<table>
<thead>
<tr>
<th>Page 2</th>
<th>Table of Contents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Page 3</td>
<td>Acknowledgement Agreement</td>
</tr>
<tr>
<td>Page 4</td>
<td>Welcome Statement from Our Executive Director</td>
</tr>
<tr>
<td>Pages 5-18</td>
<td>Getting to Know Us</td>
</tr>
<tr>
<td>Page 5</td>
<td>The Devereux Advanced Behavioral Health Model of Care</td>
</tr>
<tr>
<td>Page 6</td>
<td>Mission and Core Values</td>
</tr>
<tr>
<td>Page 6</td>
<td>Philosophy of Care</td>
</tr>
<tr>
<td>Pages 7-8</td>
<td>A Closer Look at Our Residential Programs</td>
</tr>
<tr>
<td>Pages 9-10</td>
<td>A Closer Look at Our Educational Programs</td>
</tr>
<tr>
<td>Page 11</td>
<td>Who We Serve</td>
</tr>
<tr>
<td>Page 11</td>
<td>Treatment Teams</td>
</tr>
<tr>
<td>Pages 12-13</td>
<td>Residential Team Role Descriptions</td>
</tr>
<tr>
<td>Pages 14-15</td>
<td>Educational Team Role Descriptions</td>
</tr>
<tr>
<td>Pages 17-18</td>
<td>Medical Team Role Descriptions</td>
</tr>
<tr>
<td>Pages 19-33</td>
<td>Frequently Asked Questions</td>
</tr>
<tr>
<td>Page 34</td>
<td>Campus Map</td>
</tr>
<tr>
<td>Pages 35-36</td>
<td>Local Area Information</td>
</tr>
<tr>
<td>Page 35</td>
<td>Area Restaurants</td>
</tr>
<tr>
<td>Page 35</td>
<td>Area Hotels</td>
</tr>
<tr>
<td>Page 36</td>
<td>Area Shopping</td>
</tr>
<tr>
<td>Page 36</td>
<td>Area Activities</td>
</tr>
<tr>
<td>Pages 38-43</td>
<td>Appendix: Policies and Procedures</td>
</tr>
<tr>
<td>Page 38</td>
<td>Collaborative Treatment Agreement</td>
</tr>
<tr>
<td>Page 39</td>
<td>Bill of Rights</td>
</tr>
<tr>
<td>Page 40</td>
<td>Devereux Pennsylvania CIDDS Grievance, Compliant and Appeal Process</td>
</tr>
<tr>
<td>Page 40</td>
<td>Video Monitoring Release</td>
</tr>
<tr>
<td>Page 41-42</td>
<td>Photo Release</td>
</tr>
<tr>
<td>Page 43</td>
<td>Property Damage Waiver</td>
</tr>
<tr>
<td>Pages 44-47</td>
<td>Visitation and Contact Policy</td>
</tr>
<tr>
<td>Pages 48-53</td>
<td>Managed Care Organization</td>
</tr>
<tr>
<td>Pages 48-49</td>
<td>Grievance Process</td>
</tr>
<tr>
<td>Page 49-50</td>
<td>Member Services Information</td>
</tr>
<tr>
<td>Pages 50-53</td>
<td>Therapeutic Home Visits</td>
</tr>
<tr>
<td>Pages 53</td>
<td>Commonly Used Acronyms and Names</td>
</tr>
</tbody>
</table>
Family/Agency Information Handbook

Acknowledgement Agreement

By signing below, I acknowledge that I have received a copy of the Devereux Advanced Behavioral Health Pennsylvania Children’s Intellectual/Developmental Disabilities Services (CIDDS) Family/Agency Information Handbook. I understand that the information contained in this handbook is not exhaustive of all the services my child may receive while he/she resides at Devereux. I also acknowledge that the purpose and contents of this handbook were reviewed with me. I understand that I can contact a member of my child’s Treatment Team at any time to ask questions or receive additional clarification on any of the information presented in this handbook.

______________________  _______________________
Child’s Name

______________________  _______________________
Parent/Guardian Signature       Date

______________________  _______________________
Parent/Guardian Signature       Date

______________________  _______________________
Devereux Representative Witness Signature       Date
Welcome Statement from Our Executive Director

Dear Parents/Family Members,

Welcome to the Devereux Advanced Behavioral Health Pennsylvania Children’s Intellectual/Developmental Disabilities Services (CIDDS) Family! We know it was a very difficult decision to entrust your family member to our care. Our goal is to make this a positive, time-limited experience both for your child and your family.

The first step of that process is to ensure you and your child feel welcome and safe. Please take all the time you need to ask questions of your child’s new Treatment Team members. We are committed to making your child’s treatment effective, efficient and person- and family-centered. Each time you leave our campus, you should feel confident in Devereux and our ability to provide a safe and positive experience for your child.

The second step is to ensure that you are aware of our culture of Servant Leadership. Our mission is to devote ourselves to serving the needs of our youth and families by demonstrating Respect, Accountability, Encouragement, Appreciation and Trustworthiness. These behaviors should be evident in all interactions between Treatment Team members and those we serve on a daily basis: You, your child and your family!

Finally, we need your active involvement to make this a success. You will have input into all decisions, treatment plans and goals, and are invited to participate in all family-oriented activities we offer at Devereux Pennsylvania CIDDS.

This handbook is designed to answer some of the many questions you are likely to have about your child’s treatment and how our programs work. Of course, we recognize that not all of your questions will be addressed in this handbook, so again, I encourage you to speak with your child’s Treatment Team to obtain any needed clarification. We are here for you, and your child’s success depends on teamwork and collaboration.

We are honored and humbled to be part of your family’s support system. Be involved. Ask questions. Use your Treatment Team as a resource to help pave the way for a future of success for your child. We look forward to partnering with you to achieve the maximum benefit of the services we can provide to you and to your family!

Sincerely,
Carol Anne McNellis, Psy.D., BCBA
Executive Director
Devereux CIDDS
Getting to Know Us:
The Devereux Advanced Behavioral Health Model of Care™

The Devereux Advanced Behavioral Health Model of Care™ integrates the latest scientific and medical advancements with time-tested philosophies and compassionate family engagement to provide practical, effective and efficient care, making a meaningful difference in the lives of those we serve, and the world around them.


Our advanced services include:

- Comprehensive Assessment, Diagnostics and Measurement to support data-driven care
- Evidence-based Treatment and Special Education
- Transition and Independent Life Services
- Family Education and Professional Training
- Research and Innovation to advance the field
- Advocacy, Public Awareness and Prevention
Getting to Know Us:
Our Mission and Core Values

Our Mission
Devereux Advanced Behavioral Health changes lives – by unlocking and nurturing human potential for people living with emotional, behavioral or cognitive differences.

Our Core Values

Compassion
We have a deep and abiding understanding of, and respect for, our individuals and their families.

Knowledge
We rely on data and evidence to inform our care. Our work requires a marriage of science and art.

Collaboration
We require an integrated team approach based on respect, shared goals and altruism.

Dedication
We maintain relentless optimism and perseverance to support the lifelong journey of those we serve.

Learning
We pursue continuous personal improvement, professional development and expanding impact.

Progress
We are Always en Route, continually incorporating new innovations to advance our services, our industry and the lives of those we serve.

Our Philosophy of Care

- Individualized, evidenced-based intervention
- Effective and accountable programs delivered with compassion – Meeting the “Devereux Family Standard”
- System-wide, trauma-informed, data-driven, positive-behavioral approach to care
- Meaningful family engagement and community connection
Getting to Know Us:
A Closer Look at Our Residential Programs

**Intellectual and Developmental Disabilities (I/DD) Program** provides services to male and female individuals, ages six to 21, diagnosed with mild to severe intellectual functioning, developmental disabilities, behavioral challenges and/or autism. Skill development in basic self-care, communication, social skills, anger management, problem-solving, independent living, self-esteem, recreation and community safety is emphasized using intensive, highly-structured positive behavioral support techniques that focus on developing and teaching age-appropriate behaviors. The primary goal of the I/DD program is to transition individuals back to their home communities and/or to the least restrictive living environment possible.

**Disruptive Behavioral Disorders (DBD) Program** serves males and females, ages 10 to 17, with emotional disturbances and developmental delays who are dually diagnosed with mild to borderline intellectual functioning and have moderate to severe emotional disturbances. Individuals in the DBD program may have experienced sexual, physical and/or emotional abuse. The primary goal of the DBD program is to transition individuals back to their home communities and/or to the least restrictive living environment possible.

**Sexual Responsibility Program (SRP)** provides evaluation and treatment services for male adolescents, ages 12 to 17, with sexually abusive behaviors and developmental disabilities. Treatment combines cognitive-behavioral and psycho-educational procedures that are implemented by an interdisciplinary team of professionals. The primary goals of the program are to help adolescents with sexually abusive behaviors learn to conduct themselves in accordance with society’s norms and laws, to encourage the practice of positive and healthy social interactions based on mutual decision-making and consent and to protect individuals from being victimized and experiencing the traumatic effects of sexual abuse.

**Short-Term Autism Intensive Residential Services (STAIRS) Program** serves males and females, ages six to 21, with a primary diagnosis of an autism spectrum disorder and/or intellectual disability and who demonstrate severe to moderate communication and adaptive behavior skill deficits. The child may also have a history of serious behavioral disorder defined as frequent and intensive aggression, and/or self-injurious behavior as well as other behaviors that are dangerous to self or others.

**Devereux Positive Behavioral Interventions and Supports (D-PBIS)** is a broad range of systemic and individualized strategies for achieving important social and learning outcomes while preventing problem behavior with all individuals. D-PBIS is about

- a) improving organizational culture,
- b) decreasing reactive management style,
- c) improving supports for individuals with emotional and behavioral disorders,
- d) integrating academic and behavior initiatives, and
- e) maximizing academic achievement.
The goal of **D-PBIS** is to address the behavioral needs of all individuals by organizing services within a multi-tiered framework of evidence-based interventions and supports. Devereux has developed three different D-PBIS models serving

1. children and adolescents with emotional and behavioral disorders (EBD),
2. children and adolescents with autism and intellectual disability, and
3. adults with intellectual disabilities.

Devereux Pennsylvania CIDDS implements the **D-PBIS EBD model** in our DBD classrooms and residences and implements the **D-PBIS Autism Model** in our I/DD classrooms and residences.

**D-PBIS EBD** is designed to increase appropriate behavior and decrease problem behavior by

a) teaching expectations to individuals,
b) acknowledging individuals when they demonstrate the expected behavior and other appropriate behavior, and
c) providing clear and consistent consequences for all individuals when they demonstrate problem behavior.

Individuals are also provided evidence-based interventions and supports to address presenting behavioral health concerns and challenging behaviors. These interventions teach better self-regulatory skills as well as broad values which reach beyond the walls of a treatment facility. Individuals learn specific behavioral expectations for frequently encountered environments and are more prepared to function successfully in the community.

**D-PBIS Autism Model** also uses a multi-tiered framework with a focus on improving the individuals

a) communication skills,
b) socialization abilities,
c) independence, and
d) safe behaviors.

