



**The Guild**  
FOR HUMAN SERVICES

**Youth Program  
Policies and  
Procedures**

Revised June 2023

**THE GUILD FOR HUMAN SERVICES**  
**SCHOOL AND RESIDENTIAL POLICIES**  
**YOUTH SERVICES**

Table of Contents

**Americans with Disabilities Act (ADA) Statement.....3**

**Student Admissions Procedures.....3**

**Student Suspension .....14**

**Planned Discharge Policy .....16**

**Student Unplanned Termination – Emergency Discharge .....17**

**Student Records: Retention, Access and Disposal Policy .....21**

**Family Engagement and Family Support.....29**

**Provision of Social, Psychological and Psychiatric Services.....33**

**Human Rights – Youth Programs .....34**

**Policy on Education and Support of Sexuality .....36**

**Student Personal Possessions .....39**

**Drug Free Workplace and Residences .....40**

**Student Allowance and Saving.....41**

**Visitation Policy and Procedures .....42**

**Communication Via Phone and Mail.....44**

**Behavior Management and Support (9.1 Behavior Support).....45**

**Bullying Prevention and Intervention Plan .....52**

**Anti-Hazing Policy .....63**

**Student Separation Resulting from Behavior Support .....64**

**Physical Restraint Policies and Procedures .....65**

**Complaints and Grievances .....73**

**Student Abuse/Neglect Policy .....74**

**Runaway and Missing Students.....81**

**Transportation Safety and Use of Vehicles by Program Staff .....86**

**Water Safety.....89**

**Food and Wellness Program..... 91**

**Staff Training and Development.....99**

**Unusual Incident/Accident Reporting..... 101**

**Protocol for Security Cameras and Visually Recorded Data ..... 105**

**Youth Program Health Policies**

**Disaster Plan for All Guild Sites ..... 103**

**Administration of Routine Medical Care and Preventative Health Care..... 107**

**Emergency Health Care: Nurse on-call and Consultation Services ..... 108**

**Infectious Disease/Infection Control ..... 110**

**Isolation Precautions ..... 112**

**School Program Medication Administration..... 113**

**Residential Medication Administration ..... 114**

**Self-Medication ..... 117**

**Psychotropic Medications/Antipsychotic Medications ..... 118**

**Visiting Nurse Association Visits ..... 120**

**Concord Headquarters Fire Alarm and Evacuation Drills ..... 121**

**Residential Fire Alarms and Drills ..... 124**

**Severe Weather Affecting Day/Residential Program..... 126**

|  |   |   |
|--|---|---|
| <b>Policy Title: Americans with Disabilities Act (ADA) Statement</b> |   |   |
| Guild Program: Youth   | Date Approved by CEO: 6/1/2023  | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DEEC, DESE                                       |   | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:  | Legal Authority References: Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act |   |

It is the policy of The Guild to provide universal design wherever possible for students, staff, and visitors to access facilities, curriculum, instruction, and employment.

In addition, it is the policy of The Guild to identify accessibility features in advance that benefit students with intellectual disabilities and concomitant disorders in our services and programming. (See “Admissions Policy” for more detail.)

Furthermore, it is the policy of The Guild to provide reasonable accommodation for specific individuals with disabilities in employment, its services, programs, and activities.

|  |  |   |
|--|--|---|
| <b>Policy Title: Student Admissions Procedures</b> |  |   |
| Guild Program: Youth Services                      | Date Approved by CEO: 6/1/2023                             | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DEEC, DCF, DESE                |  | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                      | Legal Authority References: 603 CMR 28.09(9); 102 CMR 3.05 |   |

The Purpose of the Student Admission Procedures is to clearly state the process for referral, admissions and intake for students who may attend The Guild School's programs.

**Students Served**

The Guild School serves students with intellectual disabilities and is known for its community-based programming for students with complex needs, including autism

spectrum disorder, mental health diagnoses, medical complexities, and behavioral challenges.

Many of The Guild's students experience congenital or acquired communication disorders associated with cerebral palsy, apraxia, autism, aphasia, traumatic brain injury, and multiple disabilities. As such, The Guild uses a Total Communication Approach to improve students' communication skills, which includes the use of manual sign, assistive technology devices, and augmentative and alternative communication devices.

As a result of both neurological and environmental conditions, The Guild's students may demonstrate maladaptive behaviors that interfere with learning and relationship-building, and insight-orientation. To address these needs, The Guild utilizes the principles of Applied Behavior Analysis (ABA) and Positive Behavior Interventions and Supports (PBIS) framework to support the academic, social, emotional and behavioral competence of all students. Other modalities may include Cognitive Behavioral Therapy (CBT) and Expressive Therapies.

Additionally, some of The Guild's students experience medically intensive conditions, including uncommon neurological/genetic diagnoses, medical diagnosis requiring ongoing medical attention. The Guild provides robust health services, including staff nurses as well as consulting general physician, dietitian, and psychiatrists.

Some Guild students have experienced one or more adverse childhood life experiences (ACES). The Guild provides trauma-informed care based upon empirically validated behavior support practices to promote independence and enhance quality of life for all individuals served.

Due to the educational, neurological, and behavioral complexities; The Guild's population benefits from an extended year of academic instruction and/or year round residential services.

### **Populations Served**

- Individuals (male, female, non-binary), ages 6 - 22

### **Eligibility Characteristics**

- Individuals with intellectual disabilities (ID) – mild to severe
- Individuals with co-occurring diagnoses of ID and Autism Spectrum Disorder and other neurological and genetic disorders like Down syndrome, Fragile X, and Cri-du-Chat syndrome
- Individuals with co-occurring diagnoses of ID and behavioral and/or mental health disorders

**Exclusionary Characteristics (may preclude admission)**

- Total vision loss
- Total hearing loss
- Prader-Willi Syndrome
- Non-ambulatory
- Juvenile offender
- Sexual aggressor/offender
- Pattern of substance abuse
- Diagnosed fire setter
- Severe pica
- Severe bolting behavior

The Guild admits students of any sex, race, color, sexual orientation or national and ethnic origin. All students are afforded the rights, privileges, programs, and activities generally made available to The Guild's student population. All programming is secular and non-denominational in nature. While a majority of students served are from Massachusetts, The Guild welcomes referrals from any state.

**Guild Programs for School-Aged Students**

- Day School – 234 school days per year
- Residential Services – 365 days per year
- Short-Term Extended Evaluations– offered when space and staffing are available

**Information, Orientation and Tours**

The Admissions and Outreach team welcomes inquiries regarding The Guild's programs and services. Questions may be directed to the team by phone, mail, email or through a website form.

The Guild invites parents, guardians, education surrogates, school district representatives and staff from state agencies to visit The Guild and meet with Admissions & Outreach Department member(s). Tours of The Guild may occur at any point in the referral process. In its student-centered approach, The Guild believes that all individuals should have the opportunity to explore the nature and content of Guild programming, the range of students served and The Guild's policies and procedures before making an enrollment decision. While interested individuals, families, and stakeholders are encouraged to visit during the school day to get the best understanding of programming and students serviced, The Guild's Admissions team is flexible and will make reasonable accommodations for all visits.

Written materials about The Guild are provided to interested parties before and/or during the referral process. Individuals may also access robust information about The Guild on our website: [www.guildhumanservices.org](http://www.guildhumanservices.org).

### **Referral and Intake Process**

Referrals are accepted throughout the year from funding sources including school districts and state agencies. Referrals may be postal mailed, emailed or faxed to the attention of the Admissions & Outreach Department. Student referral packets should include the student's Individualized Education Plan (IEP) and the most current school and independent assessments (including, but not limited to, behavioral assessments/data, 3 year re-evaluations, home assessments, etc.) and a parent/guardian consent to release records to The Guild School.

When a referral is received, the Admissions & Outreach Team thoroughly reviews all documentation to determine if The Guild may be able appropriately to meet the student's needs while considering current vacancies. The Admissions and Outreach Team presents referral cases at weekly admissions meetings attended by the Chief Education Officer, Chief Clinical Officer, Director of Youth Residential Services and the Director of Health Services. If the team determines that the student's needs may not be met at The Guild, notifications are made to the referring district/agency and to the guardian. If the team determines The Guild may be an appropriate placement for the student based on profile and vacancies, the case becomes an active referral.

Once a referral becomes active, The Admissions and Outreach team begins scheduling the following: Intake Interviews with the guardian or referring case worker, an Intake Student Observation, an Intake Conversation(s) with the student's current service provider, and tours of the school and residence.

During Intake Interviews, a member of the Admissions and Outreach team meets with guardian(s)/case worker(s) to provide a description of The Guild's program and scope of services and to answer any questions. If in agreement to move forward, parents/guardians are asked to complete and return an *Application for Student Enrollment*. Simultaneously, an Intake Observation of the student in their current service setting (school, hospital, home, etc.) and an Intake Conversation (a group provider-to-provider meeting) with the student's current team is scheduled. Representatives from The Guild's educational, residential, health services, and clinical departments participate in the Intake Student Observation/Intake Conversation and report back to their department chief or director.

If, at any point during the referral or intake process, there is a need for further information, the Admissions and Outreach team is responsible for securing additional documentation or sources. This may include, but is not limited to, requesting other documents/reports/data or scheduling follow-up meetings with providers or

caretakers. The Admissions and Outreach team is responsible for distributing new information internally to department representatives.

