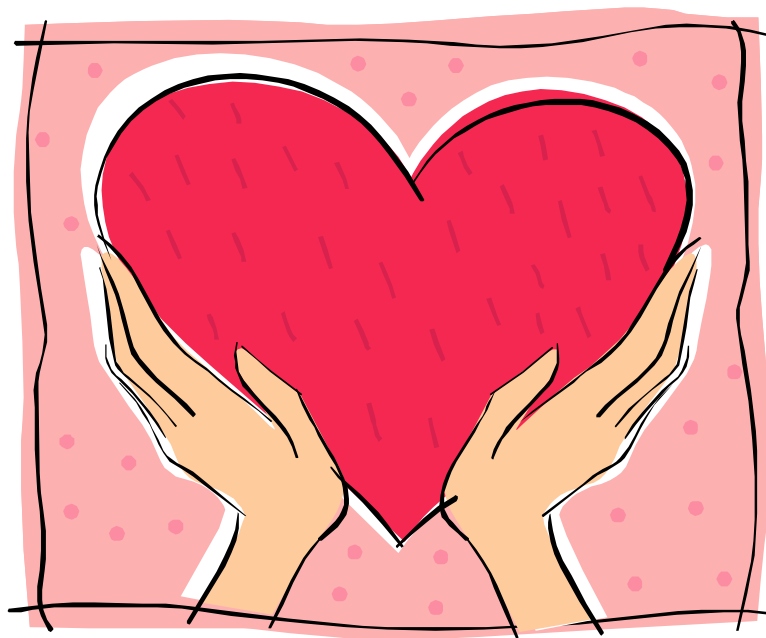


Yahweh Center Children's Village

Parent Handbook



Tender Hearts Need Tender Care

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Welcome to the Yahweh Center Children's Village family-centered program!!

www.yahwehcenter.org

Program Description

The **YAHWEH CENTER** is a Christian non-profit corporation that provides residential treatment to high-risk emotionally fragile children. The agency is also licensed as a child-placing agency, providing therapeutic foster care (level II) and adoption services. In addition, outpatient therapy services and Day Treatment are provided. The Center is licensed for 6 residential level III group home beds and 9 Psychiatric Treatment Facility (PRTF) beds by the North Carolina Department of Health and Human Services. Residents are boys and girls ages 5-12. Yahweh Children's Village is accredited by the Council on Accreditation (COA).

The **YAHWEH CENTER** was officially incorporated on February 3, 1987 and opened on December 14, 1988 at 1924 Wrightsville Avenue in Wilmington, North Carolina. The primary founder is Executive Director, Carla J. Roberts. The center was originally a 90-day emergency shelter and has evolved programmatically into residential treatment group care, Psychiatric Residential Treatment (a sub-acute psychiatric hospital) and adoption and foster care services. The PRTF and Day Treatment opened in January, 2006. Outpatient therapy and psychiatric services are also available at this time to children from the community.

Our agency focus is infants through 12 years. However, in the group care component currently we take children five and over. The Center uses a Christ Centered Relationship Model. This model integrates behavior modification techniques in order to assist the children in stabilizing their behaviors with an emphasis on building positive relationships with others. Once the children learn the necessary skills to manage their behaviors they are more likely to be able to establish healthy relationships. In addition, the relationship that children have with God will be nurtured and encouraged through the process of treatment.

The Center mission statement is formulated around a belief that all children deserve to develop and grow in the family system to which they belong. Families are taught the Yahweh Center clinical model during family therapy and are encouraged to use these interventions while on therapeutic leave. When family reunification is not possible, other alternatives such as therapeutic foster care and foster/adopt families are sought to ensure permanence for the child.

The Christ Centered Relationship Model

The following services and techniques are integrated into the Christ Centered Relationship Model:

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.

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.

Group therapy occurs in the cottages and is facilitated by Quality Professionals. Group topics include goal planning, healthy expression of feelings, anger management techniques, development of positive coping skills and social skills enhancement.

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.

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 $\frac{1}{2}$ 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.

- 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).

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."

Spirituality

We are a Christ Centered Agency, therefore prayer and worship are a part of daily activities. All children are invited to vespers multiple times a week. All children in Level III cottages are given the opportunity to attend Church services on Sunday. All children in the PRTF are provided with the opportunity for prayer and worship on Sunday provided by a staff member.

