Using the Youth and Family Rights Guides

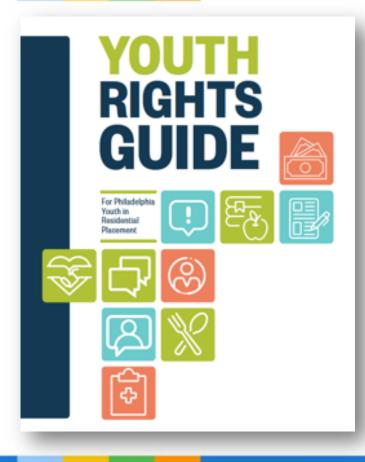
Implementation Webinar for Providers and Staff

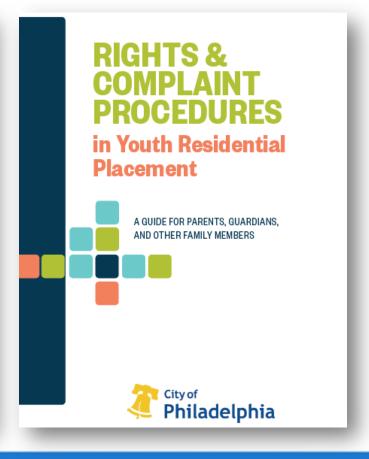
Youth Residential Placement Task Force
Department of Human Services and Community Behavioral Health
December 9th, 2020; 1-3pm



"Even though sharing rights with the youth is not new, it's clear that it was not effective in the past. So now we need to be changing the thought about how we are relaying this information to our youth, so they **are** aware."

-Residential Provider, shared in a review session





Today's Agenda

- 1 Welcome and Introduction
- 2 Youth and Families' Perspectives
- 3 Background and Goals for the Guides
- 4 Implementation Guidance & Monitoring
- 5 Specific Rights Content
- 6 Questions

Virtual Norms

- Webinar-style virtual meeting
- Only presenters will have microphone and camera access
- Use the "Q + A" box at the bottom of the screen to ask a question throughout the presentation. Please write the name of the presenter the question is directed towards, if possible.
- Questions will be answered at designated times

Goals for the Webinar

- Understanding the guides
 - Rationale
 - Their content
 - A helping hand for youth and your residential location
- Understand expectations and suggestions for implementation
- Answer questions about the guides



Youth and Family Perspectives



Youth and Family Perspectives







Melodie

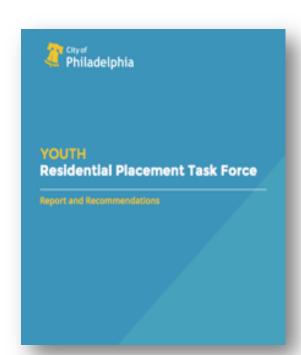
If you heard you would get a Rights Guide, what do you hope it would be like?

"Can we see it more than once? Like, repetition is important. Have a follow-up meeting to review it again. I'd want it immediately but also for someone to go over it again."

"Having this knowledge and awareness would have helped me cope with my transition into the group home." "That it would give me an idea on what the laws were, what was allowed...knowing that would help me feel comfortable and supported."

Quotes from Youth Advocates

Background: Youth Residential Placement Task Force



- Convened by City Council, met for a year
- City partners, School District, Courts & DA, Advocates, provider, youth & family representatives
- 19 recommendations
 - System-Level Reduce the Use Improve Quality
 - Improve Safety -Education Quality
- Blueprint for reform work within and across systems
- Created Rights Guides for Youth and Families, part of improving grievance processes

Background: Guides Content

- What? Pennsylvania 3800 licensing regulations, CBH Performance Standards and DHS Congregate Care contract scope
- Who? Input on format and content from community groups who had experience with the residential placement system
 - **Special thanks to**: The Office of Homelessness Services' Young Adults Leadership Committee, the Juvenile Law Center's Youth Advocates, DBH's Family Member Committee, and residential provider forum participants



Goals for the Guides: Youth and Families

The guides will contribute to:

- Youth ...
 - Feeling supported, respected, safe, and informed
 - Being empowered to speak up for their needs or for help
- Families ...
 - Being a respected and informed part of their child's care
 - o Increasing their confidence and trust in the provider to care for their child

Accessible, clear, transparent information

Goals for the Guides: Providers and Staff

The guides will contribute to:

- Providers ...
 - Meeting targets for providing high quality of care to youth & families
 - Building a supportive culture and adhering to licensing standards at the residence
- Staff...
 - Having common language and knowledge to communicate with youth
 - Responding to fewer behavioral challenges on account of youth having access to information, easing their anxiety around unknowns and safety