Intake Decision Meetings are conducted within days of an observation of the student and facilitated by the Admissions and Outreach team. All student information gathered throughout the referral/intake process is reviewed and admission decisions are made by the Chief Education Officer, the Chief Clinical Officer, the Director of Residential Services and the Director of Health Services. If offering enrollment, the team determines placement within the program and a date for enrollment. The Admissions and Outreach team then notifies the referring district/agency and guardian of an offer for enrollment and date for admission. Or, of the team's determination that The Guild is unable to serve the student within the program.

Tours of the identified residence is offered to the parents/guardians. Parents and guardians are also given the opportunity to speak to the parents of current students, attend parent group meetings, and/or meet with program staff in order to make an informed decision about student placement at The Guild School.

### **Pre-Enrollment Process**

Once an offer of enrollment is accepted, parents/guardians receive an Admissions Handbook, materials describing The Guild's programming, Admissions Checklist, and consent forms. They are also offered a tour. The handbook briefly describes policies and procedures that impact students and parents. The Admissions Handbook includes a statement that The Guild's Policy Manual is maintained on site and is available for review upon request. It is also publicly available on The Guild's website. The checklist provides a one-page synopsis of the steps in the admissions process and list of needed admissions documentation including the need for a physical exam completed within the last 12 months.

### **Parent/Guardian Consent and Required Notification**

The Guild's consent packet provides parents/guardians with information on current Guild policies/practices. The forms provided permit parents the ability to determine how their student will participate in various Guild programs and consent to certain agreements. The Admissions and Outreach team meets with the guardians to review the documents and answer any questions.

A member of the Health Services team meets with parents/guardians and/or previous providers to discuss health or medical concerns. The Guild will obtain a health history, pertinent medical records, and other information on medical care and procedures. Staff will also review all medical related consent forms including a consent for emergency medical treatment and medication administration (when applicable). The Health Services staff is responsible for annual medical reviews and consents after a student is enrolled.



Parents/guardians may ask any questions during the review of consents and may choose to sign consents and releases at the time of the intake meeting or may take the consent packet with them to complete forms at a later date. The consent process reviews authorization for fundraising, marketing and publicity, photo releases, observation and other considerations.

In accordance with state regulation and to ensure a smooth process for all, several steps must be completed in advance of student enrollment:

1. **Health Documentation:** The Health Services Department obtains updated health information and necessary health consents prior to student enrollment. If a student requires an emergency placement, the Health Services Department has contracted with a Primary Care Physician as well as local health service providers to ensure needed immunizations may be completed immediately and an updated physical exam is completed within 30 days of admission.
2. **Admissions Documentation:** Admissions and Outreach team members work with parents/guardians, school districts, and other agency professionals to ensure that all required documentation and processes are completed prior to the student's arrival. In advance of a start date, there may be arrangements for a classroom observation, visit(s) to the residence, or other family engagement activities.
3. **Pre-Enrollment Administrative Activities:** Admissions and Outreach team members ensure records are prepared for enrollment and begin the official record keeping process for The Guild. Admissions and Outreach team members will review final pre-enrollment information and outstanding requests with Student Services Case Coordinators prior to the enrollment date.
4. **Pre-Enrollment Meetings and Transition Activities:** The Admissions and Outreach team develops an individualized student *Pre-Enrollment Form*. The form contains contact information for parents, guardians, social workers, educational surrogates, school district liaisons and any other professionals involved with the case. Additionally, it contains information for the student's family members such as parents/stepparents, siblings, and any other significant family member or important person in the student's life. This can include information, when available, about how often the individual sees the family member, how they typically communicate/visit, special names they may have for that person and any other important information.

Most importantly, the *Pre-Enrollment Form* identifies the student's current needs and performance levels within a variety of domains: communication, activities of daily living/self-care, social/behavioral, academic, vocational, community and health and safety (i.e., allergies, medical diagnoses, etc.). The form is used

at Pre-Enrollment Meetings that occur with the student's Guild School team at least 2 weeks prior to enrollment. The team utilizes the form and meeting to plan for the student's arrival and for their individual transition needs (e.g., social stories, visits, meetings/activities with staff or peers, logistics of moving in, parent/guardian communication, etc.).

The *Pre-Enrollment Form* may also contain parent/guardian requests for any cultural, ethnic, and/or religious traditions they want incorporated into the student's care or programming. The Guild School strives to make reasonable accommodations for requests whenever possible. Guardians are engaged in discussions prior to the student's enrollment to establish mutual understanding of how or if such requests/expectations can be met.

5. **Contracts:** The Guild signs and executes individual school district contracts for each day and day/residential student enrolled at The Guild. School districts, upon advice of their legal counsel, may choose to use their own contracts in lieu of contracts generated by The Guild. School district contracts are maintained by the Business Office.

Additionally, The Guild is under contract with the Massachusetts Department of Children and Families (DCF) and Department of Mental Health (DMH) to provide services. This contract is also maintained in Finance Department files.

**Admissions Tasks Assignments**

| Student Recruitment                 |  |
|-------------------------------------|--|
| <b>Admissions and Outreach Team</b> | <ul style="list-style-type: none"> <li>• Shares program information with referral sources, potential referral sources, and interested parties.</li> <li>• Reviews referral packets for completeness and accuracy</li> <li>• Completes initial screening of referred students to determine a possible match</li> <li>• Presents referrals at weekly Admissions meetings attended by the Chief Education Officer, Chief Clinical Officer, the Director of Youth Residential Services and the Director of Health Service.</li> <li>• Distributes referral packets to members of the Educational, Clinical, Youth Residential and Health Services team who will be participating in the Intake Observation/Conversation for the referred student and/or the Intake Decision Meeting</li> <li>• Provides tours (virtual or on-site) of school and homes to parents, referral sources and other interested parties.</li> </ul> |
| Intake                              |  |
| <b>Admissions and Outreach Team</b> | <ul style="list-style-type: none"> <li>• Schedules, coordinates, and facilitates the Intake Process for all active referrals.</li> <li>• Meets with parents/guardians to obtain information regarding the student during the Intake Interview</li> <li>• Explains the program's mission, educational and therapeutic services; reviews the Admissions Handbook and consent packet.</li> <li>• Schedules and facilitates the Intake Observation and Intake Provider-to-Provider Conversation.</li> <li>• Schedules and chairs the Intake Decision meeting to discuss the results of Intake Observation/Conversation.</li> <li>• Notifies referral sources and parents of results of Intake (this includes requesting additional information).</li> </ul>  |
| <b>Director of Health Services</b>  | <ul style="list-style-type: none"> <li>• Reviews student's referral packet</li> <li>• Participates in weekly Admissions Meetings</li> <li>• Meets with parents/guardians to obtain information regarding student's medical history.</li> <li>• Explains the program's health program and emergency health care procedures to parents/guardians.</li> <li>• Ensures that any non-standard medical information is obtained.</li> </ul>   |

|   |  |
|---|--|
|   | <ul style="list-style-type: none"> <li>• Attends Intake Decision Meeting.</li> <li>• Completes Intake form or assigns designee to sign Intake form.</li> </ul>   |
| <p><b>Clinical, Educational, and Residential Department Representatives</b></p>   | <ul style="list-style-type: none"> <li>• Reviews student’s referral packet</li> <li>• Participates in Intake Observations/Conversations</li> <li>• Takes student for tour of The Guild School and/or selected residence.</li> <li>• Shares information learned through intake with their Chief Officer for presentation at the Intake Decision Meeting.</li> </ul>   |
| <p><b>Chief Education Officer, Chief Clinical Officer, Chief Program Officer, Director of Youth Residential Services, Director of Health Services</b></p> | <ul style="list-style-type: none"> <li>• Reviews student’s referral packet</li> <li>• Ensures that Intake Observation and Conversation is conducted by appropriate personnel in their Division, assisting when necessary.</li> <li>• Confers with their staff members after intake is completed.</li> <li>• Attends Intake Decision Meeting to discuss results of Intake Observation/Conversation.</li> <li>• Completes the Intake Decision Form or assigns a designee to sign the Intake Decision Form</li> </ul> |

