KERN BRIDGES YOUTH HOMES BEHAVIOR MANAGEMENT PROGRAM

updated 2/4/11



IT MUST BE NOTED NOW THAT EACH AND EVERY CHILD IS AN INDIVIDUAL AND THE CLINICAL TEAM IN CONJUNCTION WITH THE PROGRAM DIRECTOR AND, WHEN NECESSARY, THE PLACEMENT WORKER SHALL RESERVE THE RIGHT TO MODIFY CERTAIN PRIVILEGES AND RESTRICTIONS IN THE BEST INTEREST IN THE TREATMENT OF THE CHILD.

BEHAVIOR MANAGEMENT INFORMATION DISPENSING POLICY

It is the policy of Kern Bridges Youth Homes and a requirement of Title 22 that written information concerning management of resident behavior be provided to prospective residents, legal guardians, and referral agencies, prior to admission and it shall also be provided to childcare staff when they are hired. Each entity is required by Title 22 to make a signed acknowledgement that they have received copies of the policy.

Any substantive changes in behavior management policy shall be provided to those named above in writing after approval by Community Care Licensing (CCL).

ONLY TRAINED STAFF MEMBERS MAY MANAGE RESIDENT BEHAVIOR

BEHAVIOR MANAGEMENT POLICY

Behavior management techniques are to be utilized toward maximizing the growth and development of the child.

In any stable, healthy, family there are rules that govern all the members' behavior. In families these rules are rarely written because all members become aware of them through living together, in the case of children from infancy, and they are clearly understood and usually abided by.

At Kern Bridges Youth Homes we do have the opportunity to instill those ways of behavior that lead to a family-like situation. However, since we are dealing with children and staff who come from a variety of backgrounds, the rules of family life are not part of our culture unless we make a conscious effort to establish them. This must be done within a framework of caring, and if you will, love for each child as a distinct individual with distinct needs, abilities and contributions. As we establish parameters of acceptable behavior, these parameters will become a part of our culture at Kern Bridges Youth Homes and unacceptable behavior will diminish.

Because most of our children have been victims of abuse, many of their ways of operating and behaving are based on "survival techniques." It is our responsibility to show, and teach them that they can handle life without using methods that are harmful to themselves or others. Everyone, including children, is responsible for his/her

behavior. We need to help these children learn to accept responsibility for their behavior and develop means by which they can handle living with other people that is satisfying to them.

As Bettleheim says, "love is not enough," but without love, rules become punitive and self-defeating. These rules are developed with a foundation of caring, loving concern for each individual child. They define the parameters of acceptable behavior and allow for the flexibility of individual needs and developmental abilities.

Before any specific consequences are used, one should always remember to travel from the least restrictive towards the most restrictive. As a general guideline, thirteen stages of intervention, from least restrictive to most restrictive, are listed first, then the general Kern Bridges Youth Homes rules follow, those then are followed by the implementation and monitoring procedures known as the PDS.



Dear Young People, We know what you're doing.

THE KIDDIE PICK...When you're by yourself and you uninhibitedly twist your forefinger into your nostril with childlike joy and freedom. And the best part is, there's no time limit!

CAMOUFLAGED KIDDIE PICK...When, in the presence of other people, you wrap your forefinger in a tissue, then thrust it in deep and hold back the smile.

FAKE NOSE SCRATCH...When you make believe you've got an itch but you're really trolling the nostril edge for stray boogers.

MAKING A MEAL OUT OF IT... You do it so furiously, and for so long, you're probably entitled to dessert.

PICK YOUR BRAINS...Done in private, this is the one where your finger goes in so far, it passes the septum.

PICK AND SAVE...When you have to pick it quickly, just when someone looks away, and then you pocket the snot so they don't catch on to what you did.

PICK AND ROLL...No explanation needed.

PICK AND FLICK...Ditto.

PICK AND STICK...You wanted it to be a "Pick and Flick," but it stubbornly clings to your fingertip.

PAY DIRT...The kind where you remove a piece of snot so big, it improves your breathing by 90%.

STAGES OF INTERVENTION FROM LEAST RESTRICTIVE TO MOST RESTRICTIVE.

FROM Redl & Wineman

1. Planned Ignoring

• ... is the skill of an adult in sizing up surface behavior and limiting interference only to those behavioral trends which carry too heavy an intensity charge within themselves.



2. Signal Interference

 Interfering with one's bad behavior by action or verbal contact.



3. Proximity and Touch Control

- Calming down aroused excitement or stopping the aggressive outbursts which are based on anxiety by proximity or touch control.
- Proximity: closeness in space or time.
- Touch-control: physical contact.



