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Welcome CSLL - ABA Families!

We are very happy to be working with your child and family and appreciate the trust you have placed in our ABA therapy team to provide a high-quality learning program for your child.

We look forward to the opportunity to promote positive behavior change through teaching increased skills, interaction, independence, and participation with those around them.

This handbook is designed to provide you with important program and policy information. Please review this information carefully and use it as a resource regarding services provided at CSLL-ABA Center.

If you have any questions regarding the information in this handbook or services provided, please see the communication information enclosed, and/or contact Chelsey Oleson, BCBA, EIDBI Coordinator: 651-739-2300, chelsey@csllinc.com

Thank you,

Your CSLL-EIDBI ABA Team



CSLL MISSION

We are dedicated to foster and expand communication, learning, movement, and functional skills. We support individuals and families by providing compassionate best practices education and advocacy.

CSLL honors and upholds the practice of non-discrimination in all its activities, operations, and provisions, and for any reason, including race, color, religion, creed, gender, gender expression, age, national origin, disability, marital status, sexual orientation, or military status.

HIPPA/PRIVACY:

CSLL is governed by HIPPA laws and maintains confidential files on all registered clients. Records concerning your child are confidential and accessible ONLY to you, the therapists, CSLL and EIDBI staff and DHS - as needed. Information will not be shared or released to anyone else without your written permission.

PROGRAM COMMUNICATION

- We encourage all questions and concerns regarding your child's development and home or community issues.
- Ongoing communication with the treatment team is vital to a well-functioning program and your child's success. We are happy to set up a regular, preferred communication schedule.
- Your thoughts regarding your child's treatment and program plan are important to us. Please questions or concerns to any of the staff members listed so we may facilitate changes and meet your needs as soon as possible.
- If you are interested in additional daily information (e.g., meal information, toileting data, etc.) or more frequent progress updates, please communicate this to the treatment team and we will accommodate.
- <u>Please save program numbers and emails</u> and contact us with ANY change to your child's schedule, questions, or change(s) to your information.

Office Phone Number: 651-739-2300

Chelsev (BCBA-EIDBI Coordinator): chelsev@csllinc.com

Katlyn (Program Supervisor): katlyn@csllinc.com

Margaret (Program Supervisor): margaret@csllinc.com

Aspen (Clinic Supervisor): aspen@csllinc.com Marcy (Business Administrator): office@csllinc.com



CSLL ABA PROGRAM SCHEDULE

- CSLL-ABA Clinic is open Monday-Friday 8:00am-3:30pm
- <u>Note</u>: Your child's recommended therapy days/hours may vary depending on the Medical Necessity and Treatment Plan reports.
- Holiday hours will be shared and posted throughout the year.
- <u>Severe Weather:</u> CSLL follows the Oakdale/Washington County guidelines for weather and other related information. Weather related or emergency closings will be communicated to parents as they become available.

EIDBI-ABA PROGRAM INFORMATION

Center for Speech, Language and Learning, Inc. is pleased to offer an EIDBI – ABA Program! The **E**arly Intensive **D**evelopmental and **B**ehavioral Intervention program is designed to offer comprehensive support and medically necessary treatment for individuals through age 21, with autism spectrum disorder, (ASD) <u>and related conditions</u>. ***

In addition, the benefit is intended to:

- Provide 1:1 therapy & individualized treatment and support for each client.
- Promote independence and participation in family, school and community life.
- Improve long-term outcomes and quality of life for every client.
- Educate, train and support program parents, caregivers and family.

<u>Program Description</u>

Applied Behavior Analysis (ABA) is the approved EIDBI treatment modality CSLL's behavior therapists and supervisor(s) are qualified to provide. ABA is an evidence-based therapy known to be the best treatment for autism spectrum disorder (ASD) and can be used to teach skills to individuals with other disorders that result in developmental delays and skill deficits.