Best practice interventions specific for children and adolescents who have autism spectrum disorder include the use of visual supports such as ABA teaching strategies, errorless learning and shaping strategies. These visual supports are implemented for individuals in our I/DD classrooms and residences serving individuals with autism.

The D-PBIS Autism Model also provides individualized evidence-based interventions and supports to address challenging behaviors and adaptive skill needs. These interventions focus on eliminating unsafe behaviors while improving functional communication and social skills. Additionally, individualized interventions are designed to target the need areas of functioning for each individual to increase independent functioning across all settings.
Getting to Know Us:
A Closer Look at Our Educational Programs

The Leo Kanner Learning Center creates learning opportunities for each student to develop their skills enabling him/her to live as a respected, healthy individual in the community.

The educational program is licensed by the Pennsylvania Department of Education to offer special education to students with an autism spectrum disorder, serious emotional disturbance, speech and language impairment and/or intellectual disability. It is administered and monitored by an Education Director, Assistant Education Director, Supervisors of Special Education and non-teaching Head Teachers.

A certified Special Education Teacher implements each student's Individualized Education Plan (IEP) with classroom assistance from a Direct Support Professional, Teacher Assistant, and 1:1 aides if needed. The educational professionals develop the IEP with input from the student, parents, school district and other funding agencies. Progress is monitored through the use of assessments and ongoing data collection of skills and behaviors. Additional services such as Occupational Therapy, Physical Therapy and Speech/Language Therapy are available as needed.

The Kanner Learning Center offers a 12-month educational program to both residential and day students. This includes a seven-week extended school year (ESY). The program is modified utilizing a functional skills curriculum and following the alternate standards in math, reading and science. Students are grouped by the following criteria: age, functioning levels and behavioral needs. The classroom ratios are 1:1, 2:1, 3:1 or 4:1 depending on the individual needs of each student.
The Devereux Center for Autism Research and Education Services (CARES) is an educational program licensed by the Pennsylvania Department of Education that provides services to students, ages five to 21, diagnosed with autism spectrum disorder and other developmental disabilities. CARES provides an environment that focuses on teaching each student based on his/her unique strengths and needs.

Programming is focused on increasing independence for each student, particularly in the areas of:

- Communication
- Self-care routines
- Domestic skills
- Recreation and leisure
- Community inclusion
- Social skills
- Employment
- Self-determination
- Community inclusion
- Employment
- Self-determination

Instruction is informed by research literature on evidence-based practices for students with autism and developmental disabilities. Instructional strategies include:

- Individual and small group instruction
- Skills taught in the context of naturally occurring routines
- Instruction embedded within preferred activities
- Individualized prompting procedures
- Visual mediation
- Data-based decision making

Our Companionable Zoo houses a variety of animals including: birds, cats, dogs, rabbits, guinea pigs, ferrets, fish, horses, sheep and a goat to name a few! The Zoo offers each classroom in our school program the opportunities to visit once a week for 45 minutes and receive a short lesson about the animals and the care they need followed by supervised hands-on activities around the Zoo. There are vocational opportunities available to students who are looking to expand their job skills to help them transition into community-based positions. The Zoo program also hosts a foster program where care and socialization is provided to homeless animals such as cats, dogs and small animals with the ultimate goal of finding them a new home.

A note on educational placement:

Not all individuals who reside in our residential programs attend school at the Leo Kanner Learning Center or CARES. Please refer to the Education Process Letter given to you at your child’s admission for more information on your child’s educational placement. Parents/guardians make the final decision on educational placement.
Getting to Know Us:  
Who We Serve

Devereux Pennsylvania CIDDS serves children, adolescents and young adults, ages six to 21 with intellectual and developmental disabilities, including autism, as well as behavioral and emotional disorders.

Each year, more than 1,000 children and adolescents receive specialized care in the environment best suited to the challenges they face, all with the goal of providing each individual with the academic, social, emotional and life skills needed to flourish in their home community. While most individuals are from Pennsylvania, we are proud to serve individuals from across the country.

Diagnoses of individuals served include:

- Intellectual and developmental disabilities
- Attention-deficit/hyperactivity disorder
- Autism spectrum disorder
- Emotional disorders
- Behavioral disorders
- Neurological impairments
- Dual-diagnosis (MH/IDD)
- Conduct disorders
- Post-traumatic stress disorder
- Affective disorders
- Sexual disorders

Our Treatment Teams

The Treatment Team is comprised of the individuals that are included in developing and implementing the individualized treatment program for your child.
Getting to Know Us: 
Residential Team Role Descriptions

**Treatment Managers (TM)** oversee a residence within each program. In order to accomplish this task, the Treatment Manager is responsible for staffing, the overall therapeutic milieu, individuals programming within residences and in the community and treatment plans. The Treatment Manager enlists the assistance of Treatment Team members to ensure the efficient and therapeutic management of the residence. The professional team for each residence is led by the Treatment Manager and includes Operations Managers, Program Coordinators, Social Service Coordinators and Clinicians.

**Program Coordinators (PC)** work with the Treatment Manager with the primary responsibility of managing the residence on the evening shift. The Program Coordinator is the front line supervisor and ensures that the therapeutic milieu is maintained, ensures that programming activities are coordinated and troubleshoots any issues during the shift.

**Recreation Specialists** design, create and implement recreational and social activities and programs for our individuals. They partner with community resources to identify community recreational programs of interest.

**Direct Service Providers (DSP)** work directly with the individuals in our care. They implement the goals and objectives developed by the Treatment Team by providing general milieu therapy services, assisting with hygiene and other ADL skills and providing active engagement opportunities. DSPs provide input for development of treatment plans, assist in crisis management and also assist with advocating for the individual's medical, social and community needs.

**Program Directors** provide oversight and direction to the Treatment Managers, provide coverage in their absence and oversee all the residences in their program. The Program Director also provides training and manages the scheduling of the management staff.

**Program Administrator** provides leadership and direction to achieve the mission and therapeutic philosophy of our center, manages the daily fiscal and center residential treatment operations and ensures the highest quality of care through the utilization of Devereux’ best practice residential treatment standards.

**Operations Managers** work directly with coordinating, training, scheduling and supervising staff members. They help to oversee the general safety and regulatory requirements for individual residences on campus and help to maintain the physical environments of residences.

**Social Service Coordinators (SSC)** provide direct social work and case management services to a group of individuals and their families. This includes, but is not limited to, coordinating all individual treatment meetings, initiating the discharge planning process and organizing aftercare services. Social Service Coordinators serve as the primary contact for families and agencies to obtain progress updates, coordinate visitation and address any issues or concerns that may arise.
**Utilization Review Specialists (UR)** are assigned to each individual who is funded by a Managed Care Organization (MCO). The UR Specialist is responsible for overseeing the reauthorization process for individual’s continued stay at Devereux. They schedule and facilitate reauthorization meetings, submit continued stay requests and serve as a liaison between the MCO Care Manager and families. Continued stay and authorization is based on medical necessity and is reviewed at various periods dependent upon the MCO.

**Director of Social Services and Compliance** ensures the effective implementation of social service activity by providing supervision to our SSC and UR staff members. The Director of Social Services and Compliance also conducts reviews of records for thoroughness and accuracy and provides consultation and technical assistance to managers and program staff regarding Medicaid and funder requirements.

**Clinicians** have a master’s or doctorate degree in psychology and/or are a Board Certified Behavioral Analyst. Additionally, they have assessment and treatment experience working with individuals with intellectual/developmental disabilities and concurrent psychiatric and behavior problems. Within the multidisciplinary team, the Clinician provides assessment, intervention, consultation and psychoeducation services for a defined group of individuals.

Assessments include functional behavioral assessments, various types of psychological assessments and assessment of progress over time while the individual is in treatment. Assessments assist in clarifying diagnoses and inform treatment planning. Intervention services include supportive counseling, individual therapy, group therapy and family therapy. The Clinicians also provide behavioral consultation for educational and residential staff. Consultation may result in the development of individualized behavior support plans as well as group behavior systems and environmental modifications. Clinicians are responsible for researching information on best practices for the population served, implementing best practices, providing staff and parent training and sharing best practice methodologies at professional conferences.

**Family Support Specialists (FSS)** have a masters or doctorate degree in psychology or social work as well as assessment and treatment experience working with individuals with intellectual disabilities and concurrent psychiatric and behavior problems. The role of the FSS is to provide intensive family therapy services to families whose child is approaching discharge or whose behaviors in the home setting are a barrier to discharge. Examples of services the FSS may offer include behavior management training for parents and/or caregivers, helping individuals generalize skills to the home setting, supporting siblings and extended family members and facilitating conversations about discharge plans and barriers to discharge. The FSS is able to offer services where they are needed the most (e.g. community, home) and works closely and collaboratively with the individual’s primary Clinician and Treatment Team.

**Clinical Coordinators** develop and supervise clinical services and/or case management services for our Residences. Clinical Coordinators may also provide behavioral consultation for educational and residential staff. Consultation may result in the development of individualized behavior support plans as well as group behavior systems and environmental modifications.
Clinical Director provides and directs the delivery of clinical services in concert with evidence-based standards and practice guidelines. The Clinical Director serves as a consultant to Center leadership and staff on behavioral healthcare and is responsible for providing the leadership and vision needed to provide quality programming and treatment within Devereux standards. The supervision and development of clinical staff is also a responsibility of this role.

Getting to Know Us:
Educational Team Role Descriptions

Education Director administers and provides oversight to the education program including developing and implementing education and pre-vocational services that adhere to the regulatory guidelines, establishing systems and measures to ensure a safe environment for students and teachers and monitoring program and resource enhancement in areas such as curriculum development, service learning, transitional, vocational and technology programming.

Assistant Educational Director assists the Education Director in maintaining the educational and vocational development of students and the professional development of teachers by developing and implementing policies, programs and curriculum plans. Provides a safe and healthy environment conducive to learning.

Supervisor of Special Education oversees the daily functioning of classrooms, conducts educational staff evaluations, assists teachers with program budget planning and material acquisition, plans and implements school enhancement projects, attends IEP meetings, problem solves student classroom assignments with teachers, provides classroom support where necessary and provides direct supervision of all teachers, teacher assistants, special counselors and program counselors in the educational program.
**Head Teachers** coordinate classroom staffing, monitor incident reports for trends, institute preventive and corrective actions when necessary, assist teachers with classroom problem solving, provide specially designed instruction and appropriate curricular materials, attend IEP meetings, keep teachers informed of medication changes and assist with the communication between educational and residential programs.

**Teachers** plan and implement each student’s Individualized Education Program (IEP), plan and collect student skill data to track progress through the program, structure the classroom’s physical and social environment to promote positive social interactions in coordination with the clinical team, provide opportunities for community interaction and document/communicate student progress and performance.

**Transition Coordinator** is responsible for the ongoing development of the curriculum and the supervision of instruction for transition programs. Oversees the continuum of employment opportunities for students including classroom-based activities, the Employment Training Center, campus based activities and community based employment experiences.

**Behavior Analysts (BCBA)** develop, assess, oversee, implement and monitor Positive Behavior Support Plans (PBSP) for identified students. Conduct appropriate assessments (including functional behavioral assessments and/or analyses) to develop or modify PBSPs, determine the efficacy of each plan and participate in IEP meetings.

