



Christ Centered
Relationship
Model

"The Lord is near to the broken hearted and saves those who are crushed in spirit"
~Psalm 34:18

The staff at Yahweh Center Children's Village work with extremely troubled children who have suffered tremendous physical and emotional abuse and neglect. Many of our kids have trouble trusting that adults will properly care for them and keep them safe.

This manual was written to help Yahweh's staff provide the highest quality of care possible for our children in the hopes that, as they grow up, our children will experience more and more of the success and happiness that they deserve. We use a **Christ Centered Relationship Model** with our children, because the abuse, betrayal and neglect that have marked the early lives of these children have compromised their ability to have healthy relationships. We need to recognize that the disruptive and disrespectful behaviors that the children have exhibited have damaged past relationships. In order to develop healthy relationships, they must learn to better control their behaviors. We also believe that their personal connection to God can become a focal point in the process of their healing.

Psychiatric Services

All children receive psychiatric services from our board certified psychiatrist. Medication and current diagnosis is another imperative part of our client's treatment. Clients meet with our psychiatrist weekly in the PRTF and at least once a month in the level III or more often as needed.

Therapeutic Services

All children at the Yahweh Center participate in therapy with Licensed professionals. In therapy, we are asking our kids to confront painful emotional memories, and we are challenging them to re-think and re-experience the way that they look at themselves, others and the world. They are often required to face ongoing changes in their family circumstances and adjust to new caretakers. They learn new strategies to cope with their emotions and new skills to manage their behavior. This is not an easy task for them and they need the ongoing support and compassion from the adults around them. In addition, family therapy is provided whenever there is an identified family in the child's treatment. Work with the families is ongoing to best prepare the children to return to the least restrictive environment possible, ideally to return home.

Cottage Living

The cottage living experience is an opportunity for the children to learn and implement the necessary strategies to manage their behaviors in a safe, secure environment. Staff must provide an environment for the child that is characterized by firm, consistent limits and structure. It is in this setting that the children are learning the daily living skills that will be necessary for them to re-integrate into a family situation and allow them to develop healthy relationships. It is essential that this is done with Christ-like compassion for the children in order for them to truly grow spiritually and emotionally.

Luke 16:10

If you are faithful with little you will be faithful with much.

THE COTTAGE ENVIRONMENT

Child's Bedroom

The child's bedroom should initially contain only a moderate amount of toys, games and possessions in order to reduce stimulation. Many children have a multitude of personal possessions. The surplus items or those that are not appropriate for the cottage can be stored in the attic or sent home with their parent/guardian. The toys should generally be able to fit into their toy tub in their closet. The goal is to minimize distractions and keep the number of items to a controllable and organized level, so the rooms do not over stimulate the child. Specific items the child cannot safely have in their room need to be listed in the Behavior Plan approved by the Child's Rights Committee.

It is Yahweh's policy that our children should never have TVs, VCRs or computers in their rooms.

Bedtime

It is important that bedtime be consistent and include nightly routines (i.e., bath time, brushing teeth, reading stories, etc.). These should be appropriate to the child's developmental needs. Children should have a quiet time before the lights are turned out when they can read, play or pray quietly.

Once children have been tucked-in, the expectations will be that they remain in their rooms unless they have received permission from a staff to come out of their room.

Meal Times

Meal time should be viewed as an important learning opportunity and should model family life as much as possible. The atmosphere during meal times should be quiet and pleasant (no television or radio during meals). All children are expected to exhibit appropriate table manners. It is the responsibility of the staff members to model and teach good manners. Positive conversation should be occurring. The staff members should encourage and educate a child about healthy food choices, but not coerce a child to eat a particular food.

Chores

Chores are an essential part of daily cottage and family life. This is one way a child learns about being responsible. All children should be assigned chores in the cottage.

While inspecting the chore, staff should make a big deal out of parts of chores that are done well. Remember that the chores you give to the child and the expectations you have for their completion will vary depending upon the age and developmental abilities of the child in your care. Younger children will need more assistance to complete their chore.

