YOUTH / CLIENT HANDBOOK



Updated 3/29/22

Whitehall Psychiatric Residential Treatment Facilities

YOUTH'S RIGHTS

- 1. You have the right to receive care in a dignity-preserving, safe environment, free from all forms of abuse, neglect, harassment or mistreatment, including misappropriation of your money and personal property.
- 2. You have the right to be informed prior to or at the time of admission or during stay at facility of charges for care, treatment or related charges.
- 3. You have the right to be informed in advance about care and treatment and any changes in care and treatment that may affect your well-being.
- 4. You have the right to be free of physical punishment
- 5. You have the right to be free of involuntary treatment, unless you have been involuntarily committed by appropriate court order.
- 6. You have the right to make decisions about your care, including the right to refuse treatment. If you do refuse treatment, your refusal may be overruled.
- 7. If you are a voluntary patient and refuse treatment, the hospital may discharge you. The hospital will provide a mechanism to insure that you and your family is involved in patient care decisions.
- 8. You have the right to be free from arbitrary transfer or discharge.
- 9. You have the right to receive considerate, respectful and compassionate care regardless of race, religion, disability, national origin, age, sexual orientation, gender identity, culture, or personal values/beliefs.
- 10. You may have things you need for personal care, recreation, or other personal needs. The hospital will take away items that are not permitted on State Property, or considered contraband. The hospital may also forbid items which are too large or too valuable for the reasonable storage.
- 11. You may send and receive mail without anyone reading it first. You may talk in private to other people, either face-to-face or by telephone.
- 12. You have the right to receive visitors as long as this does not infringe upon the rights and safety of other patients and is consistent with individualized service plans.
- 13. You may make decisions for yourself unless someone else has been legally appointed to do so.
- 14. You have the right to participate in ethical questions that arise during your hospitalization.
- 15. You have the right to be free from restraint and seclusion. Restraint and seclusion will only be used to keep you or others safe from harm.
- 16. All records about your care will be private. Only persons involved in your treatment are permitted to read your record. You must give your permission for anyone else to see your record. You must give your permission for anyone else to see your record. You have the right to review your record if it is determined to be appropriate by your Treatment Team and attending Physician.
- 17. You have the right to examine results of the most recent survey of the facility conducted by representatives of the Department.
- 18. You will be paid for any work that you do for this hospital. Work does not include cleaning your room, job training, volunteer activities, or going to therapy and therapeutic activities.
- 19. You may be given the opportunity for religious worship.
- 20. The staff will help you vote the way you wish.

- 21. You have the right to make a written or verbal complaint. This must be done within 30 days for the wrong you are complaining. You get forms for making complaints in the holder by the locked box. Put the completed forms in the box. Verbal complaints may be made by talking with the Program Director, Program Manager, LRC Recovery Specialist or calling the office.
- 22. You have the right to a clinical assessment of your nutritional needs/risks and to expect drug/food interactions to be evaluated in a timely manner.
- 23. Non-retaliation. You have the right to be free from retaliation in reporting or alleging, abuse of any kind including sexual abuse, sexual assault, or rape.

PHASE SYSTEMS

<u>SU PRTF</u>

- Orientation: learning of rules, program expectations, and completing assessments
- Phase I: social control, behavior management, problem ownership
- Phase II: digging deeper into underlying problems or correlated impacts
- Phase III: intense planning for transition, discharge planning

<u>YSH PRTF</u>

- Orientation: Assessment and learning rules and expectations.
- Phase I: Introduction to Treatment focuses on basic concepts and terms
- Phase II: Understanding Yourself focuses on understanding emotions, behaviors and thinking errors
- Phase III: Understanding Dysfunctional Behavior identifies behavioral cycles and identifies safe behaviors
- Phase IV: Hitting the Target: Making Change Permanent addresses empathy, victim awareness and healthy relationships

