



# **Policies & Procedures Manual**

Each individual who intends to operate a Chapter under the auspices of LIM359 must follow the policies and procedures outlined in this Manual. Failure to do so may lead to de-chartering of the Chapter at the discretion of the Board of Directors.

## I. GUIDING PRINCIPLES OF LIM359

**Mission Statement:** The mission of LIM359 is to provide opportunities for people with limb loss and/or limb difference to come together in order to share past, present, and future experiences through participation in group activities.

**Purpose:** To provide peer support for people with limb loss and/or limb difference by:

- organizing group activities and events for people with limb loss and/or limb difference, as well as their family and friends;
- acting as a resource for people with limb loss and/or limb difference; and
- providing educational opportunities for people with limb loss and/or limb difference, as well as their family and friends.

**History, Values & Culture:** LIM359 was started because its founders saw that there were amputees or people with limb difference who were not interested in a discussion-based support group, but were in need of and looking for support. Basing support around group activities rather than structured discussion seemed to be the answer for some of these individuals as well as providing an additional stepping stone between a discussion-based support group and full integration into the community. It is important to always remember that LIM359 exists to provide peer support through engaging in group activities.

LIM359 welcomes all individuals with limb loss and limb difference, as well as their friends and family. It is okay to limit some activities per year to individuals with limb loss and limb difference only, but the Chapter must also remember the importance of having family and friends involved in activities and in ongoing support of each individual. Each Chapter should strive to offer activities that cater to a wide range of ages and ability-levels. We understand that coming up with ideas that will attract a large number of individuals who are of varying ages and ability-levels can be very difficult. The following ideas are intended as a resource only, for Chapters to refer to when they need help coming up with activity ideas. In general, we have found in Denver that we get a bigger turnout at our activities if we pair them with something related to eating.

- Kayaking followed by a BBQ or potluck picnic – this was VERY popular in Denver
- Rock Climbing (Indoor or Outdoor)
- Adaptive Yoga

- Museum Tour
- Dinner with a Guest Speaker, such as a pain doctor or physical therapist
- Board Game & Pizza Night – this was VERY popular in Denver
- Walking a 5K as a group
- Archery
- Stand-up Paddleboard Clinic followed by a BBQ
- Dinner at a sit-down restaurant
- Swimming Clinic
- Laser Tag
- Snowboarding/Skiing Lessons
- Hiking followed by a Picnic
- Scavenger Hunt
- Bowling
- Potluck Dinner (it's fun to have a theme, like Breakfast for Dinner!)
- Card Game Tournament
- Ice Cream Sundae Party
- Comedy Show

## II. CHAPTER FORMATION

**Chapter President:** Each Chapter must designate a Chapter President who is responsible for upholding the agreements set forth in the Policies & Procedures Manual & the Chapter Charter. Additional responsibilities of the Chapter President are set forth in Section II of this Manual.

**Chapter Charter:** Each Chapter President must sign the Chapter Charter. If a Chapter President leaves LIM359 for any reason, the Chapter must designate a new Chapter President who must sign a new Chapter Charter.

**Logo:** Any logo to be used by a Chapter must be approved by the Board prior to use.

**Important Note about Fundraising:** Prior to fundraising in a new state, LIM359 must file the proper paperwork with the Secretary of State to allow fundraising within that state. Each state has different guidelines, so the Chapter President needs to work with the President of the Board in order to ensure LIM359 is compliant with this requirement.

## III. CHAPTER LEADERSHIP

**Structure:** Chapters may determine how the Chapter will be lead, but shall adhere to the following guidelines in creating the structure of the Chapter leadership:

Chapter President: Each Chapter *must* have a Chapter President who is responsible for:

- Signing the Chapter Charter;
- Submitting Membership Forms for all members of the Chapter – these Membership Forms *must* be completed and signed *prior to* the new member participating in an activity with LIM359;
- Filing a Chapter Report with the Board in February, June, and October of each year;
- Ensuring that Quarterly Financial Reports are filed with the Board no later than March 31<sup>st</sup>, June 31<sup>st</sup>, September 31<sup>st</sup>, and December 31<sup>st</sup> of each year; and
- Enabling the Chapter to hold at least 4 activities/events per calendar year.

