ShawPittman

A Law Partnership Including Professional Corporations

February 28, 2001

D.C. Board of Zoning Adjustment
441 Fourth Street, N.W., Second Floor
Washington, D.C. 20001
Attn: Sheri Pruitt

Re: BZA Application No. 16531; Father Flanagan's Boys Town of Washington
Safety Plan for Sargent Road facility

Dear Board Members:

Enclosed please find the finalized Safety Plan for the Boys Town Sargent Road site. This satisfies Condition No. 9 from BZA Order No. 16531.

Should you have any questions, please contact either of the undersigned.

Sincerely,

Phil T. Feola /by mps
Phil T. Feola

Martin P. Sullivan
Martin P. Sullivan

Enclosures

cc: ANC 5A

Document #1083549

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BZA
Case No. 16531
Exhibit No. 93

Board of Zoning Adjustment
District of Columbia
CASE NO. 16531
EXHIBIT NO. 93



SAFETY PLAN

February, 2001

Constance J. Washington
Site Director

Girls and Boys Town of Washington D.C.
The Original Father Flanagan's Boys' Home
4801 Sargent Road, N.E. • Washington, DC 20017 • Office: (202) 832-7343 • Fax: (202) 832-9807
www.girlsandboystown.org

Safety Plan

The purpose of this plan is to describe current and future safeguards utilized by Girls and Boys Town of Washington to ensure the safety of the children and the community in which it places its programs. This plan is appropriate for the client population served by Girls and Boys Town of Washington, which consist of youth ages 9-18. The client population served by Girls and Boys Town of Washington in its short and long-term homes are youth referred by Child & Family Services Agency, D C Department of Human Services' child protection system. These youth come from a variety of backgrounds and situations including past histories of abuse, abandonment and neglect. Girls and Boys Town of Washington has examined various aspects of the provision of services to youth and has instituted procedures and policies that seek to maintain the safety of its youth, staff and members of the community.

This plan is appropriate for the staff's qualifications, which includes training in crisis intervention. All staff are required to attend a two-week training on issues directly related to the behaviors and emotional problems typical among youth in out of home care situations. The crisis intervention training attended by staff is a Non-violent Physical Crisis Intervention (CPI) method provided by the agency, which gives them practical and hands on background in crisis intervention techniques. The staff are also trained in the proper reporting protocol for when crisis intervention procedures are required, according to both Girls and Boys Town and the District regulations.

Intake Process

Prior to admitting youth into a program, referral information is obtained from Child & Family Services Agency. This information includes the youth's social history and other relevant information necessary to work effectively with each youth and to also assist in the development of the youth's individualized treatment plan.

During the intake process, an immediate assessment is made with the referring worker, regarding Girls and Boys Town's ability to safely maintain the youth in our home. As a part of the intake process each youth and his/her guardian are made aware of and sign the site's guidelines, youth rights, and abscondance procedures.

Monitoring of Youth

Central to the success that many Girls and Boys Town's children have enjoyed and key to the Girls and Boys Town Model of Care are two components: building relationships and teaching social skills. To this end, staff are available and in the case of evening hours, awake on a 24-hour basis, seven days a week, to monitor the youth in our care.

Monitoring is clearly defined as being in the presence of the youth and having clear view of the youth under Girls & Boys Town's supervision. Such supervision entails constant interaction between the staff and the youth that, in turn, leads to trust, ultimately leading to the establishment of appropriate relationships. The result of these relationships includes that the youth learns to trust, to accept responsibility for their actions, and to make better life decisions. Constant observation of the youth further allows staff to identify problem behaviors and to instantly teach positive alternatives to the same. Staff also teach to problem behaviors identified at the youth's admission and individualize the child's treatment plan to concentrate on those behaviors during his/her participation in the program. At no time are staff allowed to leave youth unsupervised. Staff to youth ratio during the day or wake hours is 1:4 and during sleep hours is 1:6.