PROGRAM EXPECTATIONS

A NON-AGGRESSION POLICY IS ENFORCED AT WHITEHALL

Whitehall strives to provide a safe place to receive treatment, learn, and heal. That means there are expectations of all youth participating in the program. These expectations include creating and keeping the campus an aggression-free environment. It is difficult to work on treatment issues when either verbal or physical aggression is occurring. Examples of aggressive behaviors that will result in consequences include, but are not limited, to the following:

- Any threat of harm to others
- Bullying and taunting others
- Spitting
- Hitting, punching, kicking, slapping, biting, pinching others
- Throwing objects
- Hitting someone with an object
- Self-harm including kicking or punching walls
- Making sexually threatening statements

- Attempting to sexually entice peers or staff
- Using mood altering substances and/or providing to others
- Engaging in sexual activity with peers

FAMILY INVOLVEMENT

We believe treatment should be provided within the context of the youth's family. Whenever possible, it is expected that the family and the youth are actively involved in the treatment process. At a minimum, family therapy occurs one time per week, in person and/or by phone.

After the youth advances in treatment and the youth and family have made sufficient progress in treatment, they may request family outings in the community. The family outings are approved by the treatment team, must have a therapeutic goal and the youth is required to have a safety plan that the youth and his family are expected to follow. Before a request for a family outing is considered by the treatment team, it is necessary for the family to be supportive and engaged in treatment. This includes participating in family therapy sessions in order to qualify for a therapeutic family outing. Other requirements include having advanced to Phase II of treatment and having a treatment team approved safety plan for family outings.

VISITATION AND PHONE CONTACT

ON CAMPUS:

Visitation times are available Monday through Sunday and are arranged via the primary therapist. Visits may be supervised and visitors must be on the youth's approved Contact List. Staff may ask for picture identification. A full list of guidelines related to *On Campus* visits can be found in Policy RI-14 (Whitehall) Visiting Procedures.

OFF CAMPUS/HOME VISITS -OVERNIGHTS:

Once a youth has advanced in treatment, off grounds visits with families are encouraged. All off grounds visits are coordinated through the youth's therapist and must be approved by the Treatment Team, Probation, and the youth's guardian. Many factors will be considered and a complete list of these guidelines can be found on PC-28 Therapeutic Off-Campus/Home Visits Whitehall. If the family fails to engage in therapy, a request for an Off Campus/Home Visit will be denied. The youth must have an approved safety plan to attend Off Campus Visits with family members.

Home Visits-Overnights are allowed once the youth has advanced to the final phase of treatment. These visits provide an opportunity for the youth and families to utilize the skills taught in the Whitehall Program and adjust to the youth's presence in the home. If at any time prior to the scheduled Home/Overnight visit, a youth's behaviors at Whitehall are deemed a safety risk, staff will contact the Facility Administrator and/or the Program Manager and/or Clinical Psychologist and the visit may be cancelled. Families will be contacted immediately and the reason for the cancellation will be explained.

PHONE CONTACTS

- Each youth will have an approved contact list that will include phone calls, mail, and visitation. The youth's probation officer, DHHS case manager, and/or legal guardian will give permission for all contacts.
- The social worker or therapist will keep the treatment team updated on the approved contact list.
- Youth have a right to make calls to their attorney, legal guardian, and probation officer or case manager.
- To ensure the youth are speaking to person(s) approved, staff will dial the phone number from the approved phone list. Staff remain in the general area during the call so that the youth does not call anyone else. Youth are required to use the "corded" phone. Only in special circumstances will phone calls be directly supervised by staff and the treatment team and the probation officer, DHHS case manager and/or guardian will determine when it is necessary. All calls, incoming and outgoing, will be documented by staff in the youth contact book.

WHITEHALL BEHAVIORAL EXPECTATIONS

RESPECT YOURSELF AND OTHERS

- Use appropriate language (no cursing, no references to sexual behaviors, drug use, threats of violence, or gang related jargon).
- Express emotions appropriately (no yelling, put downs, threats or intimidation).