4. Involvement In Interest Relationship

 Climatic situation were one forces the other to be involved in the situation that person is in.



5. Hypodermic Affection

 All that is needed for an ego or superego to retain control in the face of anxiety or impulse onrush is a sudden additional quantity of affection.



6. Tension-Decontamination Through Humor

 Lessening the tension the child shows when throwing temper tantrums by an act of humor.



7. Hurdle Help

 Helping one out when that person is attempting a goal and is stuck.



8. Interpretation As Interference

 The attempt to help a youngster understand the meaning of a situation he has misinterpreted, or to help him grasp his own motivation in an issue at hand.



9. Regrouping

 Simple device of a change in the group when increased intolerable problem behavior occurs.



10. Restructuring

 The abandoning of the activity pattern or life structure in which one is imbedded at the time when it has become insufficient.



11. Direct Appeal

 Interfering by an appeal to the child which would accomplish the interruption of the behavior.



12. Limitation Of Space and Tools

Limiting the use of space and tools as a prevention of further escalation.



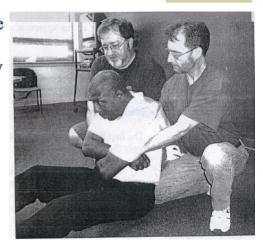
13. Antiseptic Bouncing

- "situational elimination"
- The removal of a child from a scene of conflict when in physical danger, irritation through the group psychological scene, uncheckable contagion effect, a need for a facesaving device, and limit rub-in.



14. Physical Restraint

 At time of violent rage, the act of holding the youngster down physically to remove him from a scene of danger and involvement or to prevent him from doing physical damage to others or himself.



NEVER
PRONE
RESTRAIN
UNLESS IT IS
A LIFE AND
DEATH
SITUATION!

15. Permission and "Authoritative Verbot"

- Open permission as an encourager of behavior seems to be the exact reverse of "authoritative verbot."
- Permission in order to start a piece of behavior that we want that might have been blocked.
- "Authoritative Verbot" means exactly what is says.



16. Promises And Rewards

- "Pleasure Principal"
- Technique used both for initiating and stopping behavior by means of a promise or reward.



17. Punishments And Threats Consequences Reminders

 Consequences can be effective if a child is in a state of mind to appreciate their meaning, but they don't work nearly so well if a child is not able to maintain such a state of mind.



EXPECTATIONS AND INTERVENTIONS

- 1. PROFANITY The use of profanity by the children is discouraged by always interrupting the behavior. It is important that an intervention follow the inappropriate language as the use of profanity is highly contagious in children. If vulgar language is an habitual problem for a child it will be targeted on their PDS program. Staff must also refrain from using profanity.
- **2. FIGHTING** It is extremely important that all children at Kern Bridges Youth Homes feel safe and secure. Part of this security is





knowing that other children will not be allowed to scapegoat, hit, or assault them in any way. If one child aggresses toward another child by threat or action that child shall receive a fifteen (15) If both children are minute time-out. being assaultive they both receive the time-out. It should be stressed that there are no winners, only losers, when a fight occurs. All children should receive a time-out, however, the timeout should range from two (2) minutes to fifteen (15) minutes depending on their developmental and tolerance level. In some cases, fighting is an off PDS

offense. This is deemed appropriate if blood is drawn, if the action is particularly viscous, or if the children are determined by the group home MSW to be functioning at a high enough level to know that violence is not an appropriate means to work through problems.



If you want to fight join MMA.

3. DESTRUCTION OF PROPERTY -

Children should be aware that they have to take responsibility for their actions. Intentional property damage should be dealt with according to the following guidelines: First, an attempt should be made by the child to restore the damaged property out of his/her own allowance - no more than 50% of allowance shall be required to be spent to pay for damages. If this is not feasible then a way for the child to earn money to replace or repair the damage should be found. If the child still owes for damages upon discharge the damage cost shall be waived.





4. BICYCLES - Because of the poor care many children take of bikes they borrow, children will not be allowed to borrow other children's bikes. When bikes are stored outside they should be kept clear of all entrances and exits and kept in the upright position. Staff may ride only staff bikes.

5. STAFF ROOM - No children should be allowed to be in the staff room unless accompanied by staff. STAFF ROOM MUST REMAIN LOCKED AT ALL TIMES. Youth in the FM booth must have line of sight supervision at all times. The FM booth must be locked at any time not in direct use by staff for any reason and by a child making a phone call.



