

Child Study & Treatment Center

# Ketron Cottage Program Manual



Last updated 3/29/24

# Welcome to Ketron Cottage!

Ketron Cottage is a 16-bed program for middle school age youth at Child Study and Treatment Center (CSTC). CSTC is the only state psychiatric hospital for children and adolescents in Washington. Youth at Ketron Cottage have been admitted because they have been unsafe to themselves or others due to a psychiatric disorder. Often, youth here are dealing with emotional and behavioral challenges related to trauma, grief and loss, anxiety, depression, and other issues.

All our treatment and programming are **research-based**. This means Ketron uses strategies that have been shown to be most helpful in addressing the types of challenges Ketron youths have. Our approach relies on three key principles from Trust-Based Relational Intervention® (TBRI®): Connecting, Empowering, and Correcting. This means that we focus on **building a strong relationship with you, teaching you self-regulation skills, and giving you a voice while we correct behaviors and guiding you back to what was lost.**

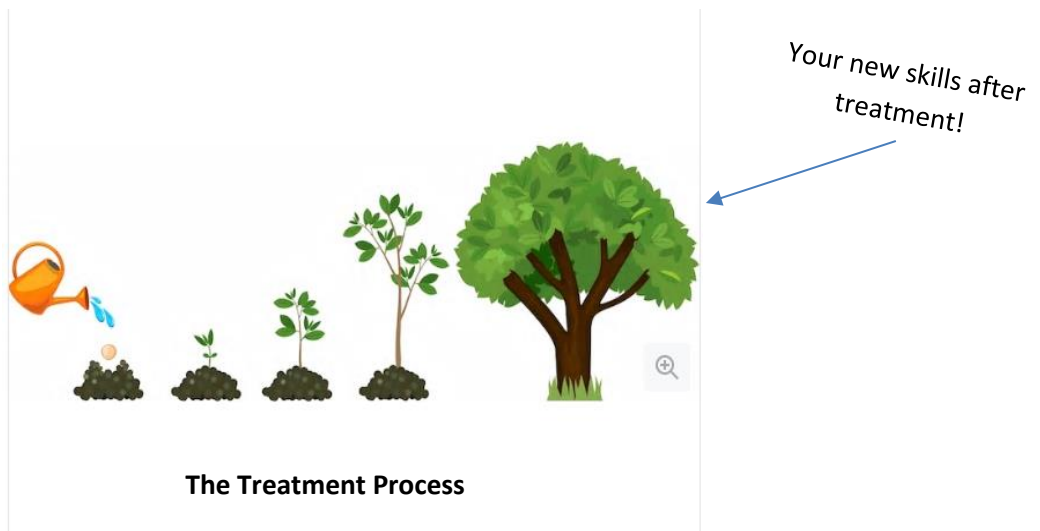
During treatment, we try to answer the following questions:

1. What things are important to you, and how are your problem behaviors getting in the way of what is important to you?
2. What thoughts, feelings, and body feelings make a problem behavior more likely to happen?
3. What consequences do you have to face after a problem behavior?
4. How can you become more skillful in handling your thoughts, feelings, and body feelings and create a life worth living?

We will learn the answer to these questions in the Ketron treatment milieu. A treatment milieu is a community where you learn and apply new skills that help you succeed in life. As you become an active member of our community, you will learn new skills and figure out new ways of solving problems.

Treatment is not going to be easy – it hard most of the time and really hard sometimes. But even though it is hard, we believe in you and your ability to succeed here and in life. **Yes, YOU!**





We fully believe in your ability to build new skills muscles and create a life worth living. Your new skills muscles will keep growing as you keep practicing skills. It is kind of like going to the gym and exercising. Over time, you will see changes in yourself that make you feel proud, and you will want to cheer on others to keep working hard.



This also means that we must work together to create a safe, inclusive, and helpful community. This looks like safe and respectful speech and actions, following the rules, taking responsibility for your role in a problem, staying committed to learning and practicing new skills, and repairing when you make a mistake.



A big part of the Ketron treatment milieu is collaborative interaction between you and the people you spend time with every day. This means that all your relationships are very important. Here is what we believe this about every youth who comes to Ketron:

1. You are unique and important.
2. You want to handle things in a better way.
3. You have been doing the best you can and can do better than you are doing now.
4. You must learn new behaviors in therapy and in the context of your day-to-day life.
5. You are not a failure, even if you have made a lot of big mistakes along the way.
6. You may not have caused all your problems, but you must solve them anyway.
7. You need to work hard, keep trying, and find ways to stay motivated to change.

You might be afraid of letting others down, but we are here to stand with you and help you.



## Ketron Values

1. **Respect** and **Safety** for yourself and other people, as well as other people's belongings.
2. **Growth** by learning about yourself, other people, and the world.
3. **Independence** and the freedom to have your own thoughts and make choices.
4. **Contribution** by helping other people in positive ways.
5. **Participation** in your treatment and staying committed to it.
6. **Significance** or the specialness of who YOU are.
7. **Connection** through relationships and belonging.

**On Ketron Cottage, we believe in never, never, never giving up.**





## Your Treatment Team

Your treatment team includes the following professionals: Dr. Storck (Psychiatrist; *he/him*), Dr. Michelle (Clinical Psychologist and Program Director; *she/her*), Rachel (Social Worker; *she/her*), Evelyn and Athena (Cottage Supervisors; both are *she/her*), LaNetra (*she/her*) and Connor (*he/him*) (Shift Leads), Nurses, Counselors, Kyle (*he/him*; Recreational Therapist), Ms. Mary (*she/her*; Cook), Ken (*he/him*; Custodian), Students Therapists, and some of the people in the community that are part of your life and were part of your team before you got here.

The most important person on your treatment team is YOU! We firmly believe in patient- and family-centered care. This means that you and your legal guardian(s) are partners with us at every level. To achieve the best outcomes, it is important that you and your legal guardian(s) are actively involved in decisions about your treatment.

## Treatment planning

Treatment planning begins as soon as you get to Ketron. You will create a list of behaviors that have been unhelpful to you and have been getting in the way of you reaching your goals. This information will form your first Treatment Plan and give you an idea of what you will work on while you are at Ketron.

We will discuss your progress on your goals with you, your guardian(s), and your community team at Treatment Plan Reviews (TPRs), which are held at 14 days after your admission, then 30 days, 60 days, and every 60 days until you discharge.



