



Policy: Behavior Support and Management

ChildNet Number: CN 003.004

Original Approved Date: June 22, 2010

Policy Revised Date(s): July 15, 2010, May 14, 2014

Policy Sunset Date:

COA Standards: BSM 1.01, 1.02, 1.03, 2.01, 2.02, 2.04, 3.01, 3.02, 3.03

Statement of Policy:

It is essential that ChildNet maintains a safe environment for its employees and provides necessary supports and resources to keep staff, caregivers, families, and children safe. ChildNet does not employ restrictive behavior management interventions, defined as isolation, manual restraint, mechanical restraint and locked seclusion. ChildNet uses positive reinforcement, verbal de-escalation, point and levels system, and Family Safety Contracts that are compliant with federal, state, and local legal and regulatory requirements.

Board Chair's Signature:

Date:

5/22/14



Procedure: Behavior Support and Management

ChildNet Number: CN 003.004

Original Approved Date: June 22, 2010

Procedure Revised Date(s): July 15, 2010, May 14, 2014, April 25, 2018, May 12, 2022

Procedure Sunset Date:

COA Standards: BSM 1.01, 1.02, 1.03, 2.01, 2.02, 2.04, 3.01, 3.02, 3.03

Definitions (If any):

Behavior Support and Management - The use of practices to promote positive behavior and protect the safety of service recipients and staff.

Restrictive Behavior Management Interventions – Interventions that restrict, limit, or curtail a person's freedom of movement to prevent harm to self or others. These interventions include isolation, manual or mechanical restraint, and locked isolation.

TIME-OUT – The practice of removing a person from his/her current environment or situation to another environment or situation for a specified period of time in order to reflect on his/her behavior. Unlike isolation, time-out offers an individual the freedom to leave the room or space if s/he chooses. For purposes of COA accreditation, time-out is distinguished from ISOLATION.

Statement of Procedure:

1. ChildNet's behavior support and management policies and procedures are developed in coordination with the Performance and Quality Improvement) and Risk Prevention and Senior Management (RPM) Committees, Senior Management, and , other areas within ChildNet as appropriate in accordance with information and research on effective practice which promote positive behavior, designed to protect the safety of service recipients and staff, and are compliant with applicable local, state, and federal laws, codes, and regulations.
2. The behavior support and management policies and procedures are reviewed and approved by ChildNet's Board of Directors.
3. The Chief Executive Officer (CEO) and senior management conduct regular reviews of incidents involving the ineffective use of behavior support and management interventions. Those incidents may be reported in several ways:
 - A. Any incidents of restrictive behavior management interventions conducted by ChildNet's subcontracted service providers and resulting in an injury are to be documented on ChildNet's Incident Report (see CN013.006 Incident Report Identification and Response (Risk Prevention))
 - B. incidents involving employees



or non-employees per CN009.031 Safety and Incident and Accident Reporting are to be documented on the Incident/Accident Report form.

- B. Findings from quarterly risk management reviews of ineffective behavior management interventions are to be used to inform staff about current practice, advise on new/additional training, and inform on the need for any additional resources.

4. Permitted Behavior Management Interventions:

- A. Positive Reinforcement
- B. Behavioral Contracts
- C. Verbal De-escalation
- D. Therapeutic Point and Levels Systems
- E. Living and supervision requirements as noted on Family Safety Contracts

5. ChildNet prohibits:

- A. The use of restrictive behavior management interventions by ChildNet employees.
- B. The use of restrictive behavior management interventions by subcontracted service providers.
- C. Use of physical punishment, inflicted in any manner on the body.
- D. Ridicule, intimidation, or verbal abuse of children.
- E. Use of chemical restraints.
- F. Cruel or humiliating treatment or other emotionally abusive behavior.
- G. Assignment of excessive exercise or work duties which are inappropriate to the child's age or development.
- H. Denial of food, clothing, shelter, medical care or prescribed therapeutic activities, or contacts with family, counselors, or legal representatives as a form of punishment.
- I. Use of adverse stimuli such as electric shock devices.

6. ChildNet Employees

- A. Are expected to model pro-social behaviors, effective problem-solving, negotiation and compromise in their interactions with the children and families served by our agency. Furthermore, all ChildNet employees are to treat parents and children served with dignity and respect.
- B. Are to support positive behavior by:
 - 1. Developing positive relationships with service recipients
 - 2. Building on strengths and reinforcing positive behavior; and
 - 3. Responding consistently to all incidents of harassment or violence.
- C. Have consultation services available through Behavioral Health Services Specialists/Certified Behavior Analyst who can assist in determining appropriate



and qualified behavior management or behavioral health service providers when it is identified that a child or parent is in need of such services.