Implementation Guidance

Implementation Guidance & Monitoring



- The policy and procedures memo/bulletin accompanying the Guides detail expectations for their use
- Guides' use is effective January 1st, 2021
- Highlights
 - Must provide, review, re-review with youth and families
 - Staff explaining guides need detailed knowledge, with all staff having a familiarity

Implementation: Ideas from Youth/Family Members & Fellow Providers



- Provide staff training on the guides as part of on-boarding
- Have family/youth peers present for explaining the guide
- Post the guides in common areas for accessibility
- Hold ongoing education sessions on the guides for youth as "check-ins"
- Incorporate into house meetings regularly
- Add into guardian and youth intake handbooks

Questions?

Specific Rights Content

What's Covered in Each Guide

Both

- My/my child's team
- Being informed
- Knowing how to make a grievance
- Having a plan
- Staying Safe: Preventing abuse and avoiding the use of restraints, exclusion and seclusion

Youth Rights

- Being treated in a fair and respectful way
- Meeting my personal needs
- Keeping my money and personal items safe
- Going to school
- Staying connected and having my privacy

- Getting health services
- The building's conditions

Family Rights

- Staying connected with my child or family member
- My child's health plan and treatment

What to Expect on the Following Slides

- On the next section of slides, you will see screenshots from the actual guides. These Guides:
 - Were emailed before the presentation
 - Can be found online here: https://www.phila.gov/hhs/accomplishments/Pages/youthtaskforce.aspx
- You will have ~20 seconds to skim each slide and page from the guide before we review it. Don't try to read it all now!
- Today, we will focus on certain rights from that section, shown with a star

Why am I getting this Youth Rights Guide?



I'm getting this guide because I'm staying at a residential facility.



The guide will tell me about my rights and how the people here must treat me. This helps me stay informed, supported and safe by knowing what is right and what to expect. Knowing these things will help me say what's up if something is wrong and get people to fix the problem.



My parents or guardians should also know my rights <u>and</u> their rights. There is a guide for them called the "Family Member/Guardian Guide."

Why am I getting this guide?

- For dependent, delinquent (non-State secure facilities) and psychiatric residential treatment placements
- Given so youth know their rights
- More information = greater safety

How should I use this guide?

I should use this guide to:



LEARN the rules that the facility must follow to keep me safe



FIND ANSWERS to my questions about what can happen here and ask someone if I can't find the answer



ASK for something the guide talks about, but I don't have



SPEAK UP for myself is something is wrong with my care or the facility



KNOW who is on my team and how to get help if I need it

How should I use this guide?

- Shows how the guide is useful to them
- Guides act as information access and tool for self-advocacy

About Me

- Page requested by youth advocates
- Youth are seen & validated
- Prompts that are important to youth & their identity
- They may complete in private

ABOUT ME

Male Female Transmale Transfemale Non-binary Prefer not to say s are:
Transmale Transfemale Non-binary Prefer not to say
Transfemale Non-binary Prefer not to say
Non-binary Prefer not to say
Prefer not to say
s are:
that are Important to me:
re:
tant to me:

MY IEAM	a lot of people on it or a few. They are all here to care about me and help me reach my goals.	
	Check each person who is a part of my team.	
▼ TEAM MEMBER	NAM	E AND CONTACT INFORMATION
CASE MANAGEMENT TEAM		
Case Manager at my placement facility		
Supervisor at my placement facility		
Unit Manager		
My DHS/CUA Case Manager		
DHS/CUA Case Manager's Supervisor		
COURT/JUSTICE TEAM		My Case Number is:
Child Advocate		
Judge		
Lawyer/Public Defender		
Juvenile Probation Officer (JP	O)	
DHS Court Representative		
EDUCATION TEAM		
Education Decision Maker (ED	OM)	
OTHER TEAM MEMBERS		
☐ Treatment Team		

should know who is on my toam. My toam might have

My Team

- Lists name and contact information for case manager and other key professionals
- Includes case manager supervisor, treatment team or juvenile probation officer, as well as education support
- Information found in placement packet; some may require follow up



WHAT ARE MY RIGHTS?

A right is something already mine by legal protections of the law and DHS/CBH rules. Starting from day one here, I have the rights that are in this guide.

A few of the items in this guide are not legally protected. When I see the words "should," or "I can ask," it means DHS or CBH think that the idea is respectful and encourage the facility to do it, but it is not a right.

I do not have to
earn my rights
or get them as
a reward, especially
communicating with family.