**After Acceptance**

|  |   |
|--|---|
| <p><b>Admissions and Outreach Team</b></p>           | <ul style="list-style-type: none"> <li>• Notifies referral parties and parents/guardians, in writing, of admissions decision. If an enrollment offer is given, the letter to the referral source includes a proposed start date and financial obligations.</li> <li>• Notifies Chief Officers, Business Office, and Service Providers of student’s entrance date when student enrollment offer is accepted.</li> <li>• Provides student records to Administrative staff to establish the student’s record books.</li> <li>• Schedules and facilitates the Pre-Enrollment Planning Meeting and distributes student referral file to all staff on the student’s team including a working draft of the Pre-Enrollment Planning form.</li> <li>• Distributes a finalized copy of the Pre-Enrollment Form to the entire team.</li> <li>• Works with parents and referral sources to collect required enrollment documentation.</li> <li>• Sends contact sheet and school calendar to parents.</li> <li>• Schedules and coordinates transition activities.</li> </ul> |
| <p><b>Clinical case manager and/or Clinician</b></p> | <ul style="list-style-type: none"> <li>• Reviews student file</li> </ul>  |

|   |   |
|---|---|
|   | <ul style="list-style-type: none"> <li>• Attends and actively participates in the Pre-Enrollment Planning Meeting</li> <li>• Assists in scheduling transition activities.</li> <li>• Determines parent contact schedule</li> <li>• Sets up a Team Meeting during the student's first week to discuss the student's transition.</li> </ul>   |
| <p><b>Chief Financial Officer and Business Office Staff</b></p>                           | <ul style="list-style-type: none"> <li>• Receives and returns contracts to Local Education Agencies.</li> <li>• Manages and contracts with the Department of Children and Families and the Department of Mental Health.</li> <li>• Contacts and speaks to funding agencies as needed.</li> </ul>  |
| <p><b>Chief Education Officer, Director of Education, or Educational Case Manager</b></p> | <ul style="list-style-type: none"> <li>• Speaks with LEA regarding the status of student's IEP.</li> <li>• Coordinates IEP meeting with funding source(s).</li> <li>• Attends and actively participates in Pre-Enrollment Planning Meeting.</li> <li>• Assists in scheduling transition activities.</li> <li>• Shares relevant student information with educational staff.</li> <li>• Informs current students of new student's enrollment.</li> </ul>                              |
| <p><b>Educational Case Manager, Classroom Teacher, and Residential Manager</b></p>        | <ul style="list-style-type: none"> <li>• Reviews student file, attends and actively participates in the Pre-Enrollment Meeting.</li> <li>• Sets up the student file for classroom/residence.</li> <li>• Prepares an activity schedule based on the student's current IEP.</li> <li>• Assists in transition planning.</li> <li>• Shares relevant student information with educational/residential staff.</li> <li>• Informs current students of new student's enrollment.</li> </ul> |
| <p><b>Specialists and Clinical Providers</b></p>  | <ul style="list-style-type: none"> <li>• Reviews student file, attends and actively participates in the Pre-Enrollment Meeting.</li> <li>• Assists in transition planning</li> <li>• Schedules service delivery in coordination with educational and residential teams.</li> <li>• Sets up student file for specific service area.</li> </ul>   |
| <p><b>Behavior Clinician</b></p>  | <ul style="list-style-type: none"> <li>• Reviews student file, attends and actively participates in the Pre-Enrollment Meeting.</li> <li>• Assists in transition planning</li> <li>• Schedules service delivery in coordination with educational and residential teams.</li> <li>• Prepares Behavior Support Plan and trains all staff on its implementation.</li> </ul>  |

|                        |  |
|------------------------|--|
| <b>Health Services</b> | <ul style="list-style-type: none"> <li>• Reviews student file, attends and actively participates in the Pre-Enrollment Meeting.</li> <li>• Assists in transition planning</li> <li>• Answers any questions parents/guardians have about medical consent forms and The Guild's medical, nursing and health services.</li> <li>• Confirms that all medical documentation and supplies are complete and available on enrollment start date.</li> <li>• In-service staff working with the student based on medical needs.</li> </ul> |
|------------------------|--|

**Student's First Day**

|  |   |
|--|---|
| <b>Admissions and Outreach Team</b>                        | <ul style="list-style-type: none"> <li>• Along with teacher or other education representative, greet student and parents/guardians/agency representatives upon arrival.</li> <li>• Arrange for student photo to be taken by Front Office for Emergency Fact Sheet</li> </ul>  |
| <b>Health Services</b>                                     | <ul style="list-style-type: none"> <li>• Brief medical assessment, including height and weight.</li> <li>• Ensures medications are present on-site for administration.</li> <li>• Sets up medication book for proper documentation of medication administration.</li> <li>• Ensures medical records are in order.</li> </ul>  |
| <b>Chief Education Officer</b>                             | <ul style="list-style-type: none"> <li>• Assist Educational Manager and Residential Manager in ensuring a smooth transition.</li> </ul>   |
| <b>Director of Education and Educational Case Managers</b> | <ul style="list-style-type: none"> <li>• Assign additional staff to support student in new classroom</li> <li>• Complete periodic check-ins to monitor student performance and to provide staff guidance.</li> <li>• Ensure parent/guardian receives phone updates from the classroom teacher according to the schedule on the Pre-Enrollment Form.</li> </ul>  |
| <b>Associate Residential Director, Residential Manager</b> | <ul style="list-style-type: none"> <li>• Arrange with parents/guardians and/or agency representatives for drop off of the student's belongings.</li> <li>• Takes inventory of student's belongings.</li> <li>• Helps student unpack and settle into residence (in many cases, with parent participation).</li> <li>• Reviews the student's schedule and behavior program with the student.</li> <li>• Assigns staff person or self to the student to help the student get acclimated to the house environment.</li> <li>• Schedules an activity at which other students can welcome the new student.</li> </ul> |

|   |  |
|---|--|
|   | <ul style="list-style-type: none"> <li>Provides parent/guardian with phone call updates according to the schedule on the Pre-Enrollment Form.</li> </ul>   |
| <b>Teacher, Classroom Staff and Residential Staff</b> | <ul style="list-style-type: none"> <li>Welcome student and provide them with a tour.</li> <li>Review the student’s schedule and daily routines.</li> <li>Implements the Behavior Support Plan and schedule as planned.</li> <li>Provide parent/guardian with phone call updates according to the schedule on the Pre-Enrollment Form.</li> </ul> |
| <b>Behavior Clinician</b>                             | <ul style="list-style-type: none"> <li>Review Behavior Support Plan with the student.</li> <li>Monitors student behavior in the school and residential settings.</li> </ul>  |

|   |   |   |
|---|---|---|
| Policy Title: <b>Student Suspension</b> |   |   |
| Guild Program: Youth Services           | Date Approved by CEO: 6/1/2023                              | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC          |   | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:           | Legal Authority References: 603 CMR 18.05(6); 102 CMR 305.7 |   |

**Policy**

It is the policy of The Guild to provide each student with an optimal learning environment while attending the program. In the event a student’s behavior warrants suspension, The Guild will ensure that the following procedures are followed to ensure clear communication with the students’ guardian and appropriate partner agencies.

**Procedure**

1. In the event a student is suspended, The Guild immediately shall notify the parents and the public school system and/or human service agency responsible for the student’s placement. Within 24 hours of the suspension notice, the Chief Education Officer or designee shall send a written statement explaining the reason(s) for suspension to the parents/guardians, the public school system and/or the appropriate human service agency, and the Department of Elementary and Secondary Education (DESE).

2. No Student will be sent home following suspension unless it has been determined that a responsible adult is home.
3. Should a student warrant suspension for three (3) consecutive days or five (5) non-consecutive school days in a school year, the Chief Education Officer will request an IEP Team meeting with the public school liaison, human service agency and the parent/guardians within five (5) school days of the final suspension. At this Team meeting, the parties should conduct a manifestation determination and consider alternative measures (including modifying programs), possible resolutions to those issues or changes concerning the student, and the possibility of alternative placement. If it is determined that alternative placement is necessary, The Guild will, if possible, agree to maintain the student in the program for thirty (30) school days while an alternative placement is being sought. A Guild student over age fourteen (14) has the right to be present and participate at this meeting and will be so informed by the Chief Education Officer or designee.
4. Duration and frequency of suspensions, including suspensions from any part of the student's IEP program, will be tracked and documented in the student's confidential file.
5. If a student suspension should exceed 10 consecutive school days, a request will be made of the student's responsible school district to convene an IEP Team meeting, which will include representation from The Guild, prior to a suspension that constitutes a change in placement.
  - a. The Guild participates in the team meeting to develop/review functional behavioral assessments of the student's behavior and to develop/modify an Individualized Behavior Treatment Plan.
  - b. The Guild assists in identifying alternative educational setting(s).
6. During the team meeting, a manifestation determination will be conducted. The following guidelines will be implemented:
  - i. Is the IEP appropriate?
  - ii. Is the placement appropriate?
  - iii. Is the Individualized Behavior Treatment Plan being implemented?
  - iv. Does the student understand the consequences of their behavior?
  - v. Can the student control their behavior?
7. If the team determines that the behavior is not a manifestation of the disability, The Guild may choose to suspend or terminate the student. The responsible school district must offer an appropriate education program to the student in another setting.



8. If the team determines that the behavior is a manifestation of the disability, the placing district, in coordination with The Guild, takes steps (with the consent of the parent/guardian) to modify the IEP, the Individualized Behavior Treatment Plan, and/or the placement.

|   |   |   |
|---|---|---|
| Policy Title: <b>Planned Discharge Policy</b> |   |   |
| Guild Program: Youth Services                 | Date Approved by CEO: 6/1/2023                                | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC                |   | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                 | Legal Authority References: 102 CMR 3.05(7), 603 CMR 18.08 7) |   |

**Policy**

It is the policy of The Guild to provide each student with an optimal learning environment for the duration of enrollment in the program. Their progress is carefully monitored to ensure movement toward greater independence and the ability to function in the least restrictive environment. Except in emergency situations, discharges will be planned and coordinated with parents or guardians and the appropriate human service agencies

**Procedure**

Planned discharges are usually related to movement to a less restrictive environment. They may be initiated by The Guild, the funding or referral source(s), parent or guardian or the individual student.

1. Criteria for discharge may be related to age, acquisition of skills/behaviors targeted through the IEP/ITP and/or the availability of a more suitable next step program
2. The Guild staff will meet with the funding or referral agency, parent/guardian and the receiving organization to review the student progress and next step placement needs and outline a transition plan.
3. Receiving agency staff will visit The Guild and observe the student in placement and ask the staff any questions regarding programming needs.
4. The Guild staff will meet with the next step placement and train new staff on the student’s programming needs and review their behavior management programs.

