

## **INTRODUCTION TO OUR MISSION AND OVERVIEW OF TREATMENT**

Dover Children's Home, founded in 1893, is a non-profit intermediate-level treatment program, offering a wide array of services to children in need from all parts of NH. The agency is designed to provide community-based residential care for youth who have been abused or neglected; are under a CHINS (Child in Need of Services) petition; or who have committed delinquent acts. The program will often not admit children who are actively fire-setting, displaying uncontrollable aggression, or are unable to understand the treatment interventions utilized by DCH due to cognitive or processing challenges. DCH is licensed to provide treatment for up to 19 children, ages 10-21. During the day, 2-3 Adolescent Counselors work with the residents while 2 remain awake all night.

Dover Children's Home mission statement is that as an agency we will "Provide tools and support for youth to heal from emotional trauma through community-based treatment programs that foster relationships and enable youth to create hope for their future."

Our goal is to provide youth with as many opportunities as possible to experience success and personal growth. It is our belief that participation in age appropriate, therapeutic, and normalized activities will help youth become a positive member in the community. The overall success of the treatment program at Dover Children's Home depends a great deal on your willingness to take advantage of our support system.

Dover Children's Home has a strong family component and encourages as much family contact as possible and appropriate through visits, phone calls, letters, and meetings. The agency also offers an environment rich with numerous family-focused events. The ultimate goal of Dover Children's Home is to reunify residents permanently with their family. If this goal is impossible, every attempt is made to transition residents to less restrictive settings (e.g. kinship home, foster home, independent living setting, Job Corps). If a resident no longer benefits from the treatment programming offered by Dover Children's Home, the resident's state worker will be notified. Once a more suitable setting can be secured, the resident's placement will end.

Dover Children's Home prescribes to 'Trust Based Relational Interventions' (TBRI) model which is a holistic approach that is multi-disciplinary, flexible, attachment-centered, and challenging. It is an evidenced-based, trauma informed intervention that is specifically designed for children who come from 'hard places', such as maltreatment, abuse, neglect, multiple home placements, and violence. TBRI consists of three sets of harmonious principles: Connecting, empowering, and correcting principles.

At Dover Children's Home, one of our philosophies is that individuals are responsible for their own behaviors. Staff, parents, and residents will always be held accountable for their actions. Residents who act cooperatively, appropriately, and respectfully will benefit from the program and earn privileges for their positive actions. Likewise, those who choose to disregard the rules and undermine their treatment will earn consequences for these types of behaviors. The success of the treatment program depends greatly on each resident's ability to act responsibly and independently as well as each staff member's ability to act consistently in setting limits and nurturing the residents.

The Home provides a structured living environment in which the residents are encouraged to develop and utilize alternative, appropriate behaviors; develop healthier community connections; and further enhance daily living and independent living skills. Dover Children's Home utilizes a relationship model to understand and engage youth and provide interventions rooted in evidence-based practices to assist with their emotional and behavioral needs. An individualized treatment plan is created with significant input from the resident, parents, and providers to identify goals to be worked toward while at DCH. The treatment team provides experiences throughout each day to enhance the normal social, emotional, and educational development of each resident. Interventions at Dover Children's Home are guided by evidence-based practices rooted in trauma informed care.

Dover Children’s Home typically expects youth to be in some form of an academic setting during daytime hours. However, the agency also works with residents who are pursuing or have obtained GEDs as well as those who wish to enroll in vocational programs or college courses. For residents requiring extra support to attend school, the agency also coordinates use of local specialized academic day programs.

To prepare residents for their ultimate transition to a less restrictive setting, the Home also focuses on the development of independent living skills. Based on treatment goals, some residents will be encouraged to work, volunteer, or maintain a hobby in the community. The Home also provides a state-certified independent living course to help residents develop skills such as maintaining a savings account, obtaining a driver’s license, budgeting money, cooking nutritionally-balanced meals, creating a resume, participating in job interviews, obtaining employment, maintaining a vehicle, balancing a checkbook, and reading a lease agreement.

Please take the time to review this Program Manual and become familiar with the rights, rules, interventions, and privileges that it describes. This manual is not meant to be all-inclusive, rather a general guide. Please feel free to contact the agency with questions, comments, and concerns. Our website is [www.doverchildrenshome.org](http://www.doverchildrenshome.org).

