



PARENT / GUARDIAN HANDBOOK: A Guide for the ITASKIN Center

STABILIZATION SHELTER / 35-DAY EVALUATION / SECURE DETENTION

Programs at the IC

by The ITASKIN Center (IC) Professionals

Operated by North Homes Children & Family Services (NHCFS), a private, non-profit organization, the ITASKIN Center (IC) has three components to the extensive continuum of NHCFS family care. We talk about two programs here. Secure detention is included later in this handbook.

STABILIZATION SHELTER

The shelter program provides a safe and structured short-term placement for 30 days or less. Placements accepted for the following reasons:

- Neglect / Abuse
- Status offense
- Awaiting long-term placement
- Respite care / time out
- Family conflict
- Emotional / behavioral problems

35-DAY EVALUATION

The evaluation program provides 24 hour supervision and behavioral observation or youth needing assessment and testing in a residential setting. Family involvement and meetings are an important part of the process. Evaluation and shelter youth participate in similar daily programming and care. The evaluation consists of several

added diagnostic components and a final thorough evaluation report. The offered components of the evaluation include:

- Behavioral assessment
- Psychological evaluation
- Academic assessment
- Health assessment
- Sex specific assessment
- Chemical dependency evaluation
- Family history and assessment
- Psychiatric assessment
- Recreation and leisure evaluation

The ITASKIN Center shelter and evaluation programs are licensed by the Minnesota Department of Human Services (DHS), as a Rule 5 Facility, to provide residential care and treatment for boys and girls ages 12-18 in a non-secure setting. There are 28 beds in the DHS portion of the IC. Youth are referred to the IC by county social workers, law enforcement, probation, voluntary, self-referral or the courts.

The core values promoted at the IC are Respect, Responsibility and Caring. These values are modeled and taught in all areas of programming, including individual and group therapy, education, activities of daily living, family contact and recreational activities.



It's About Solutions and Support

Many programs focus solely on a teen that is acting out or struggling emotionally. While there are occasions when this is required, North Homes Children & Family Services recognizes the importance of family in rehabilitation in order to achieve the long-term success. We encourage you to maintain contact with your child's Case Manager in order to stay informed and engaged. A Case Manager is the central person that will provide you and your child with support, access to referrals and information on progress.

Case Manager: _____

(218) 327-3000 or (888) 430-3055 toll free
Business hours (8:00 am to 4:30pm) M-F



Services Provided

by Connie Ross, IC Director

Youth in the Stabilization Shelter and 35-Day Evaluation programs participate in numerous program activities and receive services including, but not limited to:

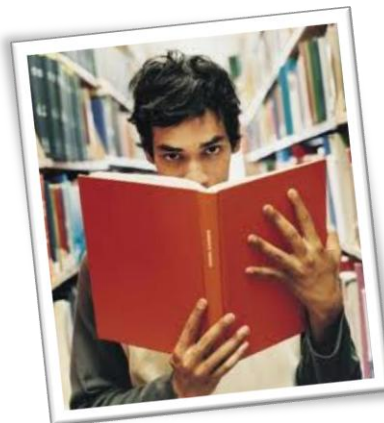
- ☞ Daily therapeutic/psycho-educational group discussions covering topics of communication skills, emotion management, chemical dependency education, gender specific issues, self-esteem and conflict resolution
- ☞ Individual counseling when requested
- ☞ Structured daily recreational and leisure activities designed to promote physical fitness, develop positive relationship skills and create healthy recreation and leisure experiences
- ☞ Structured daily schedule addressing daily living skill development such as hygiene, personal care and chores
- ☞ Cultural programming (voluntary)
- ☞ Community/on-site professional mental health care and services
- ☞ On-site full day school, including special education services
- ☞ Coordination with community resources and agencies
- ☞ On-site health screening and care by licensed medical professionals
- ☞ Religious/spiritual involvement with the youth's/family's faith community (voluntary)



MISSION STATEMENT

To provide a continuum of highest quality comprehensive care and prevention services for at-risk youth and families in the communities we serve

VISIT US:
www.northhomesinc.org



NHCFS values the individuality of each youth and their family. Therefore, the IC strives to ensure that all youth have opportunities to be involved in their natural educational, spiritual and community supports and activities whenever possible.

Learning at the IC

Program Expectations

Youth in all programs of the ITASKIN Center are expected to learn and follow basic rules. These rules are essential to maintain safe and therapeutic order at the IC and to reinforce our core values of Respect, Responsibility and Caring. Your child will be given a youth handbook upon intake that explains the schedule, behavioral expectations, and visitation and phone policies. Admission counselors will also explain the program expectations to your child at his/her own level of understanding upon arrival to IC. If you would like to see a copy of the Resident Handbook, your child's Case Manager will give you a copy at your request.

Educational Services Available

On-site educational programming is provided by Independent School District 318. This is a highly structured, supervised learning environment. Teachers and IC counselors coordinate with each other concerning student progress and behavior in order to maintain as much consistency as possible. Your child will get credit for each hour of school attendance during their placement at the ITASKIN Center.