5. A formal written discharge summary report and recommendations are submitted to parents or guardians, funding or referral source(s) and the next step agency.

**Follow Up/Outtake**

- Most Guild students will have a “placement agency person” (such as a DDS Service Coordinator) responsible for securing, referring and monitoring the student's next placement.
- If a student is discharged into the custody of their parent/guardian or independent living, The Guild will provide six months of aftercare support that may include, in home consultation, referral to other agencies, or site based supports.
- The Clinical case manager or Transition Services Coordinator will ensure that a 688 referral is made prior to the student's 22<sup>nd</sup> birthday requesting services.
- The Clinical case manager, Transition Services Coordinator or designee will make telephone contact with the next responsible placement agency, the next provider of day/residential services and/or the parent/guardian within thirty (30) days of the student’s termination from the Guild program to see how the student is handling the transition and to answer any further questions.
- The Clinical case manager or Transition Services Coordinator will make additional telephone contacts on a six-month and one-year schedule.

|  |   |   |
|--|---|---|
| Policy Title: <b>Student Unplanned Termination- Emergency Discharge</b>  |   |   |
| Guild Program: Youth   | Date Approved by CEO: 6/1/2023                              | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: Department of Elementary and Secondary Education (DESE): Department of Elementary Education and Care (DEEC): |   | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:  | Legal Authority References: 603 CMR 18.05(7), 102 CMR 305.7 |   |

**Policy**

It is the policy of The Guild to provide each student with an optimal learning environment while attending The Guild School. In the event a student's behavior warrants emergency termination, the following procedures will be implemented.

## Definitions

**Termination:** Defined as a “discharge which interrupts a previously agreed-upon stay”.

**Emergency Circumstances:** is defined as when a student’s behavior presents as a clear and present threat to the health and safety of themselves or others. This includes when a student presents such a clear and present danger to themselves and/or others or where they engage in unlawful or other behavior which endangers themselves, others in the program or in the community and immediate removal from The Guild may be necessary to ensure safety.

## Procedures

**Emergency Termination:** If the Guild determines that “Emergency Circumstances” exist which warrant an emergency termination of the student, the Guild shall implement the following steps:

1. The Chief Education Officer or designee immediately will notify parents, the administrator of Special Education of the sending school district, any state agency involved in the student care or placement, and the Department of Elementary and Secondary Education by phone and letter of the “Emergency Circumstances,” which The Guild believes warrant an emergency termination.
2. With the public school system, the Chief Education Officer or designee will arrange for a Team Meeting with the appropriate parties to provide information and assistance necessary for the public school officials to implement their responsibilities under Special Education Regulations in terminating the student’s placement at The Guild.
3. At the request of the public school district, The Guild will make every attempt to delay termination of the student for up to 10 school days to allow the public school district the opportunity to convene an emergency Team meeting or to conduct appropriate planning discussions prior to the student’s termination.

**Planned Termination:** In the event The Guild discusses the termination of the student due to behavior, the following procedures will be implemented:

1. The Guild’s Chief Education Officer or designee will immediately notify the parents, local Administrator of Special Education of the sending school district, any state agency involved in the student care or placement, and the Department of Elementary and Secondary Education of the planned termination.
2. The Guild will work with the sending school district to arrange an IEP review meeting to plan and develop a written termination plan for the student. This plan should include specific program needs for the student as well as a transition plan.

3. The district should notice of this meeting to all parties 10 days in advance of the intended date of the meeting. The purpose of the meeting will be to develop a clear and specific termination plan for the student that shall be implemented in no less than 30 days unless all parties agree to an earlier termination date.

- a. The Guild shall, at the time of admission, make a commitment to the public school system or appropriate human service agency that it will try every available means to maintain the student's placement.
- b. In order to attempt to manage serious student behaviors (other than those which require immediate termination) in a consistent and effective manner, the following procedure will be implemented.

Following the occurrence of:

- A pattern of two or more incidents of significant escalated behavior by a student within a period of time which results in: a. significant injury to staff or other student or, b. extensive property damages or, c. where supervisors/clinicians feel that the safety of the student(s), staff or others or the continued existence of the program within the community is in jeopardy or, d. the student requires physical restraint and/or exclusionary time-out or one-to-one staffing over an extended period of time in order to control the behavior.
- Continued bolting behavior by a student which a. endangers the student or others, b. requires constant one-to-one staff monitoring or, c. negatively affects the program's relation with other community/regulatory agencies (e.g., fire, police, building inspector, etc.).
- Other specific behaviors (e.g., not sleeping, inappropriate use of food, incontinence which can't be controlled under our existing medical staffing/consultation system or which requires one-to-one staff-to-student coverage.
- Any other specific behaviors which endanger the student, other students, or staff (use of unlawful drugs/alcohol, fire setting, unlawful use of a motor vehicle, etc.

The following steps (appropriate to the specific situation) will be implemented immediately.

- The Chief Clinical Officer or designee will review the Individualized Behavior Treatment Plan.
- The Chief Education Officer or designee will notify by telephone the parents/guardians and referral agencies of the problem and its immediate impact, and will advise them of the next steps to be taken to alleviate the problem and to maintain the student in the program.

- The School Nurse will schedule a physical examination to investigate any possible medical causation and notify the student's physician.
- The Chief Clinical Officer or designee will arrange for a behavioral evaluation consultation if warranted.
- The Chief Clinical Officer, Chief Education Officer or designee will contact other outside consultants as deemed necessary for additional input.
- The Chief Education Officer or designee will notify in writing the parents/guardians and funding/referral agencies of the problem and outline its ramifications for the student/program.
- If these steps or other specific interventions do not result in the problem behavior being brought under control, the procedures for suspension/termination will be discussed. The Chief Education Officer or designee will notify the local education authority (LEA) of the need for a team meeting. Notice of this meeting shall be given 10 days in advance of the intended date of the meeting and shall be sent to the parent/guardian, the Administrator of Special Education, and the appropriate human service agency. The meeting shall be held for the purpose of planning and developing a written termination plan for the student. If a student is over the age of 14, the Chief Education Officer or designee will inform them of the meeting.
- The termination plan shall describe the student's specific program needs and the short and long-term educational goal of the student, and shall include recommendations for follow-up and/or transitional services. The Clinical case manager will develop the plan.
- The Guild's Chief Education Officer or designee shall explain the termination procedures to the student, the parents, the Administrator of Special Education, and the appropriate human service agency.
- The written termination plan shall be implemented in no less than 30 days unless all parties agree to an earlier termination date.
- A Clinical case manager will ensure the termination checklist is completed.

|   |  |   |
|---|--|---|
| <b>Policy Title: Student Records: Retention, Access and Disposal Policy</b> |  |   |
| Guild Program: Youth  | Date Approved by CEO: 6/1/2023         | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC  |  | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:   | Legal Authority References: 603 CMR 23 |   |

**Definitions**

**Student:** any person enrolled or formerly enrolled in The Guild School programs.

Parent: a student's parent, guardian, person or agency legally authorized to act on behalf of the child in place of, or in conjunction with, the parent, or guardian.

**Student record:** shall consist of the temporary record and transcript, including all materials, regardless of physical form or characteristics, concerning a student that is organized based on the student's name or in a way that such student may be individually identified, and that is kept by The Guild. The term as used in these regulations shall mean all such information and materials regardless of where they are located, except for the information and materials specifically exempted by section "Personal Files of GHS Guild School Employees."

**Transcript:** shall contain original administrative records that constitute the minimum data necessary to reflect the student's educational progress and to operate the educational system.

**Temporary record:** shall consist of all the original information in the student record which is not contained in the transcript.

**Dissemination:** the written release, divulgence, transfer, inspection or copying of a student record, in whole or in part, in any manner or form, except as required for internal program use by authorized Guild School personnel to insure continuation and quality of service.

**Third party:** any person, private or public agency, authority, or organization other than the eligible student, guardian, or authorized school personnel.

**Authorized Guild personnel:** shall consist of the following: administrative, clerical, educational, clinical, para-educational, residential staff and student interns.

## Policy

The Purpose of the Guild Student records Retention and Disposal policy is to ensure that necessary student records are adequately maintained, available for access to those who have a right to access, and that these records are disposed of at the appropriate time. This policy is developed to follow the laws established by the Commonwealth of Massachusetts.

The Guild for Human Services will provide access to student records to students and their guardians. Parents and Guardians have access to student records at any time. If a student is aged between 14 and 17 years of age, both the student and guardian, or either one acting alone, shall exercise these rights. If a student is 18 years of age or older, he/she alone shall exercise these rights. However, the parent may continue to exercise the rights until expressly limited by such student. The parent always retains the right to inspect the student record. Authorized Guild personnel shall have access to the student records for whom they are providing services or when such access is required in the performance of their official duties.