**PATIENT  
RIGHTS**

## You Have Rights!

CSTC is fully accredited by something called The Joint Commission. The Joint Commission guides our policies and procedures and has recognized Ketron Cottage as a safe, stable, clinical environment. This does not mean you will always be happy about the environment. If you are not happy about something in the environment, we want to hear from you because we are committed to learning and improving. We have different ways for you to share your concerns:

- Community Meeting (weekly)
- Suggestion Box: (always available) outside of Program Director's office door
- Grievance Box: (always available) in milieu by phone, goes to CEO, (the big boss for all CSTC)
- Office hours with our Program Director, Cottage Supervisors, and/or Social Worker
- Individual contacts with your Nurse, Shift Leads, Primary Counselors, and Therapist(s)

If you submit a grievance, the CEO will read it and ask our Program Director or Cottage Supervisor to meet with you and attempt to solve it within three working days. If you are still concerned after meeting with them, you may appeal to the CEO who will attempt to solve it within five working days.

Patient Advocacy Support Services are also available. You may also contact The Joint Commission (\*0204), Disability Rights - Washington (DR-W; \*0201), Child Protective Services (\*0202), or the CEO (\*0203) if you have concerns about your care.

Using the cottage day hall phone, these services can be accessed by first dialing a star (\*) followed by the three-digit number corresponding to the service you wish to contact. All these calls are confidential. You have access to this phone outside school hours if you are safe.





## Admission Day

When you first arrive, you will meet with some of the members of your treatment team. You might also meet someone from the Medical Records department who will have you read and sign documents that have to do with your admission to our program. We will take a picture of you for your chart.

You will spend most of your time with Dr. Storck and Rachel who will talk to you and ask you about your life. You can also ask them questions and learn more about us.

The nurses will help you with your physical exam, laboratory work, dental check-up, PPD test, vital signs, hearing and vision screenings, and other medical workups as needed.

You will also meet Dr. Michelle, your Primary Counselors, and you might also meet Kyle. Your primary counselor will help you complete your first Safety Plan, and someone will also inventory of all the items you brought with you. Anything that is not approved for our setting will be sent back to your guardian or stored until you discharge.





## Your Stuff

You will have your own room and *small* space in the cottage to store your personal belongings. When we say small, we mean SMALL.

So, please think carefully about your clothing choices and bring NO MORE THAN ONE WEEK'S WORTH OF SEASONAL CLOTHING that is string and cord free. This includes pajamas, sweatpants, and hoodies. Please also make sure that your clothing is safe and respectful for a shared space. Sneakers/shoes should be the slip-on type or have shoelaces removed. We have safety laces we will give you.



You may bring a few bedding items and room items that are string and cord free. We do allow rugs to help make your room cozier and more comfortable.

Boomboses and clock radios are allowed. You may bring a CD player and an MP3 since we do not provide these items. Your MP3s *cannot* have wireless communication, recording, or camera capabilities. The MP3 screen cannot be made of glass. Your guardian(s) will be responsible for downloading music for you and monitoring song content. We are sorry that we cannot download music onto your MP3. MP3s may only be listened to in the pods or in your room and cannot be used during treatment programming such as groups, recreational therapy activities, or school. You may not borrow or trade these devices with your peers.



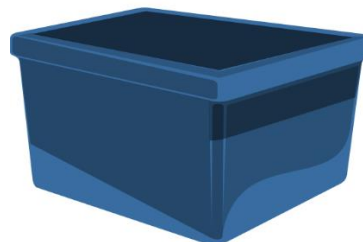
You **can** have a cordless, rechargeable, electric shaver purchased for you by your guardian(s) that will be managed by the nurses. You may not use an electric razor for the first 14 days after you are admitted. After that, your ability to use your electric razor will be determined by the nurses.



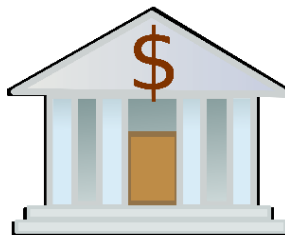
We will inventory all your items, so we are able to keep track of what you have. There are several areas where your items are kept, depending on the item:

**Blue bins.** Only a few items can be stored in your "blue bin". This is a medium-size container that is in a storage closet on cottage. Contraband items cannot be stored in your blue bin. Items stored in these bins include board games and art supplies.

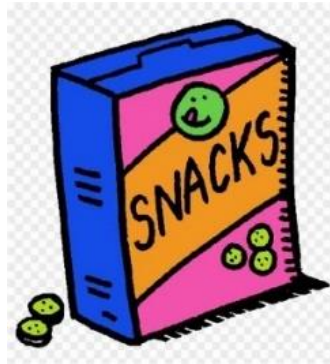
*This is the "blue bin" and is the only storage space you have! Not exaggerating. This is it!*



**Money.** When you have any amount of money, it is deposited into an individual account with the Business Office. You cannot keep it on you or in your room. You may want to withdraw money for certain outings or for passes. This will be allowed at the team's discretion (with your guardian's input). You may withdraw your money from the Business Office by asking Dr. Michelle, Rachel, Evelyn, or Athena three days in advance and signing a slip.



**Personals.** You may bring a small supply of healthy, nonperishable food and candy items you enjoy. *The amount you bring should fit in an average sized shoe box.* Refrigerated and frozen items are not permitted. They are stored in a locked cabinet until you can have them on ***certain days of the week only.*** We do not have room for bulk items. Anything that does not fit in the box provided will be sent back to your guardian. Because your health is important, you must eat at least half of your plate at lunch and dinner to be eligible for personals.



**Room searches.** Sometimes, your room or the entire cottage will need to be searched for the safety of everyone. A doctor's order is required every time this is done. **If possible, you will be present during the room search.** We make every effort to be careful and respectful of your belongings when we must search your room. It is better if you turn in items on your own because it shows that you are committed to everyone's safety.