PERSONAL SPACE AND BOUNDARIES

- Respect the physical boundaries of others. Horseplay is not allowed in the program, including cottages, campus and community settings.
- Respect others property: Lending, giving, trading, buying, selling, deal making, bartering, gambling, or borrowing are not allowed in the program.
- Respect program property.
- Allow others privacy while using the phone, seeing visitors, talking to staff, etc.

RESPONSIBILITIES

- Be assertive and not aggressive with peers and staff.
- Stay in your assigned area.
- Follow your schedule and staff direction.
- Participate in school, groups, and activities.
- Learn and use positive social skills.
- Use good hygiene including daily showers, oral care, and hand washing.
- Youth must wear shoes and clean clothes daily.
- Rooms and living areas are to be kept clean and orderly.
- Youth must be appropriately dressed at all times.
- Underclothing must be covered.
- Meals and snacks are to be eaten in the dining areas. Only one cup of water is allowed at night in youth's bedrooms.

- Youth possessions will be assessed for safety and therapeutic value prior to bringing into the program.
- School and therapy assignments must be done completely and on time.

PARTICIPATE IN ALL GROUP MEETINGS

- Be a positive role model
- Encourage positive peer behavior
- Help plan group activities
- Help solve group problems

PROPERTY DAMAGE

- Any destruction of property, state or private, will result in monetary or in-kind restitution. A personal apology will be given to the person whose property is damaged. In the case of state property, the apology would be made to a campus supervisor.
- Property damage may be paid for through youth's account, allowance, or community service. When property destruction occurs, youth will be held accountable for the destruction and parents or guardians will be contacted. Property damage may result in contact with law enforcement and a citation.

UNAUTHORIZED POSSESSIONS

Person and property searches are part of the Whitehall Psychiatric Residential Treatment Program. The objective of searches is to maintain the safety and security of the environment. Room searches will be done at least monthly or more frequently as needed. Situations may warrant searches without presence of the youth. Pat searches will be done per staff discretion. Searches may include all possessions in the living area and on the youth. Any dangerous or unauthorized possessions will be disposed of and not returned. The Facility Administrator or Program Manager or designee will contact legal authorities when appropriate.

DRESS CODE/POSSESSIONS

- No jewelry is allowed unless specific approval is requested and made for religious reasons.
- Youth's hair must be kept clean and will be styled such that it does not draw undue attention.
- Tank tops may only be worn during recreational activities. Tank tops worn as undergarments cannot be worn as outer clothing.
- No pant sagging allowed. Belts must be worn with pants with belt loops.
- A youth may be restricted from wearing steel toe shoes or boots, or other footwear based on safety considerations.
- Youth must wear shoes at all times.
- No bandanas or do-rags allowed. Do-rags will be allowed only at bedtime. Hats appropriate to weather conditions may be worn outdoors. Appropriate baseball style

hats can also be worn outside but must be worn with the brim facing forward, not backwards or tipped to the side.

- No body piercing or tattooing will be allowed while youth are in treatment.
- No artificial or painted fingernails will be permitted.
- Youth cannot have personal handheld video game systems with WiFi or Bluetooth capabilities.
- Movies must have a rating of PG-13 unless approved by administration or the Treatment Team
- Undergarments must be worn, but not visible.
- No inappropriate slogans, words or pictures will be allowed. This includes, but is not limited to swear words, sexually explicit material or gang affiliation language or images.
- Belongings may only be donated with parent and/or guardian permission to authorized locations. Youth cannot give any items to another youth.
- No aerosols will be allowed among a youth's possessions.
- No alcohol-based substances will be allowed.
- Youth are not allowed to wear sunglasses.
- Lending, borrowing, buying, selling, giving, taking, etc... Of any possessions will not be allowed.

