicable, the [REDACTED] Department of Health.

Critical Incidents do not include the following other incidents ("Other Incidents"): a) hotline calls or reports made by [REDACTED] staff to the Department of Children

and Families in regard to the condition, conduct or suspected condition or conduct of program participants, which are already covered by the Foundation's Zero Tolerance for Abuse Reporting Policy ("No Abuse Policy"); b) calls or reports by [REDACTED] staff to fire rescue or police pertaining to the condition, conduct or suspected condition or conduct of program participants, which are already governed by the Foundation's DEPCO Policy) and/or No Abuse Policy; c) matters otherwise already covered by the Foundation's No Abuse Policy and/or DEPCO Policy; and d) calls or reports by program participants directly to fire rescue or police in regard to themselves or others. Other Incidents described in a), b) and c) shall be handled in accordance with the Foundation's No Abuse Policy or DEPCO Policy, as applicable. Such reports should be noted by staff in the applicable program participant's files. No action will be taken in regard to Other Incidents described in c), as such matters are generally beyond the Foundation's purview, unless rising to the level of a violation of a program participant's agreements with the Foundation for which termination may be a remedial action.

Critical Incident Reporting and Remedial Actions

In regard to Critical Incidents described in 1) above (Grant Requirements), the Executive Director, Director, Deputy Director of Operations & Compliance, and/or Associate General Counsel shall: promptly investigate the incident; timely report Critical Incidents in accordance with the Grant Requirements, in the manner and form required; and utilizing the incident reporting procedures set forth therein.

In regard to Critical Incidents described in 2) above (Governmental Investigations), the Executive Director and Director shall: promptly investigate the incident; timely respond to governmental inquiries; implement curative actions if appropriate; and may, if they feel necessary or appropriate, engage third party legal counsel to assist their investigation and response.

In regard to Critical Incidents described in 3) above (Staff Injuries), the Executive Director, Director, and Human Resources Director shall: promptly investigate the incident; immediately instruct the staff member to seek medical attention; timely contact governmental authorities handling workmen's compensation to notify them of the incident; and may, if they feel necessary or appropriate, engage third party legal counsel to assist their investigation and response.

In regard to Critical Incidents described in 4) above (Sheltered Participant Injuries), the Executive Director, Director, Deputy Director of Clinical Programs, and/or Associate General Counsel shall: promptly investigate the incident; immediately instruct the program participant to seek medical attention; timely contact governmental authorities as appropriate (including the Department of Children and Families and/or police) to notify them of the incident; notify the Foundation's insurance agent of a possible claim; suspend, terminate, issue warnings or require other remedial action in regard to the staff member; follow the procedures for Critical Incidents described in 1) if applicable; and may, if they feel necessary or appropriate, engage third party legal counsel to assist their investigation and response.

In regard to Critical Incidents described in 5) above (Vehicular Accident), the Executive Director, Director, Human Resources Director, Deputy Director of Operations & Compliance, and/or Associate General Counsel shall: promptly investigate the incident; immediately instruct the staff member to seek medical attention if appropriate; promptly contact the Foundation's insurance agent; timely contact governmental authorities handling workmen's compensation to notify them of the incident as needed; arrange for repairs to the Foundation's vehicle if needed; and may, if they feel necessary or appropriate, engage third party legal counsel to assist their investigation and response.

In regard to Critical Incidents described in 6) above (Communicable Disease), the Executive Director Director, Deputy Director of Operations & Compliance shall: promptly investigate the incident; immediately instruct the program participant to seek medical attention and review any instructions that may be applicable to the shelter and other program participants; contact [REDACTED] and/or [REDACTED] Department of Health for advice as to appropriate precautionary steps to protect both the program participant and other program participants; request the assistance of the [REDACTED] and/or [REDACTED] Department of Health (including by way of example, vaccines or shots) and any other governmental authorities [REDACTED] [REDACTED] if quarantine offsite is recommended) as necessary or appropriate in carrying out those precautionary steps; and follow other procedures for such incidents.