The methods of ABA can be applied by breaking down skills into simpler steps, using intensive teaching procedures to reduce the likelihood errors will occur in the future, and continually teaching in the natural environment. Skills are taught with the use of prompting to assist learning until those prompts can be faded out for client independence.

A correct response to a new skill is followed by reinforcement which increases the frequency of the skill occurring in the future. Alternative behaviors are taught to replace maladaptive behaviors, with reinforcement being used to increase the future frequency of the alternative behavior and ensuring no reinforcement is provided for the maladaptive behavior.

^{***}Please see our website for more information: https://csllinc.com/.



<u>Program Description (cont.)</u>

ABA is used to change or improve specific behaviors, including:

Increase and develop:

- Language/Communication Skills
- Functional living skills (toilet training, handwashing, dressing, etc.)
- Social skills
- Motor skills
- Listener responding skills
- Visual skills
- Educational skills (math, reading, writing, etc.)
- Vocational skills (skills necessary for transitioning to a work position)

Decreasing problem behaviors:

- Tantrums (screaming, crying, stomping, flopping, etc.)
- Aggression (hitting, kicking, biting, etc.)
- Eloping
- Spitting
- Non-compliance
- Mouthing (excessive touching of items to the mouth or in the mouth)
- Scripting/Vocal Stereotypy (repetitive vocalizations that interfere with day-today)
- Stimming/Motor Stereotypy (repetitive movements that interfere with day-today)

The ABA methods used at CSLL were designed to assist in the retention of skills over time, as well as increase the likelihood the individuals we serve will use those skills in different settings (school, home, community, etc.).

It is important to understand that the development of these skills and behaviors can take time and celebrating the milestones will greatly benefit your child! The long-term goals will continually be worked on with your collaboration and approval.



PROGRAM STAFF - Who is working with my child?

Behavior Therapists

Behavior Therapists work 1-on-1 with your child daily.

CSLL employs Behaviors Therapists that are Level I and Level II EIDBI Providers.

Level I Providers have:

- at least 2000 hours of clinical experience and training working with individuals with ASD or similar conditions AND/OR
- have completed or are currently enrolled in a master's program related to the field.

<u>Level II Providers</u> have:

- at least 1000 hours of clinical experience and training working with individuals with ASD or similar conditions AND/OR
- have completed or are currently enrolled in a bachelor's program related to the field.

Behavior Therapists receive specific EIDBI training provided by the Department of Human Services (DHS). They also receive specific training on the principles and procedures of ABA and ongoing clinical supervision by a Board-Certified Behavior Analyst (BCBA) and/or a Board-Certified Assistant Behavior Analyst (BCBA).

Program Supervisors

Program Supervisors are Level 1 Providers who oversee daily program implementation and staff training. They work closely with the Behavior Analyst in ensuring effective treatment procedures are in place for each client. Program Supervisors may conduct Family Skills Training, which is recommended at minimum once a month.

Behavior Analyst (BCBA or BCaBA)

A Behavior Analyst is a Level 1 Provider with specialized education and board certification in ABA. The Behavior Analyst oversees individualized treatment plans and program implementation. The Behavior Analyst works to gain a better understanding of the family's goals for their child and to make a person and family-centered treatment plan. The Behavior Analyst will work directly with the client at minimum once a week and communicate with parents on a continual basis. The Behavior Analyst will conduct Family Skills Training and facilitate the development and use of skills across environments.



Program Staff (cont.)

Qualified Supervising Professional (QSP)

The QSP's role is to ensure the treatment plan for each client takes into consideration the person's and family's values, goals, preferences, culture and language. The QSP is responsible for approving all treatment plans and reviewing treatment documentation to ensure compliance and fidelity. The QSP observes clients during assessment and treatment plan development, throughout services, and for treatment plan updates.

QSPs are either a physician, advanced practice registered nurse, developmental or behavioral pediatrician or licensed mental health professional and have:

- at least 2000 hours of clinical experience and/or training in the examination and/or treatment of people with ASD or a related condition AND/OR
- Completed the equivalent in graduate-level coursework for ASD or related condition diagnostics, treatment strategies, or child development.