Monitoring occurs as followed:

- During an intensive teaching interaction youth are monitored during the entire interaction.
- During classroom instruction, youth are within close proximity of the staff.
- During outings and events youth are escorted and supervised closely. Youth's needs to utilize the restroom are also supervised.
- When a request is made to go outside for any reason, youth are accompanied by a staff person(s).
- During outside appointments, a staff member accompanies the youth unless other arrangements have been made (i.e., social worker, GAL accompany youth, arrangements have been made with the doctor's office).
- Youth are supervised in different areas of the home (i.e., rec room, TV room, etc.).
- During the night, youth are monitored at a minimum of every fifteen minutes during the overnight. Staff physically go into each room and make sure the youth's whereabouts are known.
- Staff document this monitoring by completing night monitoring logs.
- Any youth placed on a 5-minute precautionary watch is checked on every 5 minutes.
- Any youth placed on a 1 to 1 watch is constantly monitored. On a 1 to 1 watch the staff member stays in that child's room to make sure the child is safe.

When A Youth Leaves Without Permission

- Staff will immediately initiate campus sweeps when an abscondance arises.
- Staff will immediately notify Site administrative personnel of the abscondance.
- Staff may canvas the surrounding neighborhood when an abscondance arises, with the possibility of returning the child in an agency vehicle.
- Staff may contact pertinent others who might have information about the child's whereabouts (i.e., school personnel or legal guardians).

- Immediately, staff will begin the process of contacting the Metropolitan Police Department to report the abscondance. In the case where staff to youth ratio is not compromised, the staff is to go to the 5th District Police Precinct to make the missing person's report.
- The child's guardian(s), agency representative, or pertinent significant others are notified.
- This plan is reviewed with the youth, his/her legal guardian and signed by each and a staff representative at intake.

Intervention Strategies

Early Intervention

The Girls and Boys Town continuum of emergency interventions commences with early intervention. Our family home program philosophy and model of care provides an environment conducive to children's growth and stability. Staff working with youth in open settings are provided with various tools and systems such as extensive training, administrative support (24 hour, 7 days a week), regular, ongoing consultation (supervision), and program evaluation services. Skill-based training provides techniques in reducing the frequency and intensity of aggressive behavior through non-physical and non-aversive methods. Information from formal assessment and written reports are used to formulate each youth's individual treatment plan. The plan is used by direct care and administrative staff to identify treatment needs and develop specific behavioral treatment strategies for each youth. From the individualized treatment plan, direct care staff take an active approach to their role as treatment providers.

Emergency Intervention

Circumstances and types of behaviors that require the use of emergency intervention includes not following instructions (least restrictive intervention) to a youth presenting a substantial endangerment to himself or others (most restrictive intervention).

Techniques to be used:

I. Preventative or planned teaching

A. Description: Preventative or planned teaching is one method of intervention used. This technique provides an opportunity for the youth to develop new skills and prevent problems from occurring, thereby increasing the youth's opportunity for success. Teaching proactively means identifying skills an aggressive youth needs to learn, planning how to teach the skills, and conducting the teaching session.

B. Expected outcomes: Preventive teaching improves the youth's chances of succeeding through the development of positive, pro-social behaviors.

C. Benefit to youth: This treatment strategy benefits a youth in that it helps the youth avoid confrontations by establishing and teaching youth alternative behaviors when confronted with difficult situations.

II. Teaching alternatives to inappropriate youth behavior (early recognition that a youth is having difficulties).

A. Description: Frequent, direct, and skillful teaching of new skills provides a specific, effective, positive way to deal with problem behaviors. At the first sign a youth's behaviors are becoming inappropriate, staff address the behaviors with the youth using the behavioral treatment strategies specifically designed for each youth (individualized treatment plan). Youth are given the opportunity to explain the situation. Staff first offer specific, sincere praise or empathy to the youth and then identifies and/or demonstrates the inappropriate behavior so that the youth specifically understands the problem. This behavior may earn a negative consequence. However, staff also describe an appropriate behavior to replace the inappropriate behavior. The youth will be given an opportunity to earn some positive consequences by practicing the new skill or behavior. Rationales are provided, thus giving the aggressive youth an alternative behavior or skill to use in the future.

B. Expected outcomes: Avoid an escalation of youth behavior and other more serious consequences (e.g., aggressive act, serious confrontation).