» I must not lose my rights for any reason. This means cannot lose my rights as a punishment, especially communicating with my family. The court may make limits on this depending on my situation.

What are my rights?

- Offers definition to youth of a "right;" legal protections
- "Should" and "I can ask" indicate best practice, not legal rules
- Rights cannot be earned as reward or lost as punishment
- Family communication is critical to wellbeing; **not** allowed to be <u>withheld</u> or earned based on behavior

Being Informed

- Must receive paper:
 - Youth Rights Guide
 - Family Rights Guide
 - Facility Grievance Process
- Make multiple family contact attempts
- Review every statement in guide(s)
- Share rules for item or person searches





- I, and my parent or guardian, have the right to get a paper copy of both this Youth Rights Guide and this facility's steps to make an official grievance or complaint. Someone at the facility must go over both with me and any parent or guardian. They will explain the information in the language or type of communication I need.
- I have the right to keep both documents with me and in my room so I can look at them when I need. I can ask to have another copy if I lose it.

- I can ask questions about anything that doesn't make sense.
- The facility must tell me the rules on why, how and when me, my room or my personal items may get searched.
- I have the right to know what is going on with my case in the Court. I can talk with my lawyer in private about what it's like for me here, questions I have or things that upset me.

If I have more questions about Court, I can look at Info from the Juvenile Law Center here:

https://tinyurl.com/courtrightsJLC



Knowing How to Make a Grievance (Complaint)

- Right to share what feels wrong, unsafe or unfair with care, without retaliation
- Can get support to write/submit
- Privacy and reporting options
- Residence and outside options need to be discussed



KNOWING HOW TO MAKE A GRIEVANCE (COMPLAINT)

The rules my facility must follow are meant to keep me safe and well. It might feel weird to do but I should share about a problem or if something is wrong, unsafe or unfair so it can get fixed. The word for telling others about my problem officially Is a "grievance." It's what I can do when I have a



I have the right to speak up and make a grievance about my facility, my rights or my care if I want to.



The facility cannot punish or threaten me or my family if we make a grievance.

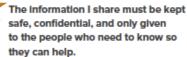
problem, concern, or complaint.

I can write about the problem myself or I can ask for help from my case manager, lawyer, parent or guardian. They can also help me send it to the right people. The words for this are "filing a grievance."



My parent or legal guardian can file a grievance for me using the facility steps or contacting the people in the chart on the next page.

I have the right to make and file my grievance in private (away from others who can hear me or read my writing), it does not matter if I say it out loud, write it down, use the phone. email, or paper mail, I can say my name or not. Staff are NOT allowed to read any mail I send out of the facility.





I have the right to ask for help from people or agencies who don't work at my facility.

I am free to contact and report my problem to anyone at any time, including my lawyer or Childline. This is just a suggested way to get help.

What's happening:

I have a problem.

telling anyone at Example: My clothes my facility or the are starting to get too tight.

problem got bigger. Example: I have not gotten bigger clothes.

I can pick how I want to aet help:

Call on the phone











and





Example: I have no clothes left that fit me.

My problem got

worse and I don't

know what to do.

Who to ask for help:

Staff I trust at the facility if I feel safe.

If I am In the child welfare system:

My DHS or CUA case manager; then their supervisor if they don't answer.

If I don't have a DHS or CUA case manager:

- Community Behavioral Health Member Services 1-888-545-2600
- My Juvenile probation officer (JPO)

My lawyer

If I am in the child welfare system:

- The Philadelphia Department of Human Services Commissioner's Action Response Office (CARO) (215)-683-6000 or
- If I don't have a DHS or CUA case manager:

dhscaro@phlla.gov

- Community Behavioral Health Member Services 1-888-545-2600
- My Juvenile probation officer (JPO)

My lawyer and child advocate. My rights have been taken away or broken.

Example: The facility tells me I must earn talking time with family.

I am being hurt. abused, neglected (not cared for) or feels unsafe in any way.

Send a note

In the mall

6

Write

a note

Talk to

them

If I am In the child welfare system:

My DHS or CUA case manager; then their supervisor if they don't answer

Staff I trust at the facility if I feel safe.

The Philadelphia Department of Human Services Commissioner's Action Response Office (CARO) (215)-683-6000 or dhscaro@phila.gov

If I don't have a DHS or CUA case manager:

- Community Behavioral Health Member Services: 1-888-545-2600
- My Juvenile probation officer (JPO)

My lawyer and child advocate.