In the event a Critical Incident in one category also constitutes a Critical Incident in another category, follow the procedures for all that apply.

Documentation and CIP Files

The Executive Director and Director shall maintain a central file documenting Critical Incidents ("CIP File"), which may be an electronic file, though in some cases a participant's file may contain additional documentation as necessary or appropriate in the ordinary course of services provided. If the form of an incident report is specified by Grant Reporting Requirements, such form will be utilized for reporting and evidence of the transmission retained; provided however, reporting and collaboration with the [REDACTED] may be by email and even text given time exigencies pertaining to the COVID-19 coronavirus. Otherwise, the incident report form included with the DEPCO Policy can be utilized. An incident report may not be appropriate, including for example governmental inquiries, but documentation of the governmental inquiry and response shall in such case be included in the CIP File.

Review and Analysis for Continuous Quality Improvement and Prevention

Upon the occurrence of a Critical Incident, the Executive Director, Director, and Associate General Counsel, alone or together with third party legal counsel and/or one or more [REDACTED] staff, shall review, confer, debrief, and analyze the Critical Incident, the Foundation's response, and take any further action they deem necessary or appropriate. If they so elect, such review and analysis may be privileged and confidential

attorney-client communications and/or attorney-work product.

In addition, at least annually, the Executive Director, Director, and General and Associate General Counsel, alone or together with third party legal counsel and/or one or more [REDACTED] staff, shall review, confer and analyze all Critical Incidents in the prior year, the Foundation's responses, update the Foundation's policies and procedures for quality improvement and prevention if appropriate, and take any further action they deem necessary or appropriate. If they so elect, such review and analysis may be privileged and confidential attorney-client communications and/or attorney-work product.

RISK MANAGEMENT

From the past decade of experiences, the Foundation has identified certain Core Risks, defined below, including general categories of threats to people, property, income, goodwill and its ability to accomplish our goals. In this Plan, the Foundation desires to implement the preventive measures, coping measures should the risk or loss occur, measures to protect the organization and prevent or reduce the severity of loss if one were to occur, and corrective measures to prevent, limit, mitigate or reduce the risk of further occurrence of a loss and/or reduce the severity of a loss if one were to occur. We acknowledge that it is impossible to anticipate and address every possible area of risk or exposure, that many risks or exposures are beyond the Foundation's control and that new possible areas of risk or exposure may arise in the future. This Plan will be reviewed annually by the Executive Director Director and Associate General Counsel in conjunction with the annual review of Critical Incidents, and updated as deemed appropriate.

Core areas of risk and/or exposure ("**Core Risks**") in:

- 1) "*Regard to People:*" the mental health and medical crisis of sheltered participants; abuse by participants toward their own children and other participants and staff; conflicts between participants; issues with facilities or rooms; issues with substance use and abuse; staff response to emergencies, crises and conflicts;
- 2) "*Regard to Property:*" physical damage, such as natural disasters like tropical storms and hurricanes; systems failure, including plumbing, electrical, HVAC, kitchen equipment, generator and fire safety; theft or vandalism; vehicle damage, and repair and replacement;
- 3) "*Regard to Income:*" having insufficient resources to assure both short and long term financial stability to advance the mission and important work of the Foundation, from government, philanthropic, corporate sponsorship and private sources;
- 4) "*Regard to Goodwill:*" damage to the reputation of the Foundation for mission-driven, high quality and impactful services and advancement of

enlightened public and social policies, as well as financial transparency and accountability; and

- 5) *“Regard to the Ability to Accomplish the Goals of the Foundation:”* recognizing the two-fold mission of the Foundation in both service and advocacy, appropriate leadership and stewardship of the Foundation’s resources, including succession and infrastructure sufficient in the near and long term.