## Not Allowed Items (Contraband)

Washington State Law prohibits the following items from being brought into or within the ground of any state institution (RCW 72.23.300):

1. Intoxicating liquor of any kind
2. Controlled Substances
3. Illegal Drugs
4. Drug Paraphernalia
5. Firearms
6. Explosives
7. Weapons



CSTC prohibits patients from having the following on campus:

- |   |  |
|---|--|
| Aluminum cans   | Media and gaming (e.g., PSP, Xbox, Wii) devices with internet capability             |
| Another patient's belongings  | Personal DVD players   |
| Belts, drawstrings, shoelaces, and other ties                                     | Metal [Notebooks, boxes, bobby pins, clips, safety pins, staples, paper clips, etc.] |
| Burned CDs, DVDs & electronic games   | Over-the-Counter Products, Supplements and Non-CSTC dispensed medications            |
| Camera capable devices [including tablets, gaming systems, iPods, etc.]           | Parental Advisory CDs, DVDs & Electronic Games                                       |
| Cash  | Permanent markers and paint  |
| Cell phones   | Pornography  |
| Cords/Rope over 6" [drawstrings, yarn, string, electrical cord, headphones, etc.] | Q-Tips   |
| Clothes iron  | Razor blades   |
| Clothing with explicit or offensive content                                       | Rocks  |
| Explicit or offensive clothing  | Shoelaces  |
| Glass of any kind [including mirrors, frames, perfume bottles, nail polish, etc.] | Studded bracelets or clothes   |
| Hair dye/hair bleach  | Tobacco Products [including cigarettes, chew, etc.]                                  |
| High heels and steel toed boots   | Unapproved addresses & phone numbers   |
| Items exceeding \$50 in value without signed waiver                               | Wi-Fi capable devices [including e-readers, gaming systems, etc.]                    |
| Lithium Batteries   |  |
| Magnets   |  |
| Matches & Lighters  |  |

CSTC specifically prohibits patients from have the following for use *in their rooms*:

1. Blow Dryers / Hair Straighteners
2. Camping Chairs
3. Hygiene Products
4. Lamps
5. Sports Equipment

In addition to those items restricted by Washington State Law and CSTC, Ketron has a specific list of items that patients are not allowed to have including:

Acrylic nails  
Caffeinated products  
Dangling earrings (hoop earrings close to ear lobe are okay)  
Dental floss  
Handheld personal gaming devices with chat capabilities (e.g., PictoChat)  
Hand sanitizer  
Inappropriate reading material  
Mouthwash that contains alcohol

Pencil sharpeners  
Plastic shower/bath loofahs  
Rated R movies; Rated M games; explicit advisory CDs  
Rings (metal or plastic)  
Super tight clothing (leggings can only be worn with a longer, looser top)  
Sheer clothing  
Shells

Other items not on this list may be considered contraband at any time depending on how the items are being used. Staff have permission to take away any unsafe and restricted items that are found, and request that the legal guardian retrieve the item(s) as soon as possible. Once the contraband is taken away, it will be labeled with your initials, the date it was confiscated, and the staff's name who discovered it and then given to Dr. Michelle. She will temporarily store the item(s) in a secure locked area until discharge.

We know that there are a lot of restrictions, but we must do this to keep the environment safe. There are a few exceptions to our contraband policy:

1. You may use shoelaces while doing athletic activities if you are supervised by staff. The shoelaces must be checked in/out so that we know they were returned after the activity.
2. You may use arts & crafts supplies otherwise considered contraband if you are supervised by staff. These items must be stored securely in your blue bin and be checked in/out so we know that all items are returned after you are done with the activity.
3. You may use the approved headphones CSTC provides if you would like to them to be longer than six inches.

No other exceptions to this policy may be granted without the prior written approval of the Chief Executive Officer (CEO).

We also recommend that you do not bring any individual item that **costs more than 50 dollars or has high personal value (including clothing)** since we cannot guarantee against lost or breakage. *Gifting, borrowing, donating, and sharing items with peers is not allowed and is also considered contraband if it occurs.*



## The Milieu Routine

The Ketron schedule has a lot of structure with school, group meetings, individual therapy, family therapy, therapy groups, recreation activities, and chores. We welcome your safe participation in everything available for you to do during your stay here.

There will be free time where you are able to pick the activity you would like to participate in, either alone or with others. These are usually non-media activities. You must have an activity if you are going to be in the milieu. We will help you figure out a non-media activity if you are having trouble finding one on your own. Here are some of our expectations:

**Boundaries.** Everyone has a right to their own personal space, emotionally and physically. You are expected to use appropriate language to make other people feel comfortable. You are also expected to respect the personal space of others and expect that others will respect your space. For safety reasons, youth are NEVER allowed in each other's rooms.

**Communication.** This is about using safe words during conflicts and asking for help when you need it. Most youth who come to Ketron have difficulties in this area and they find that partnering with the treatment team helps them develop these skills. The treatment team is here to help!



It works like this: The safer you are, the more positive experiences you will have, the more you will learn, and the more opportunities you will have as you progress in the program.



**Hygiene.** It is important that you take care of your own personal hygiene (taking showers, brushing your teeth, changing your clothes, etc.) *every day* and help with basic community living activities (clean room, washing your laundry, picking up after yourself). The treatment team will help you keep track of how often you meet goals and expectations related to self-care and room-care. Clean bodies and clean rooms = more access to privileges and activities. Hooray!



**Mealtimes.** This is a time where you practice important social skills, including manners, using an inside voice, waiting your turn, and having positive peer and counselor interactions. If you are having trouble, the treatment team will help you learn these skills.



**School.** Everyone attends school unless they are physically ill and have a nurse's or doctor's approval. Our school is called Firwood Secondary School and it is on our campus. When you leave CSTC your school record will show that you attended school in the Clover Park School District. If school is hard for you, let us know so we can help you plan for success. Going to school = more access to privileges.



**Treatment participation.** You are expected to take an active role in identifying unhelpful behaviors and treatment goals. This is your treatment, and you will only get the benefits from it if you participate in milieu activities and all the therapy opportunities we offer. If we avoid our problems, it only makes them stick around longer or even get worse. We want to help you face your problems and figure out how to deal with them.