Staff members pray with the children on a daily basis and the children are encouraged to turn to God for help and support in times of need.

Referral Sources and Geographic Area Served

The Center accepts referrals from families, private placements, community therapists and physicians, case managers, Department of Social Services, Mental Health Centers, and Psychiatric Hospitals. We also often receive referrals from other Residential Programs. Children come from throughout North Carolina for treatment at the Center. Children will step down from PRTF to Yahweh Center's level III group home and therapeutic families if possible. Children from farther away can be discharged to level III residential care and therapeutic families closer to their home and birth family, adoptive family or DSS guardian.

Admission to the YAHWEH CENTER CHILDREN'S VILLAGE

Admissions are accepted on a first come, first serve basis. Applicants may call the YAHWEH CENTER and informally discuss placing a child. A phone call does not ensure clinical acceptance to the program. Referring parties are also welcome to schedule a tour with the Admissions Coordinator prior to referring a child or following the child's acceptance to the program. Applications can be secured by fax, e-mail, postal service, or from the Center's website. The Center will accept applications and consider them complete for clinical review when we have received the Application for Service. The Application for Service, a copy of the child's immunization record, and a copy of the child's most recent physical (within the past year) is required for the Admissions Committee to begin the review process. In addition, the Admissions Committee prefers that the following information be submitted prior to the review process:

1. Most recent psychiatric evaluation
2. Most recent psychiatric testing
3. Complete medication history

After the Admissions Coordinator receives the required paperwork, the Admissions Coordinator will review the information with our Admissions Committee. The Admissions Coordinator then makes a follow up phone call to request any additional information if needed, to inform the referral source of the committee's decision, or in some situations, to schedule a placement assessment with the guardian(s), child, and other important collateral contacts involved with the child. In situations where there are no beds available, children will be placed on a waiting list and referral sources will be updated regarding their child's status.

*Please note that children already placed at the YAHWEH CENTER receive preferential placement over children not yet placed (ie, a child in our Psychiatric Residential Treatment Facility (PRTF) that is ready to step-down to our Level III program will get the first available bed in front of a child on the waiting list).

Placement fees for service and funding streams will need to be discussed and identified and agreed upon in writing before placement. **Level III and PRTF children must be pre-certified by Value Options before placement.** Value Options requires an ORIGINAL signed Certificate of Need (CON) (PRTF only), a faxed Initial Treatment Report (ITR) and a Person-Centered Plan (PCP) to pre-certify a client. A CON is good for 14 days from the signature date. Faxed copies of both these forms must be provided to the YAHWEH CENTER. **Placing agencies and case managers are responsible for assuring the correct documentation before placement.**

Our policy is to include family in the planning at the initial meeting, UNLESS THERE ARE SPECIFIC LEGAL RESTRICTIONS ON FAMILY INVOLVEMENT. We will not have a placement assessment or pre-placement meeting without family involvement if there is a plan for family clarification or reunification. For those children who are in crisis due to adoption placement disruption or in legal limbo due to pending determination of parent's rights, the YAHWEH CENTER will work with the referring agency and the current or future family for placement of the children. **All treatment teams and treatment goals are directed toward discharge planning and return to a lower level of care or the child's home. We have expectations for family and guardian involvement.**

These are:

1. During pre-admission and admission, significant people from the child's social network must be part of the admission meetings.
2. Projected discharge dates, goals and discharge plans will be defined at admission. A review of the initial plan of care occurs within 30 days of admission and every thirty days until discharge. **Guardians and Case Managers are expected by the Center and Value Options to attend these monthly treatment plan reviews in person.**
3. We organize concrete ways for parents to be involved in planning for their child such as, inclusion in school meetings, family therapy, medical decisions, clothing purchases, haircuts, and spiritual development.
4. A visitation schedule and plans for other communication such as phone calls, mail and e-mail will be arranged by the therapist during the initial admission. Generally family therapy starts at 30 days, allowing the clinical team a chance to establish relationships with the child, providing a basis for the family work to begin.

Children Who Cannot Be Considered for Placement

1. Children whose issues are more of a criminal or juvenile justice nature.
2. Children whose unsafe behavior is so extreme it would disrupt the therapeutic milieu.
3. Children who are non-ambulatory and children who are severely or profoundly retarded and experiencing multiple handicaps.
4. Children who are on the high end of 12 years and close to becoming a teenager.