The Pennsylvania Child Abuse Hotline. ChildLine at 1-800-932-0313

Childline takes calls

24/7 and will move to get more help based on the level of immediate risk to me. Action could be right away for abuse

claims, to a few days

for other concerns.

The local police department

Anyone on my team I trust a lot. They can tell the right people for help.

Ways to get help:































BEING TREATED IN A FAIR AND RESPECTFUL WAY

- I must be treated in a fair and respectful way. No one can treat me differently because of my sex, race, color, ethnicity, language, culture, how much money I have, ancestry, gender identity, sexual orientation, religious beliefs, national origin, age or disability.
- The facility must not discipline me in a way that causes me physical, emotional or mental harm.
- The facility must provide safe housing for me in a way that affirms my gender expression.
 - Other people should also use my name and pronouns of choice.

- Variety of backgrounds, common ground of respect
- No additional trauma from stay
- Youth psychological wellbeing is critical surrounding gender identity



I must not be abused by anyone at the facility, including mistreatment, harassment or threats. Abuse can be physical, sexual or emotional and it is never ok for any of these things to happen:

Physical abuse: actions done on purpose or recklessly that leave marks or cause injury, pain, damage, weakening, or disrespect to my body. Sexual abuse: any sexual contact between me and a staff member. It is also any unwanted sexual contact between me and a peer or wanted contact where our age is much different. Plus, it could be any time I feel like I must watch, do, take part in anything sexual that involves me and others. It is any time I feel like I can't say "no" because I am worried about getting in trouble.

Emotional abuse: actions or words that make me feel afraid, rejected, harassed, ignored, threatened or bad about myself.

- Tell youth who "anyone" means: peers, aides, staff, etc.
- Explain each type
- Always take their concerns seriously

Questions?



HAVING A PLAN AT THE FACILITY

- Individualized goals guide care and services, define what factors impact discharge
- Youth and family have a voice at every step
- Culturally responsive & strengths-based
- Align with other service plans



I have the right to know why I am here and how long I can expect to be here. If it's not known how long I will be here, I should hear why they don't know.



The facility must let me, my parent or guardian, and others we ask, help make a plan that meets my needs and goals because my family knows me best. I can ask about changing the plan if it is not helping.



The plan and care I get must be strengths-based and be respectful to my culture and language.



If my family wants to help when the plan is made, the facility must try more than once to find a time and place that works for us. The facility must write their tries down and any reasons why my family can't join.

Some important things in this plan are:

- Our goals to help me feel better and how long the goals might take to finish
- Info on ways my family will stay involved during my care
- · Info about my school time
- A plan to help me calm down when I get upset and any strategies that can help me or are safe for me

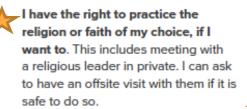
This is called "discharge or transition planning"

I have the right to take

part in planning for my future to get
me ready to leave the facility when
it is time. This should start at the
beginning of my time here and let me
take part the whole time I am here.



MEETING MY PERSONAL NEEDS



 I must have clean and comfortable clothing that fits me. It must also match my age, gender identity and the season.

I must have personal care and hygiene items. This includes products that I need for my gender, gender identity, sex or ethnicity.

» I must have time to take care of my hygiene needs like teeth brushing and showering.



 My clothes, bedding and towels must get washed at least every week.

I must get at least three meals and one snack every day, with as much water as I need. At meals, at least one food item will be there for "seconds" if I want more.

The facility must give me food and water no matter how I act.

I have the right to eat food that matches my medical (with a doctor's note), religious, or vegetarian preferences.

- » My food must be healthy and fresh.
- » I can use household appliances, like a microwave and refrigerator, if it is safe for me to use them.

- Free practice, or not, of religion
- Specific medical, religious, vegetarian food preferences
- Appropriate products needed for cultural responsiveness
- 3 meals, 1 snack (+seconds) and unlimited water
- 1x weekly clothes & linen washing



KEEPING MY MONEY AND PERSONAL ITEMS SAFE

My personal items and room are important to me and can help me cope during my time in placement. Like me, they should be respected and cared for at all times.



I have the right to keep all money that I earn or receive because it is my personal property. It might stay in a bank account.

 However, if I am in a juvenile justice facility, I may owe part of the money I earn to the Court. This is called restitution.

I can know:

- How much money is put in and taken out of my account
- What reasonable amount of money
 I can get out of my account
- How much money I have total

The facility must tell me the rules on why, how and when me, my room or my personal items may get searched.