Dover Children’s Home is a 24/7-hour program, and a staff member can be reached at anytime on the DCH floor cell: **767-5476**. An on-call supervisor is also available 24/7 to support any youth in a crisis level of care or matters of urgent need. The on-call supervisor can always help support youth who need clinical or medical care after hours and help ensure resident safety. During Business hours Monday-Friday, the administration can be reached at the following numbers:

<b>Renee Touhey-Childress</b>	<b>Executive Director</b>	<b>742-4289, ext. 12</b>
<b>Gretchen Tatulis</b>	<b>Program Director</b>	<b>742-4289, ext. 13</b>
<b>Andrea Petraitis</b>	<b>Clinical Director</b>	<b>742-4289, ext. 15</b>
	<b>Staff Office</b>	<b>742-4289, ext. 10</b>

## TABLE OF CONTENTS

	Pages
<b>Section 1: Rights of Residents</b> .....	4
Confidentiality & Privacy .....	4
Court Attendance .....	4
Participation in Treatment .....	4
Specialized Treatment Interventions .....	4-5
Resident File .....	5
Access to Help .....	5
<b>Section 2: Staff at Dover Children’s Home &amp; Strategic Plan</b> .....	5-6
<b>Section 3: Basic Expectations</b> .....	6-7
<b>Section 4: Specific House Policies</b>	
TV/Movies/Games .....	7
Electronic Devices .....	7
Boundaries .....	7
Dating .....	7
Education .....	8
Visits/Contact .....	8
Religion .....	8
Meals .....	8
Bedtime and Wake-Ups .....	8
Fire Safety .....	9
Transportation .....	9
Restricted Areas .....	9
Employment .....	9
Sick Policy .....	9
Allowance and Money .....	9-10
Medication .....	10
Hygiene and Laundry .....	10
Body Decoration/Hair Dying .....	10
Bedrooms .....	10-11
Miscellaneous .....	11
<b>Section 5: Privileges</b> .....	11
<b>Section 6: Definitions of Specific Interventions</b> .....	12
Increased Supervision .....	12
Room Time .....	12
Early Bedtime .....	12
Office Restriction .....	12
Kitchen Restriction .....	12
Privilege Freeze .....	12
<b>Section 7: Language Assistance</b> .....	12-13
<b>Section 8: Grievance Procedure</b> .....	13
<b>Section 9: Discharges</b> .....	14

## RIGHTS OF RESIDENTS

### **Confidentiality & Privacy:**

All youth who live at Dover Children's Home have the right to confidentiality and privacy. This means that personal and sensitive information as it pertains to the individual resident's treatment is protected and not shared unless with the appropriate and necessary members of a resident's treatment team. All the resident files and sensitive information will be maintained in a locked staff office, in a locked closet. The youth's treatment team meetings will be held in a room with a closed door and the treatment information disseminated only to parties of the case and or who have releases of authorization to the information. All residents will be labeled by first and last initials in communal places where applicable. All other verbal information that is sensitive, private, and considered confidential will be discussed with the youth away from their peers in a private setting. All other agency practices as derived and applied from the Health Information Privacy Protection Act (HIPPA) will be adhered to at Dover Children's Home for best practices.

In addition to all treatment documentation, all resident's financial information will be protected and maintained in the same practice to ensure confidentiality and privacy. A resident's financial information will not be disseminated to any unauthorized party at any time without approval or consent. All residents have the right from any form of financial exploitation, coercion, abuse, or other behaviors that would affect their current or future financial status and gains.

### **Court Attendance:**

All residents have the right to attend a court hearing that involves them as a party to the case. The resident has the right to discuss at any time with their court appointed advocate, state worker or DCH program administrator their wishes to attend a court hearing. Unless decided on by a judicial authority that attendance would not be in the youth's best interest, the program will ensure the youth is brought to and can participate in the legal hearing. If attending a court hearing, the resident will be expected to wear appropriate clothing and present in a style of grooming and dress that is acceptable for the setting.

### **Participation in Treatment**

All residents have the right to participate in the initial and ongoing treatment plan processes during their placement at Dover Children's Home. Residents can expect to meet with the Clinical Director and their case manager within their first thirty days of admission to discuss their needs, strengths, and areas of progress they would like to work on. The resident will be included in this process to gain information about their history and current status and have their goals and opinions reflected in their initial assessments and treatment plans. The purpose of this assessment stage is to best understand how to create mutually agreed upon goals to maximize a resident success and meet all their needs. The resident has the right to know what services will be offered and coordinated as a part of their treatment and will be involved in this service delivery to the extent that is age and developmentally appropriate. If there are additional services that the youth has requested at any point in their treatment, they have the right to meet with the Clinical Director and discuss these needs ongoing.