C. Benefit to youth: Aggressive youth are taught skills of alternative behaviors to use in the future.

III. Crisis Intervention

A. Description: Crisis intervention would be needed when an aggressive youth becomes a danger to themselves or others, has gone from anger to rage, or is behaving in a way that is seriously damaging to relationships. The primary goal of the staff is to help the youth calm down and once more be attentive to the teaching procedures that can help the youth solve the problem. Consultants and supervisors are notified immediately (and the need for back-up assistance is determined). Three phases or interventions are used: the preventive phase is entered to diffuse the youth's behavior and to help the youth regain self-control. Staff stay calm, talk in a non-threatening voice tone, and talk slowly. There is liberal use of empathy along with simple, firm instructions. Staff continue to point out the aggressive youth's ongoing inappropriate behavior and describe the alternative behavior to help guide the youth back to the point of self-control. As the crisis intervention continues, the aggressive youth's behavior may de-escalate and escalate several times. The goal is to have greater

periods of improved behavior and increased compliance over a period of time. It is very important for the childcare staff not to be drawn into content (demands, accusations, etc.), but to offer empathy and indicate a willingness to discuss the issue as soon as the youth has calmed down. By staying on task, the childcare staff avoids side issues that may only prolong the aggressive youth's out-of-control behavior. As staff work through the crisis, they maintain physical proximity to the youth. The staff are careful not to invade the youth's private space, which could cause of physical confrontation, but remain with the youth throughout the intervention. Staff also vary the intensity of his or her own behavior dependent upon the type of non-compliant behavior the aggressive youth is presenting (e.g., for a sullen, withdrawn youth, staff will use more statements of empathy and provide more frequent instructions). If the aggressive youth decides to leave the facility, the staff do not attempt to physically stop the youth by grabbing him or blocking an exit (dependent upon the age of the youth, his emotional stability, and whether or not the youth is a danger to himself or others. If the youth begins to endanger self or others, the staff determine whether to restrain the youth or call for assistance.

In addition to the above description, staff also want to minimize the attention or reinforcement that is available from other youth. Youth are instructed that upon a cue from the childcare staff, all other youth are to leave the area and are rewarded with positive consequences for this behavior. (A specific area for the youth to go and activities to engage in are prearranged).

B. Expected outcomes: Youth regains self-control.

C. Benefit to youth: A youth who is in control of his behaviors is more likely to make better decisions.

Emergency Intervention Assessment

The criteria for assessing when an emergency intervention plan needs to be modified or terminated involves a decision made by the group home staff treatment team (e.g., Program Director, Shift Supervisors, Youth Care Workers, youth's guardian or agency representative, and youth). The treatment team will review the various reports written and make a determination as to if the process is working or not. Treatment planning is an integral component of the Girls and Boys Town model of care system. Treatment plan review involves analysis of various data collection including weekly motivational system card data, incident reports, emergency interventions used and outcomes, progress on goals and objective, timeliness, and treatment strategies. This data and criteria are used by the treatment team to determine when an emergency intervention plan should be modified or terminated for any individual and to consider possible alternative treatment strategies; these interventions are documented.

Criteria for assessing when the facility does not have resources to meet the youth's needs. Girls and Boys Town is committed to serving the best interests of youth in our care. In the event the youth is not stabilized and is not progressing in his program, an early discharge may become likely. Referring agency staff (e.g. Child and Family Services Social Workers, GALs) will be consulted in making any decision to depart a youth from the program.

Girls and Boys Town will work with referring agency to permit sufficient time for planning and transfer of the youth from the program. The notification typically includes documentation of previous steps taken to stabilize the youth. Girls and Boys Town program staff work cooperatively with the caseworker or legal guardian to assist in securing an alternative, appropriate placement for the youth.

In the event a youth becomes disruptive to the point of interfering with the home and/or poses a threat to others or self, the youth's parent or legal guardian is contacted, and immediate discharge is requested. This request will normally be proceeded by notices to the responsible guardian or agency personnel that difficulties are being experienced and possible discharge is eminent. If the youth is at risk of harming himself or others, law enforcement or other professionals may also be contacted to assist in the emergency intervention and/or departure.