6. STEALING - As a general consequence the item should be returned to the owner with an apology and, if appropriate, an explanation of why the item was taken. Compensation by the child who stole the item should be made if the item cannot be returned. This should follow the same rules as destruction of property. Also, so as to discourage stealing, the individual should receive a consequence of return to staff eyesight supervision, i.e. Level 1 privileges. Taking contraband from a child is not



considered stealing by staff. Stealing is a constant problem when the group home population includes youth who are substance abusers. It is common that substance abusers will steal anything in order to obtain money to purchase their drug of choice. All children are strongly encouraged to lock up their possessions or to ask staff to lock up their possessions. KBYH will NOT replace items stolen from youth if that item was not placed under the care of the staff. KBYH is aware that under Title 22 the youth has the RIGHT to maintain possession, except for disciplinary

reasons, of their items. With that right also comes the responsibility to keep things in a safe place. All youth should be aware that many of their peers often have stealing as a behavioral issue. With that said, KBYH staff will make a concerted effort to locate and retrieve any stolen items if possible.

Due to the constant stealing in the home KBYH will typically not purchase hand held electronics. (However, if a child is on stage 5 it is a possibility but not a guarantee.) Youth may still purchase hand held electronics but they do so at their own risk because as mentioned above KBYH will not replace stolen items.

7. RUNNING AWAY - Running away is defined as leaving the designated area without permission. Running away is defined as leaving any off grounds designated location (e.g. school, theatre, ILSP, etc.) without adult permission. If a youth is not considered to be unaware of hazards and lacking of impulse control then law enforcement will be notified after three hours of being missing and there is no reason to believe in foul play or accident of any kind. If a



youth is believed to lack hazard awareness and impulse control then authorities will be notified immediately upon discovery of them being missing. Children who lack hazard awareness and impulse control which would endanger them can be physically prevented from running away. This determination should be made by the GH Social Worker in a crisis and between the GH Social Worker and the Placement worker when not in crisis. If a child does AWOL he will lose his bicycle privileges for 1 week and will not attend any outings without supervisor approval!

Run Away Plan

A. All staff shall be trained in Crisis Counseling and Run Away protocols upon hire and at least once a year there after as part of their on-going training in Non-violent Crisis Intervention.

How to respond to runaway children.

- 1. If a resident attempts to leave the facility without permission DO NOT physically try to stop the resident unless you feel they may be an immediate risk of causing harm to themselves or others. We never touch residents except to protect the resident, another resident or ourselves from harm. The child MUST LACK HAZARD AWARENESS AND IMPULSE CONTROL in order to utilized physical prevention of running away.
- 2. If the resident remains in view provide crisis counseling with resident even if it means following the resident. If you leave the facility and follow a resident, take the group home cell phone, and report back to the group home at least every 10 minutes. If the resident gets out of the sight of the staff member the resident will be considered a runaway. If a childcare worker leaves to follow a child the remaining worker must call the Group Home Administrator/Facility Social Worker and Assistant Administrator immediately and request additional supervision.
- 3. The resident will be considered a runaway if:
- a. The resident leaves the staff's supervision and they cannot be found.
- b. The staff following a resident feel that the resident is putting them self in harms way. (If this happens you may need to call 911 on the cell phone).
- 4. Time Frames. Our agreement with the placement agency regarding contact on clients with or without a history of AWOLs and running away. If a resident under the age of 13 or a resident who has been deemed to lack hazard awareness and impulse control leaves the sight of a staff member for more than 5 minutes they are deemed a runaway. If the child is age 13 or older and does NOT lack hazard awareness or impulse control they are deemed a runaway after 3 hours.

- 5. Continuum of Intervention.
- a) Crisis counseling. (Utilize all necessary managing surface behavior techniques, especially hurdle help.)
- b) Shadow the runner and continue to attempt conversation.
- c) Once sight of the runner is lost notify authorities within time frames.
- 6. Actions to locate child. If child has a history of running to certain locations notify the location or attempt to go to the location. Ask other clients if they have been told of where the child might be headed. Ask the authorities notified to inform you of any knowledge or sighting of the child.
- 7. The training program will include:
- a. Identify and practice verbal and paraverbal techniques of crisis counseling to be implemented to prevent a resident from running away.
- b. Examine Run Away and Reporting protocols including time frames, intervention continuum, staff actions, and police involvement, reporting of the incident and contacting the placement agency.
- c. Application the material covered to "real life" situations.
- d. Rehearse therapeutic Postvention techniques to be implemented after run away has occurred, to aid the child with learning from crisis situations.
- 8. For children age 13 or older after 3 hours the Sheriff is to receive a courtesy call and the placing worker and/or parents are to receive a courtesy call. If under the age of 13 or the client lacks hazard awareness and impulse control the Sheriff should be notified as soon as it is determined that the child cannot be found, but no later than 30 minutes after running. Also, if foul play is suspected then notify the sheriff immediately.
- 9. If a resident under the age of 13 or a resident who has been deemed to lack hazard awareness and impulse control leaves the sight of a staff member for more than 30 minutes during a runaway episode contact Group Home Administrator/Facility Social Worker or GH Supervisor immediately and provide a courtesy call to the authorized representative and parents. If the child is age 13 or older and does NOT lack hazard awareness or impulse control contact the GH Supervisor immediately and the GH Administrator after 3 hours and notify the authorized representative and parent.
- 10. The runaway plan must be presented to the client and authorized representative at intake and discussed with them. They are to sign acknowledgement of the plan.