Education in the PRTF- These children go to school in the PRTF classroom. The school day is broken into two groups the Dolphins and the Whales. Each school time block lasts 30 minutes. When available a staff should be present in the

classroom with the teacher and the assistant to provide support for the children. If a child is having a difficult time they should be removed from the class and go to the pillow room to complete the assignment from there with the assigned classroom staff. Any work not completed in school needs to be completed during the educational group time during second shift. The educational group takes place instead of homework and should be interactive game type activities that help the children to retain information from the school day.

Personal Space

Touch is an essential aspect of working with traumatized children. Children need closeness and touch in order to grow and change. Some children are resistant to nurturance by adults because they have been hurt physically and emotionally by adult caregivers in the past. These children may react negatively or with fear when touched by an adult. Other children may be overly affectionate with little to no awareness of appropriate boundaries. Using the language of maintaining personal space will assist the staff in appropriately addressing issues around touch and physical contact. If a child is overly affectionate, they need to be reminded to maintain personal space. It is important for the child to be taught to ask permission to touch or hug you. They need to be taught to respect others' boundaries as well. If a child throws himself at you then he should be sent back to the starting point to practice the greeting over again the appropriate way.

Handshakes and gentle pats on the back are a good way to show affection to the children as they learn that physical touch is an important aspect to healthy relationships. This needs to be done in a careful manner as initially a child may be uncomfortable with this. Until a relationship is built between a staff member and a child, it is important to ask a child to give a high five or a "side-hug". It is important to respect a child's anxiety and boundaries. Any concerns about a child's response to touch needs to be shared with the child's therapist.

"Jesus said to them...anyone who welcomes a little child like this in my name is welcoming me." Mark 9:37

Basic Yahweh rules

We have two sets of basic rules the three A's and the three B's. These rules are to be enforced by the staff and children are expected to follow them at all times.

Three A's

- *Ask for what you need and want*
- *Ask to be out of eye sight*
- *Ask for appropriate affection*

Three B's

- *Be Respectful*
- *Be responsible*
- *Be fun to be around*

Supervision in the Cottage

Golden Rule of the Yahweh Center:

Two or more kids should never, ever be alone together.

The Supervision that we provide for our kids is absolutely critical. We have to be particularly conscientious of the interactions that occur amongst our clients, and be physically present when two or more of our clients are in close proximity to one another. This means that if two kids are in the day room that at least one staff should be in the room with them to monitor their interaction. This is necessary to prevent any form of inappropriate interaction and to promote positive interactions through modeling and instruction. We need to maintain mandated ratios at all times.

Television, Computers, Video games

These activities can become distancing tools for children allowing children to tune out the real world and relationships. These activities may be allowed for brief periods, when children are demonstrating basic social skills and meeting expectations. Appropriate videos, chosen by the adults, are usually healthier than commercial television. Television time should not exceed 1 hour per shift. Video games need to be appropriate for the child's age. Video game time should not exceed ½ hour per shift. Frozen status children are not to participate in movie time or play video games.

Video games, movies or music with sexual or violent content are not permitted at the Yahweh Center. Staff should listen to music such as CD's to determine if the content is appropriate before the child is allowed to have it.

Telephone

The children have the right to make calls to and receive calls from family, friends, social workers, G.A.L.'s, doctors and clergy at reasonable times. All approved contacts must be listed on the contact sheet. Staff should stay within listening distance during calls to assure the child is not engaging in splitting behavior such as reporting untruths to outside team and family members. In addition, staff need to monitor the child to assess how the contact is affecting the child. Any concerns need to be reported to the child's therapist. Two sided monitoring of telephone calls can only take place with specific orders from a guardian and must be written into the child's plan. Inappropriate conversations should be reported to the treatment team to be addressed as a clinical issue. Staff may want to speak with the parent/adult on the telephone before and after a call to report child's current behaviors and answer any questions that may arise. This serves to build relationships between parents and staff. The children are not allowed to answer the phone.

Alarms and Cameras

Alarms on children's bedroom doors provide a sense of security for the adults and children and provide a physical boundary for the child.