**School Psychologist** provides psychological services and support to day students in the school setting. Coordinates day students’ clinical program with the students’ teacher and IEP team and completes psychological and/or adaptive skills assessments as necessary. Maintains regular communication with families, school districts and other involved agencies for all day students.
Outdoor Play Areas
Getting to Know Us:
Medical Team Role Descriptions

The Medical Department provides the following services to maintain optimal health and wellness to our individuals: annual physicals, vision and hearing screenings, routine blood work, immunization and medication administration and dietetic consults. Working with a primary care model, the residence nurse communicates the individual’s health updates to the team and family. Parents/guardians may also contact the Medical Department with any questions about their child's medications, physical health or medical treatment. Devereux’s physicians can only prescribe FDA-approved medication to individuals. We cannot prescribe or give individuals any herbal medications or supplements that are not approved by the FDA. Additionally, the CIDDS medical administrative support staff assists in coordinating medical appointments and in helping families with questions or issues related to medical insurance and bills.

Medical Director provides oversight of psychiatric, medical and nursing services.

Psychiatrists provide oversight of the psychiatric plan of care including medication management for all residential and community-based clients. They act as the liaison to outside funding agencies and treatment providers when physician involvement is necessary to ensure coordination of care.

Primary Care Physicians are contracted as the primary care provider for each individual in residential treatment. They provide oversight of all non-psychiatric medical issues and identify the need for outside subspecialty involvement. They coordinate the overall plan of care with non-Devereux providers as needed for both acute and chronic medical issues.

Director of Nursing/Nurse Manager is accountable for overall functioning of the Nursing department including supervision of nurses and ancillary support personnel.

Pod Nurses (RN) are each assigned to a number of residential residences. They function as the point of contact for coordination of nursing services with educational and residential staff for assigned individuals and are responsible for communication with families regarding their child’s overall medical status. Note: In the event an individual requires medical attention that warrants follow up with family, the nurse working at the time that care is provided will make the contact.

School Nurse provides oversight of an individual’s healthcare needs during the school day.
**Insurance Coordinator** is the primary point of contact for billing and insurance questions. Coordinates insurance issues and billing with pharmacy and outside medical subspecialists, maintains current insurance information for individuals and identifies parties responsible for payment.

**Nutrition Services** dietetic and nutritional services are provided by the CIDDS Food Service Department in collaboration with a registered dietitian. The registered dietitian will complete a nutritional assessment for any individual as ordered by the physician, requested by nursing or requested by a family member and is available to provide nutritional or dietetic consulting and education services on nutrition issues to CIDDS staff and individuals as appropriate.

**Food Service Department** provides three meals and two snacks daily, following a three-week menu cycle that is revised semiannually. Menu planning for meals and snacks is done by the registered dietitian in collaboration with the food service manager in accordance with sound nutritional standards and practices. Substitutions for menu items are made available to accommodate allergies, special diets as ordered by a physician and religious preferences. The regular menu meets guidelines set by the USDA and Child Nutrition Programs. Some individuals eat meals in the cafeteria while others eat in the kitchen area located in their respective residence.
Additionally, Devereux Advanced Behavioral Health PA CIDDS proudly participates in the PA state Health and Wellness Initiative. For a copy of our Health and Wellness plan, please visit our website or ask a member of your child’s medical team. Families/guardians may request health and nutrition resources that provide healthier eating suggestions through their treatment manager or school supervisor.

Frequently Asked Questions

**My child is placed at Devereux, what should I do now?**

Your child’s Social Services Coordinator can help you navigate the following checklist as applicable:
- Establish a visitation and contact schedule with your child (see below for additional information).
- Register child with Intellectual Disability Services (IDS): If your child is not already registered with your local county IDS office, please complete as soon as possible. IDS will largely be responsible for providing your child with needed services when he/she becomes an adult.
- Ensure your child has a valid picture state ID.
- It is recommended that you explore the process of obtaining guardianship over your child when he/she turns 18 years old.
- It is recommended that you explore future financial planning for your child such as establishing a Special Needs Trust or Estate Planning.

**What does treatment planning mean?**

Treatment planning starts on the day of your child’s admission and begins with gathering information about his/her history, strengths and presenting problems. Over the course of the first 30 days, clinical observations and assessments will be completed and treatment goals will be proposed. Goals will be developed by the Treatment Team in the areas of activities of daily living, communication, community integration, behavior management and family interactions. These goals will inform necessary interventions and supports and will be the basis of your child’s treatment while at CIDDS.

**What is my role on the Treatment Team?**

You are a critical part of your child’s Treatment Team and are encouraged to be as involved as possible in your child’s treatment. This includes participating in your child’s team meetings, advocating for your child’s wants/needs, visiting with your child, having regular contact with your child and his/her other Treatment Team members, providing items your child needs and taking advantage of the family supports that are offered to you at Devereux CIDDS. Active family involvement leads to better treatment results and increases the likelihood that your child will continue to succeed well after discharge from residential treatment.

**Will there be meetings about my child’s progress?**

Within 30 days of admission, an initial Individual Support Plan (ISP) meeting will be held to discuss the results of assessments and review the goals that the Treatment Team proposes for your child and family. You will also have the opportunity to share areas that you feel are important to your child’s treatment. These meetings typically last 60 minutes, and all members of the child’s Treatment Team are invited. Thereafter, you will receive written quarterly updates on your child’s progress and will be invited to reconvene to discuss your
child’s progress on these goals every six months. At any time during your child’s treatment, you have the right to request a meeting with your child’s Treatment Team to learn more about your child’s program or progress toward goals. Remember, your input and feedback is crucial for your child’s success!

**Who will be working with my child?**

In addition to the Treatment Manager, Program Coordinator, Clinician, Social Services Coordinator and Medical team members, your child will have assigned Direct Service Providers (DSP) working with him/her. All Devereux employees undergo background checks and child clearance checks and receive a rigorous two-week training period before working with individuals. Staff additionally complete training requirements on an annual, and as needed, basis.

**What will my child do during the day?**

Your child will be actively programmed throughout the day to ensure structure and consistency during their time here. Each residential residence has a specific schedule of what opportunities are available to individuals throughout the day. Examples of activities may include hygiene routines, meal time, community outings and recreation/leisure. Your child’s Treatment Team will provide more details on the schedule in your child’s residence.

**Will my child participate in community outings?**

Individuals who are safe and are not at imminent risk of harming themselves or others are eligible to go out on community outings. Each residential residence has an assigned vehicle to ensure individuals have multiple times to go out into the community each month. Examples of community outings include local sporting events, trips to the food store, trips to local eateries and/or trips to local parks. Your child’s Treatment Team will provide more details on the procedures for community outings in your child’s residence.

**Will my child receive individual therapy?**

All individuals at CIDDs receive clinical consultation. Your child’s needs and the criteria set forth by your child’s funding agency will determine the type and frequency of individual clinical services.
**Do you offer family therapy?**

Family engagement is an integral and essential component to residential treatment. Our clinical department offers several facets of family supports to help families cope with the transition to residential care, to learn more effective ways of communicating and supporting their child in placement and to learn behavior management strategies. Depending on the needs of the individual and their family, family engagement sessions may take place in person, via telephone, via Zoom video conferencing services, in the community or in the family home. The more involved you become, the greater your child's chances for major improvement. For more information on family engagement services please contact your child’s Clinician. **PLEASE NOTE:** There are specific requirements for family therapy for individuals funded by an MCO. Your child’s Clinician will provide you with additional information if this pertains to your child.

**What other resources are available for families?**

- Please contact your child’s SSC or Clinician for more information on the supports listed here:
- CIDDS offers a monthly Family Support Group to adult family members of current residents. The meetings last for two hours and are typically held the second Saturday of each month. Our goal is to schedule presenters/speakers who will touch upon relevant and useful information for our families.
- CIDDS has an onsite Family Resource Library.
- Throughout the year, CIDDS organizes and hosts a variety of activities for individuals and their families including, but not limited to: Family Day, holiday shows and prom.
- Visit Devereux Advanced Behavioral Health’s national website for more information on services and supports offered through Devereux. [http://www.devereux.org](http://www.devereux.org)

**How do I contact my child?**

We understand that it is not always possible for you to be in person to visit with your child. You are welcome and encouraged to contact your child via telephone, Zoom videoconference sessions and/or by sending cards and packages.

**Phone and Zoom video conference sessions:** Your child’s Treatment Team will review the center visitation and contact policy (pages 44-47) as well as specific guidelines pertaining to your child’s residence with you. If you are looking for an update on your child’s day or progress, you are encouraged to contact a member of the Treatment Team. Please refer to the information sheet provided to you by your child’s SSC on the day of admission for names and numbers of your child’s Treatment Team.

**Sending Cards and Packages:** Family members are welcome to send cards and packages, but we do ask that you provide your child’s SSC with a list of family members who might send packages/cards. Please note the list of prohibited items listed in this handbook (pages 24-25) and be aware that all mail will be opened in the presence of a Devereux staff. Items may be sent to:

Devereux Advanced Behavioral Health Pennsylvania CIDDS  
C/O Your Child’s Name/Residential Residence  
390 East Boot Road  
West Chester, PA 19380
When can I visit with my child?
A very important component of your child’s treatment program here at Devereux Pennsylvania CIDDS is family involvement in your child’s daily life and active participation in your child’s treatment program as recommended by your child’s Treatment Team. While we will never restrict visitation with your child, we ask that you adhere to our visitation and contact policy to help protect the best interests, safety and confidentiality of all those we serve. A copy of the center visitation and contact policy is located in the appendix for your review and will be reviewed with you by your child’s Treatment Team. Residence specific visitation guidelines will be addressed by your child’s Treatment Team.

Where can I visit with my child?
Each residential residence has a designated visitation space for families to utilize with their child(ren). Your child’s Treatment Team will show you the area as well as review policies regarding use. In addition, there are several other Family Visitation Areas located around the campus. Signs are posted designating these areas.

Who will provide medical attention to my child?
All individuals residing at Devereux CIDDS will receive general medical assessment/treatment by one of our nurses or medical doctors in our medical building. Individuals who reside on campus can also be assessed and treated for minor injuries at the nurse’s station located within their residence. Individuals requiring more extensive medical services or who need to see a specialist will be scheduled to be seen at a site off campus. Families are notified of appointments ahead of time so they can share concerns to be discussed with doctors or attend off-site appointments.

Who will distribute medication to my child?
On-campus residents: Each on-campus residential residence has an assigned registered nurse who is responsible for administering medications to individuals who receive them. Each residence has a nurses station where individuals report to receive medications at designated times.

Off-campus residents: Individuals who reside in one of our community-based RTF residences are given medications by staff members who have received extensive training on medication distribution. Individuals who require further medical intervention residing in community-based residences are brought to the medical building on campus for further assessment/treatment.

Medication for Family Visitation: Families are requested to contact their child’s SSC two to three days in advance of family visitation so arrangements such as packing up medication can be made. **PLEASE NOTE:** Extended visits may require more advanced notice.

Please plan to pick up your child’s medication directly from the medical department. Instructions for dispense will be included with the medication. Please return all unused medication directly to the medical department upon returning your child. **Medication cannot be left with staff members.**
Does Devereux transport my child to medical appointments, activities, family visits?

Outside Appointments: If your child has a medical/dental appointment scheduled by the Devereux Medical Department we will provide transportation for your child to/from the appointment. Family members are welcome to meet their child at scheduled appointments if they desire.

**PLEASE NOTE:** If your child has an appointment with an outside provider that was not scheduled by the Devereux Medical Department, the parent/guardian is responsible for transporting the child to/from the appointment. We also ask that the provider send a copy of the report to our medical department for your child’s record.

Community Integration/ Outside Activities: All Devereux Pennsylvania CIDDS residential residences engage in community integration trips as part of their active programming routines. Depending on the needs of the individuals in the programs, community integration trips may occur weekly, biweekly or monthly.

**PLEASE NOTE:** If your child is involved in any off-campus, non-Devereux activities such as horseback riding, dance/gym classes, etc., it is the responsibility of the parent/guardian to provide transportation to and from the activity.

Families and Devereux Vehicles: Due to liability and insurance purposes no family members will be allowed in a Devereux vehicle when residents other than their child are present.

Transportation for Family Visits: We provide regular transportation to Philadelphia, where your child will be dropped off and picked up at a designated location. Parents are responsible for contacting their SSC to schedule visit(s) and request their child be on the van. Parents must meet the van at the designated location for drop-off and pick-up. Please contact your child’s SSC for more details.
What if my medical insurance lapses or changes while my child resides at Devereux?
You must notify us immediately if your medical insurance lapses or changes while your child is residing at Devereux Pennsylvania CIDDS as this can directly impact your child’s medical funding. A failure to do so may result in you directly receiving bills for your child’s medical services and/or your child missing important appointments. Please contact the Insurance Coordinator or reference the letter on medical insurance that was provided to you at your child’s admissions with questions regarding medical insurance.

What if I move while my child resides at Devereux?
You must notify us immediately if you move while your child is residing at Devereux Pennsylvania CIDDS as this can directly impact your child’s funding. A failure to do so may result in your child losing funding for placement.

Will my child have a client account?
Your child will have a client account open through Devereux for you to deposit money into. Money in this account will be allocated for your child to be used for special trips such as movies, going out for dinner or special shopping trips. It may also be used to purchase your child needed clothing or hygiene items, if requested by family. If you would like to give your child an allowance for his/her account, please give it to your child’s SSC. If writing a check, please write it in your child’s name. If providing cash, place it in an envelope marked with your child’s name and the amount of allowance written on it. A receipt is available upon request.

Do you offer interpretation services?
Interpretation services are available by phone as well as in person. Please contact a member of your child’s Treatment Team for additional information.

Do you have campus policies?
The following policies are in place for the safety of your child and the safety of all individuals we serve, their families and our staff. Failure to comply with these policies may result in you being asked to leave the campus.

Visitation and contact: Please see the attached visitation and contact policy (pages 44-46).

Photos/Videos of individuals: For the safety of all individuals served at Devereux we ask that you not take pictures/videos of your child when he/she is around other individuals. No pictures/videos of individuals should be used or uploaded to social media accounts without permission from the individual and his/her parent/guardian.

Gifts for individuals: Gifts, including toys, food and clothing should not be given directly to any individuals served at Devereux. If you would like to provide a meal or treats to your child’s entire residence, please contact the SSC or Treatment Manager to arrange.
Gifts for staff: Devereux has a strict no gift policy for staff members. If you would like to acknowledge a staff who has gone above and beyond please consider writing a letter to be given to his/her Treatment Manager OR contact the Treatment Manager to arrange for a special event that would include all of the individuals in your child’s residence.

Prohibited Items: The following items are prohibited at all times:

- Items that can be used as a weapon
- Any item containing alcohol
- Drugs
- Cigarettes
- Any item that is glass/breakable (e.g. bottles, picture frames, mirrors)
- Any item that could present as an electrical or choking hazard
- Clothing, music, posters or books reflecting violence, drugs, alcohol, Satanism, witchcraft, occult or sex/pornography
- Electronic devices that connect to the internet or that can record pictures, video and/or audio. An example of allowed devices include MP3 players that meet above requirements and electronic devices used for communication purposes. Your child’s Treatment Team will provide additional information on the safety of these devices.

Smoking Policy: For the safety of the individuals we serve on our campus: **SMOKING IS NOT PERMITTED ANYWHERE ON CAMPUS.** All cigarettes and lighters/matches must be locked in your vehicle while visiting.

Parking Policy: While visiting your child please park in designated areas only. Parking in front of residences is only temporarily permitted if you need to pick up/drop off an item for your child. If you plan on staying and visiting with your child, please park in a designated parking area. Leaving cars unattended in front of any of the residences may cause problems in the event of an emergency. If parking lots are full by your child’s residence, additional parking is available behind the Leo Kanner Learning Center. Please be sure to lock your vehicles at all times and **DO NOT LEAVE YOUR VEHICLE RUNNING UNATTENDED WHILE ON CAMPUS.**

Speed Limits: For the safety of our clients and staff, we ask that you adhere to the posted speed limits and reduce your speed in the school zone and residential areas. Please also take notice of the stop signs located throughout the campus.
What are the names of the I/DD campus residences?

Goldsmith Residence (males only)

Greenway Residence (males only)

Brumer Residence (males only)
*Note: Building name is Jackson A*

Laura Villa Men Residence (males only)

Glen Loch Residence (females only)

Jackson B Residence (females only)

STAIRS Residence (males and females)
*Note: Building name is Glen Loch*

Pines Residence (females only)
What are the names of the I/DD community residences?

- Lisa Lane at Ship Road Residence (males only)
- Overlook Residence (males only)
- King A Residence (males only)
- King B Residence (males only)
- Colwyn Residence (males only)
What are the names of the DBD campus residences?

**Donovan Residence** (males only)

**Reed Residence** (males only)
*Note: Building name is Brumer*

**Daman Residence** (males only)

**Sexual Responsibility Program Residence** (males only)
*Note: Building name is Carriage Place*

What clothing items does my child need in the I/DD Program (please refer to the list above to see if your child resides in I/DD)?

The following is a suggested list of items to bring for your child. Your child’s Treatment Team will regularly notify you of additional items your child may need throughout his/her stay.

**PLEASE NOTE:** A clothing inventory will be completed on the day your child is admitted to account for the clothing/personal items brought. This inventory will be updated each time you bring in new items for your child and when you take your child’s personal items home. You may request a copy of your child’s clothing inventory from your child’s Treatment Manager.

### Fall/Winter

<table>
<thead>
<tr>
<th>Outerwear</th>
<th>Day Wear</th>
<th>Night Wear</th>
<th>Shoes</th>
<th>Accessories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hat</td>
<td>Jeans/Pants (4 pair)</td>
<td>Pajamas (3 pair)</td>
<td>Sneakers</td>
<td>Underwear/Garments (8 pair)</td>
</tr>
<tr>
<td>Gloves</td>
<td>Sweatpants (5 pair)</td>
<td>Robe</td>
<td>Snow Boots</td>
<td>Thermal Underwear</td>
</tr>
<tr>
<td>Winter Coat</td>
<td>Sweatshirts (3)</td>
<td></td>
<td>Slippers</td>
<td>Belt (2)</td>
</tr>
</tbody>
</table>
Rain Poncho | Long Sleeved Shirts (6) | Dress Shoes | Socks (10 pair) | Dress Outfit | Swimsuit (1 piece only for females)
---|---|---|---|---|---

**Spring/Summer**

<table>
<thead>
<tr>
<th>Outerwear</th>
<th>Day Wear</th>
<th>Night Wear</th>
<th>Shoes</th>
<th>Accessories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lightweight jacket</td>
<td>Jeans/Pants (4 pair)</td>
<td>Pajamas (3 pair)</td>
<td>Sneakers</td>
<td>Underwear/Garments (8 pair)</td>
</tr>
<tr>
<td>Rain Poncho</td>
<td>Shorts (4 pair)</td>
<td>Robe</td>
<td>Flip Flops/Sandals</td>
<td>Belt (2)</td>
</tr>
<tr>
<td>Short Sleeved Shirts (6)</td>
<td></td>
<td>Slippers</td>
<td>Socks (10 pair)</td>
<td></td>
</tr>
<tr>
<td>Sweatshirt (2)</td>
<td></td>
<td>Dress Shoes</td>
<td>Swimsuit (1 piece only for females)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Dress Outfit</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**What clothing items does my child need in the DBD Program (please refer to the list above to see if your child resides in DBD)?**

Our DBD individuals wear uniforms which are initially provided for by Devereux. Families may be asked to provide additional uniform items as needed. The following is a suggested list of items to bring for your child. Your child's Treatment Team will regularly notify you of additional items your child may need throughout his/her stay.

**PLEASE NOTE:** A clothing inventory will be completed on the day your child is admitted to account for the clothing/personal items brought. This inventory will be updated each time you bring in new items for your child and when you take your child’s personal items home. You may request a copy of your child’s clothing inventory from your child’s Treatment Manager.

**Fall/Winter**

<table>
<thead>
<tr>
<th>Outerwear</th>
<th>Day Wear</th>
<th>Night Wear</th>
<th>Shoes</th>
<th>Accessories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hat</td>
<td>Sweatpants (5 pair)</td>
<td>Pajamas (3 pair)</td>
<td>Sneakers</td>
<td>Underwear/Garments (8 pair)</td>
</tr>
<tr>
<td>Gloves</td>
<td>Sweatshirts (3)</td>
<td>Robe</td>
<td>Snow Boots</td>
<td>Thermal Underwear</td>
</tr>
</tbody>
</table>
### Winter Coat Clothing for home visits
(1-2 sets)

- Slippers
- Belt (2)

<table>
<thead>
<tr>
<th>Winter Coat</th>
<th>Clothing for home visits (1-2 sets)</th>
<th>Slippers</th>
<th>Belt (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rain Poncho</td>
<td></td>
<td>Dress Shoes</td>
<td>Socks (10 pair)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Swimsuit (1 piece only for females)</td>
</tr>
</tbody>
</table>

### Spring/Summer

#### Outerwear
- Lightweight jacket
- Rain Poncho

#### Day Wear
- Sweatshirt (2)
- Clothing for home visits (1-2 sets)

#### Night Wear
- Pajamas (3 pair)
- Robe

#### Shoes
- Sneakers
- Flip Flops/Sandals
- Dress Shoes

#### Accessories
- Underwear/Garments (8 pair)
- Belt (2)
- Socks (10 pair)
- Swimsuit (1 piece only for females)

### Additional Considerations for Personal Belongings
- Please only bring seasonal items to the residence as space is limited.
- Please label ALL belongings with a permanent marker/label.
- Devereux will provide your child with sheets, blankets, comforter, pillow and towels. If you prefer to bring your own, please be sure to label all items and include them on your child’s inventory list.
- It is not recommended to bring valuables or items that can be easily broken or stolen. Devereux provides electronics such as a television, video game console and telephones to be used by your child as needed/appropriate based on the residence your child resides in.
- If your child has a special toy/blanket/item that they highly value please notify your child’s Treatment Team so appropriate measures can be taken to ensure the safety of these items.
- Please ensure that personal hygiene products contain no alcohol and that they are labeled “Keep Out of Reach of Children.” ALL medications must be dropped off to the Medical Department.
- Please reference the list of prohibited items above.

**PLEASE NOTE:** Devereux is not responsible for replacing stolen or damaged items. Please refer to the Property Damage Waiver located in the Appendix (page 43).

### Are there specific guidelines for any of the I/DD residences?

Individuals residing in the STAIRS Program do follow different rules and policies. Please contact a member of your child’s Treatment Team if your child resides in this program for additional information.
Are there specific guidelines for any of the DBD residences?
Individuals residing in the Sexual Responsibility Program do follow different rules and policies. Please contact a member of your child’s Treatment Team if your child resides in this program for additional information.

How long will my child be at Devereux?
The estimated length of stay for most individuals at Devereux Pennsylvania CIDDS is 12 months or less. The criteria for discharge will be established and discussed with you by your child’s Treatment Team and will also consider criteria set forth by funding agencies.

Who pays for my child to be at Devereux?
Devereux Pennsylvania CIDDS accepts multiple forms of payment for residential services including funding from Managed Care Organizations (MCO), Educational Funding, Children and Youth Funding and Private Funding. Please contact your child’s SSC if you have further questions about the type of funding your child receives.

Can you tell me more about Managed Care Organization (MCO) funding and expectations of family members?
Each MCO has a different set of standards and expectations for both Devereux, as the provider of services, and families, as the consumer of services. The following is a list of Managed Care Organizations that Devereux currently accepts payment from. Included in the appendix is a list of website and member services information by county. Families are encouraged to read the standards and expectations set forth by the MCO funding your child’s placement.

- Magellan Behavioral Health (MBH)
- Community Behavioral Health (CBH)
- Community Care Behavioral Health (CCBH)
- Perform Care
- Value Behavioral Health (VBH)

Interagency (ITA) meetings are held regularly to discuss your child’s progress in their treatment program and to determine if additional time is needed in the program for your child to continue his/her progress. Please contact your child’s UR representative for more information on MCO funding, expectations and requirements.

What does discharge planning mean?
Devereux PA CIDDS is a short-term residential treatment facility, therefore, discharge planning begins on the day of your child’s admission. You will have multiple discussions with your child’s Treatment Team about your wishes and desires for your child’s future and discussions about what options are available to your child when he/she is ready for discharge from our facility. Examples of discharge options include: home with appropriate supports/services, adult community living arrangement, treatment foster placement, etc. As your child makes progress and reaches his/her goals towards discharge, you will be invited to attend discharge planning meetings, where you will solidify your child’s discharge plan and discuss what services/supports are needed/available for you and your child to access. If you have questions about this process at any time please contact your child’s SSC or Clinician.
What should I expect on the day of my child’s discharge?
On the day of your child’s discharge you will stop by his/her residence to collect his/her belongings. You will also stop by the medical department to pick up your child’s discharge packet, which will include the remaining medication for your child, 30-day medical prescriptions, copies of medical paperwork and copies of other pertinent treatment information. If you have questions about this process at any time, please contact your child’s SSC or Clinician.

Who do I contact if I have a Complaint, Grievance or Compliment?
We recognize that there will be times when you have a comment or compliment about your child’s treatment.

We recommend following these guidelines to appropriately relay your compliments:
- Please share compliments orally or in writing to a member of the Treatment Team, who will then share feedback with appropriate parties, supervisors and the Human Resources Department.

We recommend following these guidelines to appropriately relay your complaints or grievances:
- Please refer to the Grievance Process located in the appendix of this handbook for further information (page 40).
A view of some of our residential spaces
Campus Map

<table>
<thead>
<tr>
<th>MAP#</th>
<th>Building Name</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>111</td>
<td>Administration</td>
<td>111 Devereux Cr</td>
</tr>
<tr>
<td>103</td>
<td>Brumer</td>
<td>103 Devereux Cr</td>
</tr>
<tr>
<td>281</td>
<td>Carriage Place</td>
<td>281 East Boot Rd</td>
</tr>
<tr>
<td>116</td>
<td>Daman Villa</td>
<td>116 Devereux Cr</td>
</tr>
<tr>
<td>115</td>
<td>Dando Villa</td>
<td>115 Devereux Cr</td>
</tr>
<tr>
<td>107</td>
<td>Dining Hall</td>
<td>107 Devereux Cr</td>
</tr>
<tr>
<td>G102</td>
<td>Donovan</td>
<td>102 Genuardi Cr</td>
</tr>
<tr>
<td>G101</td>
<td>Glen Loch</td>
<td>101 Genuardi Cr</td>
</tr>
<tr>
<td>G100</td>
<td>Goldsmith</td>
<td>100 Genuardi Cr</td>
</tr>
<tr>
<td>102</td>
<td>Greenway</td>
<td>102 Devereux Cr</td>
</tr>
<tr>
<td>109</td>
<td>Gym (Robert H. Young)</td>
<td>109 Devereux Cr</td>
</tr>
<tr>
<td>106</td>
<td>Jackson A</td>
<td>106 Devereux Cr</td>
</tr>
<tr>
<td>105</td>
<td>Jackson B</td>
<td>105 Devereux Cr</td>
</tr>
<tr>
<td>104</td>
<td>Learning Center</td>
<td>104 Devereux Cr</td>
</tr>
<tr>
<td>112</td>
<td>Main House</td>
<td>112 Devereux Cr</td>
</tr>
<tr>
<td>261</td>
<td>Maintenance</td>
<td>261 East Boot Rd</td>
</tr>
<tr>
<td>108</td>
<td>Medical Services Building</td>
<td>108 Devereux Cr</td>
</tr>
<tr>
<td>271</td>
<td>Pines Cottage</td>
<td>271 East Boot Rd</td>
</tr>
<tr>
<td>110</td>
<td>Pool</td>
<td>110 Devereux Cr</td>
</tr>
<tr>
<td>113</td>
<td>The Villas</td>
<td>113 Devereux Cr</td>
</tr>
<tr>
<td>114</td>
<td>The Zoo</td>
<td>114 Devereux Cr</td>
</tr>
</tbody>
</table>

Map Legend:
- Road
- Building
- Parking Area
- Walking Path
Local Area Information:

Area Restaurants

- **Appetites on Main** (American) (2.6 mi)
  
  100 Bartlett Ave., Exton, PA
  
  (610) 524-0700

- **Longhorn Steakhouse** (2.3 mi)
  
  286 Main Street, Exton, PA
  
  (610) 594-2030

- **Bravo Pizza** (0.6 mi)
  
  1438 Pottstown Pike, West Chester, PA
  
  (610) 430-7770

- **Wawa (No Gas)** (0.6 mi)
  
  10 W Boot Rd., West Chester, PA

- **Exton Diner Family Restaurant** (4.4 mi)
  
  100 Marchwood Rd., Exton, PA
  
  (610) 280-9900

- **On the Border** (2.6 mi)
  
  102 Bartlett Ave., Exton, PA
  
  (610) 363-3646

- **Hong Kong** (0.9 mi)
  
  905 E Boot Rd., West Chester, PA
  
  (610) 696-2597

- **Panera Bread** (2.6 mi)
  
  151 E Swedesford Rd., Exton, PA
  
  (610) 524-1626

- **McDonalds** (2.3 mi)
  
  270 Indian Run St., Exton, PA

- **Applebee’s** (5.1 mi)
  
  1107 West Chester Pike, West Chester, PA
  
  (610) 696-0710

Area Hotels

- **Holiday Inn Express: Exton-Lionville** (2.4 mi)
  
  120 North Pottstown Pike, Exton, PA
  
  Contact Bryce Dayton for discounted rate
  
  (610) 561-9774

- **Sheraton Great Valley** (3.4 mi)
  
  707 E. Lancaster Ave., Malvern, PA
  
  Mention Devereux for a discounted rate
  
  (610) 524-5500

- **Hampton Inn Exton** (5.3 mi)
  
  4 N. Pottstown Pike, Exton, PA
  
  www.hamptoninnexton.com
  
  Mention Corporate ID #0560028329 for a discounted rate
  
  (610) 363-5555
Area Shopping

**Exton Mall**
Route 30
Exton, PA
The mall has a variety of eateries in its food court.

**QVC Retail Store and Studio**
1200 Wilson Dr.
West Chester, PA

**Target**
201 Sunrise Blvd.
Exton, PA

**Main Street at Exton Shopping Center**
Exton, PA
Various Shops and Eateries (Walmart, Old Navy, Barnes and Nobles, etc.)

**Whiteland Towne Center**
Route 30
Exton, PA
Various Shops & Eateries (Kohl’s, Big Lots, Hobby Lobby, Payless, etc.)

Area Activities

**Valley Forge National Park-Valley Forge**
(Hiking trails, Picnic Areas)

**Marsh Creek State Park - Eagle**
(Boating, Hiking, Fishing, Swimming, Playgrounds, Picnic Areas)

**French Creek State Park - Elverson**
(Boating, Fishing, Hiking, Playgrounds, Swimming, Picnic Areas)

**Bell Tavern Park-Downingtown**
(Playground, Walking Trail, Picnic Areas)

**Kerr Park/Struble Trail-Downingtown**
(Playground, Picnic Areas)

**Round 1**
172 Exton Square Mall, Exton, PA
(484) 252-2819

**Hibernia Park - Coatesville**
(Walking trails, Picnic Areas, Fishing, Playground)

**Longwood Gardens**
Route 1, Kennett Square, PA
(610) 388-1000

**Philadelphia Zoo**
34th and Girard Ave. Philadelphia, PA
(215) 243-1100

**Strasburg Railroad**
Route 741, Strasburg, PA
(717) 687-7522

**American Helicopter Museum**
1220 American Blvd., West Chester, PA
(610) 436-9600

**Palace Bowling**
977 East Lancaster Ave. Downingtown, PA
(610) 269-9999

**Regal Cinema**
100 Quarry Road, Downingtown, PA
(844) 462-7342

**Movie Tavern**
(484) 498-2331
110 Bartlett Ave. Exton, PA

**Chester Springs Creamery at Milky Way Farm**
(610) 363-8500
521 Uwchlan Ave., Chester Springs, PA

**Amusement Parks:**
Dutch Wonderland - Lancaster
Hershey Park - Hershey
Dorney Park - Allentown
Sesame Place - Langhorne
Family Visitation Areas
Dear Family,

Welcome to Devereux Pennsylvania’s Children’s Intellectual/Developmental Disabilities Services (CIDDS) center! We are honored that you have chosen us as the service provider to assist you and your child navigate through a difficult time in your family’s life. Devereux Pennsylvania CIDDS is a short-term residential treatment facility geared to provide you and your child with intense services to address your child’s presenting problems. This may include, but is not limited to, behavioral issues, medication compliance, educational issues, and issues within the family.

While your child resides at Devereux Pennsylvania CIDDS, he/she will participate in an active and structured treatment program that includes individual therapy or behavioral consultation as needed, assistance with ADL skills, structured recreation/leisure activities, community integration, access to medication management and routine medical care, educational services (if child attends school on our campus) or support transitioning to/from school (if child attends school off-campus). These services are individually tailored to your son/daughter’s needs and are based on evidence-based practices driven by clinical assessments, data collection/analysis and progress monitoring.

Another crucial component to your child’s care and success is your family’s involvement in the treatment process from day one. Our experience has shown that active family partnerships with our Treatment Teams is critical in helping children gain the behaviors and skills they need to function successfully at home and in the community. We have found that frequent and positive family engagement with their child leads to the most successful treatment outcomes. Therefore, we hope to partner with you to support regular contact with your child and his/her Treatment Team as well as invite your full participation in Treatment Team meetings and family therapy or family education with your child’s clinician throughout your child’s stay. We also strongly encourage you to abide by our campus policies and procedures presented in our Family Information Handbook for the safety of your child and others and so that all families can enjoy their time with their children.

Below is a comprehensive list of approved activities that you are invited to participate in to enhance your involvement in your child’s treatment program at Devereux CIDDS. More detailed information on these services can be found in the Family Information Handbook:

- **Frequent Family Visitation**: Starting from your child’s admission day, day visits and home visits are encouraged (as deemed appropriate by your child’s Treatment Team and your input)
- **Daily/Weekly Phone Contact** (as deemed appropriate by your child’s Treatment Team and your input)
- **Frequent Phone/Email Contact** with your child’s Treatment Team
- **In-person or phone participation in all treatment planning meetings** (ISP, ITA, IEP, Discharge Planning Meetings)
- **Parent Engagement Sessions**: Parent Training Sessions or Family Therapy or Consultation sessions (as deemed appropriate by your child’s Clinician)
  - Zoom videoconference (frequency as deemed appropriate by your child’s Treatment Team and your input)
  - Parent training/Family Therapy: Twice a month sessions required by Health Choices/MCO funded individuals
- **Monthly Family Support Group**
- **Participation in Devereux Affiliated Family Events**

We understand that there may be extenuating circumstances that may prevent you from being as actively involved in your child’s care as you may hope to be. We are committed to helping you overcome any barriers that may currently be in place or may arise during your child’s stay with us. We ask that you communicate any such barriers as soon as possible so we can work with you to address these issues and help you and your child receive the quality and quantity of services that your child and your family deserve to meet your child’s needs.

Again, we welcome you to Devereux CIDDS and look forward to working with you and your child. Should you have any questions or concerns about the material in this letter please refer to the Family Information Handbook or contact a member of your child’s Treatment Team.

Sincerely,

Jenny B. Nielsen, Ph.D., BCBA-D
PA Licensed Psychologist and Board Certified Behavior Analyst
Clinical Director Devereux Children’s IDD Services
Receipt for Bill of Rights

Bill of Rights

YOU HAVE A RIGHT TO BE TREATED WITH DIGNITY AND RESPECT

YOU SHALL RETAIN ALL CIVIL RIGHTS THAT HAVE NOT BEEN SPECIFICALLY CURTAINED BY A COURT OF LAW

(a) You may not be discriminated against because of race, color, religious creed, disability, handicap, ancestry, sexual orientation, national origin, age or sex.
(b) You may not be abused, mistreated, threatened, harassed or subject to corporal punishment.
(c) You have the right to be treated with fairness, dignity and respect.
(d) You have the right to be informed of the rules of the facility.
(e) You have the right to communicate with others by telephone subject to reasonable facility policy and written instructions from the contracting agency or court, if applicable, regarding circumstances, frequency, time, payment and privacy.
(f) You shall have the right to visit with family at least once every 2 weeks, at a time and location convenient for the family, the child and the facility, unless visits are restricted by court order. This right does not restrict more frequent family visits.
(g) You have the right to receive and send mail.
   (1) Outgoing mail may not be opened or read by staff persons.
   (2) Incoming mail from Federal, State or county officials, or from the child’s attorney, may not be opened or read by staff persons.
   (3) Incoming mail from persons other than those specified in paragraph (2), may not be opened or read by staff persons unless there is reasonable suspicion that contraband, or other information or material that may jeopardize the child’s health, safety or well-being, may be enclosed. If there is reasonable suspicion that contraband, or other information that may jeopardize the child’s health or safety may be enclosed, mail may be opened by the child in the presence of a staff person.
(h) You have the right to communicate and visit privately with his attorney and clergy.
(i) You have the right to be protected from unreasonable search and seizure. A facility may conduct search and seizure procedures, subject to reasonable facility policy.
(j) You have the right to practice the religion or faith of choice, or not to practice any religion or faith.
(k) You have the right to appropriate medical, behavioral health and dental treatment.
(l) You have the right to habilitation and treatment.
(m) You have the right to be free of excessive medication.
(n) You may not be subjected to unusual or extreme methods of discipline which may cause psychological or physical harm.
(o) You have the right to clean, seasonal clothing that is age and gender appropriate.
Grievance, Compliant and Appeal Procedure

The purpose of the Grievance and Appeal Procedure is to make sure that objections concerning treatment and/or client rights are taken care of promptly and fairly. You have the right to file complaints, grievances and appeals when informal ways of resolving problems are unsuccessful. Every client and parent/guardian shall be informed of the grievance and appeal process and are encouraged to use it when other ways of taking care of complaints are unsuccessful.

1. GRIEVANCE PROCEDURE
   a. Any client or parent/guardian may make a complaint, orally or in writing, concerning the Individual Treatment Plan, rights or the quality of services at CIDDS. The grievance shall be given to any CIDDS staff. Parents/guardians may also call or submit in writing their concerns. You may call either of the following: Executive Director at 610-431-8106; Director of Quality Management at 610-431-8184; or Principal at 610-431-8196. In writing, send your concerns to the Director of Quality Management, Devereux Advanced Behavioral Health Pennsylvania CIDDS, 390 E. Boot Rd., West Chester PA 19380.
   b. Every client or parent/guardian shall have the right to the help of an independent person and witnesses in presenting his/her complaint.
   c. The Program Director receiving the complaint shall investigate the complaint and make every effort to correct it. Based upon this procedure a decision shall be made in writing as soon as possible (usually within 48 hours) after you file the complaint. Complaints will be decided by persons not directly involved in the circumstances leading to the grievance.
   d. You shall be given a copy of the complaint and the final decision and a copy will be filed in your record.
   e. A record of client complaints and grievances will be maintained.

2. APPEAL PROCEDURE
   a. A client may appeal the grievance decision within 10 working days. The Executive Director will appoint a review committee who will review and make a determination within 10 days. Clients may utilize the Grievance and Appeal procedure when informal methods of resolving disputes regarding treatment and/or client rights are unsuccessful.

Video Monitoring Notice

Purpose

Devereux Advanced Behavioral Health Pennsylvania Children’s Intellectual/Developmental Disabilities Services uses video monitoring in various common areas throughout the campus. Video monitoring of common areas is used to enhance customer safety (clients, employees and visitors) and as an adjunct tool to further enhance the quality of care provided to clients. Surveillance equipment is not permitted in bedrooms or bathrooms and necessitates management approval for installation in both of these locations. Audio recording is not permitted. The video monitoring system is an adjunct tool to further enhance the quality of care provided to clients and is never permitted as a substitute for staff directly interacting with clients and/or personally conducting safety checks and monitoring.
Procedure
Video Monitoring/Surveillance (Digital Recording): The use of digital recording devices will abide by all federal, state and licensing privacy laws and regulations. They will be viewed routinely to ensure client/employee/visitor safety and security and are operational at all times (around the clock). Some systems are designed to record using motion activation.

Storage and Retention: Images will remain in the system for approximately three to five weeks, dependent on the amount of motion activation. At this time, images will be recorded over by newer feed. Any recorded image(s) that may involve a criminal act, an actual or threatened civil lawsuit, a licensing violation or other legal proceeding should be retained until the termination of those proceedings.

Photo Release AUTHORIZATION

_____________________________    _______________
Individual         Date

_____________________________     _______________
Residence         Person Completing Form

Authorization for still images (please initial below).
Do you give Devereux, and those acting for Devereux, permission to make still image (including photographic) recordings of the above individual for use in any medium?

Authorization for motion picture/sound recordings (please initial below).
Do you give Devereux, and those acting for Devereux, permission to make motion picture (including video) and/or voice recordings of the above individual for use in any medium?

Permission for written testimonials (please initial below).
Do you give Devereux, and those acting for Devereux, permission to use the written testimonial of the above named individual in any medium?

Permission to use personal identifiers (please initial below).
Do you give Devereux, and those acting for Devereux, permission to use personal identifiers (including the name) of the above individual in connection with the above authorized recordings?

Permission for “Social Media” and state the following (please initial below).
Do you give Devereux, and those acting for Devereux, permission to utilize photos, video and/or written testimonial on social media platforms, including without limitation, outlets such as Facebook, Twitter, Pinterest, LinkedIn, Instagram and similar outlets?
IMPORTANT - by signing below, you agree to the following:

- Devereux, and those acting for Devereux, may use the items authorized above, in any medium, for any purpose in furtherance of Devereux's mission (including but not limited to public communications describing Devereux (services and to solicit charitable donations), in perpetuity, and may edit such items and incorporate them, in whole or in part, with and into other works;
- Devereux may receive remuneration, direct or indirect, in connection with the use or disclosure for marketing purposes;
- You (and the individual, if you sign as a representative) will not receive any sort of compensation in connection with these authorized uses;
- You may revoke this Authorization at any time but you must do so in writing directed to Devereux Legal Dept, 2012 Renaissance Blvd., King of Prussia PA 19406;
- The revocation will not apply with regard to any action already taken in reliance on the Authorization. Information disclosed may be subject to redisclosure by the recipient and no longer protected;
- This Authorization will expire in 10 years, unless it is first revoked in writing; and you are not required to sign this Authorization in order to receive or be eligible for any services or benefits from Devereux.

I hereby release, discharge and agree to hold harmless Devereux, its affiliated programs, officers, directors, employees, contractors and agents from any and against all liability, claims, damages, losses and demands ("Claims") relating to the use of those items authorized above, including, but not limited to, claims for invasion of privacy, breach of confidentiality, false-light privacy, defamation, and/or commercial misappropriation.

I have read this document and fully understand its terms. I provide my consent freely and voluntarily and with the understanding that I, my successors and assigns, will be legally bound to its terms.

If I am not the individual named above, I represent that I am legally authorized to sign this Authorization for the individual named above.

_____________________________    _______________
Individual          Date

_____________________________    _______________
Parent/Legal Guardian/Representative          Date

(Description of authority to act for individual): ______________________
Property Damage Waiver

I acknowledge that Devereux Advanced Behavioral Health is not responsible for any damaged, lost or stolen electronic device that I bring to my friend/family member who is a resident at Devereux Pennsylvania Children’s I/DD Services (CIDDS) program. Electronic device includes, but is not limited to smartphones, computer tablets, hand-held games, televisions, gaming systems and games, related equipment to support such devices and all other similar electronic devices. I agree that I will inform the staff at CIDDS that I have brought an electronic device(s) for my child or family member’s use. The staff at CIDDS will secure the device(s) when it is not in use and will make best efforts to ensure that the device is not lost, stolen or damaged.

I hereby knowingly and voluntarily waive and release, and agree to indemnify, hold harmless and defend Devereux Advanced Behavioral Health, its successors, assigns, officers, directors, attorneys, employees, contractors, agents representatives, subsidiaries and its affiliated organizations from all liability for the theft, loss or damage of any electronic device that I have brought to CIDDS for my child’s or family member’s use. Such liability includes, but is not limited to, any replacement costs, settlements, judgments, attorney’s fees, expenses, fees and all other costs arising from or associated with the theft, loss or damage to the devices.

_____________________________    _______________
Individual          Date

_____________________________    _______________
Parent/Legal Guardian/Representative  Date
Devereux Pennsylvania CiDDS Visitation and Contact Policy

PURPOSE: This policy is designed to provide the individuals and families served at Devereux Advanced Behavioral Health Pennsylvania CiDDS with recommended guidelines for visitation and contact. The policy is designed to protect the best interests, safety and confidentially of all those served at Devereux Advanced Behavioral Health Pennsylvania CiDDS. This is a campus-wide policy and affects individuals residing in all campus and community residential programs. Each residence on campus reserves the right to provide individuals and families with additional guidelines depending on the needs of the individuals in the residence. They are also responsible for providing families with appropriate notification and review of any additional guidelines. Failure to comply with the guidelines in this policy may result in families being asked to leave the Devereux Advanced Behavioral Health Pennsylvania CiDDS campus or being asked to sign an “Against Medical Advice Form." The Against Medical Advice Form denotes that the family/guardian has been apprised of the risk of taking their child from the facility and by taking their child against medical advice, will assume all responsibility and liability for their child during the leave of absence from their child’s residence. Questions pertaining to any of the information contained in this policy can be reviewed with a member of the Treatment Team or the Director of Social Services and Compliance.

PROCEDURE:

1. All individuals have the right to receive scheduled and unscheduled visitors, communicate, associate, and meet privately with their families and persons of their own choice.

2. Providing notification for visits:
   a. Prior to any visitation with an individual, families **MUST** contact the assigned Social Services Coordinator (SSC). Notification may be in the form of a phone call or email prior to the visit.
   b. While 24 hours’ notice for all day visits is requested, it is understood that families may not be able to provide this notice. Therefore, families are asked to provide some type of notification prior to their arrival on campus. For weekend or weekday overnight visits it is requested that families notify the assigned SSC by noon two days prior to the intended visit.
   c. If an individual takes medication and a visit will take place during the time of medication administration, arrangements should be made with the assigned SSC to ensure medication is ready for pick up at the medical building.
      i. In the event that a visit is planned outside of normal business hours (8am – 5pm) or in the event of an emergency, families should contact the Main Switchboard (610) 431-8100 or the on duty supervisor’s number for your child’s residential area (see list of numbers received at admission).
   d. **NOTE:** Failure to notify the assigned SSC may result in an individual being off campus on an outing, an individual and his/her medications not being prepared/ready for the family visit, the family being unable to check on the status of the individual’s personal belongings, or may result in the family needing to wait outside of the residence to use a space for visitation.
3. The following pertains to ON-CAMPUS visits (i.e., Visiting in an individual’s residence or on the Devereux PA CIDDS campus):
   a. On-campus visits occur between the hours of 9am and 7pm.
   b. On-campus visits are limited to 4 hours total (unless otherwise arranged with the individual’s specific Treatment Team). Only up to 2 hours total of an on-campus visit may be held within an individual’s residence.
   c. Upon arrival to campus, families should sign in the Parent/Guardian Contact Log located in the individual’s residence. Upon returning an individual to his/her residence families should sign out on the Parent/Guardian Contact Log.
   d. Visitation within a residence may only take place in designated visitation areas as denoted by the Treatment Team. Additionally, there are several designated visitation areas located throughout campus for families to utilize. Families should look for Family Visitation Area signs to know which areas are appropriate for family interactions.
   e. It is a violation of HIPPA, a potential safety risk for families, and a potential barrier to the programming routines of other individuals for families to visit with their child in the general milieu. This includes but is not limited to meal times, medication administration, and hygiene times. Families may contact their child’s Treatment Team with questions/concerns about the level of support their child requires during his/her daily milieu.
   f. If families would like to visit in their child’s bedroom, would like to spend time inventorying their child’s personal belongings, or would like to schedule a time to observe their child in treatment, they should contact the assigned SSC to coordinate an appropriate time to do so.
   g. In the event that an individual and/or family require supervision during a visit OR the family would like a Treatment Team Member present to help support the child/family during the visit OR the family would like to utilize a family therapy room for the visit, preparations must be made for this prior to the visit occurring. Failure to do so may result in the visit being terminated prematurely, support not being available, or visitation room not being available. Families may make preparations by contacting the assigned SSC.

4. The following pertains to OFF-CAMPUS visits (i.e., Leaving the Devereux PA CIDDS campus or community home):
   a. Upon arrival to campus, families should sign in the Parent/Guardian Contact Log located in the individual’s residence. Upon returning an individual to his/her residence, families should sign out on the Parent/Guardian Contact Log. Families will also be asked to sign off on an individual body check form before/after the visit.
   b. If an individual takes medication and will require a dose during the off-campus outing, families should stop by the medical building prior to picking an individual up to get his/her medications. All unused medication should be returned back to the medical building.

5. Frequency of visitation per week:
   a. Devereux Advanced Behavioral Health Pennsylvania CIDDS will never restrict visitation between an individual and their family. However, the Treatment Team may provide recommendations regarding visitation based on an individual’s current challenging behaviors
and/or if visitation frequency impedes the Treatment Team’s ability to effectively provide consistent treatment to an individual and their family.

b. Under no circumstances will an individual’s visits with family be withheld as a form of punishment.

c. All individuals may use Procedure # 226, Client Grievances to appeal decisions made by the Treatment Team.

6. Food and Personal Belongings:

a. Food

i. The individual’s Treatment Team will notify families if their child is on a special diet. Families are asked to be respectful of the dietary needs of their child.

ii. If families bring food to a visit, all food must be consumed in an approved visitation area. **No food/beverages are allowed in individual’s bedrooms.**

iii. Families should only bring enough food to enjoy with their child during the visit. **No** non Devereux supplied food/beverages are permitted to be stored in the residences.

iv. Many of the individuals served at Devereux Advanced Behavioral Health Pennsylvania CIDDS are on diets or have food allergies/sensitivities. Therefore, families **SHOULD NOT** bring food for other residents unless special arrangements have been made with the Treatment Team ahead of time. The following items are **NOT ALLOWED** due to risk to those who have allergies: **PEANUT PRODUCTS.**

b. Personal Belongings

i. All personal items (including clothing, toys, activities, etc.) that are brought to the residence should be labeled with the individual’s name AND inventoried by the Treatment Manager to ensure items are accounted for.

ii. Valuable items or items that are easily breakable should not be left at Devereux Advanced Behavioral Health Pennsylvania CIDDS as these items may get damaged or stolen. Please refer to the Property Damage Waiver for additional information.

iii. The following is a list of items that are prohibited from the Devereux Advanced Behavioral Health Pennsylvania CIDDS campus. Individuals **WILL NOT** be allowed to keep any of these items:

   1. Items that can be used as a weapon
   2. Any item containing alcohol
   3. Drugs
   4. Cigarettes
   5. Any item that is glass/breakable (i.e., bottles, picture frames, mirrors, etc.)
   6. Any item that could present an electrical or choking hazard
   7. Clothing, music, posters or books reflecting violence, drugs, alcohol, Satanism, witchcraft, occult or sex/pornography
   8. Electronic devices that connect to internet or that can record pictures, video, and/or audio. An example of allowed devices include MP3 players that meet above requirements and electronic devices used for functional communication purposes. An individual’s Treatment Team will provide additional information on the safety of these devices.
7. The following pertains to having PHONE CONTACT with individuals:
   a. Families are welcome to contact their child in his/her residence by phone.
   b. The Treatment Team will review the best number and time to call an individual and will notify
      family if there is a phone call schedule in place at the individual’s residence for individuals to call
      their families.
   c. NOTE: Staff members are only able to impart general information about an individual’s day (i.e.,
      what did individual eat or do during the shift). For a more detailed description of an individual’s
      program families are encouraged to contact a member of the Treatment Team.

8. The following pertains to having ZOOM VIDEO CONFERENCING SESSIONS with individuals:
   a. Zoom Videoconference Sessions are available for families who may live far away and are not
      able to visit in person with their child as often as they would like OR are available as an option
      for Family Therapy with the individual’s Clinician.
   b. Zoom Videoconference Sessions MUST be scheduled in advance and typically occur during
      weekday business hours.

_________________________________________         ________________________
Approved                                                                            Date

Carol Anne McNellis, Psy.D., BCBA            October 5, 2018
Executive Director
Devereux CIDDS
Managed Care Organization (MCO) Grievance Process

A grievance can be filed by the parent/guardian/member when they disagree with a decision the Managed Care Organization (MCO) has made about their child’s behavioral health care. A grievance can be filed when the MCO:

- Deny a service
- Approve less of a service than your provider asked for
- Approve a different type of service than what your provider asked for

First Level:

- The MCO will send a letter stating that they received the complaint and the First Level Complaint process will be scheduled and held via phone (first level must be filed within 10 days of denial letter in order to have continued stay rights).
- The Treatment Team and parent/guardian will participate in first Level Grievance along with a committee of at least three people, including a licensed doctor or psychologist, and at least one person who does not work for for the MCO. This is called the ‘grievance review’.
- Information provided by the Treatment Team should include (since last ITA):
  1. Review challenging behavior data including restraint data from the period from the last ITA to the current ITA.
  2. Focus on the major challenging behaviors that are the focus for RTF level of service.
  3. Describe frequency, duration, intensity of behaviors.
  4. Provide dates of any restraints (including school restraints if education is not present).
  5. Discuss triggers for major incidents and restraints.
  6. Discuss any recent family engagement/therapy that has occurred.
  7. Review progress on residential, non-behavioral health goals.
  8. Review recent visitation dates and any barriers or problems with visitation.
  9. Review of medication
- MCO will mail a letter within 30 days from the date you filed your grievance to tell you the decision. If the decision upholds the initial denial then a Second Level Complaint can be filed by the parent/guardian/member.

Second Level:

External Complaint Review:

- External Complaint Review must be filed within 15 days of the date the Second Level Complaint decision letter is received (or within 10 days in order to have continued stay rights). Depending on the MCO the request may need to be in writing and/or filed by parent.
- The External Complaint is filed with the Pennsylvania Department of Health Bureau of Managed Care
- The MCO will send the grievance file to the reviewer. Additional information that may help with the External Grievance Review must be sent to the reviewer within 15 days of receipt of notice that the request for External Grievance Review was filed with the MCO.
- A decision letter will be received within 60 days of the date of request for an External Grievance Review. This letter will tell you the reason(s) for the decision.
Fair Hearing:
In some cases, the parent/guardian and/or representative can ask the Department of Human Services (DHS) to hold a hearing because they do not agree with the decision. These hearings are called DHS Fair Hearings. The parent/guardian can ask for a Fair Hearing when they file a complaint or grievance or after the MCO decides the First or Second Level Complaint or Grievance.