- 11. If the child has a history of running away then this needs to be indicated in the needs and services plan and treatment is to be specifically individualized with the input of the child and the authorized representative.
- 12. The child MUST LACK HAZARD AWARENESS AND IMPULSE CONTROL in order to utilized physical prevention of running away. If a resident attempts to leave the facility without permission DO NOT physically try to stop the resident unless you feel they may be an immediate risk of causing harm to themselves or others. We never touch residents except to protect the resident, another resident, or ourselves from harm.

GENERAL PROVISIONS

- 10. If a resident returns from running away or is verbally threatening to run away, staff should provide close supervision, crisis counseling, and restrict them from off grounds activities for 12 to 24 hours.
- 11. If a resident doesn't return to the facility at the scheduled time either from school or a pass call the Group Home Administrator/Facility Social Worker and Assistant Administrator. The staff shall look for the resident within the area surrounding the group home, school, bus stop etc. and call all those on the resident's phone list including the resident's placement worker asking them to inform the group home if the resident arrives there or calls.
- 12. The Administrator/Facility Social Worker or Assistant Administrator or their designee will inform the police, the placement worker and Community Care Licensing immediately whenever a resident has run away.
- 13. The staff member that witnessed or discovered that the resident ran away should complete an incident report immediately.
- 14. When the police arrive at the facility to make a runaway report
- A. Give the officer a copy of the child's picture and vital statistics (height, weight how the resident was dressed and general emotional status.) Do not give out other confidential information.
- B. Write on the incident report and in the resident's chart:
 - a. The police report number
 - b. The name of the police officer who took the report
 - c. The date and time the officer took the report
- 15. When a child has run away do not let other residents touch the child's possessions.



- **8. LITTERING** If a child is caught littering or discarding things he/she should be responsible for picking up the litter.
- 9. ROCK THROWING & STICK THROWING, FRUIT THROWING etc. If this is directed at someone or something the youth will be removed from the PDS. If it is thrown into the "wild" with no likelihood of causing damage or injury the youth shall be encouraged to develop more constructive coping skills. However, the fruit in the orchard belongs to the Farmers and throwing fruit is also stealing fruit and should be dealt with either as theft or throwing at the discretion of the FM.
- 10. WHEREABOUTS OF CHILDREN Staff are accountable for the whereabouts of the children at all times. If a child has permission to be in a certain area and leaves that area without permission, a group home restriction should ensue. Keep in mind that some areas are off limits to children at all times. Youth should be aware that regardless of their stage privileges or their age it is

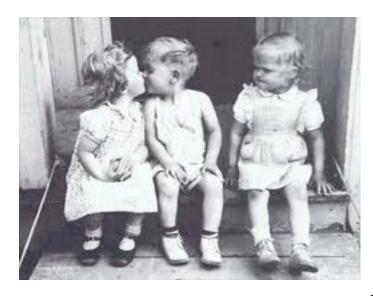


necessary for staff to know their whereabouts and it is also common courtesy to let people you live or hang with where you will be if for no other reason than safety issues.



11. SEXUAL INTERACTING OUT - A great number of our children have been sexually abused and as a result are prone to sexually interacting out. This type of behavior cannot be permitted, as it is destructive to the emotional development of the children. Usually when this happens one child is taking The former advantage of another. "victim" now becomes an "aggressor" and we have a new "victim." Children can become entrenched in these patterns of interacting with others creating life long difficulties. In addition, if we do not alter these patterns of behavior we are

seriously hampering children's chances of having successful placements when they leave Kern Bridges Youth Homes. Sexual interacting out is one behavior that most



parents, foster parents, and adoptive parents cannot tolerate.