The resident will be involved by attending their treatment meetings and providing input to the services and supports they can identify to help achieve goals and objectives of their treatment plan. A youth has the right to refuse attending their treatment meetings; however, the meeting will still need to take place to ensure that treatment plans and implementation of treatment goals can continue in a timely manner. The youth also has the right to give input ongoing at every treatment meeting as to the overall services of Dover Children's Home. The youth can do this by completing an anonymous survey regarding their experiences and satisfaction with DCH. These outcomes and feedback will be reviewed on an ongoing basis and used for consideration in quality improvement.

### **Specialized Treatment Interventions:**

All residents will have a treatment plan and corresponding daily charts reflective of their individualized goals and objectives. If and where applicable, some residents may have specialized plans and interventions that meet their needs. The youth should be encouraged to look at and only understand what their treatment plan goals are; and not compare these with their peers. A treatment plan and specialized interventions are meant to be consistent to the age and functioning level of each youth and

clinically able to support that youth's development and ability to reach their goals. All residents have the right to ensure that individualized and specialized treatment interventions are in place to meet their needs and functioning abilities. Individualized therapeutic interventions for sanctions and incentives can also be discussed during the treatment planning process and discussed with collateral team members or amongst the staff collectively at staff meetings. The youth should be encouraged to advocate for things that are appropriate and work for them; but also understand that the ultimate decision making to requests and specialized treatment interventions will be made by the Clinical Director or designee to ensure that every youth has a plan that is in their best interest to meet their clinical and developmental needs.

### **Use of Restraint**

It is the policy of Dover Children's Home that physical restraint of a child will be used ONLY when a child is at imminent risk of causing harm to self or others. Upon intake into the program, information will be gathered by a parent or guardian regarding the resident's previous restraint history, behaviors the resident is currently exhibiting that may require restraint, and any health issues that may impact the use of restraint. Planning will be done upon intake to address the information gathered during this process. Restraints will be used only by trained personnel using extreme caution using the Mandt System. Restraints will never be used as punishment for the behavior of a child. When the use of restraint is deemed necessary, parents will be notified of the incident within 24 hours of occurrence. In addition, if any incident occurs as a result of a restraint, notification to state personnel as required in RSA 126:U:10 will be followed.

### **Resident File**

Dover Children's Home will maintain a complete and accurate resident file for every youth in placement. The resident has a right to review and see the information in their file during and after their placement ends at Dover Children's Home. If a resident wishes to review specific information, forms, or documents they will need to request to do this from one of the program administrators. The administration will protect time and space to ensure privacy of the resident in a way that will allow both the resident sufficient time with the information and to ask any questions of the information maintained in the file.

After a resident discharges from Dover Children's Home, they can also request a copy of any part of their file in writing to the Program Director. The Program Director will coordinate ensuring the file is copied and provided to the discharged youth within 90 days of the received written request.

### **Access to Help**

A resident has the right to access help or other support services throughout their placement at Dover Children's Home. A resident has the right to call or contact their parent/guardian, state worker or legal counsel at any time. A resident can use the outgoing mail services to send these parties appropriate mail regarding their treatment and case through the facilitation of The Home. A resident also has the right to use the phone to reach their parent/guardian, state worker or attorney. However, access to the using the phone will generally not be available during the hours of 9p-8a due to the inappropriateness of these calling hours unless there are extenuating circumstances or true emergency exists. A resident also has the right to access any self-help or advocacy support groups in the community; unless it compromises or contradicts their treatment goals. If a resident has or believes there has been any abuse to themselves or of their resident rights, they have the right to make a complaint and grievance as stated above in the grievance procedures. If there are any allegations of abuse or denial of a resident's rights, the administration will investigate the matter promptly within 24 hours or the following business day. If a resident is not satisfied with the investigation or outcome, they have the right to access their own legal resources for support in the matter.