The facility must have an important reason and need to look on me, in my room or at my things. For example, there is a reason to believe I have something harmful, or not allowed. The facility cannot look at my things just because they want to. At the PJJSC, all rooms and personal property are searched three times a week. My room should be left tidy when they are done.

My money must stay away from money the facility uses. My money cannot be used for other kids, staff, materials, or items for everyone.



I must get all my money given back to me when I leave a facility.

- The facility must tell me if some items are not allowed at the facility and why.
- I should have the chance to get a paid job, internship, or other career preparation to prepare me for adulthood. But my guardian and sometimes the facility or Court can decide what works for me.



If I have a job offsite, my facility, team members and I should have a conversation about my work hours because the facility might make rules about a reasonable time I need to be back at night. How strong the search is should be match the risk of me having what they are looking for. Some items, like a weapon, are more dangerous than others. Staff should be careful with my stuff when they look and never willfully throw away, break or lose my items.



If my personal items get taken, because they are not allowed, the facility must write down what they took. If the items are safe, I should get them back when I leave.

I can work with my case manager to get my needed documents. These might be my social security card, my health insurance card and my ID card.

Youth Rights Guide

My Money & Personal Items

I have the right to

keep all money that I

earn or receive

because it is my
personal property.

The facility must tell me if some items are not allowed at the facility and why.

If I have a job offsite, my facility, team members and I should have a conversation about my work hours.

- Right to their money & info about it
- May have restitution

- Offers normalcy
- Support access aligned with facility schedule

My Money & Personal Items

The facility must tell me the rules on why, how and when me, my room or my personal items may get searched.

The facility must have an important reason and need to look on me, in my room or at my things.

If my personal items get taken because they are not allowed, the facility must write down what they took.

Eases sense of invasiveness

- Protection from unreasonable search & seizure
- Keep in mind intensity of search

 Record items taken, return if possible





I have the right to share my opinion in making decisions about my education, including where I go to school.

My options can be going back to the school I was in before, going to the school other kids in that neighborhood go to or staying on-site. What school I go to might depend on how far away the school is, the community's safety, and any of my own education, safety or treatment needs..

A judge might decide what school I will go to. This could be the school on-grounds at my facility.

- » I must get signed up and start classes right away if I do change schools.
- My team must be able to get Information about my grades and credits from any school that I've ever gone to.

I have the right to take part in fun things like music, sports, or other afterschool clubs. These could be at the facility, in the local community, and in my home community.

This will depend on what's safe for me and what's available. My case manager and the staff at my facility should plan for this together. My judge might ask me if I am doing any of these fun things.



I have the right to get the supports
I need to learn and get closer to
graduating. If I need or have an
Individualized Education Program
(IEP), I must get the services and help
listed in my IEP.

I have the right to academic lessons and work that match my skill and are right for how old I am.



- Residential placements can interrupt youth's progress towards graduation
- Required to work with school districts and the Education Support Center

Going to School

"to share my opinion in making decisions about my education, including where I go to school."

- Youth input in decisions
- Limit school changes and support access to local schools

I have the right to take part in fun things like music, sports, or other afterschool clubs.

I have the right to get the supports I need to learn and get closer to graduating.

 Access to extracurricular activities and needed supports (ex. IEP)



STAYING CONNECTED AND HAVING MY PRIVACY

- Value maintaining family connections, however defined by youth
- Face to face family visits at least every 2 weeks, transportation supported
- Phone and mail access
- Respect confidentiality



I have the right to say who is family to me. They might be an aunt or even sports coach if I choose them to be in my life. How much some people can take part in my life might depend on my age or a court decision.



I have the right to visit with family in-person at least one time every 2 weeks. The time and location must work for me, my treatment needs, my family, and the facility, but is ideally in our home community. The facility must help support transportation to and from the facility for our visits if we need it. I can visit with them more times if it is possible.

- This might depend on any limits set by a court order. Virtual options visits should not replace in-person ones.
- The facility must help me keep my ties to my home community and relationships.



I have the right to contact my family and loved ones using the telephone without unreasonable limits. Sometimes the court might make rules about who I can talk to or for how long if they are worried about my safety.

My facility might also have rules about using cell phones, video chatting, email and/or social media. They must share those rules with me. I have the right to send, get, and keep mail.

Staff can't open or read mail that:

- I send out of the facility;
- is from my attorney or government officials;
- Is from others. I might have to open the mail I get in front of a staff if there is reason to think that not allowed items or other harmful info is inside.



I have the right to talk, communicate and share items with my attorney or clergy in private.