7. ChildNet Employee Training

A. ChildNet provides staff with a variety of topical trainings that promote positive behavior support and management, promote a safe work environment, and reduces emergency situations. These trainings include but are not limited to:

“Non-Abusive Psychological and Physical Intervention” (NAPPI), which promotes a culture of respect, safety and positive behavior among staff and the children and families that we serve. Behavior support and management training teaches staff to promote this culture among clients by engaging and developing a positive rapport with each child and family member, encouraging client strengths, reinforcing positive behavior, and through the consistent response of staff to any act of harassment, violence, or out-of-control behavior.

B. Non-direct service personnel shall be trained on how to appropriately respond to incidents of out-of-control behavior that they may observe.

C. Training for all direct service employees shall include the following:

1. Practices that promote positive behaviors
2. Recognizing aggressive and out-of-control behavior, psychosocial issues, medical conditions, and other contributing factors that may lead to a crisis
3. Understanding how staff behavior can influence the behavior of service recipients
4. Limitations on the use of restrictive interventions
5. management of age-appropriate, but potentially dangerous behavior (i.e.: a young child running into the street)
6. Addresses methods for de-escalating volatile situations, including:
 - i. Listening and communication techniques, such as negotiation and mediation
 - ii. Involving the person in regaining control and encouraging self-calming behaviors
 - iii. Separation of individuals involved in an altercation
 - iv. Offering a voluntary escort to guide the person to a safe location
 - v. Time out to allow the person to calm down
 - vi. Other non-restrictive ways of de-escalating and reducing episodes of aggressive and out-of-control behavior.

D. All employees are to receive initial and ongoing competency-based training, appropriate to their responsibilities, on the organization’s behavior support and management intervention policies, procedures, and practices. Training for all staff will include prohibited behavior support and management techniques, along with those interventions that are allowable.



- E. ChildNet makes curriculum training decisions to promote positive behavior support and management based on population served, annual training needs survey, ongoing needs assessment and well as feedback and surveys for employees.
- F ChildNet determines competence of personnel with regard to behavior support and management through the following methods:
 - i. For in-person sessions, observation of proper and safe execution of behavior support and management techniques in the training environment.
 - ii. For on-line sessions, training post-tests are maintained in ChildNet's on-line learning system.

8. Information Provided to Parents and Legal Guardians

- A. At the time of initial case opening, ChildNet's designated Intake and Placement staff member, or designee, presents the Parent Guide to the parent which contains a written summary explaining ChildNet's behavior support and management philosophy, procedures, and strategies used to maintain a safe environment. If the initial opening is held virtually, the Parent Guide will be emailed to the parent.
- B. The parent or legal guardian is requested to sign the Acknowledgement of Receipt to indicate receipt. A copy of the Acknowledgement of Receipt of the Parent Guide is filed in the case file. If the Parent Guide was emailed, the email will confirm as receipt.

9. Response to Imminent Danger

Should a ChildNet staff member utilize the behavior support and management techniques and principles established in NAPPI and still find themselves in a situation with a child or family member that is dangerous or perceived to be dangerous, the ChildNet employee is to immediately call for back-up. The following steps are to be taken:

- A. The employee is to contact their direct supervisor, if accessible, for assistance and support.
- B. If there appears to be imminent risk of danger to staff, children, family members, or others, and none of the above options are feasible, accessible, or able to successfully de-escalate the situation, then 911 is to be called immediately.
- C. If the dangerous behavior is occurring in an area where other staff members, children, family members, or agency visitors may be, ChildNet staff is to escort them to separate area that is safe, as quickly as possible.
- D. If the situation involves risk of harm to self or others due to a known or suspected mental health condition and time allows, the local mental health mobile crisis unit may be contacted.



10. Child Placement Agreements (see CN 015.017 Child Placement Agreement)

A. For initial out-of-home placements (specific to placement with Relative and Non-Relative caregivers): Child Placement Agreements for Relative and Non-Relative Caregiver placements will be completed by the Child Protective Investigator (CPI).

- i. At the shelter hearing, the Court liaison will ask the CPI if they have completed a Child Placement Agreement and indicate such on the daily shelter report. Service Coordination also reviews the daily shelter report to identify cases that may meet criteria for a Child Placement Agreement.
- ii. If CPI completed a Child Placement Agreement, Service Coordination will review and make appropriate changes with any additional information within 7 days.
- iii. If Service Coordination determines a Child Placement Agreement is needed and the CPI did not complete, Service Coordination will initiate and complete in conjunction with the CPI.