Because of the seriousness of the situation, whenever a child is suspected of, or found engaged in sexual interacting out, the group home social worker needs to be informed. The child should be under very close supervision for at least a week and pulled off the PDS. We must remember that sexual interacting out is acting out in an aggressive manner.

Young children showing normal sexual curiosity must be redirected so that they learn such social norms, as "It's not good manners to touch one's genitals in public." This is presented in a matter of fact way to the child, avoiding escalating feelings and transmitting one's own anxiety to the child. We don't want children learning to equate their sexuality with being "nasty" or "bad."



Excessive sexual interest or curiosity on the part of any child needs to be brought to the attention of the social worker, as this may be an indication that something could be wrong.

13. **SPITTING** - If a child is caught spitting at someone, he/she should have a brief timeout and should be reminded of universal precautions issues.

14. **INTERACTING WITH WILD LIFE INCLUDING FERAL CATS AND DOGS** - This is a major safety issue both from a bite or scratch perspective and from a disease perspective and thus under health and safety it is an OFF PDS OFFENSE!



Photo courtesy of Free Range Stock Photos

RESTRICTIONS shall not interfere with scheduled activity groups during the day, therapy appointments, home visits or school.

THE PROGRESSIVE DEVELOPMENT SYSTEM

The purpose of the Progressive Development System (PDS) is to provide a framework in which treatment goals can be focused and monitored. All efforts should be made to enhance a child's ability to move forward by setting attainable, realistic goals which are stated in terms of expectations. Because of this, it is important that the PDS not be used



to discipline or punish children, and it should not replace parenting skills and good judgment. Because of our clients' experiences with failure, it is important that the PDS translate to success - no matter how small the gain.

The PDS is designed so that each child may be treated individually according to their developmental needs and capabilities. It should be noted that on any given stage, children are only given privileges which we are fairly certain they can handle. These decisions are made by the treatment team at team meetings once a week.

Children who cannot focus long enough to earn privileges may be put on a modified day at a time PDS or shorter PDS week based on one or more of many factors. (e.g. school scores, daily percentage, daily percentage on one goal etc.)

EXPECTATIONS AND PRIVILEGES OF PDS STAGES

The system consists of five stages of responsibility with added privileges and independence at each successive stage. There are no consequential or restrictive stages, only stages of growth. It should be noted that these stage privileges take into account California Law regarding PRUDENT PARENT STANDARD!

STAGE 1 - All new children for first 3 days.

All on-grounds privileges under group home staff supervision.

(e.g. video games, swimming, rec room, etc.)

Certain off-grounds activities at the discretion of the GH Supervisor.

Allowance SPENDING at supervisor discretion.

- **STAGE 2 -** Controlled independence according to their ability to develop trust in a controlled situation. No off-PDS for duration of PDS week.
 - a. Controlled independence
 - b. During Free Time be outside near group home without staff or in bedroom without staff, maximum 15 minutes. Youth must use common sense and courtesy and ask staff for privileges and inform staff of where they will be. Staff MUST use prudent parent standard in all cases. Child should not be with other children on low behavior stages unsupervised. Always be aware of contagion effect with youth who have not demonstrated self-control.
 - c. Outings with staff supervision.
 - d. Self-Management of Money**** (see certain restrictions)
- **STAGE 3** Has internalized trust in controlled situations. Expect that trust will be generalized into less controlled situations.
 - a. Negotiate bedtime up to 1/2 hour later on a school night and 1 hour later on a non-school night.
 - b. During Free Time outside ongrounds privileges without staff up to 30 minutes. Youth must use common sense and courtesy and ask staff for privileges and inform staff of where they will be. Staff must use prudent parent standard in all cases.
 - c. Contract with Supervisor for **special** wants and needs.
- **STAGE 4 -** Has exhibited trust in semi-controlled environment. Will exhibit trust within unsupervised boundaries.
 - a. Staff make bed or do chore once per week.
 - b. Front seat privileges in car if age and weight are appropriate.
 - c. During Free Time outside ongrounds privileges without staff up to 60 minutes. Youth must use common sense and courtesy and ask staff for privileges and inform staff of where they will be. Staff must use prudent parent standard in all cases.
- **STAGE 5 -** Has demonstrated good judgment and trust in independent situations.
 - a. Age appropriate independence with off grounds activities without direct staff supervision, per team decision utilizing prudent parent standard (e.g., little league, movie, shopping, etc.) During Free Time, outside ongrounds privileges without staff up to 60 minutes. Youth must use common sense and courtesy and ask staff for privileges and inform staff of where they will be. Staff must use prudent parent standard in all cases.
 - b. KBYH will pay \$50.00 monthly cell phone bill.
 - c. This is the ONLY STAGE when a child is permitted to be in another child's bedroom and the must have staff permission BEFORE entering another child's bedroom!

