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PROTECTING CLIENTS FROM HARASSMENT AND VIOLENCE POLICY

- I. Purpose.** The purpose of this policy on protecting clients from harassment and violence (this "Policy") is to ensure staff takes proactive measures to protect the client population from being traumatized or retraumatized.
- II. Scope.** This Policy applies to all TFS Employees, Students, Volunteers, and Contractors.
- III. Policy.** It is the policy of TFS to promote an environment where the safety and wellbeing of its client population and staff is paramount. Harassment and violence toward the client population will not be tolerated.
- IV. Definitions.** Capitalized terms not otherwise defined below but used in this Policy shall have the meanings assigned to them in this Policy.
- (a) "**Harassment**": to create an unpleasant or hostile situation for especially by uninvited and unwelcome verbal or physical conduct.
- V. Responsibilities.** All agency personnel are required to take a trauma informed approach to their work anticipating and responding to potential practices that may be perceived or experienced as retraumatizing to clients, allowing them to forge new ways to respond to specific situations that trigger a trauma related response, and providing clients with alternate ways of engaging in treatment.

Agency personnel are expected to foster and support positive behavior through developing positive relationships with clients and their families, building on strengths and reinforcing positive behavior and responding consistently to all incidents of harassment and violence.

TFS staff are required to proactively plan for the safety and wellbeing of service recipients at all times. This includes individual, family, and group sessions/gatherings. Planning efforts should consider participants' history of trauma and/or participants who have a history of being the victim of or perpetrating crimes.

Staff are required to utilize verbal de-escalation techniques and avoid use of hands on interventions to the greatest extent possible to manage a potentially unsafe or unsafe situation. Mechanical or chemical restraints are not to be used under any circumstances. Any person who is witness to harassment or violence in a Tides sponsored environment will first take the necessary steps to ensure that all parties involved are safe and then contact a supervisor or administrator.

All situations involving harassment or violence are to be documented and reviewed according to the TFS incident reporting guidelines. All situations involving harassment or violence involving a TFS employee will be reviewed by the Sr VP of Treatment Programs and Human Resources within 24 hours of the incident and disciplinary action up to and including termination will be taken.

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If a student/client is the victim of harassment and/or violence while in the presence of a Tides Employee, the parents and or guardian of the client will be notified immediately and will be invited to have input into follow-up measures to ensure their child's safety. Parents/Guardians may file a grievance according to the TFS client grievance policy (which is disseminated at intake) if they feel TFS has violated its policy on Harassment and Violence Prevention.

CRISIS INTERVENTION PREVENTION POLICY

- I. Purpose.** The purpose of this Crisis Intervention Prevention Policy (this "Policy") is to outline practices used to maintain a safe environment and prevent the need for crisis interventions.
- II. Scope.** This Policy applies to all TFS Employees, Students, Volunteers, and Contractors.
- III. Policy.** It is the policy of TFS to provide a culture in which individuals are supported in the management of their own positive behavior and promotes an environment that upholds the right of safety, mutual respect and dignity of both the persons it serves and its' staff.
- IV. Definitions.** Capitalized terms not otherwise defined below but used in this Policy shall have the meanings assigned to them in this Policy.
- (a) **"Corporal Punishment"**: punishment inflicted upon a person's body.
- (b) **"Adverse Stimuli Interventions"**: an intervention that involves withholding nutrition or hydration or that inflicts physical or physiological pain, demeaning, shaming or degrading language or activities, forced physical activities as a disciplinary action, punitive work assignments, punishment by peers, group punishment or discipline for an individual behavior, mechanical or chemical restraint, and locked seclusion.
- V. Responsibilities.** For many of our youth, their experiences prior to coming to TFS were not positive. Many of them have been unsuccessful in other programs and settings and come to us with mistrust and a lack of hope. We seek to be a different experience for these youth and their families. One of the ways we exemplify this is in the promotion of core values. In all programs, staff are expected to promote the core values or concepts of trust, belonging, respect, sharing and safety among themselves as well as with clients.

Unconditional Caring is a practice that all TFS employees utilize in the development and maintenance of the therapeutic relationship. Unconditional caring is not something that must be earned in a point system or worked toward in a treatment plan. Unconditional caring is something that every client and family receives upon entering any TFS program. This concept is communicated to families in the way they are treated and respected.

Strengths-based Family Focused Practice: TFS delivers all services in the context of a strengths-based family focused perspective. This approach conceptualizes competence as a



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belief that a child/adolescent and their family are the experts on their problems. TFS believes our clients and their families “have what it takes” to reach solutions as they walk in the door. This approach helps families believe in the possibility of change and allows them to negotiate and resolve differences more effectively.

No Reject No Eject Policy: One of the core values of TFS is to accept all referrals that fall within the defined scope of work for each contract and maintain youth in the program despite periods of disengagement or acting out behavior including aggression towards staff and property destruction. Staff are expected to provide unconditional caring and consistency to youth during these periods in attempts to re-engage them in programming.

Non-violent Crisis Intervention Model: TFS adheres to The Non-violent Crisis Intervention model established by the Crisis Intervention Institute, Inc. for behavior support management. The Non-violent Crisis Intervention program is a safe, non-harmful behavior management system designed to help human service professionals provide for the best possible Care, Welfare, Safety and Security of disruptive, assaultive, and out-of-control individuals – even during their most violent moments. The program focuses on preventative techniques, including the identification of behavior levels that contribute to the development of a crisis, the use of non-verbal techniques which can help prevent acting-out behavior and the use of verbal techniques to de-escalate behavior as well as identifying CPI’s Principals of Personal Safety to avoid injury if behavior escalates to a physical level. The program also focuses on how to use the time after a crisis as a step toward preventing future crises.