B. For initial out-of-home placements (specific to licensed care): If a history related to problematic behaviors is reported to Intake and Placement, including verbal reports from the Child Protection Investigator seeking the placement and/or Comprehensive Child Welfare Information System (CCWIS) report(s), Intake and placement will create a child's profile and submit to service coordination for review. If applicable, service coordination will compile a child placement agreement and enter the behavior into FSFN. A copy of the child placement agreement is provided to the identified qualified assessor in order to obtain clinical input in regard to the contract.

C. For reviews of child placement agreements given at initial out of home placements: Service Coordination review all initial contracts within 45 days after clinical input has been obtained by a qualified assessor.

D. For subsequent reviews: Service Coordination will schedule reviews every 6 months or sooner, if necessary. Service Coordination shall invite the Dependency Case Manager (DCM) and Child Advocate Supervisor/Dependency Case Manager Supervisor (DCMS). Additionally, a member of ChildNet's Intake and Placement department shall be included if there is potential that any children may need to be moved to an alternative placement. The DCM is to invite the parties/participants to the case, which may include, but are not limited to, Guardian Ad Litem, Attorney Ad Litem, caregivers, Targeted Case Manager, current placement and therapist working with the child. The facilitator of the Alert Review shall complete Child Placement Agreement. All participants shall sign the form to acknowledge participation. The facilitator shall write in participants names that joined by phone.



E. For behaviors which arise after a child is placed: At any time, the DCM may request a Child Placement Agreement staffing prior to the next scheduled review date to discuss the modification of the current child placement agreement.

11. ChildNet maintains procedures that address harassment and violence towards other service recipients, and personnel (see CN009.061 Violence in the Workplace, CN 009.024 Equal Employment Opportunity, Appropriate Conduct, and Employee Complaints, and CN 009.009 Domestic Violence – Effects in the Workplace).

12. ChildNet's Subcontracted Licensed Caregivers

A. ChildNet's subcontracted agencies that provide residential services, including foster homes, are to maintain policies and procedures related to their agency's Behavior Support and Management philosophies and protocols that are compliant with local, state and federal laws, codes, and rules.

B. ChildNet's subcontracted licensed caregiver agencies, including residential direct care staff and foster parents, are to support positive behavior by:

1. developing positive relationships with service recipients
2. building on strengths and reinforcing positive behavior
3. responding consistently to all incidents of harassment or violence

C. Training

1. ChildNet's subcontracted residential service provider staff and foster parents are to receive behavior support and management training that promotes a safe work and service environment, and a reduction in emergency situations. Training will include initial and ongoing competency-based training on the organization's behavior support and management intervention policies, procedures, and practices. Training will also support the development of a culture and structure within every facility and foster home that promotes respect, healing, and positive behavior and prevents the need for restrictive behavior management interventions.

2. Training of direct care residential staff and foster parents shall include the following:

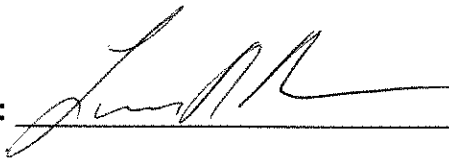
- a. Practices that promote positive behaviors.
- b. Recognizing aggressive and out-of-control behavior, psychosocial issues, medical conditions, and other contributing factors that may lead to a crisis.
- c. Understanding how staff or foster parent behavior can influence the behavior of service recipients.
- d. Limitations on the use of restrictive interventions
- e. Management of age-appropriate, but potentially dangerous behavior (i.e.: a young child running into a street)
- f. Methods for de-escalating volatile situations



D. ChildNet's subcontracted residential service providers, including foster parents, who act in a caretaking role for children may not:

1. Use restrictive behavior management interventions
2. Use physical punishment, inflicted in any manner on the body
3. Ridicule, intimidate, or verbally abuse children
4. Use chemical or mechanical restraints, unless under a physician's order in a facility certified under Administrative Chapter 65E-10, F.A.C
5. Employ cruel or humiliating treatment or other emotionally abusive behavior
6. Assign excessive exercise or work duties which are inappropriate to the child's age or development
7. Deny food, clothing, shelter, medical care or prescribed therapeutic activities, or contacts with family, counselors, or legal representatives as a form of punishment

E. Provider agencies are to comply with all components of CN 015.017 Child Placement Agreement, including signing and adhering to all conditions stipulated in a child's Child Placement Agreement.

President Signature:  Date: 09-06-22