Children generally advance from one stage to the next by earning positive points (1's) on the "Week in Review" sheet in the following ten areas:

Week in-review

- 1. Getting along with others.
- 2. Getting along with adults.
- 3. Routines/chores.
- 4. Cleanliness of self.
- 5. Free time activity.
- 6. School.
- 7. Therapeutic goal.
- 8. Individual activity goal. (worded positively)
- 9. Individual activity goal. (worded positively)
- 10. Individual activity goal. (worded positively)

At the end of each PDS week the children will be given the opportunity to review their "Week in Review." The treatment team will evaluate the children's PDS during group home staff meetings and, as a group, will decide the stage most appropriate for each one of the children for that week. Later that same evening, the children will be told their stages during a positive and supportive cottage group meeting.

Each child should have a fairly realistic chance to reach 80% of their individual goals. If they are far below 80% or consistently missing the goal should be broken into smaller increments.

REASONS FOR REMOVAL FROM THE PDS

Generally children at Kern Bridges Youth Homes are removed from the PDS for reasons of safety. Their actions are either jeopardizing their own safety or the safety of others. Initially, time spent off the PDS should not exceed 24 hours and should not be punitive in nature. It is a time for the child to be able to demonstrate a level of trust that indicates he or she is ready to comply with program expectations.

Reasons for removal from PDS:

- 1. Running away / defined as intentionally leaving a supervised area which could create a potentially harmful situation.
- 2. Racial slurs / as determined by team.
- 3. Sexually acting out / as determined by team within Kern Bridges Youth Homes guidelines. This includes accusing someone falsely of having sexual contact at any level, e.g. kissing, propositioning, etc.
- 4. Destruction of property which can cause a potential for harm.
- 5. Physically causing (or in some cases, threatening) harm to oneself or other children.
- 6. Off grounds school suspension or zero in behavior in on-grounds school.
- 7. Refuses to physically go to therapy for more than one hour.
- 8. Any protective hold.

9. Program Refusal could result in PDS removal at worst or return to Stage 2 at best.

NOTE: If a child refuses to take his/her medication he/she will have privileges frozen until child complies or the window to assist with the administration of the medications is closed. Title 22 does not allow us to force children to take their medications but it also does not allow children to refuse their medication.

Prior to removing a child from the PDS, the Facility Manager should be consulted. Once it is determined that a child is to be removed from the system, he/she should be closely supervised and his/her activities strictly monitored until a level of trust is demonstrated which would allow the child to return to the system. Generally, during off-PDS time, a child's privileges are frozen for 60 minutes and then a return to Stage 1.

IMPORTANT: The administrative in-charge person should be notified and consulted at the end of the day when a child needs to be removed from the system. An incident report will also be written and filed. After the off-PDS time is completed, the child will then be placed on Stage 1 until reviewed in the next staff meeting.

** It is important that a child be removed from the system only for the reasons stated previously or per treatment plan, as the system is designed to be positive, not punitive. **

TIME OUT PROCEDURE

Definition: A Time-out is an interruption of a child's unacceptable behavior by removing the child from the scene of the action.

As a general rule the time-out should be two minutes. Time-outs are NEVER to exceed 15 minutes. REMEMBER, if a timeout is given then the child should be reminded that the timeout does not start until they situated quietly in the timeout area.



Never add time to a time-out.

DISCIPLINARY POLICY

It is the policy of Kern Bridges Youth Homes to employ discipline as a treatment tool to assist children to learn self-discipline. As a treatment tool, discipline must be

constructive, appropriate both to the child's age and needs, and timely. Each child's treatment plan will speak to the type of disciplinary action to be used with the child. Generally, all children who are able to handle it will be placed on the Progressive Development System. The PDS is a level system employing positive steps and reinforcement and is available for review.