**Groups.** You are expected to attend all groups and activities unless indicated by your treatment plan. Groups that could be offered include Aggression Replacement Training (ART), Social Skills, Hygiene, Time to Pause (Mindfulness), Healthy Relationships, Coping with Stress, and various other special interest groups. Most groups are after school in the afternoon and evenings, and sometimes on weekends. Groups help you learn more skills, so you have lots of coping tools on your tool belt. You will be involved in groups each week. Here is an example of two groups we usually offer:

1. Dialectical Behavioral Therapy (DBT) Skills (Wednesdays) – This group teaches you DBT skills and helps you solve day-to-day problems, especially emotion dysregulation. DBT skills training groups cover five important areas: mindfulness, interpersonal effectiveness, emotion regulation, distress tolerance and walking the middle path. Activities include discussion and then practicing the skill you learned in a group recreational therapy activity. We do our best to match up what you are learning to what families are also learning in their DBT group.
2. ART Group (Tuesday, Wednesdays, and Thursdays) – This group targets aggressive behavior. ART skills training groups cover three important areas: social skills training, anger control training, and moral reasoning. Activities include discussion, rehearsing, and then practicing the skill you learned in a group recreational therapy activity.



**Recreation.** Each week there are Recreation Therapy (RT) and Recreation Participation (RP) opportunities. The monthly schedule is posted in the day hall and is updated each month. All youth are expected to attend RT (unless medically excused or unsafe). If you decline RT or are unsafe, your eligibility for evening privileges and RP activities for that day will be limited. Examples of RP activities include fitness, going to the YMCA, arcade, local parks, fun food places, public libraries, go-karting, the zoo, rock climbing, snowboarding, camping, backpacking, museums, and more.



**Bedtimes.** Bedtimes are 8:30 PM unless your level allows a later bedtime, or your behavior results in an earlier bedtime.



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Your efforts and ability to meet these expectations and follow the milieu routine will play a HUGE role what you are allowed to do while you are here. The next sections talk about our level system, daily points, and how you can get different privileges.

## Level Program

We use a level system to help you know how you're doing in your treatment and what privileges you are eligible for. Twice a day, staff will share with you daily ratings on specific target behaviors -- like a report card. Some youth may struggle more than others on some of the target behaviors, so effort on those target behaviors may get more weight when points are earned.

All youth have common target behaviors/goals:

- School participation
- Staff interactions
- Peer interactions
- Personal hygiene
- Room hygiene
- Shared living
- Treatment participation

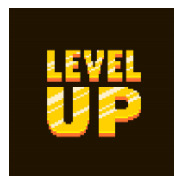
Each youth also has personal target behaviors/goals like:

- Ask for help in a safe way.
- Identify and own your feelings.
- Express your feelings.
- Disagree without being argumentative.
- Listen to other people's opinions and show interest.
- Notice when feeling unsafe and ask for help (early).
- Ask a brief question and wait for a response.
- Stop yourself from asking the same question over and over.
- Take responsibility for own words, feelings, and actions.
- Accept no as an answer without escalating to unsafe behavior.

You might be asking, *"Why do we need a level system? We don't have one of these at home."*

We want working hard towards things that are important in the community and are important to you. We also want things to be as fair and predictable as possible. A level system helps everyone keep track of how you are doing and helps us make decisions about your readiness to do certain activities.

In a nutshell, the level system is the fairest way to communicate and make decisions about day-to-day activities.



# Daily Points

We have a points system that helps us keep track of how you are doing in certain areas so we can give you feedback. You earn these points daily. The two ends of the points scale are zero (0) and three (3) and represent extremes. You can earn 0 to 3 points in the following areas: group participation, adult interactions, peer interactions, room hygiene, personal hygiene, school behavior, school attendance, verbal boundaries, body boundaries, shared living responsibilities, cue responsiveness, and coping plan commitment.

You will receive weekly feedback on your progress in these areas and we will also review your progress in these areas at Treatment Plan Reviews (TPRs). This gives you an opportunity to celebrate your successes and figure out where you need to spend more time growing.

Weekly Average Points	
Level 1	1.0-1.9
Level 2	2.0-2.5
Level 3	2.6 to 3.0
Level 4	Level 3 for one week and approved by treatment team

The chart above shows the levels, phases, and point requirements to earn each of the levels. Each level has certain responsibilities and privileges.

- At admission, all youth begin at Level 2 and “**YELLOW**” (2Y) for up to 14 days. During this time, you can go down a level, but you cannot go higher than Level 2Y. After the first 14 days and each week after that, your weekly points will be averaged to determine your maximum level for the upcoming week.
- If you earn a higher maximum level for the next week because of more points, you will be able to move up one level and safety color at a time for each 24-hour period until you reach your maximum level for the week. Your level goes up slowly so you can rebuild trust. Your level can go down faster due to broken trust from unhelpful or unsafe behavior.
- Unsafe behavior = the lowest level, Level 1 and “**RED**,” and you will have to complete Milieu Reentry. While completing Milieu Reentry tasks, you will be allowed Level 1 privileges for at least 24 hours or until you have completed them. If you do not make solid efforts to complete your repair or continue to engage in unsafe behavior, you could remain a 1R longer.

## MILIEU REENTRY

You will have to complete steps to reenter the milieu whenever you have an episode of unsafe behavior such as physical aggression, self-harm, running away, verbal threatening, severe bullying, and other behaviors that pose a considerable safety risk to yourself or others. When you are completing these steps, all your privileges are suspended for at least 24 hours until you have repaired for your behavior. You may have additional restrictions depending on the problem behavior that occurred. The purpose of this time is to help you focus on the problem behavior and prevent it from happening again. You will have to do the following things:

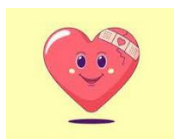
Step 1: You must complete **a behavior chain analysis (BCA) and any learning tasks** by yourself and present it to your primary counselor or designated counselor at the time of the incident for feedback once you are finished. It is a way for you and the treatment team to learn what caused the problem behavior so we can prevent it in the future and repair any damage that has been caused to relationships and/or the physical environment.

Step 2: You must describe the incident and present what you have learned about yourself to peers in a small group meeting (determined by your counselor). Peers and staff will give you feedback during this meeting. You then debrief with your primary counselor or the designated counselor to prepare for next step.

Step 3: You identify what has been damaged or needs correction or repair with your primary or designated counselor. Together you identify appropriate way to repair for the damage that was caused. **Your repair for the behavior must also include identifying, learning, and practicing a new skill**. Keep in mind that after you complete the repair (fix damage, demonstrate change, discuss, community service, etc.), you may still lose items based on your behaviors with those items.

Step 4: Once your primary or designated counselor signs off on your repair packet, you can return to normal activities and have your privileges restored.