Comprehensive Multi-Disciplinary Evaluation (CMDE) Provider

The CMDE Provider's role is to determine medical necessity for EIDBI services and to recommend treatment intensity and weekly service hours. The CMDE Provider meets with parents/caregivers to gather a medical and behavioral history of the client and overall background information on the family. The CMDE Provider will observe the client prior to the start of services and may conduct additional assessments to determine medical necessity. A report is completed once a year.

CMDE Providers must:

- Be either
 - A licensed physician, advanced practice registered nurse or mental health professional
 - A mental health practitioner who meets the requirements of a clinical trainee AND
- Have either
 - At least 2000 hours of clinical experience in the evaluation and treatment of people with ASD and/or related conditions
 - Completed the equivalent in graduate-level coursework for ASD or related condition diagnostics, treatment strategies, or child development.

CSLL's QSP and CMDE Provider is Julia Conkel Ziebell, PhD, LP, a Clinical Psychologist with experience in neurodevelopmental disorders, neuropsychological assessments, and Fetal Alcohol Spectrum Disorders.



ADMISSION INFORMATION

Before your child is enrolled, four pre-admission steps must be completed.

1. The following forms completed and returned to the CSLL office.

CSLL Enrollment packet including:

Welcome Letter
Service Agreement
Insurance Benefits form
Consent Form
Registration Form
History Form
HIPPA - Notice of Privacy practices
Authorization to Disclose / Release information

- <u>Signed</u> Receipt of CSLL Parent Handbook
- Signed Health/Illness Policy
- Signed Attendance Policy
- <u>Signed</u> Transportation Release Form
- Signed Completed Immunizations Records FORM
- <u>Signed</u> Permission to Administer Medications Form (if necessary)
- 2. An initial parent interview will be scheduled with the CMDE Provider, QSP, and Behavior Analyst. The interview will help the providers understand the needs of your child, your desires for your child's development, and will allow you to ask any questions about the program. This meeting will be scheduled at a mutually convenient time and will last approximately 1-hour in duration.
- 3. An initial assessment of your child's current developmental level and learning needs will be conducted. The primary assessment tool used for CSLL's EIDBI program is the Verbal Behavior Milestones Assessment and Placement Program (VB-MAPP). This tool breaks language and related skills down into 16 different skill areas and helps identify how a child might communicate. Other assessments may be used depending on your child's needs and will be discussed with you prior to the assessment.

Note: The assessment will be scheduled with the Behavior Analyst and your child and will occur at the center. Initial assessments are scheduled for a 2-hour duration. It is recommended that parents are not present during the assessment so the Behavior Analyst can best assess how your child will perform at the center. The Behavior Analyst will meet with you briefly after the assessment to let you know how everything went. It is possible that the Behavior Analyst will request additional time to complete the assessment, which can be scheduled at a future date. Following the finalization of the assessment, a report will be completed and discussed with you.



Admission Information (cont.)

4. A CMDE Report and Initial Treatment Plan (ITP) will be completed by using the information provided by you and the assessments conducted with your child. Once completed, these reports will be reviewed with you and will require signatures of approval. In addition to signing these documents, DHS-EIDBI documents "Client Rights and Responsibilities" and "Provider Responsibilities" will be reviewed and signed.

After the 4-step process is completed, a start-date acceptable to both your family and the program will be scheduled.

CROSS-DISCIPLINE COLLABORATION

If your child receives services from multiple locations, including attending a school, and you would like the members of each team to have a formal collaboration meeting, please notify CSLL.

A Coordinated Care Conference can be arranged prior to the start of services, every 6 months during formal progress monitoring updates, and for transition planning. Included in the coordinated care conference would be the client's parent(s)/guardian(s), the CMDE/QSP, Behavior Analyst, and at least two other providers from different specialties outside of EIDBI (e.g., speech therapist, occupational therapist, teacher, doctor, IEP manager, school psychologist, etc.). Please note that coordinated care conferences cannot occur on days that your child receives other EIDBI services.