Adolescents experiencing substance abuse problems have some specific rules that apply to them that do not apply to other youth. (see below)



Adolescents not experiencing substance abuse problems have some specific rules that apply to them that do not apply to other youth. (see below)



Certain aged adolescents have some specific rules that apply to them that do not apply to other youth. (see below)

Some program refusals are automatic drop to Stage 1 or 2. (see below)

Program refusals that result in automatic drops in privileges:

School Refusal (Automatic to Stage 1)

School late due to their behavior (Automatic Drop of 1 level)



Any indication of using or possessing alcohol (Automatic to Stage 1)

Any indication of using or possessing marijuana (Automatic to Stage 1)

Any indication of using or possessing anything stronger than alcohol or marijuana or other drug paraphernalia (Automatic Stage 1, Automatic Call for TDM with Placing Agent, Recommended for discharge)

Any youth who tests positive for substance abuse will not be allowed to manage more than \$5.00 of their own money at any one time. This is to prevent the purchasing of illegal substances. Positive test means anything above 0.000.

Youth that smell of tobacco or in possession of tobacco cannot advance above stage 2 that PDS week.

Any youth with substance abuse issues must attend substance abuse therapy or they cannot go above Stage 1. This includes submitting to testing at substance abuse counselors request.

Any youth aged 15 1/2 must attend ILSP classes (unless they have graduated the program (determined in conjunction with the GH Social Worker and the Placement Worker) or they cannot go above Stage 2 privileges.

Any youth aged 17 1/2 must attend State required TDM meeting regarding their imminent discharge from the system or they cannot go above stage 2.

All youth must be enrolled in some sort of outside agency activity or they will not be allowed to go above stage 2 on the PDS. Examples are YMCA, karate, cross country, Boy Scouts, Young Marines, school band, music lessons, etc. RESIDENTS CAN BE ON ANY LEVEL TO JOIN THESE GROUPS AND THE DECISION TO ALLOW A SPECIFIC ACTIVITY WILL BE MADE IN THE TREATMENT TEAM MEETING.

MONTHLY MONETARY

ALLOWANCE will be based on the level the child is on on the first day of the month. This is subject to revision and may be personalized.

Level 1 = \$10.00 per month

Level 2 = \$20.00 per month

Level 3 = \$30.00 per month (New intakes will be paid this the first

month)

Level 4 = \$40.00 per month

Level 5 = \$50.00 per month



BONUS CLOTHING ALLOWANCE

Any child who reaches level 5 and stays on level 5 for an entire month will receive a bonus allotment of \$80.00 to be spent of clothing or apparel items. This is in addition to all standard clothing allotments that every child receives.



BONUS HYGIENE ALLOWANCE

Any child maintaining level 4 or higher for 2 consecutive weeks will receive a \$10.00 bonus for special (e.g. AXE, OLD SPICE) hygiene supplies they desire.

WEEKLY RESTAURANT OUTING

All youth on stage 3 or higher and an overall PDS score for the week of 85% or higher will attend the PDS dinner outing.

BONUS Cell Phone ALLOWANCE

All residents on stage 5 for a minimum of two consecutive weeks will have their cell phone bill paid by KBYH provided have no off PDS offenses during the month. All residents are permitted by Title 22 to own a cell phone. Title 22 allows authorized representatives to deny cell phone privileges. Title 22 does not require KBYH to purchase a cell phone for residents.



The following types of discipline are strictly prohibited at Kern Bridges:

- 1. All forms of corporal punishment;
- 2. All forms of aversive stimuli (e.g. physical forces including sound, electricity, heat, cold, light, water, or noises, or substances including hot pepper or pepper sauce on the tongue), which are noxious or painful to a client;
- 3. All forms of mechanical restraints;
- 4. The use of locked rooms, or any rooms where the child cannot readily open the door;
- 5. The deprivation of visits by parents, social workers, or others unless specified in the treatment plan and approved by the placing workers;
- 6. Deprivation of food, including scheduled snacks.
- 7. Deprivation of telephone calls or mail unless specified in the treatment plan and approved by the placing workers.
- 8. Humiliation, intimidation, ridicule, coercion, threat, mental abuse, or other

actions of a punitive nature, including but not limited to: interference with the daily living functions or withholding of shelter, clothing, medication or aids to physical functioning;

Symptomatic behavior, such as thumb sucking, enuresis, and encopresis, shall be handled as specified in the child's treatment plan.