STATUSES FOR MAJOR BEHAVIOR PROBLEMS

Each behavioral status lists the expectations of staff and the youth. Once a status has been implemented staff members focus on teaching alternative behaviors. Therapeutic assignments are given by the youth's therapist and focus on appropriate alternative behaviors. Therapeutic assignments do not have to require written work, especially with youth who present with significant learning or academic deficits.

It is important that staff members consult with each other, whenever possible, prior to a youth being placed on a status. This reflects a "team" approach and also allows time for staff members to evaluate the situation and review the program handbook. Staff will contact the Facility Administrator, the Program Manager and/or other supervisor before placing a youth on Treatment Refocus, Community Restriction, or Ten Minute checks. Initiating staff will email a brief behavioral description to all Whitehall staff when a youth is placed on a status. Therapeutic assignments required for removal of a status are written on the youth's Personal Teaching Record and can also be written on the assignments white board in the cottage.

THERAPEUTIC STUDY STATUS

Any youth found not completing his therapeutic assignments in a timely manner or having fallen behind on his assignments, may be placed on a Therapeutic Study Status. While in this status, youth must complete all therapeutic assignments before being allowed activity time or being allowed to attend any off ground activities. The only exception would be off ground activities required by the Whitehall program (e.g. Therapeutic Recreation). Therapeutic assignments are defined as any assignments given by the Social

Worker or therapists, assignments given in accordance with specific groups, and assignments given as teachings by staff due to the youth's negative behaviors. The youth can earn 15-minute breaks at supervisor's discretion.

The activities allowed during 15 minute breaks are:

- Board games, table games or puzzles
- Appropriate reading material
- Listening to music
- Drawing, writing or coloring
- Positively interacting with peers
- Spending some time in their bedroom

Once staff have verified that the youth has completed all requirements and expectations, any Youth Security Specialists, Supervisor or therapist can remove the youth from this status.

LOSS OF PRIVILEGES

Loss of privileges (LOP) can be used when a youth is not responding to repeated cues to follow facility policies and procedures or complete an assigned chore. LOP status is meant to be short in duration. Privileges can be lost from 7:00pm until bedtime Monday through Friday and on the weekends. Any staff member may take a youth off LOP once they have served their evening LOP. The person taking a youth off LOP needs to know what behavior got the youth on the status and the expectation for ending LOP. The staff member taking the youth off LOP will inform the youth and those working in the youth's cottage. If LOP lasts more than three consecutive days the youth's situation should receive additional attention during the change of shift discussion. Also, the therapist will meet with cottage staff and youth to problem solve and determine next steps.

LOP Status Restrictions:

- No television and/or video games
- No off-grounds activities (except for Therapeutic Recreation and restitution) -
- No spending or accessing personal money
- No computer time (except for working on treatment assignments)
- Cannot order food
- While on LOP, bedtime for youth in Phase O is 8:00pm. Youth on all Phases will be in bed by 8:30pm when on LOP.

PHASE FREEZE

A youth can be placed on Phase Freeze for displaying threatening or overt aggressive behavior towards peers or staff, or serious acts of treatment noncompliance. Phase Freeze may be necessary when youth are not responding to staff teachings, refusing to follow their safety plan or not following the expectations of LOP or lesser statuses. Any staff may place a youth on Phase Freeze, but will notify the Facility Administrator, Program Manager, on- call nurse, the youth's therapist, and Supervisors before the end of their shift. Staff will also send a brief behavioral description to all Whitehall staff when a youth is placed on this status. The youth's therapist or designee will assign projects for the youth to address the youth's disruptive behaviors.

Phase Freeze Restrictions:

The youth's personal possessions, with the exception of their clothes, and hygiene products will be removed from their rooms, or the youth will be required to move to an empty room. Exceptions can be made for items that are therapeutic for the youth to have; for example, the reading material or devices to listen to music.