## **STAFF AT DOVER CHILDRENS HOME**

All the staff at Dover Children's Home have come to the agency committed to supporting the mission of The Home and supporting the youth living at DCH. The Home is made up of administrative personnel: maintenance manager, the facilities assistant, kitchen manager, office manager, administrative assistant, development director, and quality improvement specialist. The members of a youth's direct care and treatment team are; Executive Director, Program Director, Clinical

Director, Independent Living Coordinator, Academic Coordinator, adolescent supervisors, case managers and awake overnight counselors. All positions held at Dover Children's Home meet the requirements of state licensing and certification. All the staff have received initial and ongoing trainings regarding the treatment models and best practices for working with youth in care and adhere to the policies in this manual as well as the code of ethics in the DCH personnel manual. If a youth feels any staff member(s) has a conflict of interest in working with a youth, please bring this to the attention of the administration. All staff are trained in professional boundaries and will reduce or eliminate any possible conflicts of interest to a youth in care at DCH. All staff will disclose any known conflicts of interest with a youth to the administration as soon as they learn of this information.

**Strategic Plan:** Dover Children's Home is committed to excellence and as an agency has developed a strategic plan that will help support the continuation of programming excellence and future expansion of service. The strategic framework that that has been adopted for the 2020-2023 timeframe is as follows:

- Pursue Program Excellence, Expand Services, as warranted, Maximize the effectiveness of the Government & Management Structure, and Ensure Organizational Sustainability.

### **BASIC EXPECTATIONS**

- All residents are expected to follow a daily structure of routines, chores, mealtimes, and bedtimes as determined by the treatment team and as applicable to each resident's individualized treatment.
- Resident's treatment goals and progress being made toward those goals will be documented on each resident's daily chart. Residents are encouraged to look at their charts daily so that they may develop an understanding of their behaviors and assist in finding ways to achieve changes in behavior that will help them meet their goals.
- In addition to daily charts, for behaviors that are particularly inappropriate or harmful (i.e. violent or aggressive behavior, self-harming behavior, running from the program, sexual misconduct) an incident report will be written documenting the concerning behavior, and members of the resident's treatment team will be notified that the behavior occurred and what interventions staff used in response.
- The possession, distribution, and use of alcohol, cigarettes, and illegal drugs will not be tolerated and may result in criminal charges and/or termination from the program. Staff conduct random room, bag, resident cell phone and personal searches; urine screens; and police drug dog searches whenever necessary.
- Violent, aggressive, and assaultive behaviors towards oneself or others may result in a physical restraint, criminal charges, or removal from the program. Intimidating body language and threatening statements will not be tolerated and will result in an appropriate consequence based on a youth's treatment.
- Running from the program is not an acceptable way of dealing with stress, issues, and conflicts. Residents who feel like running away should talk with staff immediately about ways to make things more manageable. The police, parents, and providers will be notified immediately whenever a resident runs away. Residents' belongings will be placed in a secure area within 24 hours. Unclaimed items will be donated after 60 days.
- Residents may not possess weapons or potentially unsafe objects. All aerosol containers, nail polish remover, razors, scissors, nail clippers, nail glue, mouthwash, etc. must be kept in your personal box in staff office and signed out when in use. In addition, any items associated with fire (eg. potpourri burners, electric blankets, candles, lighters, incense, matches, and lighter fluid) are not allowed.
- Stealing and/or abuse of others' property will not be tolerated and may result in criminal charges. Residents who damage property in any way will be expected to pay for, repair, or replace the items by reimbursing DCH through their weekly allowance for the repair or replacement. A "fine" will be determined and documented on a fine log which will account for payments until the fine is paid in full. The fine log will then be kept in the resident's file.

- Withholding critical information from staff regarding the unsafe behaviors or plans of others (e.g. running, drug use, in-house relationships, self-abuse, violence) is not tolerated. Full personal accountability is always expected from every resident, as this helps ensure everyone's safety.
- Staff and residents are expected to respect one another. Lying will not be tolerated as dishonesty is considered disrespectful and undermining of treatment goals; this will result in an appropriate consequence based on a youth's treatment.
- To maintain safety and security within the treatment program, police involvement may be requested as needed. As a last resort in responding to destructive behavior, members of the treatment team have also been trained to utilize the Mandt System with residents who are at risk of harming themselves, others, or property.
- Residents are highly encouraged to label all personal belongings with their initials upon bringing them into the program. In addition, each resident has access to a locking trunk, as well as a personal box in staff office to secure personal items. Residents are encouraged to lock their bedroom doors to secure personal items.