Children and their guardians should be shown the camera system in the cottage the first day that they arrive. Cameras are used to ensure the environment is safe for all concerned.

Spiritual Activities

As a Christ centered agency we can not express enough the importance of the word of the Lord in the children's everyday lives. With their backgrounds it is important for us to help them build their self worth. Every morning is to be started with an AM blessing read by one of the children (with help from staff as needed). Each evening should end with a PM blessing read by one of the children. The singing of praise and worship throughout the day is encouraged and necessary to the treatment of our children. Vespers and bible studies are to occur on a regular basis. Campus vespers occur every other Tuesday at 3:00 in the administrative conference room and all are encouraged to participate. Praying with the children and for the children is important in building their self worth. Sunday morning preparations should be encouraging the children to dress appropriately and attend services (either in the PRTF or at Scott's Hill). All though we can not force the children to participate in these activities parent/guardians and children can agree or disagree to participating in the different areas and they should be encouraged to participate in the areas agreed upon.

Proverbs 24:3-4 "By wisdom a house is built, and by understanding it is established; and by knowledge the rooms are filled with all precious and pleasant riches."

Methods of Managing the Environment

The simplest way to manage the cottage environment is for the staff to at all times be in charge. This takes skill and intentionality on the part of staff. A good indicator that adults are not in charge is if the cottage environment begins to become unsettled and somewhat chaotic. Below are techniques that we utilize to ensure that adults stay in charge and they serve as a form of preventative maintenance from outbursts.

Have a plan

As staff we should always have a plan about what is next, and anticipating the needs of the children. This means that we as a team need to set out a plan at the beginning of the shift and be in agreement about how the shift is going to run, factoring in the individual and collective needs of the children we serve. The plan needs to revolve around a structured routine that meets daily expectations and recreational activities.

Transitions

Transitions can be a difficult time for children and require a consistent, structured approach. Approximately five minutes of quiet time should occur at each transition to be completed in a general area. Children should sit quietly on a

chair or on the floor. Once all children are settled the staff can begin setting expectations for the next activity.

Set Expectations

Once the children have completed their transition time, the staff should gather the children and review the expectations and plan for the next activity. This can take place almost anywhere; sitting in a circle in the cottage, around a flagpole outside of school, etc. While setting the expectations the staff should encourage the children to participate in the discussion. The more feedback staff receive from the children the more likely the children are to retain the information. It should not be a lecture but an interactive conversation.

Keep them Engaged

The goal is to keep the children engaged and active so that there is less opportunity for them to get involved in negative behavior. If there is down time, such as standing in line to get in the van or waiting for dinner to be ready, you can play a quick game such as Simon Says, I Spy, etc. This is an important aspect of creating a positive environment. Enthusiasm is crucial in engaging children and maintaining control of the group.

Groups

Groups need to be occurring on a daily basis. Groups need to be fun, interactive and meaningful. QP's should be planning topics for groups on a regular basis. Although in put from the RC's is encouraged. At least monthly children need to participate in a self governance meeting which consists of asking for input on types of outings, food served, and other items they can have input to. The suggestions need to be followed up with in the next meeting and evidence that reasonable requests were granted. Morning goals group should be reviewing the children's personal goals and how they plan on accomplishing their goal. All children should be paying attention to each others goals and have input on how they can help each other achieve their goals.

Individualized Behavior Charts

Each child will have an individualized behavior chart. The child is expected to meet the four goals as listed on the daily behavior chart. Each hour that the child meets the expectations, the staff member will provide the child with a praise statement and draw stars in the box. The child will then receive 3-5 minutes of reinforcement as specified in their plan for achieving their goals. If the child is not meeting the expectation, then the staff member should discuss the issue with the client and review the individual's goal. The staff member should draw a line in the box. The staff member can encourage the child to earn their stars next time. When a child does not earn their star they should be encouraged to do better in the next hour. Children should never feel unworthy or punitive as a result of not earning the star. (See attached behavior charts)

Creating the individualized plan

Each child has a Behavior Creating the Greatest Dysfunction. The team will meet to discuss what the greatest need for that child is at the time. This goal will change over time as the child makes progress through their treatment. Once the goal has been identified for the child the team will discuss what the result of that dysfunction is and what reinforces the child to obtain their goal and affirm their self worth. The team also discusses what this looks like in the current milieu and how that relates back to the child's past. (please see attached worksheet)

Please note: All adults should be praising the children on a frequent basis when they are demonstrating appropriate behavior. Frequent can be defined as every 1 – 2 minutes. It is important to create a positive environment where the children are receiving attention and praise for positive behavior. A pat on the back or a high five can be used and are encouraged.