Parents' Rights

The Center believes that parents (unless legally restricted) have a right to be involved in planning for their children. The following is the Center's "Parent Bill of Rights".

1. Parents have the right to participate in the admission process of the YAHWEH CENTER.
2. Parents have the right to review their children's record at the Center while in the agency administrative offices.

3. Parents have the right to be part of treatment planning for their child:
 - a. Medical plans or tests
 - b. Psychological or therapeutic testing
 - c. Individual school education plans
 - d. Visitation plans, birthdays, holidays and phone calling arrangements.
4. Parents have the right to make decisions on haircuts, ear piercing, and clothing purchases.
5. Parents have the right to know about any serious problems that staff are having with their child or any significant incidents.
6. Parents have the right to understand and ask about discipline, recreational activities and social outings.
7. Parents have the right to make decisions about the religious experiences offered to their child.
8. Parents have the right to stay empowered as decisions makers.
9. Parents have the right to see their children with frequency and with as much privacy as is legally allowed.
10. Yahweh Center staff will be respectful during their interactions with families, guardians and team members.

Clients' Rights

This Center also believes that children have rights. The following is the Center's children's "bill of rights."

1. Children have a right to privacy.
2. Children have a right to be provided adequate food, clothing, shelter, hygiene and cleanliness.
3. Children have the right to have access to family time and telephone conversations with family members, when not contraindicated in the child's individualized service plan.
4. Children have the right to have their possessions and to have storage space provided.
5. Children have the right to express concerns over their treatment or care.
6. Children have the right to receive care in a manner that recognizes variations in culture, values, and traditions.

7. Children have the right to be free from any religious coercion.
8. Children have the right to be free from identification in connection with publicity for the facility.
9. Children do not have to ever acknowledge dependence on or gratitude to the facility.
10. Children will not be directly involved in fund solicitation for the agency.
11. Children will not be recorded, visually or in audio, without the signing of a time-limited consent by the child and the child's legal custodian.
12. Children will be given a copy of the Client Rights Handbook (written by the Center's children) upon admission. This explains their rights in child-friendly language.

Dress Code for Children

- *No scary shirts, i.e. skulls and crossbones, blood/gore, etc.
- *No shirts with magical themes, ie Harry Potter
- *No Pokemon.
- *No Bratz shirts or other sexualized/inappropriate type shirts.
- *No "wife-beaters" (tank tops) without wearing a shirt with sleeves over them.
- *No shirts w/ inappropriate comments, for example, "I only go to school for the girls"...or "Blame my sister".
- *For girls and boys, need appropriate length shorts (should not be shorter than mid-thigh).
- *No low-ride shorts/pants/skirts that show part of bottom when sitting or standing.
- *No spaghetti strap tank tops.
- *No do-rags except at bedtime only.
- *Hats- appropriate content and need to fit properly, are not to be worn inside the cottage
- *No high-heeled shoes/boots or hiking boots

Staffing

The state requires a ratio of 1 staff per 3 children in the PRTF and 1 staff per 2 children in level III. However, at the YAHWEH CENTER we make every effort to have 1 staff per 2 children in all cottages. In addition, there is a nurse on staff in the PRTF 24 hours a day. We believe in quality care for the children entrusted to our residential programs. The Center has 24-hour supervision with a closed circuit monitoring system that is motion detected for child, staff and program security. During sleeping hours staff monitor children's needs and assist with bedwetting, bad dreams, and any other issues. The Center places a high value on child supervision, staff skills and training.

All residential direct care staff receive on-going training, skill building and supervision. We hire employees who are interested in more than employment and view their work as a ministry. Many staff have degrees and an array of clinical experience and training.