The Foundation has established the following plan, protocols and procedures to manage the core areas of risk and/or exposure and reduce the severity of a loss associated therewith if one occurs. These risk management actions are monitored by staff in their designated area of responsibilities (e.g. operations, clinical supervision, administration, and the like), as well as the Clinical Program Directors, Director, Deputy Directors and Executive Director. They are discussed regularly in staff meetings, and revisited as necessary when a particular emergency or risk is presented.

A. In Regard to People

We acknowledge that [REDACTED] shelters and serves women, youth and children who have, in many cases, varied and serious high special needs, including without limitation medical and mental health needs, disabilities, developmental challenges, and complex trauma histories. Each and every sheltered participant arrives in crisis to some degree and their personal crisis is not over simply because they are admitted. In so many ways, emergency shelter environments are crisis normalized, where sheltered participants and staff alike are facing many, complex and challenging issues, trying to identify resources, tools and solutions, seeking to foster participant empowerment and self determination, and forced to grapple with many emotional stressors, even as they work together toward the same ends.

To manage Core Risks in Regard to People and reduce the severity of a loss associated therewith if one occurs, the Foundation has adopted the rules, policies, procedures and protocols set forth in its standard written participant agreements (including the [REDACTED] [REDACTED] such as zero tolerance for drugs and alcohol, zero tolerance for violence, prohibitions on weapons, inclusivity, and cleanliness requirements, and Grievance or Consciousness Raising Procedures), building standard safety signage regarding parental obligations to supervise their children, safe sleeping and safe bathing, No Abuse Policy, Inclusivity Policy, DEPCO Policy, CV Response Plan, Guidelines for Counseling and Resource Coordination, and for participant grievances and conflicts, the Conscious Raising Procedures, to the extent reasonably practicable. The Guidelines for Counseling and Resource Coordination include, by way of example but not in limitation: a wellness assessment (biopsychosocial assessment) for adult participants, subject to participant cooperation; referral to psychiatrist, subject to availability and participant cooperation; assisting participants to fill any resultant prescriptions written by a psychiatrist; follow up to check in with participant and determine--to the extent practicable acknowledging that the Foundation operates a homeless shelter and does not manage medication—whether a participant is actually taking their medication; evidence-based assessments of children following entry to the shelter, subject to

participant cooperation; referral to child and family therapies and outside services as needed based on the results of those assessments, subject to availability and participant cooperation. [REDACTED] does not manage medication, provide psychiatric care or substance abuse treatment, and is not a medical care provider, even though efforts are made to encourage sheltered participants to access medical, mental health, and substance abuse care and services, as well as medications prescribed. Additionally, a host of programming, including arts and activities, yoga, music, theater, dance, field trips, movies and more contribute to positive social engagement, a sense of shared community and offer alternative pathways to healing, subject to available resources. We recognize that participants' participation is ultimately voluntary in regard to all of the rules, policies, procedures and protocols, programming and agreements set forth by the Foundation, and every participant's circumstances is unique, as are the efforts by staff to address their issues. Both the solutions to particular risks and the Foundation's efforts to address those risks are subject to the limits of available resources, and what may be practicable and reasonable under the unique circumstances presented.

To manage risk in regard to staff [REDACTED] the Foundation invests in its staffing team through training in a wide range of subjects pertinent to their primary duties and responsibilities, including by way of example, CPR and first aid, No Abuse Policy, Inclusivity Policy, DEPCO Policy, CV Policy, Conflict Prevention and Intervention, Guidelines for Counseling and Resource Coordination, team advisories, and for participant grievances and conflicts, the Conscious Raising Procedures, as well as the Foundation's Policies and Procedures Manual, Employee Manual, Team Support Protocol and Operations Manual. Professional degrees, certifications and licensing requirements for professional staff are specified in their respective employee agreements. Professional trainings above and beyond the foregoing are arranged for [REDACTED] staff whose duties and responsibilities may require specialized training, including by way of example CPP, PCIT, TFCBT and related trainings for child and family therapists. The Team Support Protocol includes policies and procedures for: regular background checks for staff; arranging on-site vaccinations for staff (e.g., flu and hepatitis); and arranging staff trainings relevant to their respective duties and responsibilities; and general team support such as establishing staff areas for respite and relaxation, staff appreciation activities, provision of free on-site meals, and other supports to support their effectiveness in carrying out their duties, subject to availability of resources to do so.