- The youth will not leave the unit without direct supervision and will be given an Assigned Direct Care Staff
- Visits will be supervised on campus
- The youth will be on Community Restriction
- The youth will not earn an allowance and will not be allowed to access his personal money
- The youth will not engage in any off unit recreational activities
- Youth will spend all Activity Time working on treatment issues and therapeutic assignments
- All privileges will be revoked

Activities allowed during 15 minute breaks:

- Board games, table games, or puzzles
- Appropriate reading materials
- Knitting, crocheting, working on models
- Listening to music
- Computer Time

Activities not allowed during 15 minute breaks:

- No video games
- No watching T.V.
- No off ground activities
- No purchasing snacks or pop
- No going into the living rooms to watch their peers play video games

Phase Freeze is a loss of most privileges for at least 72 hours along with the completion of additional therapeutic assignments. Therapeutic assignments (written and/or verbal) are assigned by the youth's therapist, Program Manager, or Facility Administrator. The staff member who placed the youth on Phase Freeze should be consulted when possible so that assignments can be geared towards mitigating the problematic behaviors. The youth's therapist must review the assignment with the youth before making the decision to remove the Phase Freeze status. The youth will not be on any status after being taken off of Phase Freeze. For example, there would not be a lowering to LOP as a next step.

TREATMENT REFOCUS (place youth in State Issued Sweatpants)

When a youth displays repeated behavioral problems (failure to follow a program, sexual acting out, repeated acts of verbal or physical aggression, attempts to elope etc...), it is therapeutic to increase the amount of time the youth and staff spend together and to reexamine the treatment plan. Staff will contact the Facility Administrator, Program Manager, On-Call nurse and/or other supervisor to determine if criteria for Treatment Refocus are met. Staff will also send a brief behavioral description to all Whitehall staff when a youth is placed on this status. Any youth placed on Treatment Refocus will receive a Special Treatment Plan Review. The STPR will review/identify new approaches to use with the youth to address the behavioral problems that resulted in being placed on the status.

The youth will remain on Treatment Refocus until taken off the status by the treatment team, or once the youth has met the requirements set by the treatment team. During the period of Treatment Refocus, the youth will be closely supervised by Youth Security Specialists while working on therapeutic assignments and treatment issues.

Treatment Refocus means that the following restrictions are in place:

- The youth's belongings, including their clothes but with the exception of their hygiene products, will be removed from their room or they will be required to move to an empty room. Exceptions can be made for items that are therapeutic for the youth such as relaxation tapes or CD's.
- Youth will be on Community Restriction
- The youth will not leave the unit without direct supervision and will be given an Assigned Direct Care Staff
- Youth will not earn an allowance and will not be allowed to access his personal money
- Visits will be staff supervised on campus
- Youth will not engage in any off grounds recreational activities
- Youth will spend all activity time working on treatment issues and therapeutic assignments
- All privileges will be revoked

Activities allowed during 15 minute breaks:

- Board games, table games, or puzzles
- Appropriate reading materials
- Knitting, crocheting, working on models
- Listening to music
- Computer Time

Activities not allowed during 15 minute breaks:

- No video games
- No watching T.V.
- No off ground activities
- No purchasing snacks or pop
- No going into the living rooms to watch their peers playing video games

COMMUNITY RESTRICTION

If the youth's behavior indicates he may be unsafe in the community, he will be placed on Community Restriction after contacting the Facility Administrator and/or Program Manager, or on-call nurse or other supervisor for approval. Staff will send an email to all Whitehall staff to provide a behavioral description and reason for the status. Reasons for being placed on Community Restriction can include both acts of high-risk behavior and/or failure to demonstrate safety, e.g. not participating adequately in treatment, failing to report high-risk situations, not maintaining appropriate boundaries or exhibiting aggression. A youth on Community Restriction will not be allowed to participate in activities occurring in the community, unless allowed by the treatment team in advance. An updated safety plan may or may not be needed. The treatment team will determine when a youth can come off Community Restriction.