You might be wondering, “Come on! Why do I have to do all of this!?” Well, human relationships are *very* important and if you hurt someone, you must try to make it up to the person (or people) you have hurt (including the environment that people share). No one is perfect and that is okay. Being on “restart” gives you a chance to make up for your mistake, learn from your mistake, and prevent the mistake from happening again. Learning how to change unhelpful or unsafe behavior around people you have mixed feelings about helps change your behavior for the relationships with the people you care the most about.



## SCHOOL RE-ENTRY STEPS

If you engage in serious behavior in classroom including physical aggression, property damage, and behavior that significantly disrupts the learning environment, you will be temporarily restricted to cottage. When you are restricted to cottage, the only thing you will be allowed to do is complete the steps below.

- **STEP 1:** You must complete a **BCA** to identify what led up to the problem behavior. The BCA determines what skills were needed and where they could be applied. Be sure to focus on the main problem behavior and brainstorm possible corrections for problem behavior. You can ask for help figuring out the main problem behavior. *The main problem behavior is the one that caused the most harm.* Dr. Michelle must sign off on the BCA before you move to the next step.
  - **STEP 1a (optional):** Dr. Michelle may also assign additional reentry **learning tasks** to help you get additional understanding of the problem behavior and how to prevent it. If additional learning tasks are assigned, they must be signed off by Dr. Michelle before you move to the next step.
- **STEP 2:** The shift lead will then schedule a **re-entry meeting** with the principal and review the main problem behavior from your BCA and, if applicable, your learning tasks. The goals of the meeting are to find ways to prevent the problem behavior from happening again, figure out the steps to rebuild trust with people, and create a plan for meeting school expectations.
- **STEP 3:** The shift lead or another counselor will work with you to make a **cope ahead plan** for the meeting itself.
- **STEP 4:** Your counselor will **attend the re-entry meeting** with you, your teacher, the principal, and any other school staff who were impacted by your behavior. You will be asked to share their BCA (and learning tasks, if applicable) at the meeting and plan to prevent behavior from happening again. You will also share patient ideas for **correcting the harm** that was caused.
- **STEP 5:** You may **re-enter school after your plan is approved** by the adults in the meeting.

## CONTINGENCY MANAGEMENT

Contingency management is a research-based system of rewarding desired behaviors and consequence problem behaviors to help you change your behaviors. Rewards and consequences are part of life and so they are a part of treatment. Some examples of rewards include feeling proud of yourself, people noticing when you are practicing new skills, being eligible for the Ketron store, having access to privileges, and others feeling safe around you and wanting to spend time with you.

We use natural and logical consequences to help you stop problem behavior and make safer choices. Natural consequences are experiences that naturally follow a choice or behavior. For example, going outside during the winter without a jacket naturally results in feeling cold. Logical consequences are created by adults to help youth make better choices in the future.

For example, at Ketron riding your bike outside without a helmet has two consequences, the natural consequence of possibly falling and getting hurt and the logical consequence of you not being able to ride your bike for 48 hours. In the example above, the youth misused the bike by riding it without a helmet which violates CSTC rules; therefore, access to the bike was restricted for a period. Or, if a youth self-harms with plastic, that will not be able to use anything plastic for a certain amount of time.



## Safety Status Guidelines (“Safety Color”)

**Green Status:** You earn “green” status when you have demonstrated the behaviors below and other positive/helpful behaviors.

Followed directions (several cues okay)

Appropriate conversations (one cue okay)

Safe physical boundaries with others (several cues okay depending on youth involved and not sexual, arm’s length or whatever is appropriate for activity)

Practiced coping with unpleasant feelings/thoughts

Collaborative and asked for help when needed (even for unsafe urges)

Respectful (one cue okay) and helpful in the milieu

Able to wait appropriately for help

**Yellow Status:** You earn “yellow” status when you have demonstrated the behaviors below or other behaviors that are not considered “red” status. We think about persistence of your behavior vs. an isolated instance, the nature of your behavior, and your overall behavior for the shift. How often you are cued for the same behavior is also considered here.

Difficulty following directions for at least 50% of shift

Minor boundary problems (e.g., multiple instances of standing too closely with self-correction and or correction after cues)

Instance or two of posturing, emotion dysregulation, or conflict with safe outcome/recovery

Acted on self-harm urge but reported to adults and items turned in (superficial or minor injury)

Left area without permission once with recovery (indoors)

Used inappropriate language – cussing, sexual jokes, unhelpful comments – redirected with cues or self-corrected

Passed non-sexual notes – notes about “dating” okay for this status

Antagonized peers but responded to cues

Propped door once but corrected behavior with cue

Treatment interfering behaviors – noncollaboration, noncompliance, poor follow through (at least 25% of shift)

**Red Status:** You earn “red” status when you have engaged in **SERIOUS** unsafe behaviors listed below. This status lasts 24 hours.

Egregious safety violations – physical aggression, sexual touching, exposing body, persistent disruptive behavior that jeopardized milieu safety

Violated physical boundaries – going down a different pod without permission, in another patient’s room, being in pod with peer without adult, property damage in shared space

Left area without permission (outdoors), attempted UL, UL

Persistently targeted peer(s) and poor response to cues from adults (unable to recover) jeopardizing safety of milieu

Any hateful/biased language (i.e., racial, sexual, gender identity, sexuality), sexual notes and pictures

Poor compliance with EQT

Propped door that did not correct (including after cued already another day)