The Guild will ensure destruction of temporary school records no later than seven years after the student transfers, graduates, or withdraws from the school system. The Guild will ensure destruction of medical records 10 years after the student transfers, withdraws, or graduates. The Guild will provide written notice to the eligible student and the student's guardian of the approximate date of destruction of the record and their right to receive the information in whole or in part, at the time of the student's transfer, graduation, or withdrawal. Please see Records Retention Schedule below:

## Procedures

### Collection of Data: Limitations and Requirements

All information and data contained in or added to the student record shall be limited to information relevant to the educational needs of the student

### Personal Files of School Employees

Notes, memory aids, copies of IEP's, quarterlies, and other progress notes and reports and other similar information concerning a student which is maintained in the personal or departmental files of any authorized school employee shall be only for the program use of such employee. This information may be shared with the student and guardian but shall not be released to unauthorized school personnel or to any third party. Such information may be included in or added to the permanent student record and is then subject to all of the provisions of these policies/procedures.

## Privacy and Security of Student Records

The Chief Operating Officer or designee shall be responsible for the privacy and security of all student records. The Chief Operating Officer or designee will: ensure that student records under their supervision are kept physically secure; that authorized school personnel are informed of the provisions of these policies/procedures and are educated as to the importance of information privacy and confidentiality; and that any computerized systems employed are electronically secure.

## Destruction of Student Records

Student records shall be maintained by The Guild and may only be destroyed seven years following graduation, transfer, or withdrawal from The Guild. During the time a student is enrolled in The Guild, the Chief Operating Officer may periodically review and destroy misleading, outdated, or irrelevant information contained in the temporary record provided that the eligible student and guardian are notified in writing and are given opportunity to receive the information or a copy of it prior to its destruction. A copy of such notice shall be retained in the temporary record.

## Access to and Dissemination of Student Records

A permanent log shall be kept as part of each student's original temporary record. If parts of the original temporary record are separately located, a separate log shall be kept with each part. Each person disseminating information contained within the temporary record, in whole or in part, shall upon each instance of dissemination enter into the log the following: his/her name, signature, position, the date, the portions of the record that were disseminated, and the purpose of such dissemination. If a third party is to receive information from the student record, the name and affiliation of such third party and persons authorizing such access shall be included in the log. A list of such access shall be made available upon written request to the student, legal guardian, or authorized representative and the Human Rights Officer.

## Access of Eligible Students and Parents

The eligible student and guardian, or either one, as applicable under these policies and procedures shall have access to the student record. Access will be provided as soon as practicable and within ten days after the original request.

Upon request, copies of any information contained in the student record shall be furnished to the eligible student or guardian, as applicable under these policies and procedures. A reasonable fee not to exceed the cost of reproduction may be charged. Any student, regardless of age, shall have the right pursuant to Chapter 71 Section 34A to receive a copy of their transcript.



The eligible student and the student's guardian, or either one, as applicable under these policies and procedures shall have the right upon their request to meet with Guild personnel and to have any of the contents of the student's record interpreted. The eligible student and the student's guardian, or either one, as applicable under these policies and procedures may have the student's record inspected or interpreted by a third party of their choice, i.e. attorney, advocate, or other designated individuals. Such third party shall present specific written consent of such student or the student's guardian, as applicable under these policies and procedures, prior to gaining access to the student's record.

### **Access of Authorized Guild Personnel**

Subject to these policies and procedures, including the log requirements, authorized Guild personnel shall have access to the student records for whom they are providing services, when such access is required in the performance of their official duties. The consent of the eligible student or the student's guardian shall not be necessary. The Chief Education Officer or designee may specify the person who may inspect the record, duration of inspection, uses of the record, and other restrictions to access as deemed appropriate.

### **Access of Third Parties**

No information in a student record shall be disseminated to a third party without the specific, informed written consent of the eligible student and the student's guardian, or either one, as applicable under these policies/procedures. When granting consent, the eligible student and the student's guardian, or either one, as applicable, shall have the right to designate which portions of the student record shall be disseminated to any third party. A copy of such consent shall be retained by the guardian and the student and a duplicate placed in the temporary record. The following provisions are exceptions in which consent by the student or guardian is not required in the dissemination of information to a third party:

Upon receipt of a court order or subpoena, or upon receipt of a request from a Justice of any court under the provision of Chapter 119, Section 69 of the General Laws for information regarding a student, the appropriate school official shall comply, upon condition that the student and the student's guardian, or either one, as applicable under these policies and procedures are notified of all such orders, subpoenas, and requests in advance of such compliance and of the students' and guardians' rights to question or challenge the subpoena on the ground that it is unreasonable or oppressive.

The Chief Education Officer or designee shall provide to the Massachusetts Department of Elementary and Secondary Education (DESE) such anonymous, statistical information or anonymous data derived from student records as DESE shall

require from time to time, provided the identity of any individual cannot be determined from such data.

Subject to the approval of The Chief Executive Officer, Chief Operating Officer or designee, the program may provide anonymous statistical information or anonymous data from student records to independent researchers engaged in analysis of programs and policies, provided the identity of any individual cannot be determined from such data.

The Division of Special Education of the Department of Elementary and Secondary Education may have access to and the right to copy the student record of a school-age child who has been referred to a Center for Educational Technology (CET) for an evaluation or of a school-age child with special needs, without the consent of such student or guardian, provided that: (1) such access is required in the performance of official duties; (2) a written statement for such access, signed by the Project Director for Special Education in the Regional Education Center, is presented to the appropriate school official responsible for student records; and (3) the eligible student and the student's guardian receive written notice containing the reason for such access not less than 10 days or more than 30 days prior to the access; The Chief Education Officer or designee shall send such notice upon receipt of the written statement from the Project Director for Special Education in the Regional Education Center.

### **Access of School Health Personnel and Local and State Health Department Personnel**

Subject to these regulations, The Guild's Health Services Department shall have access to all student health records, including but not limited to immunization records, without the consent of the eligible student or the student's guardian, provided that such access is mandated by statute or regulation and is required in the performance of official duties.

### **Specific Others Who May Have Access to Student Records**

- A physician who requests student records in the treatment of a medical emergency provided the student, parent, or guardian shall be given notice of said access upon termination of the emergency.
- Agencies, Insurers, trustees, and other persons through whom financial or legal assistance is, or may be, available for the student's care, treatment, training, or supervision provide all other applicable policies/procedures governing access are in force, e.g., representatives of the Department of Children and Families, Department of Public Welfare Group Care Unit, Social Security Administration, etc.).

- Department of Children and Families, a Probation Officer, a Justice of any court and The Department of Youth Services under the provisions of MGLC 119, sections 51B, 57, 69 and 69A respectively.
- Federal, State and local education officials in connection with the audit, evaluation or enforcement of Federal, State education laws, or programs subject to be provisions of 603 CMR 23.07 (4) (d).
- Appropriate parties in connection with a health or safety emergency if knowledge of the information is necessary to protect the health or safety of the student or other individuals (e.g. local or state police, Department of Children and Families, Mobile Crisis Team) subject to the provisions of MGLC 71, section 37L and MGLC 119, section 51A.
- Upon receipt of notification that a student or former student is missing, notification of any request concerning the records of said child to the appropriate law enforcement authority CMGL c.22p, section 9.
- Authorized school personnel of the school or adult agency or organization to which a student seeks or intends to transfer, provided a notice of transfer procedures is made available to the student and/or parent/guardian (routine information letter required under 603 CMR 23.10).
- Local and state health department personnel when such access is required in the performance of their official duties.

### **Confidentiality of Records**

- Guardians have the right to review all information in their child's school records.
- Guardians have the right to receive reasonable "lay interpretation" of all information in their child's records.
- Guardians have the right to obtain copies of all information concerning their child.
- The Guild School will amend any inaccurate information in a child's record. If The Guild and guardians disagree about the accuracy of any information, a formal hearing will be held. If the guardians and school still disagree about the information after the hearing, the guardians may file a non-agreement statement in the child's record.
- Guardian consent must be obtained before any personal data on the child can be disclosed to anyone other than school officials.

### **Challenges to Decisions Authorizing Record Inspection**

Students' guardians may challenge the decision of the Head of the Program (Chief Executive Officer, Chief Education Officer or designee) as to the inspection of the student's records. A grievance may be filed with the Human Rights Officer. Once a grievance is filed, no records which are the subject of the grievance shall be disclosed to other persons except upon order of a court.

### **Amending the Student Record**

The eligible student and the student's guardian, or either one, as applicable under these policies and procedures shall have the right to add information, comments, data or any other relevant written material to the student record.

The eligible student and the student's guardian, or either one, as applicable under these policies and procedures shall have the right to request deletion or amendment of any information contained in the student record.

If such student and the student's guardian, or either one, as applicable, are of the opinion that adding information is not sufficient to explain, clarify or correct objectionable material in the student record, they shall have the right to have a conference with The Chief Education Officer or designee and make their objections known. The Chief Education Officer or designee shall within one week after the conference render to such student and the student's guardian, or either one, as applicable, a decision in writing, stating the reason or reasons for the decision. If the decision is in favor of the student and the student's guardian, such steps as may be necessary to put the decision into effect shall be taken promptly.

If a student or legal guardian believes that the record contains inaccurate or misleading information, the student or legal guardian may prepare a statement of disagreement, with assistance if requested, which shall be entered into the record.

### **Appeals-Decisions of the Chief Education Officer or Designee**

In the event that any decision regarding any of the provisions contained in these policies/ procedures is not satisfactory in whole or in part to the eligible student and the student's guardian, or either, one, as applicable under these policies and procedures they shall have the right of appeal to The Chief Education Officer or designee; requests for such an appeal shall be in writing.