Staff

The IC employs qualified and trained Mental Health Practitioners and Residential Youth Counselors who provide treatment, supervision and support to each resident.

HEADING 4



Any medications that your child is currently prescribed must come to the IC in the original bottle with the prescription label. Allowing the nursing department through a release of information (ROI) so that they can talk with your regular doctor can be important to the medical care of your child while they are with us.

IC Tours

You may schedule an appointment to visit or tour the ITASKIN Center. Contact your Case Manager by calling (218) 327-3000 during business hours (8:00am to 4:30pm).



My Child's Progress

Your child's Case Manager is the best source of information on your child. If you are calling during evening hours and would like to speak to a counselor about your child's progress, please call (218) 327-3000 ext. 140 and ask to speak with the shift manager. Please note that the shift manager will only have information related to day-to-day interactions with your child.

FAST FACTS

90%

The vast majority of teens who use drugs and/or alcohol have an underlying mental health impairment, often undiagnosed. Use of alcohol and chemicals affects a person's emotions, physical health, psychological well-being, family, friends and cultural community.

20%

1 out of 5 youth receive appropriate mental health care when they experience symptoms including but not limited to: grief and loss, depression, anxiety, hopelessness, irritability, loss of interest in activities, problems with concentrating or remembering, trouble sleeping, or loss of appetite or eating too much.

FOR MORE INFORMATION

www.northhomesinc.org

Your Child's Medical Needs

by the ITASKIN Medical Health Professionals

NHCFS employs a full-time registered nurse and additional nursing staff who complete health screens for each youth within 24 hours of admission into care. During this screening, the nursing department will address initial health issues and concerns through direct care, coordination with local health care providers and/or by providing direction to youth counselors in regard to your child's health needs. Information gathered during the health screening is also used in placement planning, evaluations, staffing and follow-up care planning.

It is important that we consult with you and have all medical concerns and insurance information in order to meet your child's ongoing or emergent medical needs. We ask that you authorize medical treatment and sign releases for the local clinics and hospital in the event that medical attention is needed for your child.

If you have questions about medical care and your child or additional information or concerns, please talk to your child's Case Manager.

Psychiatric Emergencies

The safety of your child is important to us. In the event that your child experiences a psychiatric emergency, the NHCFS Mental Health Professional will be contacted, and/or, the Crisis Response Team and/or the ambulance will be dispatched. Depending upon the decision made by the attending physician and the Crisis Response Team, your child may be placed in an appropriate hospital psychiatric program. As per your child's treatment plan, you will be notified as soon as possible of the emergency and that they have been discharged from the IC.



Adaptive Communication Devices

by the ITASKIN Center Professionals

NHCFS will provide interpreters or equipment for youth with special physical and/or language needs when necessary to ensure all youth admitted to one of our programs and/or parents/guardians with whom the counseling staff is working with are informed in a way they can understand.

Youth and parents/guardians have a right to fully understand and be informed about treatment plans, options and choices, and rights. A youth will not be used as an interpreter at NHCFS.

Staying Involved

We encourage you to maintain contact with your child during his/her placement at the IC. During the admission process, a list of approved contacts is created. Typically, the placing agency, parent(s) and the Case Manager create the list. Parents, family members and legal representation are typically included on the contact list, but we do not allow contact or visitation with friends. Parents may make daily phone calls to their children.

Phone Calls

Youth in the Stabilization Shelter or Evaluation Programs are allowed to make two outgoing calls per week. This rule helps to ensure your child and others are able to have phone time. Calls are unlimited with legal representation. Parents may make daily phone calls to their child. Calls are limited to 10 minutes per call. Communication with parents/guardians is

encouraged by NHCFS. Youth have a right to refuse phone calls. Phone calls will never be denied with a parent/guardian by the IC unless a court order prohibits us from granting them. The amount of incoming phone calls is not limited unless otherwise stated through the youth's Case Manager.

Mail

Youth have the right to reasonable written communication via the United States Postal Service. If there is a reason to believe that writing letters with a certain individual may be harmful to a youth, a court order will be obtained to prevent such communication. IC staff will seal all envelopes going out. Youth must put their name and a return address on the envelope.

In the event a suspicious package arrives for a youth, NHCFS will call the local law enforcement authorities to investigate.

All mail will be opened in front of staff. Mail will not be withheld unless there is probable cause to believe the mail is a safety and security issue for the IC or youth.

Youth have a right to refuse mail. Refused mail will be returned to the sender. The program determines the amount of outgoing mail that NHCFS will pay for. Two outgoing letters are allowed per week with NHCFS providing the postage.

CORRESPONDENCE PLAN

All youth have a contact list for phone calls and visits that is coordinated between their county/tribal worker, parent/guardian and IC Case Manager in accordance with their case/treatment plan.