Reinforcement time

At the end of each 5 hour time block (time periods are modified for students attending school off grounds), there is a ½ hour block of reinforcement time. The QP in each cottage should tally the number of stars earned on the chart. As outlined on the chart 15-20 stars equals a green block, 14-10 stars is yellow, and 9-0 stars is red. Clients that are on green can go out front and ride bikes and play basketball. Clients that are on yellow and red attend a refocus group which explains why they are on red and discusses coping skills and then can go outside for reinforcement time (yellow can go out front, red go to the back). The QP needs to record whether or not each child was green, yellow or red in a separate document for tracking purposes.

Daily Review

It is appropriate for a staff member to review with each child at the end of the shift which stars they earned and did not earn and why. This should be done individually with the child, not within a group setting. This is an opportunity to help the child identify the goals they are working on and engage them in understanding their treatment. Be sure to praise the child for all of the positive behavior for the day. Also, be sure to assist them in identifying alternative behaviors to those exhibited when they did not earn their stars.

James 2: 18 (New International Version) But someone will say, "You have faith; I have deeds." Show me your faith without deeds, and I will show you my faith by what I do.

Outings

Green – if a child is on green they are able to participate in regular scheduled outings. (off-campus). Children that receive all green blocks for 7 days in a row go on a special lunch outings on Saturday s.

Yellow- if a child is on yellow the staff on shift need to discuss with their team whether or not they feel comfortable with that child going out in the community. If there is a safety concern that is surrounding the child's yellow status then the child is to remain on campus and can participate in outdoor activities but can not go into the community.

Red– A child that is a red light is not to go into the community. If they are stable enough they can play outside in the back areas of the cottages but are not to ride bikes or leave the designated areas.

Frozen Status

When a child shows aggression, attempts to run, major property destruction or other dangerous behaviors they will be placed on frozen status.

- Stealing the child will be frozen for 3-4
- Property destruction (actually breaking something) the child will be frozen for 5-6 hours
- Isolated single episodes of aggression the child will be frozen for 5-6 hours
- Short incidents of aggression for up to 15 minutes the child will be frozen for 7-8 hours
- Aggression lasting over 15 minutes the child will be frozen for 9-10 hours
- Running behaviors the child will be frozen for 11-12 hours

This means they are not able to go into the community on extra curricular outings (medical appointments and school do not apply). The staff will still indicate stars in the boxes when they earn them to help track safe behaviors during the 12 hours. During reinforcement times the child needs to attend refocus group. After refocus group they can go outside but need to do a small chore before participating in free play. After reinforcement the frozen status children should help staff clean up the balls, toys and other items used during reinforcement. They are only to go on the porch area in pink and the court yard area in PRTF, day treatment children can play in the field area between Admin and day treatment. During this frozen status staff should have the child participating in at least one “giving back” type of activity some examples would be writing apology letters, washing windows, cleaning chairs. If it is possible the child's activities should be connected to the person or object that was the center of their aggression. When a child is taken off frozen status before the assigned hours it should be a team decision, everyone on shift needs to be in agreement that the child is ready and safe. The hours should be calculated by block hours or hours the child is awake (naps can count towards block hours). If a child has a repeat behavior while frozen their time can start from the last episode, the time is not to exceed 12 hours consecutively.