The Chief Education Officer or designee shall, within two weeks after being notified of such appeal (longer should the appellant request a delay), review the issues presented and render a written decision. If the decision is in favor of the appellant, the Chief Education Officer or designee promptly shall take such steps as may be necessary to put the decision into effect.

If a student or legal guardian believes that the record contains inaccurate or misleading information, or objects to the collection of the information or its use, they may file a grievance following the grievance process.

**Notification**

The appropriate school official shall, within 90 days of their effective date, notify all students and their guardians of the general provisions of these policies/procedures and that copies of these policies/procedures are available to them for inspection.

In addition, access to the policies/procedures shall be made available to all staff and their review made a condition of employment and subject of pre-and in-service training.

**Severance Clause**

The provisions of these policies/procedures are severable and should any section be found upon judicial review to exceed the authority of the Law or regulations, the remaining sections shall not be affected. In addition, these policies/procedures shall be reviewed and modified or updated as required on a regular basis but at least yearly.

**Record Retention Schedule**

| Record           | Description  | Retention                       |
|------------------|--|---------------------------------|
| Transcript       | Administrative records that constitute the minimum data necessary to reflect student's educational progress: data shall be limited to: name, address, phone number of student as well as parent guardian; birthdate, name; course title and grades or equivalent, course credit, grade level completed; and year completed | 60 years from date of discharge |
| Temporary Record | All the information in the student record that is not contained in the transcript. This includes   | 7 years from date of discharge  |

|                        |   |                                 |
|------------------------|---|---------------------------------|
|                        | any nursing forms, i.e. body checks and medication logs that are part of the nursing department         |                                 |
| Student Health Records | Any medical records including school physician or psychiatrist records as well as immunization records. | 10 years from date of discharge |

|   |   |   |
|---|---|---|
| <b>Policy Title: Family Engagement and Family Support</b> |   |   |
| Guild Program: Youth                                      | Date Approved by CEO: 6/1/2023  | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC                            |   | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                             | Legal Authority References: 603 CMR 18.08 (4), 18.05(4) (a); 606 CMR 3.06(2). |   |

**Policy**

The Guild recognizes families and caregivers as integral members of a student’s daily life and supports healthy and positive family relationships by providing education, empowerment, and encouragement to our families and caregivers while meeting their student’s developmental, social, emotional, and behavioral needs.

The Guild will ensure that family voice and participation is a part of the student’s treatment planning by maintaining contact information for the student’s family members and facilitating and documenting consistent family outreach. The family, including guardians, siblings, and other significant caregivers, will be integrated into the treatment process when appropriate.

The Guild will provide a variety of support services to the families of Guild students because their involvement and assistance is seen as essential to the student’s success. This includes the following:

- Routine and professional program contact and involvement for parents/guardians or other designated contacts including weekly updates from educational and residential programs, ongoing case management and support from Clinical case managers and support from clinical providers.
- Parent and family groups facilitated by Guild clinicians and designed to provide support, information and social contact.

Crisis counseling for families with immediate safety needs and, when included in treatment planning goals, longer term counseling designed to assist families with relationship building and/or behavior management techniques.

- Regularly scheduled visits for each student and family or in the absence of a family, the legal guardian, advocate or other designated contact person).

### **Clinical Case Managers and Transition Services**

The Clinical Case Manager is the primary contact person with the family or guardian and other external student contacts (unless otherwise designated). The Clinical case manager serves as the overall programmatic liaison among The Guild School, parents/guardians, and other external agencies.

#### **The Clinical case manager is responsible for the following:**

- Communicating overall student status on a regular basis;
- Performing general case management and ensuring ongoing communication is completed by telephone, email, letter, use of logs, or individual and/or group meetings;
- Providing family assistance in such areas as securing additional outside services (e.g., advocates, volunteers, visiting resource).

#### **The Transition Service Coordinator is responsible for the following:**

- Providing support to the parents/guardians through any student transitions including communication updates by phone or team meetings, connecting the parent/guardian with a parent advisory group, arranging visits to new placements and completing any case management responsibilities related to the transition.
- Maintaining contact with necessary collaterals or agencies involved in the transition.
- Assisting parents/guardians through Social Security Insurance (SSI) or Social Security Disability Insurance (SSDI), Medicaid, and guardianship application processes and initiating and maintaining contact with the necessary next step placements, e.g., Department of Developmental Services (DDS), Department of Mental Health (DMH), Massachusetts Rehabilitation Commission (MRC).

The Clinical Case Managers and Transition Service Coordinator are available to talk to or meet with family members at conveniently arranged times.

### **Home Visitation**

- Whenever possible, the home visitation schedule is established as part of the placement agreement prior to the student's enrollment at The Guild.
- It is the Residential Manager's responsibility to contact guardians on a weekly basis to determine if there are any changes in the visitation schedule.

- Guardians may take students home for holidays and other regularly scheduled Guild vacation periods.

### **Regular Telephone Contact**

- Students and/or guardians can initiate phone contact at the residence. Since many students in each home like to call or receive calls from their families each night, The Guild requests that calls be limited to 10 minutes to allow all students and families the opportunity for contact.
- The Residential Manager will follow up with guardians on weekly basis by email or phone based on guardian preference to provide parents an update on the student's weekly activities at the residence, answer any questions and respond to any guardian questions or concerns.
- A guardian contact record is maintained in both the day and residential program for the purpose of documenting contact for coordination of communication.

### **Contact with The Guild for Human Services Specialists**

- Classroom Teachers and The Guild's Specialists such as the Nurse Case Managers, Mental Health Clinicians, Occupational Therapist, Communication Specialists, Behavior Clinicians, and the Teaching staff also maintain contact with the parents of students receiving their specific services and are available for meetings upon request.
- The Clinical case manager will ensure a smooth transition to the day and residential programs upon a new student's arrival into the program. The Clinical case manager is available from the time of enrollment to answer any question the family may have about the placement. The Transition Services Coordinator is available to assist in any external placement process and will track the student during the 6-month follow-up period once they leave The Guild.
- The Nurse Case Manager maintains regular telephone and email contact with all parents of students on her/his caseload regarding medications and/or with chronic or emergency medical conditions, or other health-related issues.
- The Behavior Clinicians are available to provide Behavior Support Plan consultations/trainings to guardians on a regular basis or to review behavior support plans implemented in the program settings.
- The Communication Specialists and the Occupational Therapists are available to discuss their programs with the families to ensure generalization of acquired skills in the home or other community environments.
- Physical Education Teacher is available to discuss Physical Education programs with guardians to assist with developing/implementing students' adaptive physical education programs.



### **Program Visitation**

The Guild encourages visitation by parents, guardians, siblings, advocates, and other visitors to both the day and/or residential component of the program and has developed specific guidelines to facilitate this process.

### **Other Opportunities for Involvement**

Families are offered a variety of ways to interact in a more structured manner with The Guild for Human Services.

- Open House - Families are invited on an annual basis to visit the program and meet with teachers, specialists, and residential staff to see what their child has been doing during the year. The parents have an opportunity to see some of the programming in which their child participates and to review some of the products.
- Annual Awards Ceremony - Families are encouraged to attend the annual awards ceremony in which their children are recognized in both the day and residential settings.
- Parents are encouraged to participate in regularly scheduled Parent Groups. These groups allow parents to have an opportunity to meet with other parents, staff and invited speakers and ask their questions or discuss issues in a supportive environment. Group content includes education around the many aspects of Guild programming, support around family interactions, and managing caregiver stress. Family support may include family-to-family interactions with shared lived experiences.
- A Parent/Family Advisory Council meets regularly with members of The Guild's leadership team to provide feedback and input on Guild programming. This includes advisement to the CEO and the Board of Trustees on various student-related matters. The group focuses on matters such as education, safety, federal and state regulation, behavior management, and other topics as needed.

|  |  |                                     |
|--|--|-------------------------------------|
| <b>Policy Title: Provision of Social, Psychological and Psychiatric Services</b> |  |                                     |
| Guild Program:   | Date Approved by CEO: 6/1/2023             | Date Approved by Board: 6/8/2023    |
| Licensing Agencies: DEEC   |  | Date(s) Approved by Licensing: 2022 |
| Internal Procedure Reference:  | Legal Authority References: 102CMR 3.06(3) |                                     |

The Guild will arrange for the provision of a range of appropriate social, psychological and psychiatric services for students.

### Services

The Guild has a team of licensed or licensed eligible mental health clinicians who provide counseling and individual and group therapy to students. The Guild can also arrange for professional consultation in the area of evaluation and assessment; therapy and/or counseling for individuals and groups; psychiatric services; clinical consultation with residents, parents or guardians and staff; crisis intervention; and staff development geared to the specific needs of the students served. Some services are reimbursed by "third party" payers.

**Counseling services** are provided to students on-site. These services are provided by either Clinical Team members or external licensed practitioners coordinated through the program. These counseling services include individual and group counseling. Counseling services are typically provided on a weekly basis but may vary depending on the individual needs of the student and/or their family.

**Psychiatric services** are provided by two consulting psychiatrists who are on-call at all times and can be accessed through nursing on-call and senior administrators. The psychiatrists observe students, reviews behavioral data and meet with the student's team, including behavior, clinical, health services, residential and family, to monitor the progress of students on psychotropic and anti-psychotic medications.