Staff must not talk about my physical or mental health, our talks or other confidential info with others who are not on my team or have no need to know, because it is illegal under law. If I said something that is unsafe like wanting to hurt myself or others, the staff member can only talk to the people who need to know so they can help.

The facility must keep my medical and personal info private and in a secure location. This includes my mental health information.

Staying Connected—Family Member Guide

Facilities and case managers must work towards successfully bringing my child back home after treatment, helping us reunify or find other permanency, and re-integrating into the community depending on our situation. This includes teaching me skills to help my child and their behaviors back at home.

- Role of organization and DHS/CUA staff
- Successful transition out of care
- Teaching skills



GETTING HEALTH SERVICES

- Assessment soon after entry
- Mental health treatment decisions can be made by youth 14+, or guardian if under 18 yrs.
- No over-medication
- Access to sexual health services







I must get appropriate medical, dental, mental and behavioral health services to help me stay healthy. When I have an emergency, I have the

right to get the help I need.

I must not get more medications than I need for my health.

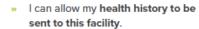
I, my parent or my guardian should be told what medications I am prescribed and their effects on my mental or physical health, unless I need the medicines in an emergency.

 I should get sexual health services (education, contraception, prevention) that match my age.

» I have the right to get tested and treated for a sexually transmitted disease or pregnancy if I want them. I can also get help for drug or alcohol abuse. This must happen in private so I am not singled out.

But I need a legal guardian to say it's ok for me to get an abortion if I am under 18. If my guardian doesn't agree with me, I can ask for the Court to hear my opinion.

I have the right to know what my health history says in most cases. Sometimes my parent or guardian has a say in who can see or get the info.





The facility's medical professionals must do a written assessment of my health and safety within 24 hours of my arrival, or 1 hour in secure detention.

If I have a health or safety risk, the facility must make a plan keep me safe. This plan must be in writing and done within 24 hours of the assessment.

Medical professionals must do a full health exam within 15 days of when I move in if my last exam is too old. This must be within four days if I'm in secure detention.

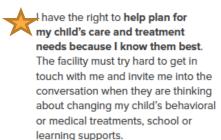
If I am 14 years or older, I can agree to mental health treatment without a parent, guardian, or agency approval. My parent or guardian and a doctor can also approve mental health care for me if I am younger than 18, even if I do not want it.

If I disagree with my guardians, I can ask the facility director for an objection form to give to the Court. I will have a court hearing within 3 days to pick what is the best path for me

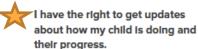


MY CHILD'S HEALTH PLAN AND TREATMENT

- I have the right to approve the facility to provide or connect my child with routine health care, such as health exams, dental care, vision care, hearing care and when hurt or sick. The facility should ask me for this approval at admission if possible.
 - If my child is over the age of 14, they can give permission for mental health treatment. If I think it is best for my child, I can also make the decision for them to get mental health treatment even if they don't want it, if they are under 18.
 - The facility must ask my permission to give my child additional treatment, like surgery. If the facility can't get in touch with me after many tries, the facility must get a court order. If it is an emergency and waiting would put my child in danger, they don't need to ask me first, but they still need to tell me.



 If my child needs special education, myself or their education decision maker must sign off on the Individualized Education Program (IEP) and recommended school.



The facility must tell me if they think my child would do better at a different facility or has made enough progress on their goals to be discharged. If possible, the facility and I should talk about this before my child goes to a new facility.

Health Plan—Family Member Guide

- Highlights communication and notification to family members
- Consent for treatment
- Kept involved and updated on progress and plans



THE FACILITY'S CONDITIONS

- » The look here should be homelike and calm, with youth ideas on decorations. The facility must let me have choice and self-expression in my room decorations. This is as long as they are not against facility rules.
- The facility must be clean and without harmful, threatening, or unsanitary conditions. This means no mice, rodents, bedbugs and infestations of bugs or insects.

- Safe and clean building
- Expectations regarding upkeep
- Youth input where possible
- Incorporate shared ownership and responsibility

STAYING SAFE IN CRISIS

Preventing the Use of Restraints, Exclusion and Seclusion*

Sometimes, I might feel a lot of emotions. I could need help with these feelings and calming down in ways that work for me. It is the facility's job to help me learn the skills I need to take care of my feelings in healthy ways.

- » First, staff must let me try many ways to calm down.
- » Then, if I can't get calm and I start using dangerous behaviors, everyone's safety is important.
- As a last resort, staff might use a "restrictive procedure" to protect me from harming myself or others. It is a last resort because nothing else helped me get calm and it doesn't feel good for anyone.