STABILIZATION SERVICES POLICY

A. CRISIS INTERVENTION PROCEDURE:

- Group home staff shall notify the administrative person in-charge (generally the shift supervisor) of the nature of the crisis.
- After being advised of the crisis, the in-charge person shall advise on a plan of action.
- Administrative person in-charge shall attempt to speak to child in person or via the telephone if necessary.
- Administrative person in-charge shall meet face to face with child and arrange for appropriate supervision until crisis has passed.
- Administrative person in-charge shall attempt to notify administrator on call and child's Kern Bridges Youth Homes Social Worker and therapist of the nature of the crisis if immediate referral to another facility is necessitated.
- Kern Bridges Youth Homes Social worker shall contact child's county social worker and formulate a plan of action.
- **B.** Administrative person in-charge shall have a beeper and be available 24 hours a day, seven days a week.
- **C.** Should Kern Bridges Youth Homes be asked to receive a child on a crisis basis all standard policies and procedures regarding intake shall be effected as soon as possible.
- Should a child need crisis medical services either an EMT will be called or the child will be transported by staff to Kern Medical Center.
- Should the crisis warrant the involvement of law enforcement, the administrative person in-charge shall contact the Kern County Sheriff.
- Should the crisis involve school personnel, a decision will be made by the child's teacher, principal and group home social worker.

PHYSICAL RESTRAINT POLICY

It is the policy of Kern Bridges Youth Homes that:

- 1. Protective holds shall be used only after less intrusive interventions have failed or when failure to restrain a resident would result in harm to the resident or others.
- 2. Only trained staff members shall use protective holds on a child.
- 3. The protective hold shall be only that which is minimally necessary to protect the resident or others.

EXAMPLE: When assessing whether to use protective hold with residents who are attempting to run away, it is necessary to consider both the environmental conditions and the resident's capabilities. Protective hold may be used only when an assessment determines that harm is likely. Capabilities to assess include, but are not limited to: the resident's age, maturational level, emotional state, adaptive behavior skills, disabilities, past behavior when under stress, impulsiveness, and judgment. Environmental factors to assess include, but are not necessarily limited to: the time of day, weather, temperatures, and geographical location.

- 4. The MAB technique shall be the only protective hold methods used.
- 5. An incident report shall be written after any and all holds.
- 6. All childcare staff shall be trained in this policy and the M.A.B. technique within seven days of employment and prior to assuming sole responsibility for the supervision of one or more residents.

MANAGING INAPPROPRIATE AND/OR DANGEROUS BEHAVIORS POLICY

MANAGEMENT OF ASSAULTIVE BEHAVIOR

Physical involvement with acting out children should have two major objectives: assuring the physical safety of both the child and the adult caretaker, and enabling the child to regain control in a learning way. Physical involvement is a technique of last resort, yet there are some situations in which it may be necessary:

To promote the physical safety of a child. If a child's behavior is so self-destructive as to be dangerous, external limits must be set to maintain a positive and safe environment.

To promote the physical safety of adults and other children. It is unacceptable to become physically involved simply because one's status or authority is threatened. The adult must remain objective and intervene physically only to promote safety.

To prevent or end the destruction of property which could lead to a dangerous situation.

If a child needs to be in a protective hold to insure his/her or another's safety the MAB hold shall be used. All staff shall be certified through MAB (Managing Aggressive Behavior) training.

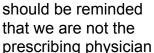
To de-escalate a potentially dangerous situation. This is not defined by acting out destructive or harmful behavior, but is rather a preventive measure to keep a situation from getting out of control. A child, who poses a serious threat to be harmful to the group, may be physically escorted by the forearm if s/he refuses to de-escalate or leave on his/her own. If, however, a child does not pose a threat, but is simply refusing a time-out or request no physical intervention shall be used.

SPECIAL SITUATIONS

Medication Issues



You cannot force a child to take medication. However, under Title 22 a child is not allowed to refuse medications. Since we are not physicians we must do the following. When a child refuse medications the child







and therefore cannot authorize for him to skip his medication. You should encourage the child to the take the medication and offer to schedule an appointment with his doctor so he can discuss his reason for not wanting to take the medication. Regardless, You CANNOT force the child to take medication. However, you can remind the children that their privileges will be frozen for not following doctors orders. Once out of the administration window the child will return to his regular status. The medication order should have instructions as to what to do if a child refuses medication. Those instructions will be followed and an incident report will be written. If orders are missing contact doctor or supervisor immediately.

FOOD ISSUES



Refusal to eat. No child can be forced to eat. If a child refuses to eat make a note of it in the daily log. Try to determine if this is a particular dislike or if something else is going with the child such as loss of appetite, illness, already full, etc.







Snacks must be available between meals for all youth 24-7 (Title 22 Regulation). KBYH provides fruits and vegetables between meals for the children. If the child has bought his own snacks then he may have those snacks whenever he desires. Staff will make healthy suggestions and recommendations but never refuse a child a snack. If a child has an eating problem or disorder he should be referred to his pediatrician.



Seconds. Children are permitted seconds and thirds provided they have eaten all the food groups originally presented at the beginning of the meals. Only a doctor can establish restrictions.