If your child receives speech and/or occupational therapy at CSLL, the EIDBI-ABA team will continually collaborate with those professionals to ensure the needs of your child are met and treatment is consistent.

For professionals who work with your child outside of CSLL, please complete the Authorization to Disclose / Release of Information form for us to communicate with those providers throughout your child's treatment.



ATTENDANCE POLICY

Consistent attendance is critical for your child's success. Our team of providers work hard to build a good relationship with each client, which creates the foundation of trust and respect needed to provide and follow through on instructions given to them. While the therapeutic relationship needs continuous attention, frequent absences can cause undue strain on the relationship and require more focus for rebuilding. This rebuilding time, what we call "pairing," can take time away from learning.

Arrival and Departure:

It is important that your child be dropped-off and picked-up at their designated time, each day. If you are running late for pick-up or drop-off, you must notify CSLL as soon as possible so we can ensure we have staff available.

If your child is sick:

<u>CSLL must be notified</u> the night before or by 7am the morning of the scheduled therapy day. All sick days will be included in the total number of missed therapy days.

Additional Absence:

<u>CSLL must be notified</u> of any planned absences as soon as they are scheduled and no later than 24 hours in advance of the scheduled therapy day (i.e., doctor's appointments, vacations, etc.).

Full-day, planned absences will be included in the total number of missed therapy days. Partial-day, planned absences will not be counted against the client (attends 3+ hours for the day).

CSLL's EIDBI Attendance Policy requires 92% attendance of scheduled sessions in a 180-day contract.

For our full-time clients scheduled Monday through Friday, this allows for 10 absences in a 180-day contract (approximately 125 therapy days, excluding weekends and holidays). An absence is considered missing a full day of therapy.

Any full-day absences will be included in the total number of missed therapy days.

If your child's absences are approaching the total number allowed in the contract period, or if a pattern of late arrivals arises, the team will schedule a meeting with the family to address improving scheduled attendance. Exceeding the total number of allowed absences in the contract period may result in discontinuation of services.



DISCONTINUATION OF SERVICES

Each client will have their own discharge criteria written in their Individual Treatment Plan (ITP), based upon the assessments used to determine developmental skills and progress, as well as their age and transition opportunities. Most clients will be recommended for discharge into the school system when they demonstrate the milestones within the VB-MAPP, demonstrate independent self-care for activities of daily living, and the necessary educational, social and behavioral skills. If a different service is determined more appropriate at that time, or a transition to school with a therapist and/or attending half days of school is determined more appropriate, communication and arrangements will be made with the family and the school or other servicing facility. The transition period is not to exceed 30 days based upon the needs of the client and their family. The family will be involved in any planning to ensure a swift transition and to ensure that they agree progress has been made across settings (at the clinic and in the home).

Other criteria for discharge include:

- The client not benefiting from services
- The client being harmed by continued services
- Parental request for discontinuation of services (a 30-day written notice is required)
- The client has a change in diagnosis that no longer falls under EIDBI funding
- An injury, illness, or a new diagnosis is presented that requires a different form of treatment incompatible with daily EIDBI ABA service

Please see your child's ITP for specific information on transition planning and discharge criteria.

Parental Request for Discontinuation of Services

If you request discontinuation of services prior to the end of the contract period, CSLL requires a 30-day notice. This notice allows the treatment team the time to update progress reports on your child, prepare a detailed transition plan, and work with the family on transitioning to the next setting. CSLL cannot guarantee fully updated reports or assistance with transitioning without a 30-day notice.



HEALTH/ILLNESS POLICY

Children have maturing immune systems and are often near one another, in centers, classrooms, and during transportation. This makes the transmission of contagious diseases particularly easy and a reason these are common in children.