Phase System

Phase I – A child that is new to the program is on Phase I for a 72 hour period. A child on Phase I is restricted to the cottage, therefore does not have access to campus or community privileges. In addition, a child that exhibits any severe behaviors while on Phase II or III will be dropped back to Phase I for a 48 hour period. Severe behaviors include suicidal ideations, unsafe behavior in the community, extreme property destruction and being hospitalized. The clinical team and/or on call staff will determine the need for a child to drop back to Phase I at any time based on severe behaviors not listed above. All children on Phase I will have a behavior chart and be able to earn reinforcement time. Reinforcement time needs to be limited to activities in the cottage and cottage grounds.

Phase II – A child will be move to Phase II once completing the 72 or 48 hour period on Phase I. A child on Phase II is able to participate in the regular program as defined above according to the color block they have earned. In addition, they will earn access to the treasure chest as defined above.

Phase III – A child on Phase III has maintained 4 weeks (28 days) on community or campus (no red blocks). A child on Phase III will be considered on community at all times. They will have access to special outings. They will have privileges that other children do not have. They will be responsible for updating their own behavior charts and staff will sign off on them. This will give them the opportunity and responsibility of evaluating their own behavior. Anytime a child on Phase III gets a red block they will be moved back down to Phase II. Anytime a child exhibits a severe behavior they may be dropped to Phase I.

Phase III privileges include:

- 15 minutes later bedtime
- 15 minutes later wake up time
- Special outings such as mall, monkey Joe's, recreational sports, etc.
- Filling out their own behavior charts

Pennies for Praise

At the end of each day, each child will receive 3 pennies for each block of time that they were a green light; 2 pennies for each block of time that they were a yellow light; and 1 penny for each block of time that they were a red light. Once a child has earned 100 pennies, they will be able to utilize their money at the campus dollar store. In order to go to the campus dollar store, the child needs to be displaying safe behaviors. This will be tracked on paper and the children will not actually receive pennies. Children that are on Frozen status do not receive any pennies and are not allowed to go to the penny store to redeem pennies until they are off frozen status.

Treasure Chest

Any child that was a green light for three consecutive time blocks will be able to pick a toy from the treasure chest. It is the responsibility of the QP to keep the treasure chest filled with small “dollar store type” items and coupons. Children on Frozen status can not pick a toy from the chest.

Psalm 37:5

“Commit everything you do to the Lord. Trust him to help you and he will do it.”

Crisis Situations

When a child’s behavior begins to escalate, interventions should be used in order of least restrictive to most restrictive. As the person directly involved in their day to day living you need to know the client and which interventions work best for them. The least restrictive starts with the behavior management techniques, then moves to escorts, seclusions, and lastly ends with restraints.

Utilize the behavior management techniques provided in TCI:

Managing the Environment

Be aware of the environment as a low arousal behavior management technique. Some ways to do this would be turning off any background noise (radios and T.V.). Sitting when talking to a child instead of standing etc.

Prompting-

Prompting is signaling to the child to either begin a desired behavior or stop an inappropriate action. This can be verbally or nonverbally “lights out is in the next 15 minutes” or motioning with a nod or glance.

Caring gestures-

Affection helps increase a young person’s self-esteem. This can be in the form of a positive encouraging statement or a pat on the back or side hug.

Hurdle Help-

Some tasks may cause clients to have an outburst because they feel overwhelmed. Offering assistance when completing difficult tasks may elevate some of the anxiety surrounding the task.

Redirection

Redirecting a child can be as simple as changing the activity. Use your creative minds to divert the child’s energy and attention in a more useful manner.

Proximity-

Often times just having the staff at close range can deescalate the behaviors. Standing or sitting next to the person who is having difficulty or between two children. Our presence can be the support the child needs.

Planned ignoring and Positive Attention-

Planned ignoring is a slow but effective way to eliminate HARMLESS, attention seeking behavior. When ignoring the negative attention seeking behaviors you need to follow these steps for it to be affective

- Stop speaking to the child

- Maintain a neutral facial expression
- Look away from the child but remain vigilant
- Avoid contact

Once the child stops the negative behaviors give praise for the appropriate behavior. This is very important for future enforcement.

Directive statements-

These statements range from requests, to a statements of rules, to demands. The statements should always be made in a positive format.

