Emergency Succession Plan
For
Child Advocates of Placer County

The Board of Directors of Child Advocates of Placer County recognizes that this is a plan for contingencies due to the disability, death or departure of the Executive Director. If the organization is faced with the unlikely event of an untimely vacancy, Child Advocates of Placer County has in place the following emergency succession plan to facilitate the transition to both interim and longer-term leadership.

The Board of Child Advocates of Placer County has reviewed the job description of the Executive Director. The job description is attached. The board has a clear understanding of the Executive Director's role in organizational leadership, program development, program administration, operations, board of directors relationships, financial operations, resource development and community presence.

Succession Plan in Event of a Temporary, Unplanned Absence: Short-Term

A temporary absence is one of less than three months in which it is expected that the Executive Director will return to his/her position once the events precipitating the absence are resolved. An unplanned absence is one that arises unexpectedly, in contrast to a planned leave, such as a vacation or a sabbatical. The Board of Directors is authorized (or authorizes the Executive Committee) of Child Advocates of Placer County to implement the terms of this emergency plan in the event of the unplanned absence of the Executive Director.

In the event of an unplanned absence of the Executive Director, the Deputy Director (or other highest ranking staff member) is to immediately inform the Board Chair (or highest ranking volunteer board member) of the absence. As soon as it is feasible, the Chair should convene a meeting of the Board or Executive Committee (choose one) to affirm the procedures prescribed in this plan or to make modifications as the Committee deems appropriate.

At the time that this plan was approved, the position of Acting Executive Director would be:
_____ (Name)
_____ (Title)

Should the standing appointee to the position of Acting Executive Director be unable to serve, the first and second back-up appointees for the position of Acting Executive Director will be:

(1) _____ Name _____ Title and
(2) _____ Name _____ Title.

If this Acting Executive Director is new to his/her position and fairly inexperienced with this organization (less than _____ months/years), the Executive Committee or Board of Directors (circle one) may decide to appoint one of the back-up appointees to the acting executive position. The Executive Committee or Board of Directors (circle one) may also consider the option of splitting executive duties among the designated appointees.

Authority and Compensation of the Acting Executive Director
The person appointed as Acting Executive Director shall have the full authority for decision-making and independent action as the regular Executive Director.

The Acting Executive Director may be offered: (check one)

- ☐ A temporary salary increase to the entry-level salary of the executive director position
- ☐ A bonus of $_____ during the Acting Executive Director Period.
- ☐ No additional compensation.

Board Oversight
The board member(s) or board committee (circle one) responsible for monitoring the work of the Acting Executive Director shall be
_____ _____ (list by name or office).

The above named people will be sensitive to the special support needs of the Acting Executive Director in this temporary leadership role.

Communications Plan
Immediately upon transferring the responsibilities to the Acting Executive Director, the Board Chair (or highest ranking Board member) will notify staff members, members of the Board of Directors and key volunteers of the delegation of authority.

As soon as possible after the Acting Executive Director has begun covering the unplanned absence, Board members and the Acting Executive Director shall communicate the temporary leadership structure to the following key external supporters of Child Advocates of Placer County. This may include (but not be limited to) government contract officers, foundation program officers, civic leaders, major donors and others (please specify):

_____

_____

_____

_____

_____

_____

Completion of Short-Term Emergency Succession Period
The decision about when the absent Executive Director returns to lead Child Advocates of Placer County should be determined by the Executive Director and the Board Chair. They will decide upon a mutually agreed upon schedule and start date. A reduced schedule for a set period of time can be allowed, by approval of the Board Chair, with the intention of working their way back up to a full-time commitment.

Succession Plan in Event of a Temporary, Unplanned Absence: Long-Term

A long-term absence is one that is expected to last more than three months. The procedures and conditions to be followed should be the same as for a short-term absence with one addition: The Executive Committee or Board of Directors (circle one) will give immediate consideration, in consultation with the Acting Executive Director, to **temporarily** filling the management position left vacant by the Acting Executive Director. This is in recognition of the fact that for a term of more than three months, it may not be reasonable to expect the Acting Executive Director to carry the duties of both positions. The position description of a temporary manager would focus on covering the priority areas in which the Acting Executive Director needs assistance.

Completion of Long-Term Emergency Succession Period

The decision about when the absent Executive Director returns to lead Child Advocates of Placer County should be determined by the Executive Director and the Board Chair. They will decide upon a mutually agreed upon schedule and start date. A reduced schedule for a set period of time can be allowed, by approval of the Board Chair, with the intention of working the way up to a full-time commitment.