PEER BOUNDARIES

When behavior between peers suggests an increased risk of sexual contact, physical aggression or other behaviors that could lead to deviant or antisocial actions, the identified youth can be placed on Peer Boundaries. While on this status the identified youth will comply with directions from staff and not engage in verbal or physical contact. The identified youth are allowed to have limited/supervised interactions during therapeutic activities; however, these interactions will be interrupted by staff if the peers engage in unwanted behaviors (e.g., antagonizing each other).

BEHAVIORAL OBSERVATIONS

This status is dealing with youth whose behavior is out-of-the ordinary indicating that the youth is considering self-harm, acting out in a sexual manner, or is continually violating boundaries of staff or peers. Any staff member may initiate Behavioral Observations Status and then will immediately contact the Facility Administrator and/or Program Manager, On-Call Nurse or other supervisor. Staff members will conduct 10-minute checks while the youth is awake. Staff members will maintain 30-minute checks when the youth is asleep. The youth will have an assigned staff member when on Behavioral Status. Only the treatment team can take a youth off Behavioral Observations status.

Behavioral Observation Status means the following restrictions are in place:

- No television and/or video games
- No off-Grounds activities (except for Therapeutic Recreation and restitution)
- No spending or accessing personal money
- No computer time (except for working on treatment assignments)
- Not eligible to check out compact discs and/or tapes
- Cannot order food

10-MINUTE SAFETY CHECKS (place youth in State Issued Sweatpants)

If a youth's behaviors suggest there is an immediate threat of self-harm or physical aggression directed at others or property, he can be placed on 10 minute safety checks. When staff believe that a youth is exhibiting behavior that would warrant being placed on Safety Checks, they must contact the Facility Administrator, the Program Manager and the On-Call Nurse. The nurse will assess the situation, consult with the Facility Administrator and Program Manager, and decide if the youth requires Safety Checks to ensure safety. The nurse will then notify the program psychiatrist who will issue the appropriate order. Once placed on Safety

Checks, the staff will send a brief behavioral description to all Whitehall staff notifying coworkers of the youth's current status. If necessary to provide for safety, the staff may temporarily remove items from the youth's room until the youth is off of Safety Checks, or the youth is moved to a safety room. Safety rooms are void of objects and furniture that can be used to harm others or self-harm.

The youth must be observed every 10 minutes on all shifts and staff will document the whereabouts of the youth on the 10 Minute Check Sheet. The youth's behaviors also need to be documented on the Daily Nursing Record and the Staff Communication Log every shift. The youth can be taken off of 10 minute safety checks by the Treatment Team or clinician or nurse after evaluation.

1:1 SUPERVISION

When a youth displays unsafe behaviors to either themselves or others, it may be necessary to increase the therapeutic supervision by placing the youth on a 1:1 Supervision with staff. While on a 1:1 Supervision, youth will be under the direct supervision of an assigned staff member at all times, including when using the bathroom and sleeping in their designated room. While youth is sleeping, 10-minute checks are maintained.

The staff assigned to the youth will be responsible for documenting the youth's whereabouts utilizing the 10-Minute Check Sheet and for documenting the youth's behaviors on the Daily Nursing Record and the staff Communication Log. It will be the responsibility of the On-Call Nurse or other supervisor to decide when 1:1 Supervision is appropriate. It will be the responsibility of the Treatment Team to discontinue the precaution after the youth has displayed consistent positive decision making.

If a youth displays a serious risk of suicide or assault, the On-Call Nurse, the Facility Administrator, and the Program Manager will be notified immediately and will decide whether a more restrictive intervention will be required, such as an inpatient hospital admission and/or police involvement.

Reasons for placing a youth on 1:1 Supervision include, but are not limited to:

- Repeated aggressive behavior
- Self-harming
- Threats of self-harm or harm to others
- Elopement or threats of elopement

1:1 Supervision Restrictions:

- Youth must be close to their assigned staff at all times, including when sleeping in their assigned room and using the bathroom.
- 10-minute checks are completed and documented.
- Youth is placed on Community Restriction.
- Youth is moved to the closest room available to the staff office.
- All requests by the youth will be directed to their assigned staff only.
- The staff assigned will be responsible for the documentation and charting of the youth.
- Youth will only be allowed to use the large bathroom.