Recreation

The Center's level III children are actively involved in public school (or day treatment), community and extra curricular activities. The center will discuss these opportunities with the legal custodian and family. Beach excursions, hiking, movies and skating are typical activities. Indoor games and crafts are routine. A custom designed play area with swings, basketball hoops and bicycles are available for children to use when demonstrating safe behaviors. Staff are always present during outings unless a specialized approved volunteer or visiting resource has been developed with the sanction of the placing agency and family. The family or legal custodian will review plans and give permission for any trips ranging further than a three county area. We also will not allow children to watch movies that are rated PG-13 or R or inappropriate for children. For all other movies, a QP first reviews the movie on a family-based website in order to ensure that the content of the material is appropriate for our children. Television is also screened for appropriate content, even programming such as the Cartoon Network and Nickelodeon. In regard to music, the children are allowed to listen to Yahweh Center approved radio stations/cds only. Approved radio stations include K-Love and Family Radio.

PRTF children attend school in the PRTF building and most activities take place on the Yahweh Village 14 acre campus. Any activities outside of the locked PRTF facility are based solely on a child's earned level of responsibility. An outside courtyard provides an outside play space for those children too unsafe to leave the locked facility area.

Use of Volunteers

We insist on background checks and screening of any involved child-volunteers. Volunteers are recruited to spend time with our children in a one-on-one mentorship capacity. This one-on-one time may include activities such as playing ball, listening to music, or playing board games. Sometimes volunteers can take children off campus for lunch or dinner, to a movie, church function, the beach, or to the park with the guardian's permission. Each volunteer is screened and participates in an orientation and training. Volunteers are then matched with a child. Once matched with a child, the Yahweh Center asks volunteers to give a minimal of a three month commitment to the child.

Transportation

Center children are transported to and from school, medical appointments and church by staff or approved volunteers. Center children do not ride the public school bus. The agency usually transports children in the Center van. All individuals transporting including volunteers have undergone a driver's license and background check.

School

PRTF children attend school in their cottage classroom. Level III children attend public school or the Center's Day Treatment Program. New Hanover County Schools determine the appropriate school placement, depending on the child's IEP requirements. Guardians are encouraged to attend school meetings and the Center's Community and School Liaison coordinates school placements and meetings.

Religious Activities

The YAHWEH CENTER is a Christian organization. We are clear with placing agencies that church involvement, Vacation Bible School and all the extra curricular social activities affiliated with Christian faith are encouraged but not required. The child's family and legal custodian are asked what the church or religious experience has been for each child. A child's biological family's church or religious experience is respected. Historically, most families and placing agencies have been accepting of church participation. We admit children regardless, of race, creed, sex, or religious affiliation. Children are not coerced into religious decision-making. Both child and guardian complete a spiritual consent at the time of admission, allowing them to make informed choices regarding the child's participation in prayer, vespers and church attendance.

Medical Needs and Medication

The Center believes that prescribed medication must be closely monitored. The PRTF has 24 hour nursing on site and level III has one full-time Registered Nurse to oversee medication management by the Residential Counselors. Children in all programs see the Center's full-time Medical Director, a board certified child psychiatrist. Parents, family members, and legal custodians are included in medical decision making and must give prior approval for routine medications, specialized treatment, hospitalization, or testing unless it is an emergency situation. Every effort is made to receive guardian consent before any medication is started. The Medical Director attends treatment planning meetings whenever possible and uses this opportunity to discuss and educate team members on the medication therapy for their child.

Discipline

A positive based behavior modification system is utilized at the Center. All children have the opportunity to earn privileges through demonstrating positive behavior. A child not demonstrating positive behavior may not be earning their privileges. Time away is utilized when a child is unable to gain

control of their behavior. In the PRTF cottage this may include the use of a seclusion room. Staff closely monitor children while they are in time away. Suspension of family visits is never used as a disciplinary measure, although therapists work with the family to determine an appropriate visitation schedule. The Center does not use or allow corporal punishment in the cottages or foster homes.

Physical Restraint

Physical restraint of a child is always a last resort for controlling a child's behavior. The YAHWEH CENTER trains all residential staff in Therapeutic Crisis Intervention (TCI). The agency has a certified TCI trainer on staff. TCI is a nationally recognized curriculum designed to train staff in de-escalation techniques, helping children regain emotional control. It is the YAHWEH Center's desire to be "restraint free". However, if necessary, staff will employ physical restraints in the following circumstances: 1) a child is hurting themselves or others and cannot or will not stop with a verbal command and other non-restrictive interventions 2) a child is in immediate danger and physical intervention is necessary to avoid serious injury (running in traffic, trying to climb out a window, has a weapon, etc.)