Contagious disease is often caused by the spread of bacteria (such as in scarlet fever) or viruses (such as in chickenpox, measles, hand-foot-and-mouth disease, and quite a few others) in droplets of saliva and mucus, especially when coughing or sneezing.

Contagious disease may also occur by coming in close personal contact with another infected person or even by sharing personal items of an infected person, as in the case with infestation caused by insects (such as with lice and scabies) or a fungal infection (such as in tinea infections, commonly called "ringworm").

The health and safety of students and staff is paramount. As each student arrives, your child's therapist will perform a temperature and fact check to determine potential illness. If an illness is present or develops during the day – you will be contacted by your child's therapist.

<u>Clients with symptoms listed below or a suspected contagious illness MUST be excluded from the CSLL – EIDBI program</u> until checked by a doctor and/or clear of illness. Return to the program may occur with a clear health determination note provided by a health care official.

- Fever (without medication) over 100.0 degrees within 24-hours
- Vomiting within 24-hours
- Unexplained rash
- Sore throat/swollen glands, severe cough, eye discharge, yellow skin or eyes, or the individual is irritable, uncomfortable and/or continuously crying or requires more attention than program is able to provide.
- COVID-19
- Hand-Foot-Mouth Fifth Disease (Erythema Infectiosum) ...
- Roseola (Sixth Disease) ...
- Measles (Rubeola) ...
- Chickenpox (Varicella) ...
- Scarlet Fever
- German Measles (Rubella) ...
- Scabies (Pediatric) ...
- Pink Eye (Conjunctivitis)
- Strep Throat (Streptococcal Pharyngitis)
- Ringworm
- Lice



SAFETY POLICIES

All CSLL staff work together to ensure safety is a #1 priority at all times. Your child will always be under the direct supervision of at least one staff member. If your child has an injury, you will be notified according to your health care directive. In an emergency, 911 is contacted and then the parent/emergency number is called.

Medication Administration:

ALL medication must be in its original packaging with instructions included.

A "Permission to Administer Medication" form must be completed with instructions and signed by a parent / guardian for ALL prescription and over-the-counter medication.

Incident Reports:

Client incident reports are completed every time an event occurs that leads to injury or the possibility of injury. In the report, a description of the event will be written, including where the incident occurred, what the client and therapist were doing at the time of the incident, the type of injury or illness (type, location, size, etc.), and how the therapist responded (i.e., first aid). Parents will be notified of incidents in person, via their preferred method of communication, and/or a copy of the incident report will be sent home. In addition to documenting incidents that occur at the center, any injuries noticed upon arrival at the center that have not been previously noted will be recorded. If your child receives an injury at home, please notify the center (such as cuts, bruises and bumps) so we have an accurate report and can also continue to treat the affected area when needed.

Outside Play:

While CSLL does not have a designated outside play area, we do utilize the space behind the building to play outdoor games during nice weather. If your child is interested in playing outside (bubbles, chalk, bike riding, etc.) while other clients are not, there will be two staff assigned to them while outside.

Field Trips:

Parents/Guardians/Families will be contacted and notified in advance of ANY/ALL program related field trips. Signed Permission forms will be required before a child will be able to participate in a planned field trip.



BEHAVIOR GUIDANCE & PROBLEM BEHAVIOR RESPONSE

CSLL EIDBI staff respond to problem behavior based on the function (reason) for the problem behavior. Staff are trained to identify the function of the problem behavior and can work with the family on identifying the function of problem behavior in the home, as well. Please see the chart on the next page.

<u>Corporal punishment is prohibited</u>. Your child will not be subject to any physical punishment including, but not limited to rough handling, shoving, hair pulling, ear pulling, shaking, slapping, kicking, biting, pinching, hitting, or spanking.

Your child will not be subject to emotional abuse including, but not limited to ostracism, shaming, using derogatory language related to the child and/or their family, or using language that threatens, humiliates, or frightens the child.

Basic necessities (food, water, clothing, medical care, shelter) will never be withheld from your child.

Manual restraints are prohibited under EIDBI policy, except in the event of an emergency to keep your child or other children from injury.