 A Special Treatment Plan Review will be conducted within 1 business day of the implementation of this status.

RUN RISK PRECAUTION (place youth in State Issued Sweatpants)

When a youth shows that he might be a risk to run from the Whitehall Program, the Facility Administrator and/or Program Manager, and On-Call Nurse or other supervisor will be contacted (to comply with Whitehall Policy) and may place the youth on Run Risk Precaution after an assessment. This increases the supervision and safety of the youth at risk. The youth will be taken off run risk precaution status by the treatment team when it is found that the youth no longer represents a run risk.

While on this precaution, a number of restrictions are put into place. These restrictions include, but are not limited to:

- 1:1 with staff while awake, staying in staff sight during awake hours, with documentation of the youth's behaviors on the 10 Minute Check Sheet
- The youth's belongings, including their clothes, but with the exception of their hygiene products, will be removed from their room or they will be required to move to an empty room. Exceptions can be made for items that are therapeutic for the youth to have; for example, a device used to listen to music.
- Community Restriction
- Moved to a room closer to the staff office to increase supervision.
 Youths contact list and phone calls may be limited or restricted.
- The youth's clothes and shoes will be confiscated and he will be given state issued clothing including slippers or shoes without laces.
- All of the youth's money will be placed in their med box and they will be denied access to the money.
- At bedtime the youth's clothing shall be turned into staff and he will be allowed only what he wears to bed.
- Assigned 1:1 staff will be required to keep and update a clothing description of the youth and to carry a cell phone on them at all times. Youth is to always be in State Issued Sweats.
- If a youth leaves the Whitehall Campus without permission, it is our policy that the assigned 1:1 staff must follow the youth, without physically intervening, keeping them in sight at all times if possible.

THERAPEUTIC SCORE

An equally important component of treatment are the Staff's ratings of each youth's behaviors during therapeutic sessions. The *Garcia Scales* were adapted at Whitehall to evaluate each youth's behavior, participation, and homework during therapeutic sessions (i.e., therapeutic groups and individual sessions). Youth are scored on a 0 to 10 point Likert type scale and scores are averaged across the three areas resulting in an overall monthly average. These scores

reflect the youth's effort and motivation for treatment and go hand in hand with the Personal Teaching Record.

Participation: A score of 10 reflects the youth actively participated, made appropriate comments and questions, and was overall engaged. A score of 0 indicates that the youth did not attend, was asked to leave the group or left without asking to do so.

Homework and Preparedness: A score of 10 indicates the youth came well prepared and homework was completed in a thoughtful manner. 0 indicates the youth did not complete the assignment or did not bring the assignment.

Behavior: A 10 on the behavior scale indicates the youth fully complied with the group rules throughout the session. A 0 indicates the youth did not attend or left the group or was asked to leave due to negative behaviors.

ADDITIONAL INFORMATION

RECREATIONAL THERAPY

Recreation therapies focus on teaching youth valuable life skills through leisure experiences. Both individual and group opportunities are available. Youth are taken into the community to practice social control.

MEDICATION

It is important that the youth know and understand their medications. If the youth take medication, they are administered the medications by a Medication Aide or nurse. The Direct Care Staff are trained as Medication Aides. The registered nurse teaches the youth about the medication, including the classification, effects and possible side effects of the medication. Each youth is encouraged to inform a staff member if he or she feels they might be experiencing any side effects. The youth are seen and assessed twice a month by their psychiatrist.

THERAPEUTIC CHORES

Youth are encouraged and supported in the development of good work habits and an awareness of the conditions of their surroundings. The ability to work cooperatively with others is encouraged. Youth are responsible for the cleanliness and care of their own rooms, clothing and possessions and share the responsibility in maintaining clean and organized common living areas.