Chapter Treasurer: Each Chapter *may* have a Chapter Treasurer who is responsible for handling the finances of that Chapter. The Chapter Treasurer shall be responsible for filing the Quarterly Financial Reports with the Board, but the ultimate responsibility will fall on the Chapter President if the Reports are not filed on time.

Additional Committees: Each Chapter *may* form other committees as needed to assist the Chapter President and Chapter Treasurer in running the Chapter. The structure of each Chapter shall not resemble a board of directors, but should instead be made up of these committees. Such committees may include:

- *Activities Committee:* This committee may be responsible for assisting in the actual planning & hosting of activities. For example, a Chapter President may form an Activities Committee who is responsible for planning & carrying out a set number of activities per year.
- *Fundraising Committee:* This committee may be responsible for raising funds for the Chapter in accordance with the guidelines set forth in this Manual.
- *Marketing Committee:* This committee may be responsible for designing, ordering, and distributing marketing materials, such as business cards, flyers, t-shirts, etc. The purpose of this committee would likely be to ensure that amputees, prosthetists, therapists, doctors, and other healthcare providers are aware of the Chapter's existence so new amputees will be referred to the Chapter.
- *Membership Committee:* This committee may be responsible for gathering Membership Forms from all new members, sending copies of the Membership Forms to the Board, and reaching out to new members to make them feel welcome.

- *Peer Visitor Committee:* This committee may be responsible for organizing peer visitor training through the Amputee Coalition, reaching out to the healthcare community to ensure they know the Chapter has the capability to conduct peer visits, and matching new amputee referrals to Certified Peer Visitors.
- *Other committees as the Chapter President believes may be helpful in running the Chapter.*

**Ethical Considerations for the Chapter President:** As the leader of a group, the Chapter President is in a position of power. It is important to remember that members may give the Chapter President's opinion greater weight because of this, so the Chapter President must be mindful of the following ethical considerations:

Endorsements: Any endorsement-type item, whether purchased or given to the Chapter President, should not be worn during activities with the Chapter.

Opinions Regarding Prosthetic Care: If asked, it is okay for the Chapter President to honestly answer questions about who s/he goes to for prosthetic care and what types of components s/he prefers. However, the Chapter President should provide all necessary information so the person asking is empowered to make their own decisions. Thus, for example, if an individual asks what prosthetist they should go to, the Chapter President may tell the individual who they use for their prosthetic needs, but should make sure to also provide the individual with information for all known options and encourage the individual to interview multiple prosthetists and then choose the prosthetist they feel is best for them. (Note: You may also direct them to <http://lim359.wordpress.com/2013/12/20/questions-to-ask-when-choosing-a-prosthetist/> for ideas of what types of questions to ask in an interview.)

Donations & Sponsorships: The Chapter may accept donations and sponsorships from anyone; however, the only obligation the Chapter has in return is to publicly acknowledge the donation. The Chapter President should be clear up front with donors and sponsors that there should be no expectation of anything, such as new patients, in return for the donation or sponsorship.

Privacy of Members: The Chapter President shall not give the Chapter's email or mailing list to anyone because it is confidential. The Chapter's email and mailing list should be well-protected and with limited access. If you send a mass email to the group, you must *blind copy (bcc:)* everyone (regular carbon copies distribute everyone's emails to the entire list,

and therefore does not protect confidentiality). If the Chapter President is approached for the Chapter's mailing list, the Chapter President may instead encourage the individual who approached him/her to send the information to the Chapter President, and the Chapter President may then distribute this information to group.