Phone Call Times:

Monday – Friday 3:00 pm – 9:00 pm
Saturday – Sunday 10:00 am – 9:00 pm

Visiting your Child

by the ITASKIN Center Professionals

Visitation Hours:

Tuesday: 10:00 am-11:00 am
 & 6:00 pm-7:00 pm
Wednesday: 3:30-4:30 pm
Thursday: 6:00 pm-7:00 pm
Saturday: 3:30pm-4:30pm
 & 6:00 pm-7:00 pm
Sunday: 10:00 am-11:00 am
 & 4:00 pm-5:00 pm

Please, do not bring money, food, beverages, gum or candy for your child while he/she is in placement. Youth are served three meals each day, snacks in the evening and earn points to be spent on additional snack and personal items at the 'Little Store'.



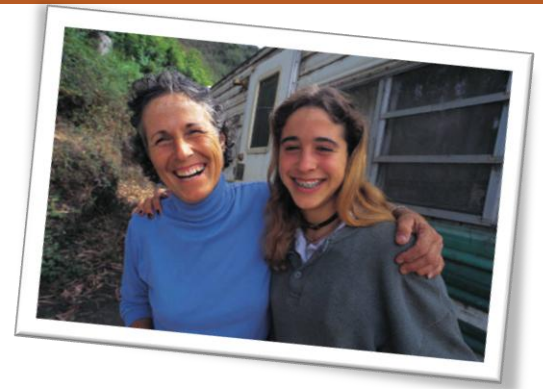
What I can bring my child:

Your child will need five complete changes of clothing, plus extra underwear and socks to wear at bedtime. All of your child's belongings and clothing will be inventoried. Laundry is done as needed, so additional clothing is not necessary, but longer-term residents may want to have more variety in clothing.

The IC can provide all hygiene items needed for personal care, but you or your child may choose to use items from home or that we do not keep in stock. You may bring these products to your child.

The IC has a library for all youth, and you may bring books in for your child to read. The Case Manager will need to approve the subject matter and content prior to your child receiving the book. NHCFS or any of its programs will not be responsible for personal property beyond establishing a separate account for any money your child may have.

Youth may have photos of their family at the IC. Please bring only duplicates and ensure subject matter is appropriate.



Contraband:

- Non-prescription medication
- Lighters / Cigarettes
- Nail polish remover / mouthwash
- Pins or sharp objects
- Illegal Drugs / Paraphernalia
- Video Tapes / CDs / DVDs
- Cell phones
- Aerosol sprays of any kind
- Belts (unless a plan is developed)
- Pens / Markers
- Nail clippers (available from staff on an as-needed and supervised basis)
- Metal objects / sharp objects
- Any clothing that is revealing, such as showing a midsection (At IC discretion)

These items are not allowed in the possession of IC youth. Possession will result in loss of privileges.

Visit Guidelines

by the ITASKIN Center Professionals

Reservations for visits must be made 24 hours in advance

- The Administrative Director and/or IC Case Manager must approve visitors on the contact list. Visitors are limited to parents, relatives, or other adults who were responsible for your child's care before their admission. A youth's County Case Manager will approve any additional visitors.
- Visits by an attorney, probation officer, case worker, or religious/spiritual counselor are allowed and will be permitted to take place in private.
- All visitors will register upon entry into NHCFS, give their name, address and relationship to the youth they are visiting and produce a reliable form of picture identification.
- Visits may be monitored and notice of such monitoring will be given verbally.
- Special visits, when necessary, can be arranged with prior approval of the Administrative Director or Case Manager.
- Visitors' handbags, briefcases, wallets, coins, pocket knives, and other personal belongings must be left in a locked vehicle.
- The Administrative Director or designee may terminate a visit based on the safety, security and order of NHCFS.
- A parent or guardian must accompany visitors under the age of 18.
- Any visitor suspected of being under the influence of drugs or alcohol will not be allowed to visit.
- Only three visitors for each youth will be allowed at one time, unless prearranged with the IC Case Manager.
- Contraband is not allowed in the facility or on the grounds of NHCFS. Do not bring any objects deemed to be a weapon into the facility.
- Any denial of a visit will be given to the resident and visitor and documented in a youth's file.
- No area used for visitation uses audio monitoring equipment during visits.
- Cell phones are not allowed in the IC.

IC staff maintain and monitor all visits for compliance

- If scheduled visitation hours conflict with a parent's schedule, arrangements can be made through the Administrative Director or your child's Case Manager. They will set up a visit time that will accommodate a parent's schedule.
- Please review the items that may be brought to your child. The list does not include food or pop. Items may be brought to youth in the Stabilization Shelter and Evaluation Programs only.
- All visits must be set up 24 hours in advance through your child's Case Manager. After hours, you may set up a visit through the IC Staff in central control.

Home Visits:

NHCFS believes in family centered intervention and care. Your child and family deserve durable long-term outcomes. Often, a child's healing is also the family's healing, Home visits can be an important extension of care.