# Privileges

	1R	1Y	1G	2R	2Y	2G	3Y	3G	4
Bedtime: Monday - Sunday	8:00 PM	8:15 PM	8:30 PM	8:00 PM	8:15 PM	8:30 PM	8:15 PM	8:30 PM	9:00 PM
Tea at bedtime (unless problem at bedtime)	Y*	Y	Y	Y	Y	Y	Y	Y	Y
Special tea flavors at bedtime	N	N	N	N	Y	Y	Y	Y	Y
Hot cocoa or apple cider at bedtime	N	N	N	N	N	Y	Y	Y	Y
Check-in with primary at bedtime (unless problem at bedtime)	Y*	Y	Y	Y	Y	Y	Y	Y	Y
Additional check-in with a preferred staff at bedtime	N	N	N	N	N	N	Y	Y	Y
On cottage recreation participation, activities	Y*	Y	Y	Y*	Y	Y	Y	Y	Y
On campus recreation therapy	Y*	Y	Y	Y*	Y	Y	Y	Y	Y
On campus recreation participation	N	N	Y	N	Y	Y	Y	Y	Y
Outside with identified activity	N	N	15 MIN*	N	N	30 MIN*	N	60 MIN*	UNL*
Off campus activities, outings	N	N	N	N	N	Y	N*	Y	Y
Bikes, skateboards, scooters, and skates outside	N	N	N	N	N	Y	N	Y	Y
Other areas besides room for transitions	N	N	N	N	N	N	N	N	Y
Access library to check out books, make phone calls	N	N	N	N	N	Y	N	Y	Y
Use library independently without supervision	N	N	N	N	N	N	N	Y	Y
Electronic handheld games in pod only	N	N	N	N	N	15 MIN*	30 MIN*	60 MIN*	90 MIN*
Video games	N	N	N	N	N	15 MIN*	30 MIN*	60 MIN*	90 MIN*
Independent media when space is available	N	N	N	N	N	60 MIN*	60 MIN*	Full movie	Full movie
Contract for independent activities	Y	Y	Y	Y	Y	Y	Y	Y	Y
Choose TV show or cottage movie during milieu media	N	N	N	N	N	N	N	Y	Y
Personal radio, boombox, and MP3 in room	Y*	Y	Y	Y	Y	Y	Y	Y	Y
Access blue bin items	N	N	N	N	Y*	Y	Y*	Y	Y
Non-permanent writing utensils in room	N	N	N	N	N	Y	N	Y	Y
Choose a game from the back game closet	N	N	N	N	N	Y	N	Y	Y
Help serve snack on cottage and/or at school	N	N	N	N	Y	Y	Y	Y	Y
Help staff with projects or setting up activities	N	N	N	N	N	N	N	Y	Y
Extra day of personals	N	N	N	N	N	N	Y	Y	Y
Cottage store	N	N	N	N	N	Y*	N	Y	Y
Barber shop, haircuts on cottage	N	N	Y	N	N	Y	N	Y	Y
Trading Card Games (Magic, Pokémon)	N	N	N	N	N	N	Y*	Y	Y
1:1 outing with a staff and/or cottage leadership	N	N	N	N	N	N	N	N	Y

\*Staff discretion



## OUTSIDE EXPECTATIONS

1. You must attend a full day of school without any walk outs.
2. All repairs and overcorrections must be completed prior to going outside. This means you must have met Milieu Reentry expectations.
3. All daily expectations must be completed prior to you going outside. This includes hygiene, having a clean room, and completing all chores.
4. You must have maintained 24 hours (one day) of safety and following directions with no more than two cues on the shift prior to going outside. [Staff discretion]
5. You must have a planned activity when you are outside. Activities include basketball, walking the loop, playing on the swings, kicking a soccer ball, and so on. The activity you chose must be approved by the treatment team *before* you go outside. Some activities are based on your level. [Staff discretion]
6. You must have respectful interactions with the treatment team and your peers on that shift before going outside and while you are outside. This includes having appropriate language.
7. Once you ask to be let inside, you will not be able to go back out until the next time the treatment team takes kids outside. One of your peers will be given an opportunity to go outside in your place.
8. Your time limit for outside time is based on your level. [Staff discretion]
9. You must be a part of clean up before coming inside. This includes picking up and putting away all helmets, bikes, skateboards, basketballs, and any other items you were using.



## OUTING EXPECTATIONS

1. You must have attended all Recreational Therapy (RT) groups for the week of the outing and stayed safe with your body and your language. [Staff discretion]
2. All daily expectations must be completed prior to you going on the outing. This includes hygiene, having a clean room, and completing all chores.
3. You must be at least a Level 2G to be outing eligible.
4. All daily expectations must be completed prior to you going on the outing. This includes hygiene, having a clean room, and completing all chores.

5. All repairs and overcorrections must be completed prior to the outing. This means you must have met Milieu Reentry expectations.
6. While on an outing, you must follow directions with no more than two cues and have respectful interactions with peers and adults. You must also follow staff expectations for seating and noise volume in vehicles.
7. Any unsafe behavior during an outing will result in outing restriction for one week. It could be longer depending on the seriousness of the behavior. You will be responsible for meeting all expectations to restore your outing privileges. [Staff discretion]
8. Remember, even if you meet these expectations, the activity leader has the ultimate discretion of who they take on the outing. You and your treatment team will work hard to provide the safest and most compatible group for you to join.



## KEEPING YOU AND OTHERS SAFE

**Resets:** The treatment team might ask you to do “resets” by spending time in your room or pod. You may also ask for a reset. This is the preferred approach if the milieu gets too loud or too silly. Practicing resets gives you a chance to learn how to cope by walking away from overwhelming situations, taking a break before problem-solving, and keeping the cottage safe. The treatment team can direct you to complete a reset at any time.

**Time-outs:** The treatment team might also ask you to take a time-out in your room or other area, which is called a Counselor Directed Time-Out. There are areas at school for time-outs as well. It is preferred if you ask for a time-out on your own, which is called a personal time-out, or PTO. The purpose of a time-out is to alert yourself and others that you need to calm yourself and prepare to safely get back into activities. Accepting and requesting time-outs shows that you recognize that a behavior is becoming problematic and are committed to working on your unhelpful behaviors. This usually helps you stay safe and still work towards your treatment goals. The treatment team will talk to you after a time out to help you get back on track.

**Physically Directing:** The treatment team may physically guide you to walk to a different location and if you walk with us, it is called physically directing. There is no use of physical restraint because you accept us helping you walk away or “disengage” from a situation.

**Emergency Quiet Time (“EQT”)**: If someone is being unsafe in the milieu and is having trouble resetting in another area or following safety directions, a counselor will ask you to “clear the floor.” This means that you immediately go to your pod and stand in front of your door and wait for counselor to let you in. You must remain in your room until a counselor says it is time to come out. We try to make this time as short as possible, and we will give you K-Bucks to spend at the store (on store day) if you stay in your room until the “EQT” or “clear the floor” is over. If you have concerns about being in your room during these times, please talk to your counselors about how to problem-solve it before it happens, this way you can cope when they occur.

**Seclusions and Restraints** – The treatment team is committed to helping you express yourself in ways that are safe and help you get your needs met. However, at times, it may be necessary to physically intervene to help you or other youth stay safe around others. The use of seclusion (being in the seclusion room “QR” with the door locked) or restraint (going “hands-on” with you to protect you from hurting yourself or others) is used only when every other safety strategy has failed.