For additional ethical guidance, the Chapter President should refer to the Amputee Coalition's *Support Group Manual*, available at <http://www.amputee-coalition.org/support-groups-peer-support/documents/support-group-manual.pdf>.

#### **IV. FINANCIAL GUIDELINES**

**Financial Self-Sufficiency:** Each Chapter shall be financially self-sufficient and shall not rely on LIM359 in Denver for financial support. Funds raised by the Chapter shall go directly to that Chapter. All funds must be reported to the Board in the Quarterly Financial Statement so that all money attributed to any Chapter of LIM359 can be reported in our annual taxes. Failure to report accurately may jeopardize the status of LIM359 as a tax-exempt 501(c)3 organization, so it is imperative that the Quarterly Financial Statements are 100% accurate and filed on time.

**Fundraising:** Our Bylaws allow us to fundraise for the benefit of LIM359 in supporting our mission and purpose as described above and in the LIM359 Bylaws. Each Chapter should establish fundraising goals each year and a major goal should always be to cover the cost of all Chapter activities for LIM359 members. Fundraising efforts shall be for the purpose of supporting the Chapter as a whole, not for any specific individual member.

**Disbursing Funds:** The Chapter has ultimate control over their funds, but should adhere to the following guidance when disbursing funds:

Paying for Activities: The Chapter should use funds to provide activities free of cost to LIM359 members throughout the year.

Subsidizing Costs for Specific Members: When the Chapter is unable to cover the cost for all LIM359 members, the Chapter shall have the authority to subsidize costs for members who are unable to afford the cost of an activity if the Chapter has sufficient funds to do so. The Chapter shall establish a consistent system for determining who is eligible for such a subsidy.

Marketing Materials: The Chapter may use funds to purchase marketing materials.

Apparel: The Chapter may use funds to purchase apparel, such as t-shirts, jackets, hats, etc. The Chapter may give apparel to LIM359 at no charge, or they may charge for sales and collect any profit as part of an ongoing fundraising effort.

Equipment: The Chapter may use funds to purchase equipment for the Chapter, but may not use it to purchase equipment for any individual member. This includes sporting equipment, prosthetic devices, and any other tangible item that may be defined as equipment.

Other: The Chapter may use funds for other purposes not described herein if deemed necessary by the Chapter President and approved prior to disbursement by a majority of the LIM359 Board of Directors.

## **V. WHAT TO DO IN THE EVENT OF AN ACCIDENT**

Accidents are inevitable, no matter how much care is taken during activities. Understanding that this is part of the nature of what we do, the following process must be followed when there is an allegation or occurrence of an accident/incident:

- The Chapter President or another designated Chapter Leader must immediately talk to the involved parties and complete the Incident Report Form included at the end of this Manual. Make sure all emergency situations are handled, calling 9-1-1 if necessary.
- If the Reporting Party is not the Chapter President, the Reporting Party must notify the Chapter President of the incident as soon as possible.
- The Chapter President or another designated Chapter Leader must notify the Board of the incident and email a copy of the completed Incident Report Form to [livinginmotion359@gmail.com](mailto:livinginmotion359@gmail.com) within 24 hours of the allegation or occurrence of an accident/incident.
- If deemed appropriate by the Chapter President, follow up with the involved parties within 1 week after the incident. If the Chapter President is unsure of whether or not a follow-up is needed, s/he may seek the advice of the Board.
- Maintain a copy of each completed Incident Report, either electronically or in hard-copy.

Any questions about this process should be directed to [livinginmotion359@gmail.com](mailto:livinginmotion359@gmail.com)

# Chapter Charter

An agreement between LIM359 and

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Name of Chapter

## Name:

1. The name "LIM359" belongs to the national organization, headquartered in Denver, Colorado. Public statements and written materials in the name of LIM359 (as opposed to the chapter name) must receive approval from the president or designated representative.
2. Chapters can name themselves "LIM359 – [place]" or "LIM359 [place or name] Chapter."