Any significant incidents, including all restrictive interventions, are documented. These are then shared with parents, custodians, Mental Health and the State Division of Social Services for timely review within the laws and governing statutes. Administrative staff review restraint policy and frequency during Quality Assurance meetings and clinical reviews. The TCI training manual and videos are available for review in the administrative office of the Center. Parents, family members, and placing agencies are invited to attend trainings at the Center upon request.

TCI utilizes three types of physical holds. The standing hold positions a staff standing on either side of your child holding his arms. A small child hold brings the child to a sitting position on the floor, with the child facing away and the child's arms crossed in front of him. This hold involves staff leaning against a wall or sitting on the floor, once the child has been contained. A second staff may hold the child's legs. The team restraint takes place with the child lying on the floor and involves at least two staff. The child is face down and **staff NEVER places their weight on the child.** The child's respiration, color and medical status are monitored throughout

the hold, according to TCI protocol. According to State and Federal guidelines PRTF children are physically checked by a nurse after each restraint or seclusion. The Yahweh Center does not use mechanical restraints.

Search Policy

The Yahweh Center respects the right of privacy for the children in our care. Therefore, searching a child's room or person will only occur when it is deemed necessary for the safety of the child, staff, and other residents. A search and seizure log will be completed if a search should occur; documenting the reason for the search and date it occurred. Usually searches involve reasonable suspicion of a sharp object or significant theft. Any search of a child will require two staff present, one of the same sex as the child. The Center does not perform body or cavity searches.

Mail and Telephone Calls

Children are allowed to receive telephone calls from family, guardians and case managers, unless prohibited by the Department of Social Services. Families are asked to limit those on the contact list and discuss changes in the list with the therapist. Approved contacts must be listed on the contact sheet at the time of admission. Telephone hours are usually 5-7 PM. Alternate arrangements can be made at the parent's request. Upon admission, the guardian will be asked to select a code word that is easily remembered. This code word is kept in the phone log in the cottages and at the main reception desk. **Callers will not be permitted to speak with the child without knowing the code word and being listed on the contact list for the child.**

Money and Allowance

For safety purposes, children are not allowed to keep money in their rooms. All money is kept in individually labeled pouches in the accountant's office. The center asks that money given to children be limited to five dollars at a time. A receipt will be given to the guardian for the money provided and the child will sign for funds when they are spent. To avoid children hiding money

in their rooms, we ask parents to give the cash to the cottage staff for safe storage.

Personal Possessions/Gifts

Clients are allowed to bring with them and to acquire belongings while at the Yahweh Center (see the list of acceptable possessions listed below). Each child will be provided with hygiene items such as shampoo and lotion. Children may have a personal comforter for their bed, if it is well marked.

Bring

Approx. 7-10 changes of clothing	Seasonally appropriate jacket
2-3 pairs of pajamas	Stuffed animals
10 pairs of socks	Toys and dolls
10 changes of underwear	Family pictures (unframed)
Slippers	Favorite books
2 pairs of outdoor shoes	
Bathing suit (must be one-piece for girls)	

Do Not Bring

Electronic games	Nail polish remover or polish
CD players/CDs	Belts (PRTF only)
Radios	Jewelry (PRTF only)
Aerosol sprays	Sharp or heavy objects
Food/candy	Electronic game systems (Gameboys, etc.)
Musical instruments (PRTF only)	
DVDs	

****At admission items will be searched and inventoried. They should be clearly marked in permanent ink. Contraband items will be returned to the guardian. Please do not bring any sentimental or valuable items and **minimize the quantity of personal possessions**. Every effort is made to keep children's belongings secure. However, the nature of this population makes breakable and valuable items inappropriate.

Fire Escape Plan

The fire escape plan is posted in residential treatment cottages. This plan is reviewed with the children on a monthly basis.

Disaster Plan

The Village is located about 12 miles from the beach. Cottages are supplied with a hurricane readiness kit. The PRTF cottage has a back-up generator and was constructed to withstand a type 4 hurricane. Parents may choose to take children home on therapeutic leave during any hurricane or other disaster. Level III children and staff will first evacuate to the PRTF. If the Executive Director determines the PRTF facility is inadequate, then children will be evacuated to their families or removed to inland locations. The Center has a lengthy disaster plan as part of its policies and procedures. You may request further information on this topic as needed.