Anytime you are placed in locked seclusion, a doctor’s order is required authorizing you to be kept there until you are safe to join the community again. After a seclusion, you can help restore trust in the community by contracting with the treatment team for safety and completing a behavior analysis (BCA) to increase your behavioral skills and make the same behavior less likely to happen again. You will also be able to use this time to prepare and plan for your correction and repair.

**Item Restrictions**: At any point the treatment team may not allow you to have certain items if you have used them inappropriately or unsafely for up to one week depending on the behavior. You will also get expectations about how to earn the items back. For example, if you throw your shoe at someone, you will lose your shoes for three days if you are safe with your shoes for those three days.

**Making Amends**: You might be asked to make amends for one hour as part of Milieu Reentry if you have damaged property, declined to clean up a mess that you made, or when adults must clean up a mess that you made so that others can use a shared space. Making amends could include deep cleaning, doing peers’ chores for them, doing something for the community, and other tasks at staff discretion.

**Safety Precautions**: If you are having a lot of difficulty interacting with others safely or keeping yourself safe you could be placed on one of these precautions:

- ◆ **30/30**: This is when you are restricted for a specific period from the normal milieu programming. You spend time between your room and pod, or between your pod and the milieu, and are unable to join others in the milieu. We usually use this restriction if you are having a problem getting along with other people. Time spent away from the milieu is a good opportunity for you to complete a BCA and reflect on what challenging behaviors excluded you from being around peers, think about why the behavior is not appropriate, and plan how you will correct your behavior to rejoin the milieu.
- ◆ **Other restrictions**: You may have other restrictions for safety. For example, if you try to run away, you will be placed on “Run Risk,” and you will not be allowed outside for a period and may only be allowed to wear slippers to walk to and from school. This is to

help decrease the likelihood that you will act on the urge to run so the treatment team can provide the type of support that will help you reach your goals.

**Levels of Observation:** The treatment team might need to keep a closer eye on you for safety reasons for a specific behavior. This includes:

- **Extra Vigilance (EV)** – A Physician’s order that requires continual and direct observation of a patient every 15 minutes.
- **Close Observation (CO)** – A Physician’s order that always requires direct line of sight of a patient.
- **Maximum Precaution (MP)** – A Physician’s order that always requires direct line of sight of a patient, while maintaining close physical proximity.
- **Continuous Therapeutic Intervention (CTI)** – Targeted plan assembled by the Clinical Treatment Team that consists of a specific set of instruction for direct care counselor working with a patient.

At any time, if your treatment team believes you need extra supervision for safety reasons, they will make sure you are supervised in whatever way necessary. We recognize that this could be uncomfortable for you. We do it anyway because you are special and important and valuable, no matter what kinds of mistakes you made in the past and the things you struggle with today. This is the way we care. The world needs YOU and we will do what we must make sure you keep growing and learning. One of our mottos is **“You make today better.”** We believe this 100%, even when you are having a hard day.

**Other restrictive orders** – The treatment team may search you and/or wand you, and/or search your room to help keep you safe. These searches require a doctor’s order and are not taken lightly. You may be wanded and searched after outings and therapeutic leave (“passes”), as well as if you make threats of or attempt self-harm.

**Sexual Safety** – You might be asked to participate in a sexual safety learning task if the treatment team thinks it is necessary. If you require Sexually Aggressive Youth (SAY) treatment at admission, or if you have problem with sexual behaviors during treatment, our sexual decision-making counselor will provide therapy and other services to you to help you get back on track to meeting important goals.

**Substance abuse assessment and treatment** – You might be asked to participate in a substance use disorder assessments if the treatment team thinks it is necessary. If you meet criteria for a substance abuse disorder, our substance abuse counselor will provide therapy and other services to you to help you get back on track to meeting important goals.

OK, phew! Was that a lot of information or what?! The next section is about how parents, guardians, families, and approved visitors can participate in your treatment with you by phone calls, visits, therapeutic leave (“passes”), and things like that. It is important that you learn about these things, too. We also know you might be a little tired and might need a break. If you want to skip ahead to see what a typical day or week looks like, you can skip ahead to the very last page. If you would like to see the current schedule, you can find that posted in the day hall.

If you decide to take a break now, make sure you come back and read the next few pages, so you have an idea about expectations for parents, guardians, family members, and other approved contacts in terms of phone calls, visits, passes, and treatment participation.



## **Information for Parents, Guardians, Family Members, and Other Approved Contacts**

**Your involvement** – We believe your involvement in treatment is extremely important because it helps you increase your behavioral skills and research shows that it leads to better treatment outcomes. There are many ways that you and other approved contacts may be involved in your youths’ care while they are at Ketron.

- **Family therapy** – Family therapy, if applicable, is a firm expectation of treatment and requires at least two in-person sessions per month. You will be matched to a family therapist *no later* than the 30-day Treatment Plan Review. The details of therapy such as whether it will be by phone, via video conference, etc. will be determined by the family therapist in collaboration with the youth and her/his family. Family therapy usually focuses on education, support, communication, interactions, increasing behavioral skills, and behavior change.
- **Parent DBT Group** – Parent DBT group can include other family members and is an opportunity for you to increase behavioral skills and develop a shared treatment language and skillset.
- **CLIP Parent Weekend** – This event is hosted by the CLIP Administration and other agencies. It is an opportunity for you to connect with other parents/guardians who have been in similar situations. It is also an opportunity to learn more about available community resources.
- **Recreation Department hosted Center-wide Events** – Examples of such events include Rocket Blast Off, a campus Carnival (with dunk tank!!☺), and holiday celebrations.

**Therapeutic Leave (TL; “passes”)** – Another important way you and other approved contacts can be involved in treatment is by participating in progressive passes, which are collaboratively guided by the treatment team. After your youth has shown that they can be safe on cottage, as well as when they are on cottage and recreation outings, opportunities for local day passes will be encouraged. After a period of successful day passes, a home visit will be scheduled before overnight passes begin. The move from day passes to overnight passes gives the youth and their family chances to practice new skills in different contexts (“skill

generalization”) and repair trust. All of this is intended to prepare everyone for living together again.

Before a youth leaves on pass, we ask that they spend a few minutes with a counselor to write down the goals for the pass. We usually discourage special activities that require money. When a youth returns from a pass, we ask that they spend a moment with a counselor reviewing how the pass went, how well goals were met, and checking in or out any personal items.