## **SPECIFIC HOUSE POLICIES**

### **TV/Movies/Games**

- Lounges have televisions and gaming consoles for resident use when privileges have been earned. Staff will determine which television shows, movies and activities are appropriate for residents based on age, treatment concerns, and parental input.
- Any items not approved for use in the program such as personal gaming consoles and televisions will need to be returned to a parent/guardian or caretaker of the youth.
- Residents have access to DCH accounts for various streaming services. Residents are not permitted to log into personal accounts (Netflix, X-box Live, YouTube, etc.) on DCH devices, but can do so on approved personal devices as approved by their treatment team.

### **Electronic Devices**

- After a 30-day meeting, residents can earn the privilege of using their personal electronic devices such as phones, tablets, and laptops if approved by their team and DCH staff. Charging cords and unapproved electronic devices will be kept in personal boxes until approved.
- Residents who would like this privilege are required to sign an Electronics Contract that outlines the expectations of maintaining this privilege. Residents can lose this privilege at any time if they are using the device inappropriately or if there are any safety concerns.

### **Boundaries**

- Dating or any romantic relationships will not be allowed between residents of the program, regardless of gender or sexual orientation. Communication between residents may not include whispering, note passing, or other means of communicating which might exclude residents or prevent staff from properly supervising residents. Residents who break boundaries in the Home will be asked to sign a relationship contract to maintain appropriate boundaries.
- Residents may not be in one another's rooms or bedroom doorways, but may spend time together in common areas, lounges, hallways, and the yard when appropriate and permitted by staff.
- Residents may not lend, borrow, give away, or sell ANY personal items (i.e. clothing, hair products, CD's, money, iPods).

## Dating

- Dating outside of DCH is permitted and staff can support visits on an individual basis based on age and parent/guardian approval.

## Education

- If or when DCH needs to conduct a remote learning environment for any resident, the residents are expected to follow the rules and expectations put forth by the academic coordinator and their prospective school districts.
- Truancy, refusing to complete and hand in homework, and behaving inappropriately at school are all choices that will earn consequences.
- Study hour is held Monday through Thursday. An informal study hour is also held on Sundays. Residents must come to study hour prepared. Educational computer games and leisure reading are allowed after all school assignments are completed.
- When residents receive in, after, or out-of-school suspension, they will receive consequences based on the incident on the day the behavior occurred or on the day that DCH is notified as well as EBT.

## Visits/Contact

- Before an out of house visit with a friend occurs, DCH staff must contact the friend's parent/guardian to promote positive communication and discuss expectations for the visit.
- While on home visits, residents of DCH may not visit, call, date, or communicate in any way with any other resident or any other resident's family members. All rules that apply at DCH apply at home as well.
- Staff may monitor in-coming and out-going mail and phone calls per parent or worker request.

## Religion

- DCH supports residents who wish to attend religious services if their involvement does not contradict their treatment goals. Residents' parents will be consulted.

## Meals

- If residents do not like the dish being served during a particular meal, they have the option to eat a sandwich, salad, fruit, or leftovers.
- When friends or family join a resident for a meal at DCH, staff should be informed ahead of time.
- Residents are expected to attend dinner when they are at DCH but can order their own food only on Fridays and Saturdays.

## Bedtimes and Wakeups

- Residents must wear pajamas, shorts, sweats, or t-shirts to bed that cover their bodies from shoulder to mid-thigh. Thin, open-fly boxer shorts that are typically worn as underwear are not permitted.
- All residents are required to practice waking themselves up in the morning to attend school, activities, visits, meetings, work, or other appointments, by setting an alarm clock. On school days, staff will give one courtesy wake-up call at their designated wake-up time (based on school schedule and residents' requests).



- On weekends and no school days residents should be out of bed by 11:00am and must have their rooms and chores checked and approved by staff before privileges can be used. Residents who take medications must receive their medications no later than 9am.

### **Fire Safety**

- During a drill or actual fire, all residents and staff are to meet under the gazebo on the left-hand side of the House. Residents will be charged a fine for refusing to exit the building during a fire drill. Fire exits and extinguishers are only to be used in case of an actual fire or an evacuation drill. All residents are expected to participate in all other emergency preparedness drills when they take place.
- Fire exit windows must always remain closed and locked unless being used. The area surrounding all fire exits must be kept free of personal belongings and obstructions. Before exiting the building during a drill or actual fire, residents must close the door to the room behind them.