B. In Regard to Property

The [REDACTED] property occupied and utilized by the Foundation [REDACTED] is master leased and such lease includes a wide range of duties and responsibilities to insure, repair, maintain and replace the property, in addition to paying rent. To manage Core Risks in Regard to Property and reduce the severity of a loss associated therewith if one occurs, the Foundation has adopted the rules, policies, procedures and protocols set forth in its Operating Procedures, the DEPCO Policy and its standard written participant agreements (including the [REDACTED] Rules, such as cleanliness requirements and prohibitions of smoking, cooking, and burning of candles and incense

inside the facilities). The Foundation's Operating Procedures require among other preventive and curative measures: regular inspection of participant rooms and common areas and timely response to maintenance issues that present an apparent safety risk (e.g. fallen shower seat, falling countertop, broken bed); review of and remedial action, if needed, for participant maintenance complaints; regular cleaning of the common areas of the facilities and reporting of any facilities-related concerns, pursuant to the Foundation's Operations Manual; cleaning and maintenance of the Foundation's kitchen in accordance with Department of Health standards (acknowledging that the Department of Health does not monitor the Foundation's operations or kitchen); and establishing contractors and as needed, regular contracts for the maintenance and repair of the facilities systems, including plumbing, electrical, HVAC, generator, fire safety, laundry, pest control, and trash removal.

Posted exterior signage and a video surveillance system (both internal and external) embedded in the facilities act as a deterrent to theft and vandalism. Subject to the availability of funds, additional cameras may be added as needed.

The [REDACTED] facilities include a number of features to minimize the losses associated with natural disasters, such as its substantially concrete and CMU structure, impact windows and doors, a generator with a 3-day run capacity, and underground natural gas lines that support cooking in the kitchen facilities. While landscaping is always at risk in natural disasters, the core facilities are anticipated to be among the safest in [REDACTED] County to support our shelter-in operations during such contingencies. The Foundation's DEPCO Policy provides detailed protocol and procedures to prepare for and mitigate loss in such circumstances.

The Foundation recognizes the COVID-19 coronavirus pandemic as a natural disaster of unprecedented impact on the shelter's environment, operations, programming and support services. To that end, it established the Response Team and the CV Response Plan. The Response Team will continue to monitor Federal, State and local government news, guidelines and advisors, meet and update as needed the CV Response Plan to respond to the pandemic.

To mitigate the losses incurred by the Foundation for Core Risks in Regard to People and Regard to Property, the Foundation shall procure and maintain in full force and effect for the benefit of the Foundation insurance policies to address risks and losses, such as property, liability, auto, professional liability, directors and officers liability and worker's compensation, together with such other coverages for the benefit of additional insureds and in such amounts as the Executive Director deems appropriate, but not less than the coverages and amounts required by any statutes applicable [REDACTED], Grant Requirements and the Foundation's lease and other contractual obligations. Annually, the Executive Director, and Director will review the insurance policy coverages and amounts with the advice and assistance of the Foundation's insurance agent to assess the needs, risks, and assets of the Foundation in regard to the appropriateness of the Foundation's insurance prior to renewal. As part of its legislative initiatives, the Foundation will continue to advocate for and advance legislation that establishes the Good Samaritan status of homeless shelters at the State level.