If your child is in a residential program or long-term shelter, they may be eligible for home visits during his/her placement at the IC, depending on individual treatment and stabilization goals. Home visit planning involves all members of the treatment team including the IC staff, County Case Managers, individual therapists and parents. When approved, home visits usually occur one weekend per month, but this plan may vary according to individual needs and progress.

During home visits, 24-hour crisis assistance is available to you and your child by calling NHCFS at (888) 430-3055 or (218) 327-3000 ext. 140.

After the home visit, communicate with your child's IC Case Manager and let them know what went well, what was different and also what you would like to see improve. Many studies have proven that the more family is part of a child's treatment, the better the prognosis and likelihood of long-term success.

YOUR FAMILY . YOUR CHILD . OUR SUPPORT



Family Centered

Research on parent-adolescent relationships has maintained a constant presence in the literature and captured the lion's share of publications on children and teenagers and how to ensure their health and well-being. We fully believe that family is important and a key component to long-term success.



Communication of Needs

If your child requires culturally specific products, for example for hygiene, or a specific diet, please talk to the IC Case Manager. The IC respects individual needs and differences.



Safety for All

Your child's physical, emotional, cultural, spiritual and psychological safety is important to us. NHCFS and the IC understand that a symptomatic child or teen may say or do things that are hurtful to you, themselves, or others. We work diligently to keep children safe while building relationships and providing treatment to alleviate those symptoms. Bully behavior, racism, sexism, sexual harassment or any abusive or dehumanizing behavior is not tolerated in any of the NHCFS programs.

Spirituality & Culture

Spirituality Services and Counseling

Your child will be given opportunities to participate in spirituality services, activities, and counseling on a voluntary basis. Your child will not be required to attend the services or activities. All spirituality services and activities will be held in a location separate from the youth who do not wish to participate so they are not incidentally exposed to the services or activities. Attendance or lack of attendance at religious services or activities will not be considered as a basis for any right or privilege in the IC.

NHCFS will arrange with the clergy or spiritual leaders within the area to provide spiritual counseling if requested by your child. Every effort will be made to accommodate your child or your family to meet your individual spirituality needs, which includes spiritual needs related to your culture, in the IC. If your child or family's request cannot be met, NHCFS will provide documentation of the reason.

NHCFS will allow youth who request private interviews or counseling regarding spiritual, personal, or family problems the opportunity to meet with a spiritual or religious person of their choice, within reasonable facility rules needed to protect the facility's security and the safety of other residents and staff within the facility.

IC has contracted with Youth for Christ, "Campus Life", to conduct spirituality groups to the youth in care. Local elders conduct native American Spirituality groups such as smudging or sweat lodge. Spirituality groups are held two times per month, or more, in each program at the IC. Youth sign up for the groups if they wish to attend.

IC will arrange for visits and phone contact with spiritual elders as deemed appropriate per IC visitation policies.

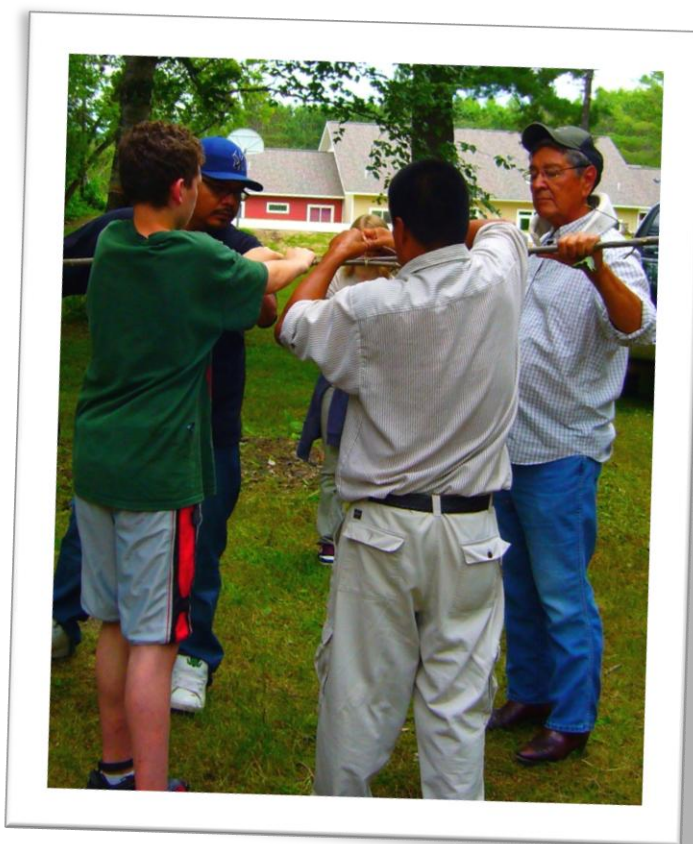
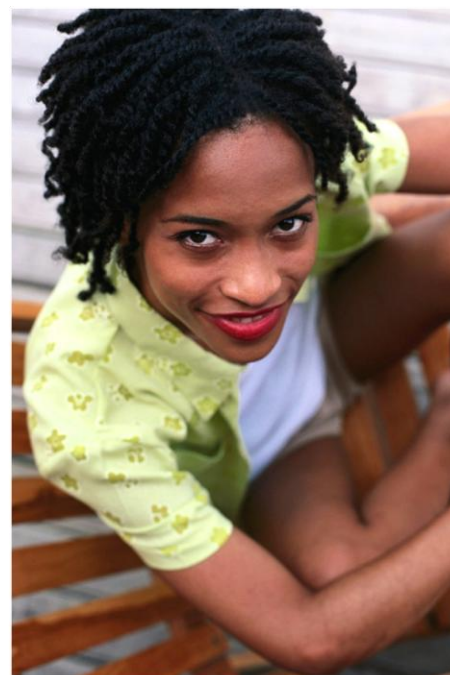
PARTNERING WITH PARENTS