Succession Plan in Event of a Permanent Change in Executive Director

A permanent change is one in which it is firmly determined that the Executive Director will not be returning to the position. The procedures and conditions should be the same as for a long-term temporary absence with one addition:

The Board of Directors will appoint a Transition and Search Committee within (add number) _____ days to plan and carry out a transition to a new permanent executive director. The Board will also consider the need for outside consulting assistance depending on the circumstances of the transition and the board's capacity to plan and manage the transition and search. The Transition and Search Committee will also determine the need for an Interim Executive Director, and plan for the recruitment and selection of an Interim Executive Director and/or permanent Executive Director.

Checklist for Acceptance of All Types of Emergency Succession Plans

Succession plan approval. This succession plan will be approved by the Executive Committee and forwarded to the full Board of Directors for its vote and approval. This plan should be reviewed annually.

Signatories. The Board Chair, the Executive Director, the Program Manager and the Acting Executive Director shall sign this plan, and the appointees designated in this plan.

Organizational Charts. Two organizational charts need to be prepared and attached to this plan. Prepare and attach an organizational chart reflecting staffing positions and lines of authority/reporting throughout the organization. Prepare and attach a second organizational chart that reflects how that structure will change within the context of an emergency/unplanned absence of the Executive Director.

Important Organizational Information. Complete the attached *Information and Contact Inventory* and attach it to this document. Also attach a current list of the organization's board of directors.

Copies. Copies of this Emergency Succession Plan along with the corresponding documentation shall be maintained by The Board Chair, the Executive Director, the Acting Executive Director Appointee, and the organization's attorney.

Information and Contact Inventory for Child Advocates of Placer County

Knowing where your organization's key information is located is critical so that if an emergency succession should occur, your organization would be able to quickly continue work in the most efficient and effective way.

(List Onsite Location / Offsite Location / Online URL)

Nonprofit Status

IRS Determination Letter:
IRS Form 1023:
Bylaws:
Mission Statement:
Board Minutes:
Corporate Seal:

Financial Information

Employer Identification Number (EIN) #: _____

Current and previous Form 990s _____ _____ _____

Current and previous audited financial statements _____ _____ _____

Financial Statements (if not part of the computer system and regularly backed-up) _____ _____ _____

State or District Sales-Tax Exemption Certificate _____ _____ _____

Blank Checks _____ _____ _____

Computer passwords _____ _____ _____

Donor Records _____ _____ _____

Client Records _____ _____ _____

Vendor Records _____ _____ _____

Volunteer Records* _____ _____ _____

Auditor

Name:_____

Phone Number/Email:_____

Bank

Name(s):_____

Account Numbers:_____

Branch Representative(s):_____

Phone Number:_____

Fax:_____

Email:_____

Investments

Financial Planner / Broker Company_____

Representative Name:_____

Phone Number:_____

Email:_____

Who is authorized to make transfers? Who is authorized to make wire transfers? Are there alternatives?

_____

_____

_____

Who are the authorized check signers?

_____

Is there an office safe? Who has the combination/keys?

_____

Legal Counsel

Attorney

Name:_____

Phone Number:_____

E-mail:_____

Human Resources Information
Onsite Location / Offsite Location / Online URL
Employee Records/ Personnel Info* _____ _____ _____
**Names, home addresses, phone numbers, email, emergency contacts, etc.*
I-9s _____ _____ _____

Payroll

Company Name:_____

Account Number:_____

Payroll Rep:_____

Phone Number:_____

Email:_____

Facilities Information
Office Lease (for renters) _____ _____

Building Management

Company Name:_____

Contact Name:_____

Phone Number/Email:_____

Office Security System

Company Name:_____

Account Number_____

Representative Phone Number/Email:_____

Broker Phone Number/Email:_____

Insurance Information

General Liability / Commercial Umbrella
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Directors & Officers Liability
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Health Insurance
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Unemployment Insurance
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Workers' Compensation
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Disability Insurance (short-term)
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Disability Insurance (long-term)
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Life Insurance
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Dental
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Long Term Care
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Retirement Plan
Company/Underwriter:_____
Policy Number_____
Representative Phone Number/Email:_____
Broker Phone Number/Email:_____

Date of Completion for Information and Contact Inventory:
_____

Name of Person Completing Document:
_____

The Emergency Succession Plan and the supporting documents (the information and contact inventory, job descriptions, and organizational charts) should be reviewed and updated annually.

Signatures of Approval, Child Advocates of Placer County

_____
Board Chair / Date

_____
Executive Director / Date

_____
Program Manager / Date

_____
Individual Selected as Acting Executive Director

_____
Acting Executive Director's Current Title Date