The three types are:

- Restraint: stopping my movement temporarily
- 2) Exclusion: being removed from an activity to stay in a room alone
- Seclusion: staying locked in a room alone
- » If staff use one of the types, It must happen in a safe way for the shortest time needed.
- » When I am calm again, staff must stop right away.

- » I must have a personalized plan**
 if my health and personal past show
 that I need one to keep me or other
 people safe. This will list information
 about any unsafe behaviors I have
 had before, ways to stop my unsafe
 behaviors before they happen, and
 ways to keep me safe if a restrictive
 procedure is used. I (with my parent
 or guardian if I want) can help make of
 the plan and get a copy of it.
- » My team and I must review the plan at least every 6 months. We can talk about the plan sooner if we don't think it is helping keep me or others safe.

A NOTE ABOUT STAFF

Staff cannot use one of the types to punish me or to make their job easier.

Staff who do any type of restrictive procedure MUST have had training in the last year. Some of the things staff must learn are: ways to de-escalate, behavior reactions to stress that are normal for my age, and safe ways to do a restrictive procedure if needed. Staff must never ask or make another youth do one of these procedures to me.

Facilities must also use special trainings and have plans that research proves helps lower and stop the use of these procedures.

STAYING SAFE IN CRISIS

Preventing the Use of Restraints, Exclusion and Seclusion*

- Last resort to protect harm, deescalate first
- Never to punish, youth-youth, or longer than needed
- System move towards reduction and elimination
- Explain Restraint, Exclusion and Seclusion as applies to that setting

STAYING SAFE IN CRISIS

Preventing the Use of Restraints, Exclusion and Seclusion*



NEVER ALLOWED

- "Hands on me" restraint where I can't breathe. Staff MUST NOT put weight on my mouth, nose, neck, chest, belly or back because this could cause extreme danger. A chokehold is NOT allowed.
- "Hands on me" restraint with me face down on the floor. Staff must also not put me to the floor or anywhere else in a violent way as punishment or trying to get back at me for anything I did.

- » Pressure point techniques (causing pain to get me to follow a direction, example: pulling or twisting ears or squeezing arms or wrists)
- » Aversive conditioning (Using things that are startling, painful or harmful to my senses example: splashing water in my face)
- Wing drugs to relax me when it is not an emergency

ALLOWED AT ALL FACILITY TYPES

(ONLY to keep me or others safe and if there is absolutely no other option)

A "hands on me" restraint

- » The staff or kind of a "hands-onme" restraint must change every 10 minutes until I am calm again.
- "I must be able to breathe if staff use a "hands-on-me" restraint. Staff MUST NOT put weight on my mouth, nose, neck, chest, belly or back because this could cause extreme danger. A chokehold is NOT allowed.
- » Another person must watch the staff doing the restraint to make sure they are not hurting me. This person will take notes on how I am doing while they use the restraint.

Emergency use of drugs to relax me if I can't be calmed down. This is only allowed if a doctor examines me first, approves it and a medical professional gives the drugs.

Having me leave one place to be in a room alone (Exclusion)

- » Staff cannot use a "hands-on me" restraint when I am in the room.
- » This cannot last more than 60 minutes in a 2-hour period. I cannot be in a room by myself more than 4 times in 24 hours.
- » Someone needs to be check on me every 5 minutes, so I am ok.
- The room must be bigger than a closet (at least 40 square feet), with light, air, a view outside the room, and nothing in it that could hurt me.

Bite release

(pushing on my jawbone to make me stop biting someone)

ALLOWED ONLY AT A SECURE FACILITY

(ONLY to keep me or others safe and if there is absolutely no other option)

A secure facility means I am Involved in the juvenile justice system and the facility has locked doors or fences that stop me from leaving.

Being locked in a room by myself (Seclusion/Isolation)

- » A boss must give approval before seclusion starts. A "floor staff" cannot order me into seclusion.
- » Two different people need to check on me. One person checks on me every 5 minutes. A supervisor must check on me every 2 hours to see how I am doing emotionally and physically.
- » Seclusion must be for less than 4 hours. If I am still not calm, a medical staff must make sure I am safe and write that I can stay another 4 hours at most. It If Is longer than 8 hours in a 48-hour period, there must be a court order and a reason to keep me there.
- The room must be bigger than a closet (at lest 40 square feet), with light, air, a view outside the room, and nothing in it that could hurt me.