NHCFS seeks to partner with parents and guardians in regards to spiritual and cultural activities. If you have any questions about the program experiences offered, please talk to your child's Case Manager. You have the right to request your child not attend any spiritual or cultural activities.

Culturally Responsive Care

NHCFS will document in each youth's Treatment/Case Plan and Weekly Progress Notes the provision of culturally responsive care to each individual youth that includes:

- Opportunities to associate with culturally and racially similar adults, peers and role models. NHCFS encourages the employment of staff and counselors with diverse racial and cultural backgrounds.
- Opportunities to participate in positive experiences related to your child's cultural and racial group, to the best of our ability. NHCFS does offer culturally specific Native American programming such as smudging, sweat lodge ceremonies, cultural education, crafts and participation in area pow wows.
- Culturally responsive programming services address the needs of all youth in care.
- Cultural sensitivity, including the provision of interpreters and English language skill development to meet the needs of IC youth as required by Laws 1995, chapter 226, article 3, section 60, Subp. 2, paragraph 2, clause (v).



Directions to North Homes Children and Family Services - ITASKIN Center

**1880 River Road
Grand Rapids, MN 55744**
(888) 430-3055
(218) 327-3000

From the West: HWY US-2 East
Turn right onto N Pokegama Ave / US-169
Take the 3rd left onto 1st St SE
1st St SE becomes River Rd
NHCFS is on the right

From the East: HWY US-2 West
Turn left onto 7th Ave SE
Take the 1st left onto River Rd
NHCFS is on the right

From the South: HWY 169 North
HWY 169 becomes N Pokegama Ave/US-169
Turn right onto 1st St SE
1st St SE becomes River Road
NHCFS is on the right



The IC Secure Detention Program

The ITASKIN Center operates a twelve bed Secure Detention Unit, which is licensed by the Minnesota Department of Corrections.

The IC Secure Detention program seeks to provide a safe and healthy living environment for youth who have been charged or adjudicated for criminal activity. The IC youth counselors and staff provide educational and therapeutic programming, build relationships with youth and families, and work towards successful resolution and transition back to the community/home setting.

Secure Programming includes:

- Daily therapeutic / educational groups covering a variety of topics such as communication skills, emotional control skills, chemical dependency education, gender specific topics, self-esteem and conflict resolution
- Individual counseling when requested
- Structured daily recreational / leisure activities designed to promote physical fitness, develop positive relationship skills and create healthy recreation / leisure experiences
- Structured daily schedule addressing daily living skill development such as: hygiene, personal care and chores
- Access to cultural and spiritual programming
- On-site health screening and care by a licensed nurse
- Long term youth participate in the 'Thinking for a Change' curriculum

Additions for Security:

Youth in the secure unit follow many of the same programming elements and rules as the shelter and evaluation youth. In addition to the protocols for the shelter / evaluation program, the secure program requires:

Phone Calls:

- A staff will be present at all times during phone calls. Call hours M-Su 4-6pm. Exceptions may be made on an individual basis.

Visits:

- All Secure Unit visitors will undergo a metal detector search or security wand search
- Visitors must leave all personal belongings in their vehicle or locked in lockers provided
- No items may be brought for the youth at visitation (food or pop) without exception.
- All visits, other than with an attorney, clergy, county worker or therapist, will be monitored by an IC staff member or IC Case Manager

Belongings:

- Youth are provided all clothing and hygiene needs from the IC Secure Unit. Additional items are not allowed

**ITASKIN Center
Secure Unit**
1880 River Road
Grand Rapids, MN 55744

(218) 327-3000
(888) 430-3055

Contact your IC Case Manager if you have any questions

Please remember visits must be scheduled 24 hours in advance

WHAT IF MY CHILD OR I ARE NOT HAPPY WITH NHCFS SERVICES

Youth / Family Grievance Policy: It is the policy of NHCFS and its programs to allow youth and their families/guardians air grievances in an accepting and non-intimidating environment with appropriate and objective personnel. The youth and their families/guardians will receive a copy of the grievance procedure prior to or upon admission. It is our belief that the majority of issues with staff are most effectively resolved by talking directly to the staff person involved. This is the first step in healthy conflict resolution. Residents and families are required and encouraged to address concerns verbally with the staff involved prior to filing a formal grievance. When a youth or family believes a resident right has been violated, a grievance may be filed.