Time away-

Time away is requiring a child to go to a quiet area such as their room or reflection to reduce the stimulation by others.

Besides TCI we have other tools that can be utilized in a crisis situation

Activity Pause

Any child that is having difficulty listening, distracting others, or is unwilling to participate appropriately in an activity, should be required to complete an activity pause. This should occur away from the group, but within the general vicinity of the activity. The staff member should instruct the child to sit in a designated area until settled. Once the child is settled and sitting quietly they need to remain in the activity pause for 3 - 5 minutes before returning.

Show of Shepherds

During regular business hours we have extra support available and are encouraged to utilize their presence. We have preset emails saved on cottage computers to be used in critical situations. If staff feel like they are losing control and are running out of options click send on the drafted email and support staff will come as quickly as possible. This can be utilized at any point when staff feel they are losing control and need support. Included on this show of shepherds would be the Senior Therapist, RPM, FOM, Day TX coordinator, QIQA, DON, and Pink QP.

Seclusions-

Our PRTF has a seclusion room that is to be utilized when a child is displaying unsafe behaviors and all other less restrictive interventions fail. Staff need to notify the nurse when planning to initiate a seclusion as they are doctor ordered. Seclusions are to be used when a client is being unsafe to themselves or peers. The seclusion room door can be closed without being locked to be used as a reflection room, giving the child the chance to calm down without having to lock the door. Blocking the door or holding the door shut will be considered a seclusion if a child is so unsafe while the door is unlocked that you feel they can not exit you need to initiate the seclusion.

Restraints-

We have TCI restraints that we utilize for unsafe behaviors when all other less restrictive interventions fail. Also PRTF children that can not be safely escorted

to seclusion or are displaying unsafe behavior in seclusion should be placed in an appropriate TCI restraint, again notify the nurse before initiating.

Code Red

If a child needs to be restrained then an actual Code Red would be called. When this occurs, all children not involved in the restraint need to go to their rooms and shut the doors. Staff will use their discretion whenever it is possible to take the children outside or to another setting/room. Staff ratios need to be considered with this option. The goal in calling these codes is to keep all of the clients safe, prevent the further escalation of the agitated client, and to gain control of the environment in a timely fashion.

Psalm 138:7 “ Though I walk in the midst of trouble, you will revive me; You will stretch out your hand against the wrath of my enemies and your right hand will save me.”

LSI (Life Space Interview)– I-ESCAPE

Any time that a child’s behavior leads to time away or physical restraint, the child should remain away from the group for a designated period of time. Once this is completed and the child is completely settled, the staff member will follow up with the steps to LSI. The following steps should be completed in a timely manner. It should be done in a problem solving, solution focused fashion.

- I - Isolate the conversation
- E – Explore child’s point of view
- S – Summarize the feelings and content
- C – Connect behavior to feelings
- A – Alternative behaviors discussed
- P – Plan developed/Practice new behavior
- E – Enter child back into the routine

Consequences

Severe behaviors may require further consequences outside of what is defined in the current model. Staff can bring ideas and concerns to the clinical team for further review and feedback.

Intense Supervision

If the clinical team feels that the child is in need of close supervision due to safety issues, one-on-one may be required. The child is expected to remain in close proximity (approx. 5-10 feet) to the staff so that the staff can ensure the child’s safety. The staff determines when the child is displaying safe behaviors and no longer needs to be under close supervision.

The Treatment Team needs to be consulted in any situations involving serious safety issues. The Treatment Team may develop a safety plan and the Treatment Team will determine when the safety plan is no longer necessary.

Psalm 91

¹⁰ No evil will befall you,

Nor will any plague come near your tent.

¹¹ For He will give His angels charge concerning you,

To guard you in all your ways

Therapeutic Relationships

Boundaries

Boundaries are the key to forming a therapeutic relationship. Our children may have had experiences with “bad” touch of all types whether it was physical abuse or sexual touch most of them have no idea where a good healthy relationship should begin or end. We role model and teach this skill every moment we are with them. They are watching how we interact with them, other children and each other. This makes self-monitoring our boundaries the key to teaching them how healthy relationships function.