Note: All guardians and family members are encouraged to allow the absolute minimum of caffeine while youth are on pass, and we strongly discourage any caffeinated beverages after 5:00 PM, whether the youth is returning to cottage that night or staying with you.

**PLEASE NOTE: Contact with other CSTC youth while on pass is never allowed. Also, CSTC policy states that discharged youth may not have ongoing contact with current CSTC youth and this includes when they are on pass.**

If the cost of travel from great distances to participate in a youth’s care at CSTC is a hardship for families, some community agencies may be able to help. The treatment team will help connect you with these resources.

**Visits and visiting hours** – The best times for visits are between 5:00 PM and 7:00 PM Monday through Friday and between 9:00 AM to 7:00 PM Saturday, Sunday, or on Holidays, when visits do not interfere with treatment programming. Each visit may last up to 3.0 hours. How often people visit a youth and where you prefer to visit should be discussed with the youth, the people involved, and the treatment team. You are welcome to observe your youth in school. This must be scheduled at least 24 hours in advance by calling the school at (253)756-2522. Some other details about visitors:

- **All visitors must be on the approved visitors list** and must call Ketrone Cottage (253 756 2381) **before** coming to visit. The typical day is structured and full of treatment programming. By calling ahead, a visitor can be sure the youth will be available.
- Visitors should bring current government issued picture identification and show it whenever asked.
- For therapeutic reasons, at the request of the guardian, or in compliance with court order, visitation or phone contact may be supervised or limited. If this is the case, we will let everyone know the reason and expectation.
- **Visits never occur in a youth’s room** or in the pod for safety reasons. However, you may show your visitor your room if you.
- Visitors are expected to meaningfully interact and spend their time with the youth when visiting. This means no media or gaming using a cellphone or other media device.
- All items brought by visitors must be checked in by a member of the treatment team before the item is given to the youth. **\*\*We may ask you to bring items home if we**

cannot store the items, if the items violate policy, and/or the items interfere with treatment. \*\*

- **Counselors have the responsibility and authority to ask any visitor to leave** if the visitor: 1) is not following the above rules, 2) is ignoring safety directions, 3) is disruptive to the milieu, 4) is not dressed appropriately, or 5) if conditions on the cottage require visitors to exit for safety reasons. **All visitors must promptly follow Counselors' directions if asked to shorten a visit, move to another area, or leave the cottage.**

**Phone calls** – ***All callers must be on the approved contact list.*** Most calls are limited to 10 minutes to give other youths a chance to use the phone. The best times to call are between 4:00 PM and 7:00 PM Monday through Friday and between 9:00 AM to 7:00 PM Saturday, Sunday, and holidays. Phone calls are discouraged during school hours. If a youth receives a call during school, group, mealtime, or transition time, *the person who called the youth will be asked to call back.* Due to the busyness of the milieu, counselor cannot be expected to take messages.

Some calls are monitored or on speaker phone for legal or therapeutic reasons. If this is the case, all parties involved in the call will be told about this before the call or at least at the beginning of the call. Before some calls a youth may get coaching to prepare him/her/them and the other person for a successful call. Counselors may interrupt you or end a phone call if it becomes inappropriate, disruptive to the milieu, unsafe, or too intense.

**Food items** – Please limit food items that are brought back to cottage to save for a later time (e.g., fast food, pizza, etc.). If you would like to bring food items, please consult with the treatment team *prior to bringing in the items.*

**Guess what? YOU MADE IT TO THE END! WOOHOO!!!!** ☺ Thank you for taking the time to read through our program handbook. We know that was A LOT of information and that you might have some thoughts, opinions, and feelings about what you have read because of how it all affects your life day-to-day. We are all here and would love to talk to you and answer any questions you may have.



The last page is a sample weekly schedule so you can get an idea of what a typical week looks like. ☺

# Typical Schedule

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7:30 Breakfast	7:30 Breakfast	8:30 Breakfast	7:30 Breakfast	7:30 Breakfast	8:30 Breakfast	8:30 Breakfast
8:30 School	8:30 School	9:00 Room time	8:30 School	8:30 School	8:00 Cottage Activity	9:00 Cottage clean-up
		9:30 School			10:00 Recreation	
12:15 Lunch	12:15 Lunch	12:15 Lunch	12:15 Lunch	12:15 Lunch	12:00 Lunch	12:00 Lunch
12:45 Room time	12:45 Room time	12:45 Room time	12:45 Room time	12:45 Room time	12:30 Room time	12:30 Room time
1:00 School	1:00 School	1:00 School	1:00 School	1:00 School	1:00 Activities	1:00 Activities
2:45 Room time	2:45 Room time	2:45 Room time	2:45 Room time	2:45 Room time or Incentive outing	2:45 Room time	2:45 Room time
3:15 Community Meeting	3:15 Chores	3:15 DBT Skills	3:15 Chores	3:15 Social Skills	3:15 Cottage announcements	3:15 Cottage announcements
3:30 Cottage Activities	3:30 Community Meeting	3:45 Soccer	3:30 Cottage Activities	4:00 Cottage Activities	3:30 Cottage Activities	3:30 Cottage Activities
5:00 Dinner	5:00 Dinner	5:00 Dinner	5:00 Dinner	5:00 Dinner	5:00 Dinner	5:00 Dinner
5:30 Room time	5:30 Room time	5:30 Room time	5:30 Room time	5:30 Room time	5:30 Room time	5:30 Room time
6:00 Cottage Activity/Hygiene	6:00 Recreation	6:00 Incentive Outing	6:00 Campus fitness	6:00 Hoops	6:00 Cottage Activity/Hygiene/Art Expression	6:00 Cottage Activity/Hygiene
	6:15 Cottage Activity/Hygiene	6:15 Cottage Activity/Hygiene	6:15 Cottage Activity/Hygiene	6:15 Cottage Activity/Hygiene		
7:15 Snack	7:15 Snack	7:15 Snack	7:15 Snack	7:15 Snack	7:15 Snack	7:15 Snack
7:45 Pod time	7:45 Pod time	7:45 Pod time	7:45 Pod time	7:45 Pod time	7:45 Pod time	7:45 Pod time
8:30 Bedtime	8:30 Bedtime	8:30 Bedtime	8:30 Bedtime	8:30 Bedtime	8:30 Bedtime	8:30 Bedtime