Mechanical Restraint

(a device to stop my movement)

- The only types that are allowed are behind the back handcuffs and leg restraints. Handcuffs in front of me are allowed with a transportation waist belt.
- A supervisor must give approval before they are used. A "floor staff" cannot order me to wear them.
- » I cannot have them on If I am In seclusion.
- » I cannot be handcuffed to another person or thing.
- I must be able to eat, use the bathroom or meet my other physical needs.
- » I can only have them on for 2 hours in a row, unless a medical staff makes sure I am ok and writes that it is safe for another 2 hours.
- I cannot wear them longer than 4 hours in a 48-hour period unless there is a court order and a reason to keep using them.
- The restraints must come off for a 10-minute break every 2 hours.

Having a child in a residential placement can be stressful for anyone and it's normal for me to think about my child and their safety when I'm not there. The facility must take many steps to prevent any type of harm to my child.

- » The staff caring for my child are essential to having a safe and nurturing space.
 The facility must make sure, and keep records, that all staff:
 - · Pass child abuse, criminal history and FBI background checks;
 - · Get training about trauma and how it plays a role in what my child or I go through
 - Get training about trauma-informed strategies for working with me and my child, ways to compassionately de-escalate a situation, and ways to handle crisis situations safely

ABUSE OR EMERGENCIES

- I can make a report to Childline or my lawyer at any time if my child tells me or I think they are being hurt, neglected or feel unsafe—physically, sexually, or emotionally.
- Plus, the facility must tell me immediately if anyone at the placement (staff or other kids) is suspected to have seriously hurt my child. They must also report this to Childline immediately. During the investigation, each facility must have a plan to make sure that all children are kept safe during the investigation. This usually means that any staff who is under investigation is not allowed to work in the same area with youth.
- I must also be told immediately about any serious incidents that happen to my child. This includes things like going to the hospital, an outbreak of sickness, or their rights' were taken away. To see the full list of things I must be told about, I can search "55 Pa Code 3800.16" online or ask the facility for a copy.
- I must also be told if my child is offsite without staff approval for more than 4 hours or more than 30 minutes if they could be in immediate danger. I can ask the facility during plan making if I would like to be told sooner.
- The facility must give me a copy of their plan for medical emergencies as soon my child starts there. I must be told immediately if the emergency plan is needed for my child, or if my child has a bad reaction to any medications.

MY CHILD'S SAFETY:

Preventing Abuse and Avoiding the Use of Restraints, Exclusion and Seclusion 3

- Address a primary parent/guardian concern—child's safety
- Staff requirements and training, communication to families about safety onsite

Choosing the Least Restrictive Safety Option

Sometimes, my child might feel a lot of emotions. They could need help with these feelings and calming down in ways that work for them. It is the facility's job to help my child learn the skills they need to take care of their feelings in healthy ways.

It is also their job to make the facility safe and healing. This means that they must work to use the approach and procedure that is the least restrictive to keep my child or others safe. This starts with trying to deescalate any unsafe behaviors and only moving to intrusive procedures if nothing else worked. The staff are never allowed to use one of these procedures because they are mad at something my child did or because they want their job to be easier.

However, it is important for me to know that Pennsylvania still allows the facilities to use some procedures if there is a safety risk. To make sure my child is as safe as possible if one is used, there are rules to follow to avoid harm.

My child must have a personalized plan* about when and what types of procedures could be used. They will get a plan if their health and personal history show they need one to stay, or keep others, safe.

- My child and I have the right to help make the plan, along with any person invited by my child or me, or other professionals. Here, we can share our ideas on ways that help my child calm down (including how I could support if I wanted) and also what I want for my child's safety.
 - The plan will also have information about what type of unsafe behaviors my child has, any signs that show the behavior is coming and thoughts about why the behavior happens. It will also talk about ways the behavior can be stopped before a more restrictive procedure is used (like changing who my child is around, the room they are in, or their routine).
 - I can ask the facility about what program and types of procedures they use.
- The plan must be reviewed at least every 6 months. We can talk about the plan sooner if we don't think it is helping keep my child or others safe.
- The facility must contact me if they think changes need to be made to the restraint plan.
- » I must have the chance to sign the restraint plan.

Choosing the Least Restrictive Safety Option

- Outlines role of provider in helping teach skills and deescalate behavior first to avoid restraint procedures altogether
- Discusses guardian's involvement with making safety plan

Questions?

Recap

- Reflect on goals for meeting and youth/family perspective
- Reflect:
 - A right already known
 - Two rights learned
 - One right you still have questions about
- Questions can be submitted and will be answered in FAQ document

Thank you!

Please direct any follow-up questions to: PhilaYouthResidentialTF@phila.gov

Recording will be available