If verbal resolution is not satisfactory and a youth or other person believe they have a grievance they will do the following:

1. Request a grievance form from an IC staff member.
2. The staff will then give the youth or family/guardian a grievance form to complete and are offered assistance in completing the paperwork if needed. If the youth or family would like help, the Compliance Director is available to assist.
3. The grievance will be given to the Administrative Director for review.
4. The Director will then give the grievance to the staff involved (if the grievance concerns the issue of staff conduct) for the staff's response to the grievance.
5. If the youth or person filing the grievance is not satisfied with this response, the grievance will then be submitted to the Administrative Director to investigate the concern.
6. The youth or person filing the grievance will receive a response within five (5) days.
7. The Administrative Director or the Compliance Director will document an initial response as to the steps to be taken on the grievance form within five (5) days of receiving the grievance. A copy of this report is placed in both the youth's file as well as in an agency file of grievances and kept on file for two licensing periods.
8. Should a youth or person filing a grievance feel their grievance has not been handled properly or feel a need to submit their grievance to someone other than the Administrative Director, or the Compliance Director, the grievance can be submitted directly to the Executive Director, the highest level of authority.
9. The youth or family/guardian will be informed that he/she has a right to notify the following agencies if the grievance is not resolved to mutual satisfaction:

State Ombudsman Office
(800) 657-3506

Itasca County Social Services
(218) 327-1291

Office of Health Facility
(612) 643-2580

MN Dept. of Human Services
(651) 296-3977

10. Grievances should be made in writing. If the youth is particularly vulnerable or has difficulty expressing their grievance in writing, they may verbally file it with the appropriate staff and they will document the content.
11. Once the grievance has been resolved, the results are shared with the Quality Assurance Committee for feedback and review.



WHAT RIGHTS DO WE HAVE

A youth has, but is not limited to, the following basic rights:

- The right to reasonable observance of cultural and ethnic practice and religion
- The right to a reasonable degree of privacy
- The right to positive and pro-active adult guidance, support and supervision
- The right to be free from abuse, neglect, inhumane treatment and sexual exploitation
- The right to have adequate medical care
- The right to nutritious and sufficient meals and sufficient clothing and housing
- The right to live in clean, safe surroundings
- The right to receive a public education
- The right to reasonable communication and visitation with adults outside of the IC, which may include a parent, extended family members, siblings, legal guardian, case worker, attorney, therapist, physician, religious advisor and case manager in accordance with the youth's case plan
- The right to daily bathing or showering and reasonable use of materials, including culturally specific appropriate skin and hair care products and any assistance necessary to maintain an acceptable level of personal hygiene
- The right of access to protection and advocacy services, including the appropriate state-appointed ombudsman
- The right to retain and use a reasonable amount of personal property
- The right to courteous and respectful treatment
- If applicable, the rights stated in Minnesota Statutes, sections [144.651](#) and [253B.03](#). Patient Bill of Rights or Rights of Patient
- The right to be free from bias and harassment regarding race, gender, age, disability, spirituality and sexual orientation
- The right to be informed of and to use a grievance procedure
- The right to be free from restraint or seclusion used for a purpose other than to protect the youth from imminent danger to self or others, except for the use of disciplinary room time as it is allowed in the correctional facility's discipline plan

CHILDREN AND FAMILY BILL OF RIGHTS

Legal and Civil Rights:

In accordance with federal law and U.S. Department of Agriculture policy, NHCFS is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. Also, NHCFS will not discriminate on the basis of ethnicity, religion, sexual preference, HIV infection, AIDS-related complex, or AIDS. NHCFS policies, rules, employees and contracted employees will reflect respect for the dignity of all individuals.

Mental, Physical and Sexual Abuse: All children and their families will be free from behaviors constituting the following:

Punishment/Assault: The intentional and non-therapeutic influence of pain or injury

Chemical Restraint: Use of medication(s) for non-therapeutic purposes instigated for the convenience of staff

Sexually Inappropriate Behaviors: These include any behaviors that would constitute sexual exploitation or criminal sexual misconduct

Physical Holding/Isolation:

No child will be subjected to physical holding or isolation as a general practice. Exceptions will be made only when a child presents a physical danger to self or others when less restrictive measures have failed or as indicated by the treatment plan. The appropriate use of physical holding or isolation will be identified in the child's Individual Treatment Plan and prior authorized by a Mental Health Professional if feasible or as soon as possible thereafter.