### **Transportation**

- Residents are not allowed in the House vans without staff. While in the vans, residents must always be sitting up, facing forward, with feet on the floor, and arms kept to themselves. Residents 12 or younger cannot be in the front seat. Residents must wear their seatbelts correctly.
- Eating and drinking are not allowed in the vans unless pre-approved.
- Seating in the vans will be determined by staff

### **Restricted Areas**

- Residents are not allowed to be in restricted areas (e.g. staff offices, kitchen, basement, recreation room, supply closets, etc.) unless supervised by staff. Residents must wait for permission before entering staff office when the door is half closed and should wait at the designated distance to ensure privacy for other residents making calls or receiving medications. Areas that residents should not enter without permission are delineated by blue tape. No more than two residents at a time are allowed in the staff office, one at a time during medication dispensation.

### **Employment**

- Residents are highly encouraged to obtain and maintain employment when approved by their treatment team. The locations and times of their employment is also subject to the discretion of their treatment team. Residents who are employed in any way must provide staff with their schedule. They are also required to open and maintain a savings account at a local bank with the DCH Independent Living Coordinator. Residents must deposit 75% of all earnings.
- Residents are asked to sign an employment contract to ensure they understand the expectations around maintaining their employment. If a resident is not at their job when assigned to work, engaging in illegal activity, or if treatment goals are not being met or addressed sufficiently, they will be asked to put in their notice at work.

### **Sick Policy**

- Residents must inform staff immediately when they are not feeling well. A temperature will be taken, and symptoms will be discussed. If an appointment is needed, staff will schedule one. Once placed on Sick Policy, the resident must remain in his or her bedroom the entire day and night to prevent the spread of illness. Residents on Sick Policy may not have privileges that day. If a resident is not placed on Sick Policy and refuses to attend school or a day program, he or she will also have no privileges.

## **Allowance and Money**

- Residents may not have more than \$20.00 in their possession at a time. Residents with more than \$20.00 must keep the excess money in their personal box in the staff office. Residents with over \$50.00 in their staff office account may have their money moved to the Program Director's office or the Office Manager's office and should sign a promissory note.
- All withdrawals from bank savings accounts must be pre-approved by the DCH Case Manager, and the DCH Program Director. All withdrawals from savings accounts may also be subject to the approval of the parent/guardian when appropriate.
- Residents can make \$9.50 per week for allowance by successfully completing daily room and daily chore. Residents who complete all their room cleaning and chores during the week will receive a \$1.00 bonus. Residents will earn \$1.50 after successfully completing their weekly general cleanup chore. Residents may also complete extra chores to earn more than \$9.50 per week. On Fridays, the allowances are calculated, and fines or court restitutions are subtracted. Residents receive allowance after completing their chores on Fridays.

## **Medication**

- Medication will be kept in a locked area and handed out in the staff office only. Medications need to be taken within an hour before or an hour after their prescribed time. Residents must take medications, one at a time, in front of staff and follow the directives of staff when administering their medication.
- Based on treatment plan goals, some residents may be expected to take some medications independently.
- Residents will earn consequences for having medication of any kind in their rooms. Residents who wish to stop taking prescribed medications must first contact the prescribing doctor to review the proper procedure.
- Over-the-counter medications will be dispensed at staff discretion.

## **Hygiene and Laundry**

- DCH supplies general hygiene items such as toothbrushes, toothpaste, soap, shampoo, feminine hygiene products, towels, washcloths, etc. Please ask a DCH staff member if you need any of these items.
- Residents may request a haircut through any DCH staff member once a month. Staff will schedule an appointment with a licensed hairdresser as soon as possible.
- Residents are responsible for doing their own laundry and will be given time to do so each week.

## **Body Decoration/Hair Dying**

- Residents may not pierce themselves or others while at DCH. New piercings are permitted for residents 16 and older with parent/guardian approval. Staff will support the resident in scheduling an appointment at an approved licensed facility.
- Residents may not tattoo themselves or others while at DCH. Non-offensive/non-discriminatory tattoos are permitted for residents 18 and older if they would like to make arrangements independently. Residents 18 and older must agree to follow the care instructions provided by the tattoo artist.
- Hair dying is not allowed inside DCH facilities. Hair dying is permitted outside for natural colors with parent/guardian permission. Unnatural colors must be approved by the parent/guardian and be done by a professional.

## Bedrooms

- Once rooms have been assigned, residents may not change rooms until the change has been discussed and approved in a staff meeting.
- Residents who leave electrical appliances or lights on when they are not in use may earn a fine.
- Food items are not allowed to be stored in bedrooms or lounges; they may be kept in residents' personal boxes in the staff office or in the kitchen. Residents may keep chewing gum and water in their bedrooms. Residents may eat or drink in their bedrooms or lounges with staff permission, and residents are responsible for returning any cups, dishes, and utensils to the kitchen before floor time each night.