**Crisis Intervention:** The Guild's clinical providers work diligently with all members of an individual's team to minimize the need for hospitalization when there is evidence of a mental health crisis. If a safety assessment conducted by a licensed clinician, mobile crisis team, or emergency department personnel indicates that an individual meets hospital-level of care, members of the Clinical and Health Services Teams will coordinate with the consulting medical personnel and provide advocacy for the individual's specific needs. The Guild team will remain in contact with the hospital placement and engage in transition planning meetings and activities to prepare for the individual's return to the program following discharge.

**Evaluation and assessment** is coordinated through the Clinical Team at The Guild. The Guild can arrange for psychological evaluations to be completed internally by The Guild’s staff psychologist or, if the scope of assessment requires a specialization or further expertise, through a consulting psychologist, neuropsychologist or other specialty provider.

**Staff training and development** is a formal and ongoing process for each staff member. Program staff are trained in prevention techniques which assist in recognizing antecedents to specific target behaviors, indicators of mental health crises, and/or psychiatric emergencies which may contribute to the escalation of maladaptive behaviors and necessitate clinical intervention.

|   |                                |                                  |
|---|--------------------------------|----------------------------------|
| <b>Policy Title: Human Rights -- Youth Programs</b> |                                |                                  |
| Guild Program:                                      | Date Approved by CEO: 6/1/2023 | Date Approved by Board: 6/8/2023 |
| Licensing Agencies:                                 |                                | Date(s) Approved by Licensing:   |
| Internal Procedure Reference:                       | Legal Authority References:    |                                  |

**Policy**

The Guild respects the human rights of all people. The Guild will promote and protect the human dignity, rights, and liberties of students by implementing training for all employees and students, provide resources and training for families and by designating at least one Human Rights Officer for Youth Services. The Guild for Human Services maintains that all students have the right to:

- be treated with dignity and respect
- be free of discrimination because of race, creed, citizenship, national origin, gender, age, religion, sexual orientation or handicap
- participate in a barrier-free program
- be taught in the least restrictive environment
- practice a religion
- vote (provided they are at least 18 years of age and are registered)
- be provided with a sound diet, appropriate recreation and exercise
- receive instruction that increases academic and independent living skills
- participate in writing their own individual education/service plan
- possess and store their own personal belongings
- manage and spend their own funds unless a conservator/guardian has been appointed or an evaluation has proved the student incapable of doing so
- be free from restraint unless it is the only way in which serious injury can be prevented

- not be given medications to control behavior in quantities that interfere with learning or as punishment, or for the convenience of staff
- be paid for vocational work shifts
- have access to their program records, and to know who has seen their record and the reason why
- file a complaint if they feel their rights have been violated
  - a student may file a human rights complaint with any Guild staff who will report the complaint to the Human Rights Officer

### **Procedures**

All Guild employees are trained on Basic Human Rights. Upon admission, Guild staff shall inform students of their rights and provide training on self-advocacy.

Upon admission to The Guild School and upon request at any time thereafter, The Guild shall provide students and/or guardians with the names, addresses and telephone numbers of the following organizations:

a. Disability Law Center (Massachusetts Mental Health Protection and Advocacy Project); b. Mental Health Legal Advisors Committee; c. Committee for Public Counsel Services; and d. Any other legal service agencies funded by the Massachusetts Legal Assistance Corporation, under the provisions of chapter 221A, to provide free legal services.

### **Role of Human Rights Officer(s)**

The Human Rights Officer(s) shall be appointed by the Chief Operating Officer or Chief Executive Officer. At least one Human Rights Officer will be part of the Quality Assurance department. The Human Rights Officer is responsible for human rights training and support for individuals and their families. The Human Rights Officer will offer advice, information and guidance to direct support staff on human rights issues. They also must seek out opportunities for individuals to exercise their rights. Overall, officers are trained to support the fulfillment of rights wherever individuals live, work or play.

### **Responsibilities of the Human Rights Officer include:**

- being an expert in the area Human Rights and the developmentally disabled
- being an advocate for students' rights
- providing training for staff and students in the area of Human Rights
- Ensure that ongoing QA site visits include:
  - whether students have the opportunity to live and receive services in the least restrictive and most normal setting possible

- whether students are provided adequate, appropriate and humane care and treatment which recognize students' human dignity and enables them to exercise self-determination and freedom of choice to their fullest capabilities.
- Remain informed on both current issues and new developments related to human rights, particularly as they apply to Residential Schools in the Commonwealth of Massachusetts.
- Evaluate if any Human Rights issue for students aged 18-22 should be reviewed by the Guild Human Rights Committee.

|   |  |                                       |
|---|--|---------------------------------------|
| Policy Title: <b>Education and Support of Sexuality</b> |  |                                       |
| Guild Program: Youth Programs                           | Date Approved by CEO: June 1, 2023                               | Date Approved by Board: June 13, 2023 |
| Licensing Agencies: DEEC, DESE                          |  |                                       |
| Internal Procedure Reference:                           | Legal Authority References: General Laws Chapter 71, Section 32A |                                       |

This policy and support statement cites directly from and is modeled after the Vermont Division of Disability and Aging Services Policy on Education and Support of Sexuality.

<https://ddsd.vermont.gov/sites/ddsd/files/documents/policy-education-support-of-sexuality.pdf>

Sexuality is part of who we are as individuals. It is a basic human drive. Sexuality can be expressed through feelings, emotions, and actions. The ways we express our sexuality vary from individual to individual, and also vary at different stages of our lives. The term “sexuality” applies to much more than just “having sex.”

**We support the right** of all people to have privacy, to have relationships of their choice, and to find satisfying ways of expressing their sexuality. Most sexual activity occurs in the context of social relationships, although some people choose and prefer solitary sexual activity. People have a variety of ways (both verbal and non-verbal) to indicate interest and desires. Many people need help and support to explore and enjoy social and sexual relationships of their own choosing. Many people also need support in discovering and becoming comfortable with their sexual identity.

**We support the right** of all people to learn about and become comfortable with the many aspects of their sexuality. Some people have religious or personal beliefs about how and when sexual expression should occur. Some people have made a religious or personal choice to avoid sexual activity altogether. We should respect the religious and personal beliefs of others. We should not seek to impose our own religious and personal beliefs on others.

**We support the right** of all people to identify their own personal and religious beliefs regarding sexual practices.

### **Privacy**

In our society, some types of sexual expression occur in public places, such as dancing, hugging, and kissing. But most intimate sexual expression occurs in private.

- We support the right of individuals to have privacy for both intimate and solitary sexual activities.
- We support the right of individuals to speak privately and confidentially about their sexual activities and feelings, and to choose those in whom they wish to confide.

### **Choice, Support, and & Consent**

Consent in a sexual context has three aspects:

- Refusing a request from another person
- Agreeing to a request from another person
- Initiating a request

All aspects are important. Individuals need to learn about entering into voluntary relationships that may have sexual elements. Individuals need to learn how to be successful in initiating interpersonal relationships that may have sexual aspects.

- **We support the right** of individuals who are the age of consent to choose or initiate relationships of a sexual nature. Intimate sexual relationships can have a profound effect upon a person's health, safety, and emotional well-being. Because people with developmental disabilities have been more vulnerable to sexual abuse than other citizens, we must be particularly careful to assure that sexual activity is wanted. Individuals need to learn how to protect themselves from predatory, inappropriate, or undesired advances.

- **We support the right** of all people to be free from unwanted sexual advances and safe from the threat of abuse. Certain sexual encounters may be so dangerous to the individual that others will feel responsible to intervene. Responses may range from providing access to birth control, counseling, education, or support to restrictions on the activity. The dangers and responses need to be assessed on an individual basis.

- **We support the right** of individuals to have personalized supports that will assist them to identify dangerous situation and to be safe.

We do not support testing for consent because it is an unreliable method of deciding whether or not a person is able to give consent. An individual's opinions and decisions about sexual relationships may change over time, and even from moment to moment. The level of consent that is needed is related to the degree of risk for the person; for instance, petting and kissing carry considerably less risk than sexual intercourse.

Capacity to consent can be learned and increased. Indeed, a person's capacity to consent is developed over years of learning and life experiences. Tools to assess decision-making and knowledge may be useful in designing individualized education and support.

- **We support the right** of people to receive individual supports and education to develop capacity and skill in initiating, declining, agreeing to, and engaging in sexual activity.

### **Illegal Sexual Activity**

There are certain limited situations where others have responsibility to prevent, stop, or report sexual activity that is illegal. In Massachusetts, these situations include, but are not limited to:

- A sexual encounter where one of the individuals does not consent
- Possession or use of child pornography (print, video, internet)
- A sexual relationship or activity between a paid worker and an individual receiving services
- Sexual activities that involve exploitation or abuse
- Any sexual act with a child under the age of 16
- Any sexual act between a person under 18 and a person who occupies a position of authority over the youth
- Exposing oneself sexually in a public place (lewd and lascivious)
- Prostitution (sex for hire)
- Incest (sex with a close relative)

Our goal is that all people will be free from victimization and from engaging in illegal sexual activity.

### **Education**

All people need education about safe sexual expression, and opportunities to talk about and discover their sexual feelings. Most people also need education about the possible consequences and legal aspects of sexual expression. Education is needed across the lifespan as individuals develop new interests, have new experiences, or encounter new risks.

- We support education about sexuality for individuals, families, staff and other workers.