In the case of psychiatric hospitalization, program staff are available for communication with the treatment team of the psychiatric hospital. Efforts are made to communicate with the youth or the hospital staff, and weekly visits are typically made by administrative staff. Generally, the youth are allowed to return to the program once stabilized and no longer engaging in suicidal or homicidal ideation or action, or physical aggression. The decision to re-admit is made on an individual case basis, but a youth will not be allowed to return to the program if it is determined that his treatment needs cannot be met at Girls and Boys Town.

Emergency Intervention Staff Training Plan

A. Each staff member working in the group home/residential program completes the Non-Violent Physical Crisis Intervention training (CPI) as a requirement of the Girls and Boys Town Pre-Service Training. The training is an eight-hour course provided by Girls and Boys Town trainers, who are certified as (CPI) trainers. This nationally recognized intervention technique is designed for professionals who work with individuals whose behaviors sometimes manifest in potentially threatening manners. The emphasis is on verbal crisis intervention techniques and methods of redirecting the activities of the individual who is potentially aggressive. The training also emphasizes self-control and assessment skills. The training gives staff practical and safe methods for manually restraining a youth who has become out of self-control.

B. The training requirements for new personnel at Girls and Boys Town is designed so that within 30 days of employment each employee attends a two week, pre-service training amounting to 80 hours. The Non-Violent Physical Crisis Intervention workshop is an

additional 8-hour training provided to all direct care and administrative employees. Upon completion of this workshop the employee is given a certificate.

C. Ongoing training requires that all employees annually attend a four-hour refresher class in Non-Violent Physical Intervention (CPI).

D. The emergency intervention training curriculum used addresses the following areas:
   1. Techniques of group and individual behavior management, including crisis prevention; precipitating factors leading to aggressive behavior, and crisis intervention.
   2. Methods of de-escalating volatile situations, including non-physical intervention techniques such as crisis communication, evasive techniques, and alternative behavior.
   3. Alternative methods of handling aggressive behavior.
   4. The physical techniques of applying hand-hold restraints in a safe and effective manner ranging from the least restrictive type(s) of restraints including, but not limited to, transporting techniques, team control positioning, and individual children's control positions.
   5. Techniques for returning the youth to the planned activity following completion of the emergency intervention.
   6. The training includes a written and hands-on competency test.

E. The training is provided by an individual who holds a valid instructor's certificate from the Crisis Prevention Institute, which is consistent with the District regulations.

F. Girls and Boys Town maintains a written record of all the staff training occurring on site.

   a. Documentation of training received is maintained in the personnel record of each employee and includes:
      - Dates, hours and a description of the training completed;
      - Name of the instructor who provided the training;
      - A copy of training certificates; and
      - Certification from the instructor of the employee's successful completion of the workshop.

G. The personnel training records are available for review by the Child & Family Service Agency and the Department of Health, upon request.

H. Girls and Boys Town personnel receive on-going training annually to maintain certification.

I. When an inappropriate manual restraint technique is used during an emergency intervention, a corrective action plan is developed. As a part of the plan, the employee involved is required to repeat the emergency intervention training.

Facilities

Girls and Boys Town of Washington maintains a secure facility by incorporating the following mechanisms designed to protect the youth, staff and members of the community:

- Entrance to the site is limited to one main entrance at the front of the site.
- Each building on the property is equipped with an alarm system which is monitored for safety by ADT Alarm Company.

As a part of the new construction project the site will be landscaped to include appropriate shrubbery for privacy and fencing.

The 5th District Police Precinct, as a part of their community policing, has increased patrols in close proximity to our site, not at our request, but as an over all effort to be more responsive to community needs.

Reporting

Girls and Boys Town Of Washington will provide an update on safety issues at each Community Advisory Liaison Committee (CALC) meeting.

CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing document was sent by hand delivery this 28th day of February 2001, to the following parties:

Commissioner Norma Broadnax
Chair ANC 5A
4702 6th Street, NE
Washington, DC 20011

Timothy Thomas, Commissioner SMD 5A04
4716 Eastern Avenue, NE
Washington, DC 20017

Advisory Neighborhood Commission 5A
Slowe School Demountable
1322 Irving Street, NE
Washington, DC 20017



Martin P. Sullivan