Procedures:

- Therapeutic chores will be assigned to each youth and will be rotated on a regular basis every week.
- Therapeutic chores will be done daily as scheduled. This includes bedrooms and living areas.
- Deep cleaning is completed on Saturdays.
- Specific expectations regarding therapeutic chores are listed in the units and are available to the youth.

ROOM CARE

Youth are expected to keep their room clean. If a youth fails to keep their room clean, staff will determine a therapeutic course of action. The requirements are as follows:

- All surfaces must be kept clear of dust and clutter.
- Clean clothes must be hung up or folded.
- Dirty clothes must be kept in the laundry hamper.
- Each youth is assigned a weekly laundry day to do their own laundry
- Floors are to be kept clean of trash and vacuumed.
- Trash cans are to be kept clean with new bags when trash is taken out.
- Hygiene items are to be kept in the youth's hygiene box.
- No food or beverages are allowed in a youth's room unless on sick bed, or approved by the nurse or treatment team. One Styrofoam cup of water is allowed.
- Nothing is to be on the wall/shelves within 18 inches of the ceiling.
- Rooms should not smell offensive.
- All fire exits are to remain unblocked.
- Nothing should be placed in front of the vents.
- No contraband or inappropriate items will be kept in a youth's room.

ALLOWANCES

All youth will be given an opportunity to earn weekly allowances. The amount of the allowance is phase specific and is as follows:

YSU PRTF	
Phase 0 \$1.00 per week	
Phase 1 \$2.00 per week	
Phase 2 \$3.00 per week	
Phase 3 \$4.00 per week	
Phase 4 \$5.00 per week	

SU PRTF Phase 0 \$1.00 per week Phase I \$2.00 per week Phase 2 \$3.00 per week Phase 3 \$5.00 per week

To earn their full allowance, youth must meet certain criteria for the preceding week. It is the youth's responsibility to ask staff to check off these criteria daily. The criteria are:

- Complete daily room care expectations
- Complete daily chores
- Complete weekly deep cleans (both room and chore)

Youth who meet these criteria 4-6 days of the preceding week will only receive ½ of their allowance. The youth will not receive an allowance if the following occurred: youth did not meet the criteria 3 days or less, were placed on Phase Freeze or Treatment Refocus at any time during the preceding week, or the youth was on a Run Risk Precaution. Any youth making payments for restitution will use their allowance for this purpose.

YOUTH ACCOUNTS

All youth will have an account set up with the LRC Patient Accounts upon admission. To access their account youth must fill out a withdrawal slip. All Whitehall money transactions with Patient Accounts will occur on Thursdays. Withdrawal slips are available in each cottage and must be filled out completely including a detailed list of what the withdrawal is for. After a

youth's money is withdrawn, it will be placed in a ledger envelope and stored in a locked box in the staff office. Youth are allowed to have a max of \$10 on their person and up to \$20 in the lock box. Youth will have access to their money at the time for which the approved withdrawal was made. All other money received by the youth (e.g. Paychecks, money from family, etc.) will be deposited into Patient Accounts.

YOUTH'S PERSONAL FOOD AND BEVERAGES

The Whitehall Program is family centered and recognizes that families like to provide personal food and beverages for their youth. In order to provide this opportunity the following guidelines shall be used:

- Families shall only provide single servings of food or beverages for their youth.
- All food or beverage leftovers shall be returned to the family at the end of the visit and removed from the campus.
- Families shall not provide food or beverages to other youth in the Whitehall Program.
- Youth also have an opportunity to purchase their own food and beverages once they reach a specific phase.
- Whitehall program guidelines for youth purchases or orders of foods/beverages outside the program are:
 - Youth can only purchase or order a single serving of a food or beverage item. The purchasing of bulk items is prohibited.
 - Youth will not share any food or beverage items with any other youth in the Whitehall Program or with staff.
 - Youth shall not bring back any food or beverages purchased on an off grounds or a home visit.