C. In Regard to Income

The Foundation is committed to developing sufficient resources, from government, philanthropic, corporate sponsorship and private sources, to assure both short and long term financial stability to advance the mission and important work [REDACTED]. This is particularly important given that [REDACTED] is a homeless shelter dedicated to serving those most in need, the Foundation provides its services free of charge and does not accept payment from program participants. As such, the Foundation relies entirely on revenues from grants and donations, both financial and in-kind, to operate. To manage Core Risks in Regard to Income and reduce the severity of a loss associated therewith if one occurs, [REDACTED] engages in strategic fundraising, in accordance with the goals and objectives of the Foundation's approved annual Strategic Business Plan, that includes, three prongs:

1) research and submission of regular letters of inquiry, proposals and grant applications to a wide range of government, philanthropic, corporate and private sources, initiated and developed, reviewed and tracked principally by the Director, Program Development Director, and Executive Director. Upon securing grants, the management, reporting and tracking is principally under the supervision of the Director and Executive Director and must be reviewed at regular intervals to assure compliance and/or identify areas for remedial action;

2) community outreach and engagement activities developed, managed and supervised principally by the Director Executive Director and Community Outreach Director. Community engagement activities are wide ranging but include by way of example: a) the annual gala as the primary annual fundraiser; b) other smaller selected events throughout the year to both fund and friend raise, c) an ongoing active social media campaign (Facebook, Twitter, Instagram and eblasts) with targeted financial and in-kind fundraising through the year, [REDACTED] targeted outreach to prospective philanthropic, corporate and individual donors, and d) extensive volunteer engagement and hands-on support for the shelter's programming and operations.

The Foundation's strategic fundraising is multi-faceted, flexible, opportunistic and readily adaptable to changing circumstances and community inquiries. Equally important in managing the risks associated with loss of income is the Foundation's vigilant income preservation strategy through the careful stewardship of those resources to assure both short and long term financial stability. The stewardship of resources includes the detailed policies, procedures, systems and controls identified in the Foundation's Policies and Procedures Manual, including by way of example: a thorough budgeting process based on prior year revenues and expenses and projected revenue and expenses, both relatively certain and uncertain sources; and monthly monitoring of financials, including budget to actual revenues and expenses. Careful attention to both may result in adjustments to service levels based on actual versus projected revenues and expenditures, as determined by the Director and/or Executive Director.

In early 2020, recognizing the importance of cash operating reserves, the Foundation established a cash reserve from available resources in accordance with its Policies and Procedures Manual. It recognizes the importance of continuing to grow cash reserves to assure the continuity of operations [REDACTED] in times of economic uncertainty, particularly given the likelihood that such times generate a concomitant need for shelter services. This has been made ever more urgent in the face of the economic devastation caused by the coronavirus pandemic.

[REDACTED] the coronavirus pandemic presented all new challenges [REDACTED] beginning in the Spring of 2020, from added expenses to diminished “in person” public fundraising efforts to support the shelter. Our immediate response was to develop a new public awareness and fundraising campaign that was social media driven, with the launch of a series of regular communications by eblast, on Facebook and Instagram, as well as a web-based COVID Relief Fund which remains ongoing. The community outreach team developed regular communications offering the community a deeper understanding of the challenges [REDACTED] faced to remain fully operational and indeed ramp up its capacity to serve women and children in need, as well as those struggling in its [REDACTED] neighborhood. The results yielded an unprecedented outpouring of support from the community in donations, both in-kind (masks for adults and children alike, food supplies, prepared meals, groceries, baby supplies, and more) and financial. This continues to be particularly important given the challenges of hosting in-person fundraisers. In addition to its social media campaign, [REDACTED] has participated in many public zoom and similar governmental meetings, [REDACTED] to bring attention to the needs of sheltered children and families in particular.

In the face of unprecedented economic uncertainty and an even greater need for [REDACTED] services in the wake of the pandemic, the [REDACTED] management team carefully tracked and projected additional expenses needed to implement the Plan, remain fully operational, and expand its services as a result of the pandemic. [REDACTED]

[REDACTED] Since the height of the pandemic, traditional funding sources have stabilized but expenses have continued to increase across the board. The team has worked hard to find savings wherever possible and has been extremely successful in obtaining additional grant funding, which allowed greater contributions to the Foundation’s reserves. Additional grant sourcing and fundraising continues to be a primary focus for the Foundation’s Executive Director, Program Development Director and Community Outreach Director.