We need to monitor our own reactions to each interaction we have with them. We must constantly set limits on how we hug or engage in touch with each child. If it does not feel comfortable, do not do it. If you find yourself paying more attention to one particular child on a regular basis, pay attention to it. These issues need to be discussed with your team, the cottage QP, the Residential Supervisor and the Clinical Supervisor. This is one piece of taking care of yourself, so you can take care of the children.

Children should NEVER be taken to your home, be visiting with your own family members or be given unnecessary information about your personal life. We want to create a family environment in the cottage AND we want to be clear that our personal relationships are kept separate from our professional relationships. You are a trained professional working with a client, not a friend or family member spending time with a child.

Staff attitude

A staff member may possess the most effective techniques and utilize interventions that are the cutting edge in treatment, but without a healthy attitude, techniques and interventions become ineffective and possibly harmful to a child.

Staff should be aware of the impact that their personal issues have on their attitudes and practices. If they feel that these issues are interfering with being effective they need to speak with their supervisor.

Staff need to demonstrate an ability to:

- provide an opportunity for fun and enjoyment for the child
- avoid power struggles with the child

- maintain a matter-of-fact tone of voice when implementing interventions
- avoid the use of sarcasm or teasing
- control one's anger and frustration

If I am inconsiderate about the comfort of others, or their feelings, or even their little weaknesses: if I am careless about their little hurts and miss opportunities to smooth their way; if I make the sweet running of household wheels more difficult to accomplish, then I know nothing of Calvary's love. ~ Amy Carmichael

A missionary and caregiver to hundreds of orphaned and abused children in India in the 1900's.

Team Relationships

Cottage staff need to continue to monitor their relationships with each other and the children, especially after a new child has been placed in the cottage. An essential part of team participation is being able to support each other by intervening when necessary. Often staff will become exhausted, "burned out" or simply lose perspective after spending hours and days with a particular client. The agency has developed a safe, effective and respectful technique for stopping interactions between staff and clients that appear to be either escalating a child or physically unsafe for a child.

"Giving Grace"

Giving grace to staff, including supervisors or members of the clinical team, is necessary if they appear to be escalating rather than calming a child. Examples would be, engaging in power struggles, overly harsh interventions, inappropriate language or voice tone and negatively reacting rather than ignoring client's attempts to engage them. It is also a necessary and mandatory response to a restraint or seclusion involving use of incorrect techniques or failure to follow agency and state policies and guidelines.

When giving "Grace" staff would:

- tap the staff receiving grace on the shoulder
- state clearly "I am giving you grace now"
- Replace the person receiving grace
- Debrief the incident in private or during change of shift as an opportunity for learning and building team relationships

When receiving "Grace" staff would:

- Thank the giving staff for intervening
- Leave the immediate eyesight of the child
- Debrief the incident in private or during change of shift as an opportunity for learning and building team relationships

Refusal to accept "Grace" when given results in:

- The giving staff immediately notifies on-call

- On-call follows the protocol for serious infraction of behavior outlined in the on-call manual

THE NUMBER ONE RULE

IT MAY SEEM SIMPLE.

IT WAS ALWAYS EASY IN THE PAST.

IT IS ONE OF THE MOST DIFFICULT THINGS TO DO WHEN
TAKING CARE OF THESE CHILDREN.

WHAT IS IT?

Take
GOOD
CARE
OF
YOURSELF

Job 23:10 " He has acquainted himself with my beaten path. When he hath searched me out, I shall come out shining."

Scriptural Grounding of **Christ Centered Relationship Model**

Matthew 28:18-20

“18 Jesus came and told his disciples, I have been given complete authority in heaven and on earth .19 Therefore, go and make disciples of all the nations, baptizing them in the name of the Father and the Son and the Holy Spirit.20 Teach these new disciples to obey all the commands I have given you. And be sure of this: I am with you always, even to the end of the age.”

Jeremiah 18:4

But the vessel that he was making of clay was spoiled in the hand of the potter; so he remade it into another vessel as it pleased the potter to me.