Trained EIDBI staff may use transportation techniques to move your child from point A to point B with your approval. This can assist with the reduction of problem behavior and/or reduce the chance of harm (flopping to the ground in the bathroom where there is hard tile and sharp corners).

While CSLL is a reinforcement-based facility, there are instances in which reinforcement alone is not effective for reducing and replacing problem behavior. In that case, a punishment procedure may be recommended. In ABA, punishment is the addition or removal of a stimulus that decreases the future frequency of a behavior. For example, if a child is frequently biting when they play iPad and other procedures are not working to reduce this behavior, we might recommend removing the iPad (remove stimulus, decrease biting); **OR** if a child frequently throws their toys on the ground we might recommend restitutional overcorrection, a procedure in which they restore the environment back to its original state plus make it better than it was before, such as pick up their toys and then also clean the tables or vacuum the floor (add stimulus, reduce throwing toys). Punishment will always be used alongside reinforcement. A goal to systematically fade out the punishment procedure will always be included in the intervention plan.

Note: Your child will not be subject to punishment without prior, written approval.

Specific protocols (not listed below) for your child will be discussed with you and approved prior to implementation. If a Behavior Intervention Plan is required, this will be written and reviewed in depth with you.



Antecedent	Functional Definition (Reason)	Consequence (Response)
Interrupt Activity/ Transition	When the client is interrupted from a preferred item/activity and a demand	Block access to the preferred item/activity and guide the client to
	is placed to transition to something else, they emit problem behavior due to a history of maintaining access to	comply with the demand.
	the item/activity and avoiding the demand following the problem behavior.	
Told No (Denied Access)	When the client is denied access to an item/activity after an appropriate declaration of motivation (i.e., mand), they emit problem behavior due to a history of gaining access to the denied item/activity following the problem behavior.	Block access to the desired item/activity. Redirect to something else if possible and/or wait out the behavior.
Demands	When the client is presented with a demand, they emit problem behavior due to a history of the removal or delay of the demand following the problem behavior.	Guide the client to comply with the demand.
Wants Something – Can't Have	When the client wants something, they emit problem behavior due to a history of gaining access to the desired item/activity following the problem behavior.	Can't Have (item/activity is unavailable): Block access to the desired item/activity. Redirect to something else if possible and/or wait out the behavior.
Wants Something – Can Have	When the client wants something, they emit problem behavior due to a history of gaining access to the desired item/activity following the problem behavior.	Can Have (provider is willing to give the item/activity): Therapist will respond with a "count and mand." They will use a stern tone to tell the client "There is no (problem behavior)." The therapist will count to 5 (visibly and vocally). If no problem behavior occurs during the count, then the therapist will prompt the mand and differentially reinforce (give them a little amount of what they wanted, not a lot). If the client emits problem behavior during the count, the count gets restarted until they can make it 5 seconds without problem behavior.



FAMILY SKILLS TRAINING

CSLL encourages parents/family members to participate in their child's treatment. We recommend a minimum of one Family Skills Training (FST) a month. FST is conducted by the Behavior Analyst and/or Program Supervisors. This time is designated to work with the parent(s) and child together and can also include siblings and other family members. FST is best conducted at the center during therapy hours or in the home and is between 1 and 3 hours in duration. The treatment team will do their best to accommodate the family's schedule to incorporate FST. If regular business hours do not work for your family, a telemedicine FST can be utilized. Please keep in mind that telemedicine is more difficult to conduct, as the client may not be able to attend to the camera for long durations of time and it limits the providers' ability to model and instruct family members on how to engage. FST via telemedicine is limited to 1 hour in duration.

If at any time you would like to visit the center to observe your child, please schedule this with the treatment team so we can follow all HIPPA regulations for your visit.

MEALS/NUTRITION

Please notify CSLL of any allergies.

CSLL provides lunch for all clients who attend the center full days. Breakfast and snacks are optional and can be provided when requested by the parent and/or when the client shows signs of being hungry.