## Membership:

1. Membership in chapters is open to people with limb loss and/or limb difference as well as their family and friends.

## Chapter President:

1. Each chapter must designate a Chapter President who will take responsibility for communication with the Board and list his/her phone number on the LIM359 website as a public representative. This person will be considered by LIM359 to be responsible for the Chapter.
2. The internal structure is up the chapter, but if the Chapter President is replaced, the new President must sign this agreement.

## Dues:

1. There shall be no dues charged to members or volunteers. Any administrative costs should be covered by local fundraising.

## Funds:

1. Each chapter shall be financially self-sufficient.
2. Each chapter shall file quarterly financial reports with headquarters.

## Dechartering:

1. LIM359 reserves the right to disenfranchise a chapter or a Chapter President. In this event, or if a chapter ends operations by itself, all records, including mailing lists, correspondence, bank accounts, and confidential information revert to the possession of the main office in Denver, Colorado.

**The undersigned agrees to all conditions listed above in this Chapter Charter and has read and agrees to the policies and procedures as set forth in the LIM359 Policies & Procedures Manual:**

Chapter President for \_\_\_\_\_ Chapter

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

President, Local Chapter (signature): \_\_\_\_\_ Date: \_\_\_\_\_

Approved by LIM359 President: \_\_\_\_\_ Date: \_\_\_\_\_

# Chapter Report

Must be filed in February, June, and October of each year.



## Chapter Info:

\_\_\_\_\_  
Chapter Name

\_\_\_\_\_  
Chapter President

\_\_\_\_\_  
Email

## Current Chapter Membership:

Estimated Number of Members with limb loss and/or limb difference: \_\_\_\_\_

Estimated Number of Members who are family or friends of people with limb loss and/or limb difference: \_\_\_\_\_

**How many activities or events has your chapter hosted in the last 4 months?**

\_\_\_\_\_

**What types of activities have you hosted in the past 4 months:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**What else would you like to share with us?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please attach photos and news articles from the last 4 months with this report. Thank you.**

**Send your chapter report, photos, and news articles to: [livinginmotion359@gmail.com](mailto:livinginmotion359@gmail.com)**

# Quarterly Financial Report

Must be filed by March 31<sup>st</sup>, June 31<sup>st</sup>, September 31<sup>st</sup>, and December 31<sup>st</sup> of each year.



## Chapter Info:

Chapter Name: \_\_\_\_\_

Chapter Treasurer and/or President: \_\_\_\_\_

Email(s): \_\_\_\_\_

Bank where Chapter account is held: \_\_\_\_\_

Date Last Financial Report was Filed: \_\_\_\_\_

We are legally required to keep track of how much money comes in to LIM359 & how much money goes out. Please provide us with the following information, accounting only for the time period between the date you last filed through the date you are filing this Report:

Money In: \$ \_\_\_\_\_

Money Out: \$ \_\_\_\_\_

*You are also required to keep an itemized list of Chapter spending that must be attached to this Report.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Filing

\_\_\_\_\_  
Printed Name

# Incident Report Form

Must be filed in for events or allegations of injury to anyone participating in an activity with LIM359.



Chapter Name: \_\_\_\_\_

Incident Date: \_\_\_\_\_ Time: \_\_\_\_\_

Reporting Date: \_\_\_\_\_ Time: \_\_\_\_\_

Reporting Person: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Description of Incident: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Individual(s) Involved: \_\_\_\_\_

Contact Info (phone number & email) of Individual(s) Involved: \_\_\_\_\_

\_\_\_\_\_

Injured Body Part(s) (please indicate what was injured on whom): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Was Medical Treatment Given at the Scene? \_\_\_\_\_ To Whom? \_\_\_\_\_

Type: \_\_\_\_\_

Was Individual transported to the Hospital (which one)? \_\_\_\_\_

Please list the following information for individual witnesses to the incident:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please list any additional information that you deem pertinent here or on the back of this page: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_