## Miscellaneous

- Except for staff-approved, non-aggressive fish, residents may not have pets at DCH.
- Footwear and day clothes must be worn on the first floor, in all common areas and outside at all times. Socks or slippers, at the least, must be worn everywhere else on the second and third floors.
- Residents must dress temperature-appropriately (e.g. no heavy jackets, knit hats, or hoods worn inside). Jackets must be worn outside at staff discretion.
- Residents must wear bike helmets while on bikes, rollerblades, skateboards, etc. Residents must wear reflective gear while biking at night.
- All residents are required to inform staff of their whereabouts in the House, the community, and on grounds at all times.
- Residents may NOT have the following electronic devices until approved by program administration: TV's for bedrooms, laptops, cell phones, any device that connects to the internet including some iPods/MP3 players, and personal game systems. Upon intake, you are required to turn in any of these items and await approval from program administration.
- Residents may NOT illegally download any music at any time from a DCH computer or device. Residents will have access to 'itunes' music via a staff laptop to download music.

## PRIVILEGES

Residents will retain the following privileges daily unless residents engage in behaviors or choices that are unsafe, disrespectful and/or defiant. When engaged in those behaviors, privileges will be restricted, much like in a family/home setting. Daily privileges include:

- Use of lounges including the study lounge
- Paid activities with the group
- Use of the recreation room and equipment with staff supervision
- Have approved friends and visitors over

Additional privileges may be earned after being discussed in resident's first treatment plan meeting, or as agreed upon by the team based on resident's treatment focus. Residents will earn additional privileges by consistently demonstrating respect and responsibility for self and community. Those privileges include:

- Walk to and from school
- Use of electronic devices

- Attend school functions (i.e. sporting events, dances, prom, etc.). Negotiation between residents and the treatment team is expected if the function requires program changes (i.e. missing group, later floor time/bedtime, etc.)
- Off grounds, unsupervised visits with visiting resources that have been pre-approved by staff. Time will be decided according to individual needs and treatment plans.
- Planned, unsupervised time in the community at approved locations.

### DEFINITIONS OF SPECIFIC INTERVENTIONS

Every youth will have interventions that are made to be individualized and unique to their treatment plan. However, there are some rules and expectation that apply to all youth and some interventions that will be commonly used.

Abusive, corporal, humiliating, and frightening punishment will not be used at the DCH treatment program. The following punishments will never be used: denial of food, including snacks at scheduled snack times; denial of sleep; using rest as a punishment; denial of shelter, clothing, or bedding, solely as punishment; denial of access to a bathroom; denial of appropriate mail or visits with approved family members or imposing restrictions around home visits, solely as a punishment; imposing isolation or sensory deprivation techniques; mandating physical exercise when used solely as a punishment; using mechanical restraints; and allowing residents to discipline one another. Some of the following interventions are not an exhaustive list, but some of the commonly used interventions.

**Increased Supervision:** When determined to be clinically necessary, there will be increased supervision of a resident based off circumstance and need. Examples may include but are not limited to, increased room checks, increased direct supervision, increased overnight checks, and in certain circumstances with a staff member always.

**Room Time:** The resident must remain in their bedroom for a period not to exceed one hour without on-call approval. Room Time will be extended if safety or behavioral issues persist. This intervention is used when a resident's behavior is having a perceived negative influence on the program. Examples may include but are not limited to swearing, disrespect or continued non-compliance.

**Early Bedtime:** A resident will need to be prepared and in bed by 8:30. Early Bedtime is intended to remove the youth from the group of peers and help support them getting more rest if needed. Examples may include but are not limited to, disrespect to staff and or peers, aggressive swearing, general or specific program non-compliance.

**Office Restriction:** The resident is not allowed past the door frame of the staff office or allowed to use the phones in that area for a period of time determined by staff. This restriction is often used after a resident has refused to leave the area. Administration can enforce their own office restriction at their discretion.

**Kitchen Restriction:** The resident must remain out of the kitchen for a period of time decided upon by the staff due to the infraction. The resident will have food or other items that are necessary from the kitchen brought to them. Examples for this restriction may include but are not limited to, stealing from the kitchen, going into restricted areas, using kitchen tools in an aggressive manner.