Our lunch menu follows public school guidelines for a balanced and nutritious meal, including a protein, vegetable, fruit, and milk. This menu can be provided to you prior to your child starting services.

If your child is a picky eater, you may be interested in our Expansion of Foods Program, which systematically increases a child's interaction with and ultimately consumption of new foods. This program helps to ensure your child is getting the nutrients they need. We recommend sending in small portions of preferred foods to aid in the success of this program. More information will be provided to parents who choose this program for their child.

Birthday Celebrations

At your discretion, the ABA program would like to celebrate your child's birthday. As preferred, on the designated day, you can provide at least 20 nutritionally based snack pieces. This will allow for ALL children and staff to participate in your child's birthday celebration. We will sing "Happy Birthday" and share a special treat together!



PROGRAM SUPPLIES

On your child's first day, please send in the following items to remain at the center:

- A water bottle
- 3 extra outfits (shirt, pants, underwear, socks, etc.)
- A toothbrush and toothpaste
- Lotion and/or Vaseline (if desired)
- An extra pair of shoes (tennis shoes or slip-on shoes to wear around the center)
- Any additional items preferred

If your child is not toilet trained, please also send in:

- Diapers/pullups
- Wipes
- Diaper rash cream
- Any additional items preferred

All personal belongings should be labeled with your child's name or initials.

Staff will update you when we are running low on items that need replaced.

EMERGENCY PLANS

In the event of a **FIRE**:

Look to your nearest exit door, gather your client and exit out the **NEAREST EXIT DOOR.** <u>DO NOT MAKE A CALL FROM INSIDE THE BUILDING</u> – BRING your phone outside to safety. We will ALL gather outdoors (south end of the building), at the Lutheran Church/door.

In the event of a **WEATHER** emergency:

<u>Immediately</u> gather in the central hallway (509) located on the map. Further directions will be provided there, depending on the type of weather emergency. We will stay in the central safe area until the weather emergency has been cleared.

In the event of an **IMMINENT THREAT** to life:

Immediately gather in the central hallway (509) located on the map. Both the bathrooms (510 and 511), room (507) and other surrounding / alternate rooms have <u>locked access</u>, with NO windows. At the time we gather, we will determine where staff and any clients are able to remain in a locked room until the threat has been cleared.

FIRE / TORNADO / EMERGENCY Practice Drills

Practice drills are conducted monthly, according to the season.

ALL staff and children participate in practice drills following policies and procedures in case of an actual fire, tornado or emergency.



HELPFUL RESOURCES / PHONE NUMBERS

Washington County	Ramsey County
CPS: 651-430-6457	CPS: 651-226-4500
Crisis Line: 651-777-5222	Crisis Line: 651-226-7878
Anoka County	Hennepin County
CPS: 763-324-1440	CPS: 612-348-3552
Crisis Line: 763-755-3801	Crisis line: 612-348-2233
Dakota County	Scott County
CPS: 952-891-7459	CPS: 952-496-8959
Crisis Line: 952-891-7171	Crisis Line: 952-496-8481

Emergency: 911

First Call for HELP: 2-1-1

Non-Emergency Oakdale Police: 651-439-9381

National Suicide Prevention Hotline: 1-800-273-TALK

<u>Domestic Violence Crisis Line</u>: East Metro-641-770-0777

West Metro-612-825-0000

Poison Control: 1-800-222-1222

American Red Cross (local): 651-439-0031

Crisis Connection: 612-379-6363

Confidential phone counseling and referral

National Run-away Hotline: 1-800-786-2929

Washington County Emergency Social Services: 651-291-6795



Parent /Guardian Signature: _____ Preceived a copy of the CSLL-EIDBI PARENT HANDBOOK _____ I've read the CSLL-EIDBI Parent Handbook and had the opportunity to ask questions and received answers related to the CSLL-EIDBI Parent Handbook. Parent /Guardian Name / Print: Date: