

# Child Study & Treatment Center

*Making a difference in the lives of children.*

## **WELCOME TO KETRON COTTAGE**

*Providing a safe, nurturing, and collaborative environment for skill-building that supports growth and self-efficacy, improves quality of life, and increases independence for a successful future.*



Youth Program Handbook

Last updated 1/9/18

# **WELCOME TO KETRON COTTAGE**

Ketron Cottage is a 16-bed co-ed program for youth ages 12 through 15 at Child Study and Treatment Center (CSTC), the Washington State psychiatric hospital for children and adolescents. Youth at Ketron have been admitted because they have been a danger to themselves or others due to a psychiatric disorder. Often, youth on Ketron are dealing with emotional and behavioral challenges related to trauma, grief and loss, and other issues.

All our treatment and programming is research-based. This means Ketron uses strategies that have been shown to be most helpful in addressing the types of challenges Ketron youths have. Our communication and problem-solving style is collaborative and relies on **Motivational Interviewing (MI)** and **Think: Kids-Collaborative Problem-Solving**. Our treatment strategies include common elements of **Cognitive-Behavioral Therapy (CBT)**, **Trauma Focused-CBT (TF-CBT)**, **Acceptance and Commitment Therapy (ACT)**, **Aggression Replacement Training (ART)**, **Dialectical Behavioral Therapy (DBT)**, and **Recreational Therapy**. Using these strategies, we try to answer the following questions:

1. What skills have been hard for you to build?
2. What things are important to you, and how are your challenging behaviors getting in your way?
3. What are the unmet expectations/triggers right before the challenging behaviors?
4. What happens in you and the environment that makes the challenging behavior stick around?
5. How can we work together to solve the problems that arise?
6. What is most important for you to change about your behavior that will help you be successful when you leave Ketron?

We answer these questions as we interact with you in the context of our treatment milieu. A treatment milieu is a place where you live in a community of people your age and where you can learn new skills that help you succeed in life. As you become an active member of the Ketron community, you will experience opportunities to find new ways of solving problems while learning new skills. Over time, you will take pride in the changes you made within a community that benefits from your contributions. A treatment milieu assumes that its members want to succeed in improving and managing their lives and are open to learning new and effective ways of relating to others.

Of course, living in a treatment milieu, especially early on in your time here, is going to have its challenges. To live in any community safely and productively requires everyone to work together in being safe in speech and actions, respecting themselves and others, acting responsibly with a commitment to positive behavior, learning new skills, and

trying new ways of problem-solving. Every community has rules, routines, and activities that help unite its members in a safe and positive way. The treatment team is here to help you and others benefit from the treatment milieu.

A central focus of the Ketron treatment milieu is collaborative interaction between you and the people you spend time with every day. This means that all your relationships are very important. We make the following assumptions about every youth on Ketron:

1. Kids do well if they can.
2. If kids are not doing well, something is getting in the way, and we need to figure out what, so we can help.
3. Our understanding of the problem determines the solution.
4. Behind most challenging behaviors are triggers/unmet expectations and skills that need to be learned.

Full Value Contract - To make Ketron a safe and successful therapeutic milieu, all youth and staff are expected to keep the **Full Value Contract** at all times. This Contract states that we all agree to:

- Have and work on individual and group goals
- Be safe for ourselves and others
- Listen to understand other people's ideas and feelings
- Respect other people's thoughts, feelings, and efforts
- Respect our own thoughts, feelings, and efforts
- Keep commitments and give support and positive feedback
- Take safe risks (trying something that is outside of your comfort zone and is safe)

The **Full Value Contract** is the basic safety plan that makes it possible for us all to participate in activities and adventures. Once you know the **Full Value Contract** you will be asked to agree to keep it to participate in most activities at CSTC and in the community.

Ketron's mission and vision are grounded in 10 values:

1. Collaboration (partnership)
2. Safety (towards yourself and other people)
3. Respect (for yourself and other people)
4. Contribution (adding value to other people's lives)
5. Participation (being a driver of your treatment)
6. Significance (importance in own eyes and eyes of others, creating identity)
7. Achievement (overcoming obstacles)
8. Connection (relationships, belonging)
9. Independence (freedom to think/act freely)
10. Growth (striving to learn about yourself, other people, and the world)

**Your Rights and Responsibilities.** You have both rights and responsibilities you are here. You are given a copy of these rights when you are admitted. You have a responsibility to treat hospital Counselors in a respectful way, which is in line with the hospital's responsibility to keep a respectful and kind relationship with you and the important adults in your life. Shared respect supports communication and teamwork in a way that makes the hospital safer, more helpful, and better overall. Your responsibilities include giving information, asking questions, treating others with respect, and following all instructions and rules. Your responsibilities also include being actively and meaningfully involved in your treatment.

## **WHO'S WHO ON KETRON COTTAGE**

**Attending Child Psychiatrist – Mick Storck, MD (253.756.2397)** is a medical doctor. Dr. Storck (“Storcky”) is the member of your treatment team who will work with you to understand your problems, manage your medication, and collaborate with you and other people on your team to develop a treatment plan to help you meet your goals. He might also work with you as your individual or family therapist.

**Program Director – Michelle Giresi, PhD, MLS, (253.761.7514)** is a clinical and forensic psychologist. Dr. Michelle oversees the overall leadership and direction of the therapeutic milieu. She works closely with you, Dr. Storck and the other members of your treatment team to develop your treatment plan to help you meet your goals. She might also work with you as your individual, family, and/or group therapist.

**Psychiatric Social Worker – Ilys Hernandez, MSW, LICSW, (253.756.2539)** is the member of your treatment team who will manage your admission, mail, progress update meetings, and discharge plan with you and the rest of your treatment team. She schedules Treatment Plan Review meetings and works to ensure that you remain connected with your family and community supports.

**Cottage Supervisor – Angel Beckford, PCCC3, (253.756.2391)** is the member of your treatment team who coordinates staffing and works closely with Dr. Michelle to make sure the cottage runs smoothly. She also makes sure your concerns are addressed when a grievance is filed.

**Shift Charges/Leads, PCCC2s – Lauren Stuck (days) and Adaje Ellison (evenings), (253.756.2381)** are members of your treatment team who make staffing assignments for each shift and help make sure treatment plans are being followed. Also, when necessary, they will help you suggest or file a grievance

**Psychiatric Child Care Counselors, PCCCs** – PCCCs are members of your treatment team that help you every day to reach your treatment goals. They coach you when you are having a hard time coping on your own. They also help you practice the skillful behavior you are learning during treatment. **Primary Counselors** (“Primaries”) are certain PCCCs that are assigned to you based on the pod you live in. You will have a different Primary on day shift and swing shift. Your Primaries work closely with you, your family, and other members of your treatment team. They also work with you to create your Safety Plan, decrease unhelpful behaviors, and learn more skillful behaviors. One of your Primaries will have weekly contact with your guardian to discuss your progress. Your dayshift Primary will attend school with you but may not be in your classroom.

*My Primary Counselor for Day Shift is \_\_\_\_\_.*

*My Primary Counselor for Swing Shift is \_\_\_\_\_.*

**Nurses** – **Kim Stevenson, RN (day); Emily Ward, RN (swing); and Chris Miranda, RN (night) (253.756.2381)** are members of your treatment team who give out medications, set-up and take you to medical appointments, give the flu shot and immunizations, provide basic first aid or medical assessments, take your monthly vital signs, and answer any questions you might have about your health or medications.

**Family Therapist** – **Edwin Morris, PhD (253.756.2883)** is a member of the treatment team who may work with you for individual and/or family therapy.

**Recreation Therapist** – **Carrie Chavez, CTRS (253.756.2550)** works with other recreation therapists on campus and is the member of your treatment team who works with you to develop a wide range of healthy and enjoyable leisure activities while you are at Ketron.

**Senior Secretary** – **(253.756.2381)** helps track things such as cottage schedules and staffing.

**Housekeeper** – **Kenneth Gadd** is the Ketron Custodian. He works with everyone to make sure the cottage is clean, safe, and well-maintained.

**Cooks** – **Mary, Derek, Peggy, and Rose** are the Ketron Cooks. They work hard to prepare nutritious meals, help with special diets, prepare baked goods, and make birthday desserts and other special occasion meals.

**Other members of the treatment team** – CSTC is a training hospital. This means that you will likely work with practicum students, interns, and psychiatry residents who are supervised by Dr. Storck and Dr. Michelle and may conduct individual, family, and/or therapy groups on Ketron.

## **IF YOU HAVE CONCERNS ABOUT YOUR CARE...**

CSTC is fully accredited by The Joint Commission. The Joint Commission accreditation forms the foundation of our policies and procedures and has established us as a safe, stable, clinical environment.

If you have concerns about your care, CSTC has the following ways for you to give input on your care:

- Community Meeting (weekly)
- Suggestion Box: (always available) outside of Dr. Michelle's office door
- Grievance Box: (always available) in milieu by phone, goes to Rick Mehlman, PhD, CEO
- Office hours with Dr. Michelle (sign-up sheet usually posted weekly)
- Individual contacts with your Nurse, Primary Counselors and Dr. Storck

If you do not feel your concern can be dealt with through your Nurse, Primary Counselor, or Dr. Storck you may file a grievance. Dr. Mehlman will read the grievance and ask Angel and/or Dr. Michelle to meet with you and attempt to solve it within three working days. If that solution is not acceptable to you, you may appeal to Dr. Mehlman who will attempt to solve it within five working days.

**Patient Advocacy Support Services are also available. You may also contact The Joint Commission (\*603), Disability Rights - Washington (DR-W; \*600), Child Protective Services (\*601), or Dr. Mehlman (\*602) if you have concerns about your care.**

These services can be accessed by first dialing a star (\*) followed by the three digit number corresponding to the service you wish to contact on the cottage day hall phone. All these calls are confidential. You have access to this phone outside school hours if you are safe.

# **WHAT TO EXPECT WHEN YOU GET HERE**

**Your first day** – When you first arrive here (intake), you will meet with a few members of your treatment team. You will meet a staff from the Medical Records department who will have you read and sign documents that have to do with your hospitalization. The person will also take a picture of you for your chart. After this, you will meet with Dr. Storck for a Psychiatric Intake and physical. You will then meet with Ilys for a Social Work Intake. This is the time for us to get to know your story in your words and for you to get to know us. On your first day, you will meet your Primaries and begin to learn about and participate in activities that make up the Ketron Program. These activities include school, therapy groups, recreation therapy groups, and other milieu activities (a weekly schedule can be found on the last page of this handbook). You can also expect other laboratory work, a dental check-up, PPD test, vital signs, hearing and vision screenings, and other medical work-ups as needed.

**Treatment planning** – At the time of admission, you will create a list of behaviors that have been unhelpful to you and have been getting in the way of your goals. This information will form your initial Treatment Plan and give you an idea of what you will work on while you are at Ketron. We will discuss your progress with you, your parent(s)/guardian(s), and your community team at Treatment Plan Reviews (TPRs), which are held at 14 days, 30 days, 60 days, and every 60 days after that until you discharge.

**What to bring and what not to bring** – You will have your own room and small space to store your personal belongings. We ask that you think carefully about your clothing choices because we want to make sure all youth stay safe and wear clothing that is respectful. Please only bring enough seasonal clothing for about one week. All strings and cords must be removed before they are brought to Ketron. You may also bring a few bedding items that are cord/string free. Sneakers/shoes should be the slip-on type or have shoelaces removed. We have safety laces we will give you to replace them. You may bring a CD player and an MP3/iPod since we do not provide these items. You **can** have a cordless, rechargeable, electric shaver purchased for you by your parent(s)/guardian(s).

***Information about personal MP3s and iPods:*** MP3s/iPods are permitted on Ketron as long as they are not capable of wireless communication or recording, do not include a camera. **Parent(s)/guardian(s) will be responsible for downloading music and monitoring song content.** Ketron staff cannot download music onto your MP3/iPod for you. These devices may only be listened

to in the pods or in your room, and cannot be used during treatment programming such as groups or recreational therapy activities. You may not borrow or trade these devices with other youth. You may not bring your MP3/ipod to school unless you are eligible to do so on Fridays. **You can lose the privilege of using your MP3/iPod at the treatment team's discretion, ☹ so please use your MP3/iPod appropriately. ☺**

**Information about burned CDs:** Burned CDs must be reviewed by Dr. Michelle before they can be used on Ketron. The burned CDs cannot contain "parental advisory" songs or albums. The treatment team will not burn CDs for you. You may not burn your own CDs at school or on cottage.

The contraband list below lists **all the items you are not allowed** to have while you are at CSTC for any reason. The Ketron treatment team will never give special permission for you to have these items. Campus-wide contraband items include:

Alcohol, tobacco products, cannabis products and/or illegal drugs	Matches and lighters
Aluminum cans	Metal (such as three ring binders, toys, containers, bobby pins, safety pins, studded clothing, tools, staples, etc.)
Lithium batteries	Super tight or sheer clothing (leggings, running tights can only be worn with a longer, looser shirt)
Belts, drawstrings, shoelaces, and other tie-like items (we will provide safety laces)	Dangling earrings and high heels
Cameras, tablets, cell phones	Over the counter supplements and any medications not prescribed at CSTC
Money (must be handled through business office)	Permanent markers and paint
Rated R movies; Rated M games; Parental advisory CDs	Cords over 12 inches (unless zip-tied)
Clothes iron	Pornography; sexually suggestive materials
Explicit or offensive clothing	Q-Tips and plastic bath loofah poofs
Glass of ANY kind	Disposable razors and sharps
Lamps	Unapproved contact information
Magnets	More than 4 electronic games (value not to exceed 50.00 each)
Gaming (e.g., PSP, Xbox, Wii) and DVD players	Another patient's clothing/belongings
Media devices with internet capability	Dental floss, pencil sharpeners
Weapons or anything designed as a weapon	
Hair dye/hair bleach	

Please note: Other items not on this list may be considered contraband at any time depending on how the items are being used.

In addition to the list above, caffeine is not permitted on Ketron. **We also recommend that you do not bring any individual item that costs more than 50 dollars or has**



**high personal value (including clothing)** since we cannot guarantee against lost or breakage.

**How we handle your belongings** – When you first get here, your Primary will go through your things with you. Your Primary will also go through your things whenever you bring new items back to the cottage. Your Primary will document your possessions for the record. If you bring items to cottage that are not allowed, you will be asked to return those items home or send them home with your parent(s)/guardian(s). Items that are not returned home will be stored in Dr. Michelle's office or the basement until they can be returned home or to your placement.

***Blue bins.*** Only a few items can be stored in your "blue bin". This is a medium-size container that is in a storage closet on cottage. Contraband items cannot be stored in your blue bin. Some items that may be stored in your blue bin include board games and art supplies.

***Money.*** When you have any amount of money, it is deposited into an individual account with the Business Office. It cannot be kept on you or in your room. You may want to withdraw money for certain outings. This will be allowed at the team's discretion (with your parent(s)/guardian(s) input). You may withdraw money from the Business Office by signing a slip, which is cosigned by Ilys or Dr. Michelle. Please ask for your money three days before the outing.

***Personals.*** You may bring a small supply of nonperishable food and candy items you enjoy and have them replenished by your parent(s)/guardian(s) as needed. You may have your personals on **certain days of the week only**. They are stored in a locked cabinet until you can have them. Because your health is important, you must eat at least half of your vegetables at each meal to be eligible for personals. If you refuse meals, you will not be allowed to have personals, which is not very fun. ☹️ You can also lose the personals if you behave inappropriately at meal time. ☹️ ☹️ ☹️

***Room searches.*** Sometimes, your room or the entire cottage will need to be searched for contraband for the safety of all youth who live here and adults who work here. A doctor's order is required every time this is done. **If possible, you will be present during the room search.** You will always be informed about any contraband items that are found in your room. Counselors will make every effort to be careful and respectful of your belongings as they search. You can show that you are taking responsibility for contraband items by handing in these

items on your own. This shows that you are committed to your own safety and other people's safety. 😊

**Cottage routine** – The Ketron schedule is highly structured with school, group meetings, individual therapy, family therapy, therapy groups, recreation activities, and chores. We welcome your safe participation in everything available for you to do during your stay here. The more positive experiences you have, the more you will learn and the more opportunities you will have as you progress in the program. You will also have some free time where you are able to pick the activity you would like to participate in, either alone or with others. You must have an activity if you are going to be in the milieu and these will usually be non-media activities. The treatment team is around to help you figure out a non-media activity if you are having trouble finding one on your own.

Some non-media activities I could do with others are:

1.

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2.

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3.

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Some non-media activities I could do alone are:

1.

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2.

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3.

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**Hygiene.** It is also important while you are here to take care of your own personal hygiene (taking showers, brushing your teeth, etc.) and help with basic community living activities (clean room, washing your laundry, picking up after yourself). The treatment team will help you keep track of how often you meet goals and expectations related to self-care and room-care. There will be routine room checks to make sure you are keeping your room clean.

Note: Hair straighteners, blow dryers, and hygiene products must be kept in the hygiene closet or your blue bin and may not be kept in your room.

**Meal times.** This is a time where you practice important social skills, including manners, using an inside voice, waiting your turn, and having positive peer and staff interactions. If you are having trouble, the treatment team will help you learn these skills. Dining room expectations are posted in the dining room.

**School.** During the school year and most of the summer, all youth on Ketron attend school. Most Ketron youth attend Firwood Secondary School on Campus. Firwood is part of the Clover Park School District. When you leave CSTC your school record will show that you attended school in the Clover Park School District. It will not show that you were at CSTC. All Ketron students attend school unless they are physically ill *and* have a nurse or doctor excuse them.

**Groups.** You will learn many skills from therapy groups. Most groups are after school in the afternoon and evenings, and sometimes on weekends. Occasionally, there are groups before school in the morning. Groups help you learn more skills, so you have lots of coping tools on your tool belt. You will be involved in groups each week. See weekly schedule for more details.

**More about PREP.** PREP: Making Proud Choices is an HIV prevention curriculum emphasizing safer sex, including information about abstinence and condoms. PREP meets for eight sessions and each session lasts 60 minutes. Activities build skills to delay initiating sex and to communicate with partners. The treatment team obtains parental/guardian permission before allowing you to take part in this curriculum.

**Recreation.** Each week there are Recreation Therapy (RT) and Recreation Participation (RP) opportunities. The monthly schedule is posted in the day hall and is updated each month. RT and RP are different. All youth are expected to attend RT (unless you are medically excused by the nurse or are immediately unsafe). If you refuse RT or are unsafe, your eligibility for evening privileges may be limited. In addition, you may not be able to participate in RP or go on RP outings. Examples of recreational outings include going to the YMCA, arcade, local parks, fun food places, public libraries, go-karting, the zoo, and more. Recreational incentive outings include rock climbing, snowboarding, camping, backpacking, museums, and more. Expectations for outings are posted in the day hall.

**Outside.** On Ketron, you can go outside when the treatment team is taking youth outside as long as meet outside expectations. These expectations are posted in the day hall.

**Store.** Ketron maintains an incentive store for you to purchase items with Ketron Bucks you earn throughout the week for helpful and safe behaviors. Youth who meet store expectations can go to store on Mondays. Expectations are posted in the day hall.

**Bedtimes.** Bedtimes are 9:00 PM on school nights and 9:30 PM on weekends and holidays, unless your Phase of Treatment allows you to stay up later. However, if you are having difficulty at bedtime or with waking up in the morning, you will have an earlier bedtime, no matter the day of the week.

# **DAILY EXPECTATIONS**

## **OUR GENERAL RULES, ROUTINES, AND ACTIVITIES**

### **Take care of your hygiene**

You are expected to bathe, take care of your hair, brush your teeth, and change your clothes at least once a day.

### **Help keep your living environment clean**

Since you share the same living environment with others, everyone is expected to help keep the cottage and their rooms clean. We have assigned days for chores and laundry, as well as a weekly deep clean. Food and drink (other than water or tea) are never allowed in your room because we do not want any visitors finding their way into our living space. 🦋 You are expected to participate in maintaining the cottage and your room.

### **Attend and participate in groups and activities**

You are expected to attend all groups and activities unless indicated by your treatment plan.

### **Attend school**

You are expected to attend and participate in school activities so that you can stay up-to-date academically and learn new skills while you are there. School is in session year-round at CSTC.

### **Participate in individual and family therapy sessions**

Lots of people try running away from their problems, denying that they exist, and avoiding them by using things such as self-harm or drugs. This makes problems stick around longer or even get worse. Individual and family therapy help you face your problems, with support, and figure out how to deal with them. You are expected to partner with therapists by attending individual and family therapy.

### **Participate in your treatment**

You are expected to take an active role in identifying unhelpful behaviors and treatment goals. This is your treatment and you will only get the benefits from treatment if you actively participate.

### **Respect personal and community boundaries**

Everyone has a right to their own personal space, both emotionally and physically. You are expected to use appropriate language to make other people feel comfortable. You are also expected to respect the personal space of others and expect that others will respect yours. For safety reasons, youth are NEVER allowed in each other's rooms.

### **Use good communication skills during conflicts and ask for help when you need to**

Learning and using conflict resolution skills, healthy and respectful communication skills, and accepting support will make a huge difference in your life. Most youth who come to Ketron have difficulties in this area and they find that partnering with the treatment team helps them develop these skills. The treatment team is here to help!

*Which of any of these areas above do you need help or support with?*

# PHASES OF TREATMENT

The treatment team will work with you to create a treatment program that addresses your needs and helps you meet the goals you have set for yourself. In addition, you will be tracking your progress using the Phases of Treatment program. The purpose of the Phases program is to give you a sense of how you are progressing on your treatment goals and where to focus your attention. Some privileges are linked to the Phase of Treatment. The Phases of Treatment are described more below.

## Relationship-Building

You will begin on this phase of treatment when you are admitted to Ketron Cottage and will remain on this phase for at least two weeks. Youth on this phase of treatment are focusing on learning the program and following rules, building commitment to treatment, identifying target behaviors to work on, and building relationships with peers and members of the treatment team. At this phase of treatment, you will partner with the treatment team to complete several tasks, so you can move forward in treatment:

1. Lagging skills assessment – Everyone has strengths and areas where they need more skills. This assessment will be conducted by the treatment team based on your referral information and how you are settling into the milieu. The assessment will be shared with you.
2. Review Program Handbook – You will have a meeting with each of your Primaries, so you get to know each other, review the Program Handbook, and talk about the expectations for each shift.
3. Individual Goals Worksheet – This worksheet will help you figure out *at least two* unhelpful behaviors to work on. This means you will be able to describe two unhelpful behaviors that are getting in the way of your goals. Your Primary counselors will be able to help you with this if you are having trouble.
4. Complete Safety Plans – You will complete two Safety Plans with your Primaries, one for school and one for cottage. You will be able to figure out what acts as a “trigger” for you, how you can cope with strong feelings, and what other people can do to help you when you have strong feelings.
5. Complete a Behavior Chain Analysis (BCA, see page 21) – In this Phase, it is a good idea to become familiar with forms we use to help you understand how your thoughts, feelings, and bodily sensations play a role in your behavior.
6. Meet with school and attend daily – You will have a meeting with people at school a day or two after your admission. After this meeting, you are expected to attend school on-time every day.
7. Attend at least two skills-building therapy groups – There will be a lot to learn and get used to when you first get to Ketron. You may not feel quite ready to attend

every group. However, over time, and so you can move to another Phase, you will want to attend all therapy groups since they will teach you skills for managing tough situations and strong feelings.

8. Meet your individual and, if it applies, your family therapist – These individuals will be matched to you as early in treatment as possible. They will help you work through tough issues, learn and practice new skills, and help you meet your goals.

### **Ownership**

Youth at this phase of treatment are working on staying safe. They may not feel motivated to participate in treatment and change thoughts, feelings, or behaviors. They may believe that their thoughts, feelings or behaviors are not causing them any problems, or they may feel stuck and unsure about what to do about their thoughts, feelings, or behaviors. **Safety and increasing motivation** is the top priority at this phase of treatment. Your efforts and attitude toward treatment determine how long you are in this phase. When you are working hard on safety and showing that you are committed to treatment, you are ready to complete the tasks below, so you can move forward in treatment:

1. Attend groups – Groups on Ketron help you learn skills to deal with strong feelings, manage unhelpful thoughts, and be in social situations. Your attendance and participation in these groups shows that you are committed to improving your life. You will show you are motivated for treatment when you participate in a helpful and serious way.
2. Attend school daily – You may have a modified school plan, so you can focus on safety and success. The treatment team will partner with you to develop a safety plan for school.
3. Update Individual Goals Worksheet – After you have spent time practicing new skills in different situations, you might want to update your treatment goals, so you continue moving forward in treatment.
4. Complete BCA for all problematic behaviors – This means that you will partner with the treatment team to identify unsafe behaviors that get in your way and try to figure out what drives them, what keeps them around, and how to repair any damage that the behaviors have caused to other people and the environment.
5. Review and update Safety Plan – Your Safety Plan will be reviewed with you to make sure that your plan is working for you.
6. Participate in individual, family and group therapies – These therapies will teach you skills to manage your thoughts, feelings, and bodily sensations so you can successfully meet your goals.

7. Participate in Treatment Plan Reviews (TPRs) – These meetings discuss your treatment progress and discharge expectations. You will be able to share what goals you are working on and how you are working toward those goals.

### **Active Participation**

Youth at this phase of treatment have a positive attitude towards treatment, recognize target behaviors they need to change, and work with the treatment team to figure out how to fine tune their treatment so that they are working towards the goals and values they care about. Youth at this phase are also continuing to learn how to resolve conflicts, disputes, and disagreements in a collaborative way that addresses everyone's concerns. Youth in **Active Participation** are tracking their own progress towards their goals to see if they are ready to create a new goal. You can request a print out of your progress from Dr. Michelle. When you are meeting your goals 80% of the time, you are ready to create a new goal to work on. 😊

The focus in this phase is on how motivated you are to learn about yourself, learn new skills for coping with strong and unpleasant feelings, and practicing these new skills during everyday challenges. You can show you are motivated in the following ways:

1. Be open and willing to look at the link between internal/external triggers and unhelpful and challenging behaviors.
2. Partner with the treatment team to solve problems.
3. Be open and positive about learning new skills.
4. Try new skills you learn to manage unhelpful thoughts and strong feelings.

The goal is for you to have a good understanding of the goals you are trying to reach, what gets in the way of you reaching your goals, and how you deal with life challenges. At this phase of treatment, you will partner with the treatment team to complete several tasks, so you can move forward:

1. Actively practice new coping skills and working on staying safe in difficult situations continues – In Active Participation, you will be learning a lot about yourself and how to plan for challenging situations.
2. Attend all therapy groups and participate meaningfully – This means you are doing more than just being in group. It means you are thinking about the group topic and being part of the discussion in a helpful way, for yourself and others.
3. Attend school daily, on-time, and complete all work – This means following your school plan and doing your best each day. The treatment team and your teachers are there to help you if you are having a hard time.
4. Review and modify Safety Plan – New situations come up all the time. Reviewing and changing your Safety Plan with these new situations in mind will help you make sure your plan is working for you.

5. Request problem-solving meetings as needed – Since new situations come up all the time, you will be faced with new challenges and problems to solve. You will have already seen how good it feels to participate in these meetings and be successful. You can request meetings with Dr. Michelle and other members of the treatment team, as needed, to figure out how to solve problems.
6. Participate in individual therapy – Your individual therapist can help you learn skills and make a safety plan. It is important that you attend individual therapy consistently, so you can talk about what you are having difficulty with, figure out which skills are or are not working so well, and make a plan to practice new skills so you can safely reach your goals.
7. Participate in family therapy – If you have family therapy, it is important that you participate in these sessions to practice your new skills with your family, repair relationships, and plan for passes.
8. Participate in Treatment Plan Reviews (TPRs) - These meetings discuss your treatment progress and discharge expectations. You will be able to share what goals you are working on and how you are working toward those goals.

## **Independence**

Youth at this phase of treatment are working hard and have been successful at staying safe and finding new, more skillful ways to manage strong and/or unpleasant feelings. It is expected that at this phase of treatment you are **using your skills more independently** and are relying on adults and other people only when you need it. The following tasks need to be continued at this phase:

1. Actively practicing new coping skills and staying safe in difficult situations continues.
2. Ongoing commitment to therapy – As you learn more about yourself and have more success when you face of challenges, you will feel more confident. People you care about will trust you more, and you will trust yourself and your ability to handle challenges. Independence feels so good!
3. Increasing your understanding about yourself and how to be safe with others – This includes your lagging skills, internal and external triggers, and how your thoughts feelings and behaviors are connected. You will also have a plan for how to cope with unhelpful thoughts, strong feelings, and bodily sensations.
4. Seeking out opportunities to have a positive impact on your own life and other people's lives – When you are able to be more independent, you can shift your focus to helping other people feel good and be successful. This includes:



- a. Leading or co-leading a group activity.
- b. Mentoring peers to help them complete the tasks of their Phase of Treatment, problem-solve successfully, complete daily expectations, and practice safe coping skills.

**Refocus and Repair (R & R)** – You will always run into challenges in life. The more skills you learn, the more tools you will have in your tool belt to face life challenges and be successful. It is still possible something unsafe or unhelpful will happen after a period of success. When you are in any Phase and you engage in behaviors that are unsafe or repeatedly unhelpful, the treatment team will recommend that you be on **R & R** status. If you are on **R & R** status, you will have an opportunity to look at your unhelpful or unsafe behavior and figure out how to prevent it from happening in the future. You will also have to repair the damages your behavior caused. Damages can be to property and/or relationships.

**Unsafe behavior that will result in R & R status** – noncompliance with clear the floor/Emergency Quiet Time (EQT) directives, threats, sexualized comments and behaviors, racial comments, physical fights with peers, aggressive behavior towards staff, posturing, walk-outs from the school building, and running away.

When you are on R & R, you can repair in the following ways:

- a. Complete all tasks assigned to you by the treatment team.
- b. Review BCA and worksheets with Primary and make changes as needed.
- c. Update your Safety Plan and Individual Goals to include what you learned from the chain analysis and worksheets.
- d. Complete repairs (these would be more substantial repairs than usual). Information about repairs can be found on pages 21 and 22 of this handbook.
- e. Have primary sign off on completion of repairs.
- f. Have Dr. Michelle approve removal of R & R status.

## **PHASE PRIVILEGES**

Ketron mostly focuses on helping you figure out internal motivators for changing unhelpful patterns of thinking and behavior. Internal motivators include your values, who you want to be, and your goals. We also provide external motivators like privileges to help you keep working hard in treatment. Privileges are chosen with the idea that they motivate you to progress through treatment and actively work towards discharge.

### **Relationship Building**

Ketron Store

On-cottage activities

Outside time is limited and requires a doctor's order

### **Ownership**

All privileges of Relationship Building

Outside 30 minutes

Off-cottage activities

One group outing per month

15 minutes of media daily

### **Active Participation**

All privileges of Ownership

Borrow cottage radio 15 minutes a shift

Outside 45 minutes

Off-campus group outings

30 minutes of media daily

Hot cocoa at bedtime

### **Independence**

All privileges of Active Participation

Library/TV room/shower during transitions

Bed time 9:30pm 10:00pm on weekends

1:1 outings

2 extra days of personals

1 hour of media daily (per shift on weekends)

### **Refocus and Repair**

All privileges suspended

## **COLLABORATIVE PROBLEM SOLVING**

Ketron uses an individual problem-solving approach that is collaborative and promotes relationships. Most importantly, this approach teaches youth valuable problem-solving skills that they can use at home and in the community. These are the steps to collaborative problem solving:

1. First, a member of the treatment team will try to figure out and understand YOUR concern about a given issue and reassure you that the issue will not be resolved by forcing adult's demands on you.
2. Second, a member of the treatment team will try to figure out her/his OWN view on the same issue or problem.
3. Third, you will be invited to brainstorm possible solutions that takes into consideration BOTH your concerns and the adult's concerns and is realistic.

## **KEEPING SAFE**

**Recovery** – The treatment team likes to focus on recovery, especially if the unhelpful behavior is isolated. Recovery means that you can still maintain your phase of treatment even if you make a mistake if you take responsibility for your behavior and complete the tasks assigned in your phase of treatment. But, this does not apply to all behaviors. For example, if your behavior seriously jeopardizes the safety of other people (such as hitting another person), then you will need to spend time on R & R focusing on safety, ownership, and repairing.

**Restrictions** – At any point the treatment team may make item restrictions if you are using an item inappropriately. For example, if you throw your shoe at someone, you will lose your shoes for a period. Other restrictions might include:

1. *Milieu restriction* – This is when a youth is restricted for a specific period from the normal milieu programming. Something called a “30/30” is an example where you spend time between your room and pod, or between your pod and the milieu, and are unable to join others in the milieu. We usually use this restriction if you are having a problem getting along with other people.

Time spent away from the milieu is a good opportunity for youth to reflect on what challenging behaviors excluded them from being around peers, think

about why the behavior is not appropriate/helpful/safe, and plans how they will to rejoin the milieu.

2. *Special statuses* – The treatment team might need to keep a closer eye on a youth for safety reasons. When this is needed, the youth will be on a special status that helps the treatment communicate that the youth needs more support with strong feelings and urges to escape unpleasant feelings. For example, if a youth is placed on “Run Risk,” s/he will not be allowed outside for a period and may only wear slippers to walk to and from school. This is to help decrease the likelihood a youth will act on the urge to run so the treatment team can provide the type of support that will help the youth reach her/his treatment goals.

**Resets** – The treatment team might ask you to do “resets” by spending time in your room or pod. You may also ask for a reset. This is the preferred approach if the milieu gets too loud or too silly. Practicing resets gives you a chance to learn how to cope by walking away from overwhelming situations, taking a break before problem-solving, and keeping the cottage safe. The treatment team can direct you to complete a reset at any time.

**Time-outs** – The treatment team might also ask you to take a time-out in your room or other area, which is called a Staff Directed Time-Out. There are areas at school for time-outs as well. It is preferred if you ask for a time-out on your own, which is called a personal time-out, or PTO. The purpose of a time-out is to alert yourself and others that you need to calm yourself and prepare to safely get back into activities. Accepting and requesting time-outs shows that you recognize that a behavior is becoming problematic and are committed to working on your unhelpful behaviors. This usually helps you stay safe and still work towards your treatment goals. The treatment team will talk to you after a time out to help you get back on track.

**Physically Directing** – The treatment team may physically guide you or redirect you to a different location without the use of physical restraint. When this happens, a youth is not physically resisting the guidance.

**Seclusions/restraints** – The treatment team is committed to helping you express yourself in ways that are safe and help you get your needs met. However, at times, it may be necessary physically intervene to help you or other youth be safe around others. The use of seclusion (being in the quiet room with the door locked) or restraints (safely placing hands-on you to protect you from hurting yourself or others) is used only when every other safety strategy has failed.

Anytime you are placed in locked seclusion, a doctor's order is required authorizing you to be kept there until you are safe to join the community again. After seclusion, you will help you restore your trust level in the community by contracting with the treatment team, problem-solving to make the same behavior less likely to happen again, making restitution, and/or completing community service.

**Other restrictive orders** – The treatment team may search you and/or wand you, and/or search your room to help keep you safe. These searches require a doctor's order and are not taken lightly. You may be wanded and searched after outings and TLs/passes, as well as if you make threats of or attempt self-harm.

## **NATURAL AND LOGICAL CONSEQUENCES**

Ketron uses natural and logical consequences to help youth in developing more helpful behaviors. Natural consequences are experiences that naturally follow a choice or behavior. For example, going outside during the winter without a jacket naturally results in feeling cold. Logical consequences are created by adults to help youth make better choices in the future. For example, at Ketron riding your bike outside without a helmet has two consequences, the natural consequence of possibly falling and getting hurt and the logical consequence of you not being able to ride your bike for 48 hours. In the example above, the youth misused the bike by riding it without a helmet which violates CSTC rules; therefore, access to the bike was restricted for a period of time. Natural and logical consequences are a part of life and are used to help you make better choices.

## **TASKS YOU WILL BE ASKED TO DO**

**Behavior Chain Analysis(BCA)** – A BCA will be necessary when you show unhelpful and/or unsafe behaviors. The purpose of a BCA is to help you:

- Notice and describe the links of the chain
- Notice cues for your own anger sooner
- Figure out things you can do instead of engaging in unhelpful behaviors
- Figure out things we can do to better help you
- Learn from your difficult times as well as from your successes

On Ketron, learning is tailored to you. Safety and relationship repair tasks will be figured out with you to match your abilities, behavior, and emotional needs. The tasks you are

asked to complete are meant to help you learn to cool off, think about what you did, and learn from the situation so you can make better decisions for better outcomes in the future. These tasks also give you the chance to make your relationship with others better.

Learning, safety, and relationship repair tasks will be different for every youth and for every situation. In general, though, they will be similar. The main purpose of these tasks will be to take an upsetting situation and learn how to have things go better in the future. Also, these tasks help to remind us of our responsibility for our own actions and how our actions can affect others.

**Examples of possible tasks** – Depending on behavior, attitude, phase in treatment, level of ability, and understanding you may have to complete one or more tasks that have to do with safety, learning, relationship repair, and other areas. For example, a **safety tasks** could include:

- ◆ Waiting in your room until you are ready to begin your learning tasks in a neutral or better manner
- ◆ Spending a specified period in your room.
- ◆ Not be allowed in the same area as another youth who was involved in the same incident with you.
- ◆ Spending a specified amount of time in your room and then the pod, but not the milieu, for a specific period.

**Learning tasks** could include:

- ◆ Cleaning up a mess you made while also cleaning up other areas of the cottage
- ◆ Writing a story about a youth who was rude to a peer, telling how the peer felt and thought
- ◆ Completing a BCA and figuring out what led to the unhelpful behavior and how you can manage your thoughts and feelings better
- ◆ Talking with an adult about other ways you could have seen a situation or how you could have done something different
- ◆ Writing an apology letter or essay, or create an art project that has to do with what happened and shows how you will try to prevent the behavior in the future
- ◆ Partnering with a staff to figure out how to solve the problem

**Relationship repair tasks** could include:

- ◆ Talking to the person you are having conflict with and figuring out how to get along better
- ◆ Writing a letter and reading it in front of the Cottage where you apologize for your behavior which kept others from participating in an activity
- ◆ Painting a picture as a gift for a peer to whom you were rude

- ◆ Identify ten (or more) positive and honest statements you could make toward a peer to whom you made hurtful statements
- ◆ Play a table game or participate in another cooperative activity for 30-60 minutes with the person you were upset toward
- ◆ Use money from your account to make payments to cover the cost of something you damaged or destroyed
- ◆ Some other task designed to remind you of what you have done, how others probably feel about it, and to help you make it better or soften the harm done

The purpose of all these tasks is to help you learn from your behavior, stay on track to meet your goals, line up your behavior with your values, and repair trust in the community.

## **COMMUNITY SERVICE**

You may also be asked to complete Community Service. Community Service is used on Ketron to encourage personal responsibility. Youth receive community service for various behaviors including property destruction, causing injury to others and disrupting the milieu. Community Service hours are determined using the following method:

- 1) Property damage = the cost of the damaged property, including labor
- 2) Injury to staff or peer = the medical costs associated with the injury
- 3) Disrupting the environment = time spent taken away from others in the environment

The total cost of the first two behaviors listed above (1 and 2) is divided by a fair wage, currently \$12 per hour and that accounts for the number of hours of community service assigned. For example, if a youth breaks their bedroom door which subsequently needs to be replaced community service would be calculated in the following manner:

Cost of door = \$1000

Cost of labor to replace door = 1 hour billed at \$40 per hour

Total cost of damages = \$1040

Community Service calculation =  $\$1040/\$12$

Community Service assigned to youth = 86 hours

Community Service for disrupting the milieu is calculated slightly differently to take into consideration the number of individuals affected by a behavior. For example, if a youth is in the milieu threatening and posturing, staff will need to have all other youth clear the area and go to their rooms to keep them safe. Community Service in this situation would be calculated by looking at the amount of time everyone in the environment was affected by the youth's behavior:

Amount of time peers spent in their room: 15 minutes  
Number of peers affected: 6  
Community Service calculation: 15 minutes X 6  
Community Service assigned to youth = 90 minutes

Community Service tasks are individualized and generally make the environment more pleasant for the youth residing at Ketron. Activities may include decorating or cleaning the environment, showing group leadership, helping with cottage activities, helping peers make progress on their treatment goals, or making reasonable suggestions to improve the cottage program.

Time is credited minute for minute, which means that if you lead a 45 minute group you will earn credit for 45 minutes of Community Service. The purpose of completing these tasks is to help youth understand the damage caused to their environment and how to make the environment in a meaningful way. Additionally, this helps youth develop a better understanding of the relationship between actions and outcomes.

Youth who are assigned Community Service will work with their Primaries or a member of the treatment team to figure out an individualized plan (which will appear on your daily sheet) to complete their service. The individual plan will say how youth will complete Community Service hours to make sure that the activity is related to the behavior that resulted in the assigned hours. For example, if a youth receives Community Service hours for ripping down artwork they would be encouraged to make something to replace the missing art. The plan will also specify how much community service needs to be completed per shift prior to a youth being able to access privileges. Staff will document Community Service completed per shift on your daily sheet.

**ANNNNNND YOU'RE ALMOST DONE!!!!!!!!!!!!!!!**

Phew! You made it through the Handbook! The treatment team is ready to answer any questions you may have. ☺ The next section is geared towards parents/guardians and gives information about phone calls, visits, and passes, and things like that, which you are welcome to learn about. The very last page of the Handbook shows you the weekly schedule, so you know what to expect in a typical day.



## **INFORMATION FOR PARENTS/GUARDIANS/FAMILIES**

**Parent/family/guardian involvement** – We believe that interactions with important people in youths' lives must be timely, respectful, and consistent. There are many ways that parents/guardians and other family members may be involved in youths' care while they are at Ketron.

- **Family therapy** – Family therapy is an expectation of treatment, including at least two in-person sessions per month. Parents/guardians and family (where indicated) are expected to have at least two sessions a month with the family therapist. The details of therapy such as whether it will be by phone, via video conference, etc. will be determined by the family therapist in collaboration with the youth and her/his family.
- **Multiple Family Group Treatment (MFGT)** – MFGT occurs the second and fourth Sundays of the month at 5:00 PM in the administration building. Dinner is provided. There are also quarterly workshops that cover a variety of topics and usually reflect topics that arise during weekly MFGT sessions.
- **CLIP Parent Weekend** – This event is hosted by the CLIP Administration and other agencies. Parents/guardians will learn from other parents/guardians who have been in similar situations, as well as important skills to increase success in the community. Space is limited, and registration is usually required.
- **Recreation Department hosted Center-wide Events** – Examples of such events include Rocket Blast Off, Carnival (with dunk tank!! ☺), and Holiday Celebrations.
- **Other family therapy groups** – Other family groups that may be hosted by CSTC include Motivational Interviewing workshops and Parent/Guardian Dialectical Behavioral Therapy. A member of the treatment team will notify parents/guardians of upcoming groups as they are offered.

**Therapeutic Leave (TL; “passes”)** – TLs are another important way we encourage and support parent/family involvement. After your youth has shown that he/she can be safe on cottage, as well as when she/he is on cottage and recreation outings, opportunities for local day passes will be encouraged. Preparation for passes occurs in collaboration with the family, youth, and treatment team. After a period of successful day passes, a home visit will be scheduled before overnight passes begin. The move from day passes to overnight passes gives the youth and her/his family chances to practice new skills and styles of interacting. This is all intended to get the youth ready to return to community living. All pass requests must be received by Wednesday of each week.

Before the youth leaves on pass, we ask that s/he and her/his parents/guardians spend a few minutes with a staff to write down the goals for the pass. We usually discourage special activities that require money. When the youth returns from pass, we ask that s/he spend a moment with a staff reviewing how the pass went, how well goals were met, and checking in or out any changes to the youth's personal items inventory.

**PLEASE NOTE: Contact with other CSTC youth while on Therapeutic Leave is not allowed. Also, CSTC policy states that discharged youth may not have ongoing contact with current CSTC youth and this includes when s/he is on a pass.**

If the cost of travel from great distances to participate in a youth's care at CSTC is a hardship for families, some community agencies may be able to help. Ilys will help families connect with these sources for help.

Note: All parent(s)/guardian(s) are encouraged to allow the absolute minimum of caffeine while youth are on Therapeutic Leave (pass). While on pass, we strongly discourage parents/guardians from allowing caffeinated beverages after 5:00 PM, whether the youth is returning to cottage that night or staying with her/his parent(s)/guardian(s)/family member(s).

**Visits and visiting hours** – The best times for approved people to visit are between 5:00 PM and 8:00 PM Monday through Friday and between 9:00 AM to 8:00 PM Saturday, Sunday, or on Holidays, when visits do not interfere with treatment programming. Each visit may last up to 3.0 hours. How often people visit a youth should be discussed with the youth, the people involved, and the treatment team. Parents/guardians are welcome to observe a youth in school. This must be scheduled at least 24 hours in advance by calling the cottage (253 756 2381) and/or school (253 756 2797). Approved visitors who travel from great distances and are not able to visit often may call and request some adjustments to the visiting hours. Some other details:

- ***All visitors must be on the approved visitors list*** and must call Ketrone Cottage (253 756 2381) **before** coming to visit. There is a very active school and treatment program throughout the day, which includes therapy groups, recreation therapy, recreation outings, and incentive outings. By calling ahead, a visitor can be sure the youth will be available.
- Visitors should bring current government issued picture identification and show it whenever asked.
- For therapeutic reasons or at the request of the parent(s)/guardian(s), or in compliance with court order, visitation or phone contact may need to be

supervised or limited. If this is the case the parent(s)/guardian(s), the visitor, and the youth will be told the reason.

- While parent(s)/guardian(s) may have a brief tour of your room on Ketron, **usually visits do not occur in a youth's room** or on the pod. Any time an adult spends time with a youth in her/his room, the door should be widely propped open, so the treatment team can have a clear line of sight.
- Visitors are expected to interact and spend their time with the youth when visiting.
- All items brought by visitors must be checked in by a member of the treatment team before the item is given to the youth.
- **Counselors have the responsibility and authority to ask any visitor to leave** if the visitor: 1) is not following the above rules, 2) is ignoring safety directions, 3) is disruptive to the milieu, 4) is not dressed appropriately, or 5) if conditions on the cottage require visitors to exit for safety reasons. All visitors must promptly follow Counselors' directions if asked to shorten a visit, move to another area, or leave the cottage.

**Phone calls** – ***All callers must be on the approved contact list.*** Most calls are limited to 10 minutes to give other youths a chance to use the phone. You will be allowed no more than two calls per shift, depending on safety or limits requested by parent(s)/guardian(s)/family member(s). The best times to call are between 6:00 PM and 8:00 PM Monday through Friday and between 10:00 AM to 8:00 PM Saturday, Sunday, and Holidays. Please limit phone calls during school hours. If a youth receives a call during school, group, meal time, or transition time, *the person who called the youth will be asked to call back.* Due to the busyness of the milieu, staff cannot be expected to take messages.

Some calls are monitored or on speaker phone for legal or therapeutic reasons. If this is the case, all parties involved in the call will be told about this before the call or at least at the beginning of the call. Before some calls a youth may get coaching to prepare her/him and the other person for a successful call. Counselors may interrupt you or end a phone call if it becomes inappropriate, disruptive to the milieu, unsafe, or too intense.

**Food items** – Please limit food items that are brought back to cottage to save for a later time (e.g., fast food, pizza, etc.). If you would like to bring food items, please consult with the treatment team prior to bringing in the items.

Thank you for taking the time to become familiar with the Ketron Program! If you have any questions, please do not hesitate to contact the treatment team at one of the numbers listed at the beginning of this Handbook. ☺

## **WEEKLY COTTAGE SCHEDULE** ♦

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6:45 <i>Shift change</i>	6:45 <i>Shift change</i>	6:45 <i>Shift change</i>	6:45 <i>Shift change</i>	6:45 <i>Shift change</i>	6:45 <i>Shift change</i>	6:45 <i>Shift change</i>
7:30 Breakfast	7:30 Breakfast	7:30 Breakfast	7:30 Breakfast	7:30 Breakfast	8:30 Breakfast	8:30 Breakfast
8:30 School	8:30 School	8:30 Community Meeting	8:30 School	8:30 School	Pod Clean-Up	Cottage Activity
		9:30 School				
12:00 Lunch	12:00 Lunch	12:00 Lunch	12:00 Lunch	12:00 Lunch	12:00 Lunch	12:00 Lunch
12:50 Room time	12:50 Room time	12:50 Room time	12:50 Room time	12:50 Room time	12:30 Room time	12:30 Room time
1:00 School	1:00 School	1:00 School	1:00 School	1:00 School	1:00 Cottage Activity/Media	1:00 Cottage Activity/Media
2:45 <i>Shift change</i> Transition Time (room)	2:45 <i>Shift change</i> Transition Time (room)	2:45 <i>Shift change</i> Transition Time (room)	2:45 <i>Shift change</i> Transition Time (room)	2:45 <i>Shift change</i> Transition Time (room)	2:45 <i>Shift change</i> Transition Time (room)	2:45 <i>Shift change</i> Transition Time (room)
3:15 Community Meeting	3:15 Healthy Relationships Group	3:15 Rock Wall or Pokémon/Magic Group	3:30 Growing Up Strong (Rec)	3:30 Building Strength (Rec)	3:15 Pokémon/Magic Group	3:15 Cottage Clean-Up
4:00 Soccer Group	4:00 Arts and Crafts Group		Healthy Masculinity Group (Cottage)	Healthy Friendships Group (Cottage)		4:15 Pokémon/Magic Group
5:00 Dinner	5:00 Dinner	5:00 Dinner	5:00 Dinner	5:00 Dinner	5:00 Dinner	5:00 Dinner
5:30 Educational Time (room)	5:30 Educational Time (room)	5:30 Educational Time (room)	5:30 Educational Time (room)	5:30 Educational Time (room)	5:30 Educational Time (room)	5:30 Educational Time (room)
6:00 Physical Activity	6:00 Physical Activity	6:00 Cottage Activity	6:00 DBT Group	6:00 Karaoke & Music Group	6:00 Game Room or Gym	6:00 Physical Activity
7:00 Snack	7:00 Snack	7:00 Snack/Personals	7:00 Snack	7:00 Snack/Personals	7:00 Snack	7:00 Snack
7:30 Cottage Store (milieu closed)	7:30 Cottage Activity	7:30 Board Games	7:30 Cottage Activity	7:30 Pokémon/Magic Group	7:30 Cottage Activity	7:30 Pokémon/Magic Trade Group
8:30 Bed time routine begins in pods	8:30 Bed time routine begins in pods	8:30 Bed time routine begins in pods	8:30 Bed time routine begins in pods	9:00 Bed time routine begins in pods	9:00 Bed time routine begins in pods	8:30 Bed time routine begins in pods

\*most up-to-date schedule posted in day hall