Youth Mental Health First Aid is designed to teach parents, family members, caregivers, teachers, school staff, peers, neighbors, health and human services workers, and other caring citizens how to help an adolescent (age 12-18) who is experiencing a mental health or addictions challenge or is in crisis. The course introduces common mental health challenges for youth, reviews typical adolescent development, and teaches a 5-step action plan for how to help young people in both crisis and non-crisis situations.

Training: All staff who has direct contact with the service population are trained in the Non-violent Crisis Intervention model as part of their new employee orientation. Direct service staff receive annual refresher trainings in the Non-violent Crisis Intervention model as ongoing staff development. Additionally, all staff will receive a minimum of annual training to support a trauma informed approach to their work at TFS. Additionally, all bachelor level staff receives training in Youth Mental Health First Aid.

Use of Corporal Punishment and Adverse Stimuli Interventions: TFS strictly prohibits the use of corporal punishment and adverse stimulus interventions. Use of these interventions will result in disciplinary action up to and including termination.

Use of Police Intervention: It is the aim of all TFS programming to prevent unnecessary reliance on police and hospital intervention to manage behavior as these interventions cause trauma and re-traumatization. Staff are expected to utilize pro-active safety and crisis planning prior to a crisis occurring to limit the reliance on these interventions. Police and

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hospital intervention are to be used as a last resort if TFS staff are unsuccessful in supporting and ensuring the safety of a client.

Communication to Service Recipients: Upon intake, all parents/guardians will receive a copy of the Agency's Crisis Intervention Prevention Policy and Protecting Clients from Harassment and Violence Prevention Policy. Parents and guardians of students in the Tides School will also receive a copy of the school's Behavior Management Plan which outlines the school's behavioral expectations, the school's point system, and incentive program.

Documentation: All crisis situations are documented and reviewed according to the Agency's Incident Management Reporting Policies and Procedures.

APPROVED PRACTICES AND INTERVENTIONS FOR BEHAVIOR SUPPORT MANAGEMENT POLICY

- I. Purpose.** The purpose of this policy on approved practices and interventions for behavior support management provides staff with a framework for behavior management practices and interventions geared towards protecting the safety and well-being of clients and staff.
- II. Scope.** This Policy applies to all TFS Employees, Students, Volunteers, and Contractors.
- III. Policy.** It is the policy of TFS to promote an environment where the safety and well-being of its client population and staff is paramount. Use of restrictive behavior support management practices are to be avoided at all costs in the management of client behavior.
- IV. Definitions.** Capitalized terms not otherwise defined below but used in this Policy shall have the meanings assigned to them in this Policy.
- (a) "**Restrictive Behavioral Support Interventions**" include any hands on intervention utilized to manage client behavior by a TFS Staff, the use of adverse stimuli interventions, or locked seclusion.
- V. Responsibilities.** The following is a summary of approved and encouraged practices for the management of client behavior. It is the aim of TFS to be proactive in the prevention of crisis intervention and prevent youth and staff from being traumatized or retraumatized. Determination of behavior support management interventions is based on comprehensive individual client assessments including trauma history, interventions proactively described in a client's safety plan, and the immediate risk of safety to all parties involved in a crisis situation.

Non-violent Crisis Intervention: TFS adheres to the Non-violent Crisis Intervention Program for its approved behavioral support practices and interventions. The Non-violent Crisis Intervention Program emphasizes preventative measures for maintaining a safe and secure approach to behavior support, such as recognizing behavior levels that contribute to the



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development of a crisis and verbal techniques for de-escalating behaviors. Interventions taught to staff during annual Non-violent Crisis Intervention training are the only interventions approved for use by staff in all Tides' programs.

Youth Mental Health First Aid is designed to teach parents, family members, caregivers, teachers, school staff, peers, neighbors, health and human services workers, and other caring citizens how to help an adolescent (age 12-18) who is experiencing a mental health or addictions challenge or is in crisis. The course introduces common mental health challenges for youth, reviews typical adolescent development, and teaches a 5-step action plan for how to help young people in both crisis and non-crisis situations.

Proactive Safety Planning is encouraged for all youth participating in Tides programming. This allows for youth to identify and communicate antecedents to behaviors as well as identify appropriate coping strategies and a range of supports from formal to informal to prevent situations from escalating to an unsafe level.

Supervised "Quiet Time" may be utilized for a client in a group or school setting where a client is allowed to take space in a safe area separated from the larger group of clients while under consistent staff supervision. Staff are to be expected to support the client in assessing the appropriate length of time needed to de-escalate at no longer than 30-minute intervals throughout the quiet time. Quiet time never occurs in a locked space and is always to be supervised by a staff.

Individual and/or Family Counseling may be utilized proactively to assist a client who has either self-identified or been identified by a staff member, or family member as experiencing an antecedent to a crisis situation. This allows the client to appropriately process the antecedent and avoid escalation. Individual counseling can also be utilized in attempts to de-escalate a crisis situation that is in process.

Physical Restraint is not to be utilized as a planned intervention or as a behavior management technique. The use of physical restraints is only utilized in a crisis situation where a client is actively harming themselves or another person and no other option would prevent harm. If physical restraint is utilized to prevent imminent harm, staff will utilize the least intrusive physical restraint necessary. Staff will cease the use of physical restraint as soon as the need for protection has ended and/or medical personnel arrive to provide further intervention (see section f).

Use of Police or Medical Intervention is to be utilized as a last resort if safety cannot be supported by any of the above listed measures