- A letter will be sent from the Department of Human Services’ Bureau of Hearings and Appeals explaining where the hearing will be held and the date and time of the hearing.
- The parent/guardian may attend the Fair Hearing or be included by phone. The Treatment Team may participate via phone and provide information as outlined above under first Level Grievance.
- The MCO will also go to the Fair Hearing to explain why they made the decision or explain what happened.
- The outcome of the Fair Hearing should be decided within 90 days from when the Pennsylvania Department of Human Services received the request. A letter will be sent after the decision is made. This letter will tell you the reason(s) for the decision.

Managed Care Organizations Member Service Information

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<thead>
<tr>
<th>MCO Name</th>
<th>MCO Website</th>
<th>MCO listed by county</th>
<th>Service Number</th>
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<tbody>
<tr>
<td>Magellan Behavioral Health (MBH)</td>
<td><a href="http://www.magellanofpa.com/">http://www.magellanofpa.com/</a></td>
<td>Bucks, Cambria, Delaware, Lehigh, Montgomery, Northampton</td>
<td>(877) 769-9784</td>
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<td>(800) 424-0485</td>
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<td>(866) 238-2312</td>
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<td>Community Behavioral Health (CBH)</td>
<td><a href="http://dbhids.org/cbh/">http://dbhids.org/cbh/</a></td>
<td>Philadelphia</td>
<td>(888) 545-2600</td>
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<tr>
<td>Community Care Behavioral Health (CCBH)</td>
<td><a href="http://www.ccbh.com/">http://www.ccbh.com/</a></td>
<td>Adams, Allegheny, Blair, Berks, Bradford, Cameron, Centre, Clarion, Clearfield, Columbus, Elk, Forest, Huntingdon, Jefferson, Juniata, McKean, Millfili, Montour, Northumberland, Potter, Schuylkill, Snyder, Sullivan, Tioga, Union, Warren, or Wayne Carbon/Monroe/Pike Chester Erie Lackawanna, Luzerne, Susquehanna, or Wyoming Lycoming or Clinton York</td>
<td>(866) 738-9849</td>
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<td>(866) 542-0299</td>
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Procedure for Approval of Therapeutic Home Visits

**PURPOSE:** Devereux Pennsylvania CIDDS respects the needs and desires of families to have their children home for visits while in treatment with us. This is, in fact, the long-range plan that all of our children return home to live with their parents after their course of treatment here. However, while families may wish to have their children home for a visit, the timing of the visit and/or the length of the visit may not always be in the best therapeutic interest of the child. Children are typically referred for RTF level of treatment because of significant behavioral and psychiatric problems at home. Parents and other family members may not have felt safe around the child and may have had difficulty knowing the best strategies to prevent or de-escalate unsafe behaviors prior to admission to our RTF.

This policy outlines our recommendations to ensure that all home visits be recognized as therapeutic home visits in which children who participate in these visits only participate if: 1) unsafe behaviors have stabilized; 2) the home environment has no known safety risks; 3) the family has learned new skills to work with their child more effectively through regular participation in family therapy; 4) the family is willing to work on therapeutic goals during the visit; and 5) the length of visit is judged to be within a time frame that does not exceed the family’s capacity to have a successful visit. This policy is not designed to be punitive to the child or family. The goal of this policy is to keep children and families safe during visits, to make sure families have the necessary skills to feel more confident and competent when their children visit, and promote successful visits that lead to a child’s discharge and return home.

**Definitions:** Treatment Teams will not recommend therapeutic home visits if any of the following conditions are met:
Unsafe Behaviors: The Treatment Team will not recommend a therapeutic home visit for a child if the child has engaged in unsafe behaviors within 48 hours of a scheduled home visit. Unsafe behaviors include any behavior requiring a physical restraint and/or significant physical aggression, significant self-injurious behavior, suicidal ideation, threat, or gesture, significant property destruction, AWOL off campus, specific threat to seriously harm someone, significant sexual incident, fire setting, and alcohol and substance use. The Treatment Team may also use their discretion to delay a home visit for other behaviors not listed which could also be considered unsafe if demonstrated during a home visit.

Unsafe Home Environment: Some of our individuals have family situations in which family visitations are restricted by court order. In these cases, we will always follow the recommendations of the court surrounding visitation. Additionally, during a child’s treatment with us, we may find that there are unsafe conditions in the home environment. Some examples of unsafe conditions would be lack of adequate supervision of the child during a home visit, illegal drug use in the home, and physical/sexual/emotional abuse of the child in the home. All Devereux Pennsylvania CIDDS staff are mandated reporters in Pennsylvania, and if child abuse is suspected, we are required and will make a report of suspected child abuse to ChildLine. Further, we may also not recommend a home visit if the individual has a history of sexually abusive behaviors, and there are former victims or other vulnerable individuals in the home.

Lack of Participation in Family Therapy: Our overarching treatment goal is stabilization of individuals and discharge back home whenever possible. To achieve this goal, we want to partner with families to develop their skills to work more effectively with their children. In order to do this, families must make a commitment to be an active participant in the treatment process. Families are expected to communicate regularly with Treatment Team members and participate in family therapy sessions at least two times per month. Without this type of active engagement and commitment, families will be ill-equipped to deal with their child during a home visit and can more than likely expect to see more of the same type of unsafe behaviors during the visit that originally led to RTF placement. The purpose of family engagement and therapy is to understand how their child is making progress and learn the skills to make the same positive changes at home. Our Treatment Teams will be unable to recommend home visits unless families demonstrate commitment to the family therapy process.

Unwillingness to Work on Therapeutic Goals During a Home Visit: Families must remember that home visits are “therapeutic home visits” and extensions of their child’s residential treatment. Each child and family will have at least one goal to work on during a home visit. Families will be asked to work on that goal and report back to the clinician on how the intervention was delivered, their child’s response during the intervention, and general behaviors and progress during the visit. Families may be asked to record specific information on a behavior record form and return it to the clinician. Working on the specified goals and progress reporting is a critical part of treatment and assists with readying a child for discharge. Unwillingness to work on goals or provide progress reports will also lead the Treatment Team to not recommend a therapeutic home visit until the family is able to engage successfully in treatment efforts.
Home Visit Exceeds the Amount of Days Recommended: Generally, when a child is ready for a home visit, the team will recommend only one or two nights. Families, however, often want to have their children home for longer periods for special events, or for convenience due to travel arrangements, or for other reasons. The team will evaluate longer requests, but may be inclined to not recommend an extended visit if the team does not feel the individual or family is therapeutically ready. Further, for our individuals who are funded through Health Choices (CBH, VBH, CBH-NP, CCBH, and Magellan), only 48 days a year are funded for home visits. If a family uses up their allotted days too quickly, the family runs the risk of being denied additional days of funding for RTF level of care. Being able to have the child out of RTF treatment and at home for an extended period sends the message that the family is now able to manage their child’s behaviors and psychiatric concerns. However, the family and child may not have completed the full course of treatment. We will not make a recommendation for therapeutic home leave for what we judge to be an excessive number days that could be detrimental to the child’s course of RTF treatment.

Home Visit Not Recommended by the Treatment Team (Against Medical Advice, AMA): If a family requests a home visit for their child and the Treatment Team feels that the child is not safe to go home, the home environment is unsafe, the family has not made progress in therapy, the family has been unwilling to work on therapeutic goals during a visit, or the number of days requested exceeds what is considered to be therapeutic, the Treatment Team will not recommend the home visit.

A family may still have their child home for the visit, but since the visit has not been approved and scheduled by the team, the visit will be considered against medical advice (AMA). Devereux Pennsylvania CIDDS will not transport children on the Philadelphia van runs or offer other transportation home if a visit is deemed AMA. If the family decides to have a child home in spite of the team’s recommendation, the family member picking up the child will need to sign an AMA form when taking the child from the campus. Refusal to sign the form will not negate the AMA determination. While this policy and procedure was developed primarily for Health Choices funded individuals, the AMA procedures outlined may be enforced for other individuals as deemed necessary.

Procedures:

1) All families will be apprised of therapeutic home visit policy and procedures at admission and as needed during the course of their child’s treatment.
2) The Treatment Team will work with each family to keep the family up to date as to their child’s readiness for therapeutic home leave. The child’s treating psychiatrist will make the final determination of readiness and parameters surrounding therapeutic home leave.
3) The clinician or family support specialist will work with the child and family to develop family therapy goals and will work with the family to establish regular family therapy sessions. Generally, the clinician will integrate family therapy sessions with on-campus visitation and day visits to assess readiness to begin overnight therapeutic home leave.
4) When a child is approved for therapeutic home leave, the clinician or family support specialist will work with the family to ensure that the family is aware of goals, objectives, and interventions for the visit.
5) Following the visit, the clinician or family support specialist will be in contact with the family to assess progress on the goal(s) during the visit.
6) If a visit is deemed AMA and the family proceeds with a visit for their child, the family member picking up the child will need to sign an AMA form when picking up the child. Refusal to sign the form will not negate the AMA determination.
Commonly Used Acronyms and Names

**Children and Youth Agencies**
- **CYF**: Children, Youth and Families
- **DHS**: Department of Human Services (Philadelphia County)
- **DYFS**: Department of Youth and Family Services (New Jersey)
- **ACS**: Administration for Children’s Services (New York)
- **WV DHHR**: West Virginia Department of Health and Human Resources (West Virginia)

**Intellectual Disabilities Agencies**
- **IDS**: Office of Intellectual Disability Services (Philadelphia County)
- **OMRDD**: Office of Mental Retardation and Developmental Disabilities (New York)
- **DDD**: Department of Developmental Disabilities (New Jersey)
- **MH/ID**: Mental Health/Intellectual Disabilities (Chester County and most other counties)

**Mental Health Agencies**
- **OBH**: Office of Behavioral Health (Philadelphia County)
- **Life Spire**: (New York)
- **MH/ID**: Mental Health/Intellectual Disabilities (Chester County & most other counties)

**Managed Care Organizations**
- **MBH**: Magellan Behavioral Health (Delaware, Montgomery and Bucks Counties)
- **CBH**: Community Behavioral Health (Philadelphia County)
- **CCBH**: Community Care Behavioral Health (Chester, York, Adams, Berks Counties)
- **VBH**: Value Behavioral Health (Erie and northern PA counties)
- **Perform Care**: (Dauphin, Cumberland, Perry, Lancaster and Lebanon Counties)
- **FFS/DPW**: Fee-for-Service/Department of Public Welfare (Non-managed care converted counties)

**Other Acronyms**
- **FSP**: Family Service Plan (DHS only)
- **ISP**: Individual Support Plan
- **IEP**: Individualized Educational Plan
- **ITA**: Inter-Agency Meeting
- **RR**: Re-Evaluation Report (educational document)
- **LKLC**: Leo Kanner Learning Center
- **IR**: Incident Report
- **MCO**: Managed Care Organization
- **LCCR**: Learning Center Conference Room (school)
- **Adm. Rm**: Admission Conference Room (school)
- **Admin. Bldg**: Administration Building Conference Room
- **TPL**: Third Party Liability (private insurance such as BC/BS, Aetna)
- **I/DD**: Intellectual and Developmental Disabilities
- **DBD**: Disruptive Behavioral Disorders
- **STAIRS**: Short-Term Autism Intensive Residential Services