When a child is admitted to the IC an Immediate Needs Assessment Plan (INAP) and Assessment of Child's Susceptibility to Abuse will be filled out within 24 hours. The INAP identifies mental health needs, chemical use concerns, social functioning, family issues, sexual concerns, self-care concerns, education/vocational concerns, medical and dental needs, legal issues, financial, clothing, housing and transportation needs and psychiatric needs. Along with this comprehensive assessment, the child is assessed for vulnerability to maltreatment and susceptibility to abuse. The INAP also includes objectives to meet assessed needs and the responsible party for implementing the plan.

- Individual Treatment or Case Plan:** The child's Individual Treatment /Case Plan will be written within ten (10) working days of a child's admission. The Individual Plan will be used as the working tool, which identifies reasons for admission, goals for the individual measurements of success and treatment services that will be used to achieve the goals. Further, the plan will outline the outcomes a child will need to exhibit to be discharged to a less restrictive setting. The child and his/her family will be involved to the greatest extent possible in the development of the Individual Treatment/Case Plan.
- Appropriate Care and Treatment:** The child and his/her family have the right to know that services are being provided by qualified staff. Disclosure will include the names, professional status and role of all staff providing treatment and medical services from both within the program as well as from contracted providers. Children and families may inquire as to staff credentials and training by contacting the Program Director during business hours.
- Medical Care:** The child and his/her family have the right to complete and current information relative to diagnosis, treatment alternatives, risks and prognoses. The information will be provided in clear, understandable language and include the likely results of treatment.
- Medications:** The child and his/her family have the right to know the risks, side effects and expected benefits of all medications being used or recommended. The child has the right to refuse medications. The child/family has the right to rescind consent at any time.
- Refusal of Care:** The child has the right to refuse care and when this occurs, he/she has the right to an explanation of the medical or psychological effects of the refusal so that alternative plans can be made.
- Research Projects:** The child and his/her family have the right to know when they are participating in a research project. They also need to know that they have the right to refuse to participate in any project.
- Communication Privileges:** The child has the right to receive and send mail. The child has the right to telephone parents and have visitation with authorized visitors. These rights are restricted to reasonable hours and use. All communications are subject to conditions set forth in any current court orders. The child has the right to access, within reasonable terms, to their social workers, probation officers and legal representatives.
- Cost of Services:** The child and his/her family have the right to know the daily cost of services and the services covered by that cost.
- Rules and Routines:** The child has the right to know the rules and routines of the program.
- Physical Illness:** The child has the right to prompt and adequate medical services for illnesses.
- Privacy:** The child has the right to every consideration of privacy unless immediate safety risks require otherwise.
- Spirituality:** The child has the right to every consideration of his/her spiritual development.
- Confidentiality:** The child and his/her family have the right to know that their personal and medical records are confidential and may not be released to any person outside of NHCFS without their consent. The child and his/her family, therefore, will be informed when any requests for information come to the facility. This right does not apply to complaint investigations and inspections by the Department of Health, third party payers, or as otherwise provided by law.
- Clothing and Possessions:** The child has the right to expect clean, sanitary and adequate housing, nutritious foods and security for themselves and their possessions.
- Grievance and Complaint:** The child and his/her family have the right to initiate a complaint for grievance free from restraint, interference, coercion, discrimination or reprisal including threat of discharge by either staff or the facility. Should a family/guardian request their grievance be heard by someone other than the child's team supervisor, the following personnel should be used: first the Administrative Director, secondarily the Director of Quality Assurance, and thirdly the Executive Director. Forms will be provided by request.

PATIENT BILL OF RIGHTS

Consumers of psychological services in the State of Minnesota have the following rights:

- To expect that the treating physician/therapist has met the minimum qualifications of training and experience required by state law
- To examine the public records maintained by accrediting boards and agencies regarding the credentials of the physician/therapist
- To obtain a copy of the Rules of Conduct from the State Register and Public Documents Divisions (Department of Administration, 117 University Avenue, St. Paul, MN 55155)
- To report complaints to the Minnesota Board of Psychology (2700 University Avenue West, St. Paul, MN 55114-1095)
- To be informed of the cost of professional services before receiving the services
- To privacy, within established rules and expectations of confidentiality and data privacy (See *)
- To be free from being the object of discrimination on the basis of race, religion, gender or other unlawful category while receiving psychiatric and/or psychological services
- To be free from harassment or exploitation for the benefit or advantage of the physician or psychologist
- To have access to your records as provided in Minnesota Statutes, section 144.335, subdivision 2
- To participate in the development of your Individual Plan of Treatment and to have the plan reviewed and updates, at a minimum, every 90 days
- To receive the least restrictive level of treatment necessary to effectively treat your condition

If you have any concerns about how you are treated at NHCFS or concerns regarding billing procedures or the services rendered to you here, please notify any of our staff so that the problem can be resolved.