Finally, the Foundation advances its long-term financial sustainability goals by supporting the capital campaign [REDACTED] to help

ensure [REDACTED] will be a resource for generations to come.

D. In Regard to Good Will

Over the past decade, the Foundation has earned a reputation for mission-driven, high quality and impactful services, the advancement of enlightened public and social policies, and exemplary financial stewardship, transparency and accountability. The bedrock of this reputation is first and foremost, our absolute dedication, love and compassion for those to whom we are blessed to be in service. From there flows our commitment to trauma-informed, evidence-based best practices and innovation, extraordinarily successful outcomes, honesty, integrity and careful stewardship of resources to assure our continued enrichment of services and advancement of social and public policies to bring an end to homelessness. We commit ourselves to the continuation of these principles. We recognize that good will is earned and nothing is a substitute. May [REDACTED] rest always on the firm ground of emptiness.

Protocol, policies and procedures regarding communications that address media relations and social media are governed by the Policies and Procedures Manual, Employee Manual and individual employment agreements, and HIPAA Manual. Media relations and social media fall within the exclusive purview and supervision of the Executive Director and Director, assisted if they deem appropriate by the Community Outreach Director

The Foundation recognizes that the preservation of its good will in the community is supported by the extraordinary expertise and dedication of its pro bono media relations firm [REDACTED]

E. In Regard to the Ability to Accomplish the Goals of the Foundation

The goals of the Foundation are two-fold and re-stated below:

Our mission is to improve the lives of impoverished and homeless women, youth and children by providing sanctuary, support, education, tools and resources that empower them to improve the quality of their lives on every level, achieve greater self sufficiency, and build safe, secure lives. In their dreams come true, we enrich our community with the fruit of their potential realized.

To support our mission, we also advocate on behalf of homeless women, youth and children to raise awareness of their special needs; inspire innovative, holistic solutions that truly break the cycle of childhood abuse, domestic violence and homelessness; and advance research and enlightened social policies for greater understanding, social inclusion and resources for homeless women, youth and children.

We recognize that proper leadership and stewardship of the Foundation's resources are essential to our ability to accomplish the goals of the Foundation. To that end, we manage the Core Risks in Regard to the Ability To Accomplish the Goals of the

Foundation through strategic planning for leadership succession and organizational infrastructure sufficient in the near and long term to achieve our goals. The Founder [REDACTED] and President of the Foundation, is supported by the Executive Director and Director overseeing all day to day operations, programming, services and data, grant and fiscal management, compliance, contracting and management, Data and Grants Management, Quality Assurance and Community Outreach Teams; Compliance and Operations Deputy Director overseeing the Operations, Maintenance and Culinary Teams; Deputy Director of Children's Services and Clinical Programs; and a wide range of directors overseeing teams of essential departments for the operation of the shelter. During the pandemic, the teams at all levels, including in particular the management and executive teams, were challenged to deepen their collaboration both within and across departments and succeeded in doing so to assure the safety of all concerned and continue the essential work of the Foundation. [REDACTED]

[REDACTED] The Foundation has been building the executive and management teams and organizational infrastructure for years in anticipation of this succession of leadership. The Board has continued to grow and diversify over that same time, amended the Bylaws to establish a working Executive Committee charged with many of the Board powers to streamline decisions making, and plans to further amend the Bylaws to provide for greater separation of duties of the Board President and Executive Director as the Board continues its overall role in supporting the Foundation's mission.

Annual Review

At least annually, the Executive Director, Director, and Associate General Counsel alone or together with third party legal counsel shall review and analyze the risks to people, property, income, goodwill and the ability to accomplish its goals of the Foundation, this protocols and procedures set forth in this Plan, make updates as appropriate, and take any further action they deem necessary or appropriate to manage risk and reduce the severity of a loss if one were to occur. If they so elect, such review and analysis may be privileged and confidential attorney-client communications and/or attorney-work product. Additionally, the Foundation's insurance policy amounts and coverages will also be reviewed annually, as discussed above.

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