**Privilege Freeze:** This is when a resident has their privileges "frozen" or unavailable to them up to 24 hours. Examples for this include but are not limited to, Non-compliance of daily routine (e.g. refusing to complete study hour, group, meals, refusing to attend school), Non-compliance with program expectations (e.g. refusing to do chores, clean bedroom/bathroom), inappropriate school behaviors resulting in detention, suspension, and or persistent disrespectful behavior toward peers or staff (e.g. name calling, insulting others, verbal abuse).

## LANGUAGE ASSISTANCE SERVICES FOR RESIDENTS AND PARENTS WITH LIMITED ENGLISH PROFICIENCY

Prior to admission, efforts will be made to identify youth and/or family members that have Limited English Proficiency (with the assistance of the referral source i.e. JPPO or law enforcement).

Language assistance resources such as use of bilingual staff members (if possible) or access to telephone interpreter services will be made available. Ascentria Care Alliance will be accessed as needed to provide interpreter services: 603-410-6183

Family members/friends will only be used as interpreters in rare situations in which the client is agreeable.

Additional LEP resources may be accessed in cooperation with DCYF and the Family Court system.

Guidance will be provided to staff on the language access requirements as well as services available to clients.

## GRIEVANCE PROCEDURE FOR RESIDENTS AND PARENTS/GUARDIANS

1. If you have any conflicts with Dover Children's Home residents or staff, you are encouraged to first work out the conflict directly with the individual you are in conflict with through a meeting, phone call, or letter.
2. If the on-going conflict is with a resident and cannot be resolved through a 1:1 meeting, talk to a Residential Counselor on shift.
3. If the on-going conflict is with a Residential Counselor, you have the right to make a formal complaint in writing to the Residential Supervisor on shift.  
\*The formal Grievance form can be located in the staff office and accessible to a resident at all times
4. If the on-going conflict is with a Residential Supervisor, talk to the Program or Clinical Director.
5. If the on-going conflict is with a Director or you have talked to a Director and still feel the conflict is unresolved, you may schedule a meeting with the Executive Director, to include all involved people. At this meeting, you will have a chance to discuss the problem and to suggest improvements or changes.
6. If you still do not feel that the problem is resolved following this meeting, the grievance procedure will move to include DCH board members. All grievances will be kept in the resident's main file for reference as well as program record file.
7. The timeframe to assess a grievance of alleged abuse will be within twenty fours or the following business day to start an internal investigation conducted by the administration. The matter should be a top priority and resolved in no more than five business days. If the grievance is of a nature of non-abuse allegation, the administration should respond to the matter within five business days.
8. If the grievance procedure moves on from one position to another person of authority, each new person making contact for the first with the resident's grievance has five business days to provide a response to the matter.
9. Once the grievance has reached the final party and a decision to the matter has been made, the resident will meet with the members of the administration involved and be informed of the outcome. A written response of this decision will be maintained in the Program Directors records as well as the resident's file. A resident has the right to have a professional advocate who is a member of the treatment team available by choice if preferred to help support the resident through the process.
10. A resident will not receive any consequences as a response to a grievance; nor will there be any retaliatory sanction for using the grievance procedure

**Appeal Process:** All residents have the right to appeal the decision of the grievance and can do this with a higher authority than the person who originally reviewed the grievance. The resident would need to write a written appeal request with the reasons for why they feel an appeal is warranted and the person who is determined to be of the higher authority will decide if the appeal has merit and should be reviewed. If the appeal holds merit, the person above the original decision maker will respond within five business days and re-review the information and decision from the original grievance claim and meet with the youth to review the appeal decision. This will be maintained in both the residents file and the programs records in the grievance section.

### **DISCHARGES**

- Once admitted to the Dover Children's Home, a discharge will not occur unless the resident has successfully completed the program; the resident has been accepted to another setting that can better meet their clinical needs, as determined in the treatment planning process; the resident is a danger to other residents and/or staff; the resident is a danger to themselves; after intensive program intervention, it is determined that a more restrictive environment is necessary for the resident's safety; or the resident requires a psychiatric hospitalization after an emergency mental health evaluation.
- When discharged from the program, residents will be charged for any lost loaned-out items as well as any damage they have done to rooms, bikes, furniture, or loaned-out property at the discretion of the Administration.
- During an unplanned discharge, program staff will pack up any items left behind by a discharged resident and place them in a secure area within 24 hours. Residents who wish to claim belongings must call ahead to schedule a time for an adult to pick up the items. Unclaimed items will be donated after 60 days.