RULES AND EXEMPTIONS OF CONFIDENTIALITY AND DATA PRIVACY

Some situations qualify as Exemptions to Rules of Confidentiality and Data Privacy. These are described below:

- If a client/patient threatens to harm him/herself and the therapist believes there is an imminent risk of the client actually doing so, the physician/therapist is required by law to notify public authorities in order to try to maintain the individual's safety and to help the individual obtain proper treatment.
- If the client threatens to harm someone else and the therapist determines there is an imminent risk of the client actually doing so, the therapist is required by law to inform the intended victim and public authorities in order to try to monitor others' personal safety.
- If a client who is under the age of 18 discloses information that the therapist determines needs to be reported to parents, guardians, or public authorities in order to effectively intervene or to otherwise maintain the individual's well-being, the therapist will do so.
- If a client discloses information concerning the physical or sexual abuse of a minor or vulnerable adult, either by the client or by another individual, the therapist is required by law to report such information to the appropriate Governmental or Human Service Agency.
- If a client discloses information concerning the unethical conduct of another physician or therapist, the treating therapist is required by law to disclose such information to the proper authorities.
- If the client is required by law or court order to receive evaluation or treatment, resulting clinical information will be disclosed to the appropriate agencies in order to fulfill the order and/or to accomplish/maintain coordination of care.
- If a subpoena or court order requests the disclosure of personal or clinical information, the therapist is required by law to provide such information in either written or verbal format.

POLICY/PROCEDURE FOR REPORTING OF MALTREATMENT OF MINORS

The Legislature declares that the public policy of this state is to protect the children whose health or welfare may be jeopardized through physical abuse, neglect or sexual abuse; to strengthen the family as well as make the home, school and community safe for children by promoting responsible child care in all settings.

In addition, it is the policy of this state to require the reporting of neglect, physical or sexual abuse of children in the home, school and community settings; to provide the voluntary reporting of abuse or neglect of children; to require the assessment and investigation of the reports; and to provide protective and counseling services in appropriate cases.

NHCFS supports these policies and strives to conform to its own policies and practices to them. All staff are given this information at time of employment and trained about these procedures annually. This includes when and to whom reports are forwarded in writing.

PERSONS MANDATED TO REPORT

A professional or the professional's delegate who is engaged in the practice of healing arts, social services, hospital administration, psychological or psychiatric treatment, child care, education, or law enforcement who know or has reason to believe a child is being neglected or physically or sexually abused, or has been neglected or physically or sexually abused within the preceding three years, shall immediately report the information to the local welfare agency, police department, or the county sheriff.

Any person mandated to report shall, upon request to the local welfare agency, receive a summary of the disposition of any report made by that reporter, unless release would be detrimental to the best interests of the child.

The law requires mandated reporters to make a report if they know or have reason to believe a child is being neglected or abused or has been neglected or abused within the preceding three years.

IMMUNITY FROM LIABILITY

The following persons are immune from any civil or criminal liability that otherwise might result from their actions, if they are acting in good faith:

- Any person making a voluntary or mandated report, or assisting in an assessment
- Any social worker or supervisor employed by a local welfare agency
- Any public or private school, facility, or the employee of any public or private school or facility who permits access by a local welfare agency or local law enforcement agency and assists in an investigation or assessment
- A person who is a supervisor or social worker employed by a local welfare agency is immune from any civil or criminal liability that might otherwise result from the person's actions, if the person is acting in good faith and exercising due care

The subdivision does not provide immunity to any person for failure to make a required report or for committing neglect, physical abuse, or sexual abuse of a child.

DEFINITIONS OF WHAT TO REPORT

Persons who work in licensed facilities must be aware that they are mandated to report any person whom they have reason to believe is abusing or neglecting a child, including employers or fellow employees.

Neglect

Child neglect is the failure by parents or caretakers to provide a child with necessary food, shelter, clothing, medical care, and to ensure that the child is educated according to Minnesota laws. Neglect may also occur when the person responsible for the care of the child fails to protect the child from conditions or actions which seriously endanger the child's physical or mental health, when reasonable able to do so.

Child neglect differs from child abuse, though its results may be similar. Both can cause physical injury, emotional harm and even death. Neglect is what a parent or other caretaker does not do rather than what he or she does. The following are conditions of neglect that must be reported:

- Inadequate food, clothing, shelter or medical care
- Abandonment
- Exposure or threatening or endangering conditions
- Educational neglect
- Prenatal exposure to certain controlled substances
- Inadequate supervision
- Child has suffered a physical injury as a result of hazardous conditions uncorrected by parent or guardian
- Child is at risk of harm due to domestic violence
- Failure to provide for a child's special needs
- Exposure to, or involvement in criminal activities

Physical Abuse

Physical abuse means any physical or mental injury or threatened injury, inflicted by a person responsible for the child's care, on a child other than by accidental means, or any physical or mental injury that cannot reasonably be explained by the child's history of injuries.

Abuse does not include reasonable and moderate physical discipline of a child administered by a parent or guardian, which does not result in an injury.