In accordance with General Laws Chapter 71, Section 32A, the Guild School has adopted this policy and statement of support on the rights of all individuals. We also

acknowledge the rights of parents and guardians of our minor students in relation to curriculum that primarily involves human sexual education or human sexuality issues.

All parents/guardians of students in our schools will be notified annually, in writing of the courses and curriculum we offer that primarily involve human sexual education or human sexuality issues. Parents/guardians of students will be given the written notice at the time of admission. If the planned curriculum changes during the school year, to the extent practicable, parents/guardians will be notified of this fact in a timely manner before implementation.

Each such notice to parents/guardians will include a brief description of the curriculum covered by this policy, and will inform parents/guardians that they may:

1. exempt their minor child from any portion of the curriculum that primarily involves human sexual education or human sexuality issues, without penalty to the student, by sending a letter to the school principal requesting an exemption. Any student who is exempted by request of the parent/guardian under this policy may be given an alternative assignment.
2. inspect and review program instruction materials for these curricula, which will be made reasonably accessible to parents/guardians and others to the extent practicable. Parents/guardians may arrange with the principal to review the materials at the school and may also review them at other locations that may be determined by the Chief Education Officer.

A parent/guardian who is dissatisfied with a decision concerning notice, access to instructional materials, or exemption for the student under this policy may send a written request to the Chief Education Officer for review of the issue. The Chief Education officer or designee will review the issue and give the parent/guardian a timely written decision, preferably within two weeks of the request. A parent/guardian who is dissatisfied with the Chief Education Officer's decision may send a written request to the Chief Operating Officer for review of the issue following our grievance procedure.

|   |                                |   |
|---|--------------------------------|---|
| <b>Policy Title: Student Personal Possessions</b> |                                |   |
| Guild Program: Youth                              | Date Approved by CEO: 6/1/2023 | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC                    |                                | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                     | Legal Authority References:    |   |



**Policy**

It is the policy of The Guild for Human Services that students are allowed to acquire, retain and dispose of personal possessions provided:

- That the parent, guardian, or student (if their own guardian) sign the “Disclaimer of Responsibility for Personal Possessions” form.
  - The Guild prohibits the use, possession, sale, distribution, or manufacture of non-prescribed controlled substances or alcohol on Guild Youth property.
  - That no possessions will be allowed which are considered to present a threat of physical harm to the individual or other persons. This includes possession of ammunition, firearms or other weapons, including, but not limited to, guns, BB guns, bows, arrows, knives, brass knuckles, or other devices used as a weapon.
- a. If the student has already acquired such possessions, they will be kept in custody by the program for the student, given to the parent or guardian, or disposed of appropriately by the student.
  - b. Police or other safety agencies may be notified when appropriate.
  - c. The Human Rights Officer should be notified of any restriction or removal.
  - d. If it appears that further training would remove the threat of physical harm by the possession, and if such training is appropriate, available and in the best interest of the student, such training will be initiated and documented in the student’s record.

|   |                                   |                                     |
|---|-----------------------------------|-------------------------------------|
| <b>Policy Title: Drug Free Workplace and Residences</b> |                                   |                                     |
| Guild Program: Youth                                    | Date Approved by CEO:<br>6/1/2023 | Date Approved by Board:<br>6/8/2023 |
| Licensing Agencies: DEEC, DESE                          |                                   | Date(s) Approved by Licensing:      |
| Internal Procedure Reference:                           | Legal Authority References:       |                                     |

**Purpose:**

The Guild for Human Services is committed to maintaining a workplace that is free from drugs, tobacco and alcohol and has an obligation to set a good example for those individuals who have experienced alcohol and substance abuse difficulties.

**Policy:**

Smoking and Smoking Violations No Smoking Due to federal and state regulations, all Guild properties are SMOKE FREE facilities. Smoking is not allowed in any Guild facility or at any time. This policy includes all Guild residences and headquarters. Smoking is prohibited in any Guild vehicle. This includes all Guild youth residents, employees and visitors.

**Per the federal Controlled Substances Act, the unlawful manufacture, distribution, dispensation, possession or use of controlled substances on agency property, including vehicles, is strictly prohibited. This prohibition includes marijuana, which is deemed as a Schedule 1 narcotic.**

All incidents of the manufacture, distribution, dispensation, possession or use of controlled substances or alcohol will be dealt with on a case by case basis. Actions may include, but are not limited to:

- Confiscation
- Reporting to the police
- Treatment/Education

|   |   |                                     |
|---|---|-------------------------------------|
| <b>Policy Title: Student Allowance and Saving</b> |   |                                     |
| Guild Program: Youth                              | Date Approved by CEO: 6/1/2023                | Date Approved by Board: 6/8/2023    |
| Licensing Agencies: DEEC                          |   | Date(s) Approved by Licensing: 2022 |
| Internal Procedure Reference:                     | Legal Authority References:102 CMR 3.07(8)(b) |                                     |

**Policy**

It is the policy of the Guild that, to the extent feasible, students will have access to and control of their own funds.

For the purpose of this policy student specific funds and allowances emanate from four (4) major sources:

**Student Paychecks:** Money earned by students for work performed as part of their employment training. This money is paid bi-weekly by individual checks.

**Supplemental Security Income (SSI):** Checks are received monthly by students who are their own payee and deposited in their individual bank accounts. The Guild does not act as a representative payee for any student.

**Department of Children and Families (DCF):** provides quarterly clothing allowances for students in their care. These monies are received by The Guild business office in a check with an accompanying student invoice. The money is then re-allocated by issuing individual student checks for the invoiced amount and the check is given to the student’s Clinical case manager for deposit by the student into the student’s account.

**Parent Guardian:** gifts of monies received by students from parents, guardians, relatives or involved others.

**Procedure**

The Guild shall facilitate students cashing their paycheck on a regular basis.

- Students are provided assistance and training. This includes functional money management (money discrimination, making change, banking, cashing checks, budgeting money, etc.).
- With assistance and training, students determine how and when to spend their earned and unearned funds (gifts from family, clothing allowances, etc.).
- Such training is part of the educational component of the day program and is documented in the student’s IEP.
- A guardian conservator or representative payee may provide the student assistance with how to use the student’s funds.
- Students may elect to deposit funds into a bank account.
- A receipt will be given for amounts deposited; this will be used as the record for the transaction.
- Receipts will be kept for purchased items.
- Any interest is accrued in the individual student’s account

The Guild will participate with other involved agencies or parties, on the student’s behalf, on determining eligibility for financial benefits.

All transactions (debits and credits) will be recorded in an individual student financial ledger.

|   |  |   |
|---|--|---|
| Policy Title: <b>Visitation Policy and Procedures</b> |  |   |
| Guild Program: Youth                                  | Date Approved by CEO: 6/1/2023                                       | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DEEC, DESE                        |  | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                         | Legal Authority References: 102 CMR 3.07 (9), 603 CMR 18.03 (9) (a). |   |

## Policy

It is the policy of The Guild to support visitation at both the day program and in their residences. The Guild encourages and supports students who wish to visit with family and friends. Maintaining connection with family and members of their home community highlight a consistent value of community engagement and connection.

## Procedures

All visitors should arrange their visits through the Clinical case manager, residential manager or designated Education Administrator in order to coordinate date, time, anticipated length of visit and any necessary arrangements for privacy. These team members will be best able to support visitation and work to minimize any scheduling conflicts with community engagement and school activities.

Family members, a student's attorney, advocate, clergyman and personal physician may visit a student at any reasonable time between the within the Guild programs.

Staff may reasonably restrict the time and place of a visit in order to meet the needs and ensure the rights of the other students.

Students will be provided with a place to visit that will allow for confidentiality.

Students may invite visitors other than those listed above with permission of parent or guardian by working with their team to plan in advance. The student's team may limit the number or frequency of guests or restrict visits if they interfere with the student's behavior or the planned activities.

All visitors must follow existing Guild policies and procedures.

Students are allowed to visit outside the Guild within the following guidelines with the expectation that communication and scheduling will be done with the clinical case manager, Education Administrator or residential manager:

Visitors are asked to sign into visitor logs at either the Guild school or the student's residence.

Communication is key between Guild team members and visitors. It is expected that they will communicate about any significant incidents, medical issues or changes in behavior that have occurred just before or during a visit.

Students will not be restricted from visiting with family or other persons unless such opportunities are restricted by a court order or by a behavior plan for therapeutic reasons.

|   |  |   |
|---|--|---|
| Policy Title: <b>Communication via Phone and Mail</b> |  |   |
| Guild Program: Youth                                  | Date Approved by CEO: 6/1/2023                                     | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DEEC, DESE                        |  | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                         | Legal Authority References: 102 CMR 3.07 (9), 603 CMR 18.03 (9)(a) |   |

**Subject**

To establish guidelines for students communication via phone and mail.

**Policy**

It is the policy of The Guild to allow and support students to use mail and telephonic communication with family members and key people in their lives. Maintaining connection with family and members of their home community highlights a consistent value of community engagement and connection. Phone and mail communication should be confidential unless there are specific therapeutic limitations in place.

**Procedures**

**Mail**

Students at The Guild receive and send unopened mail as well as receive and make confidential telephone calls. Staff can assist students (i.e., read letters to them, etc.) who are unable to communicate through these means independently.

**Phone calls**

Most phone calls to and from families occur in the residential program. Phone calls to family generally occur nightly; students may receive calls during all awake hours. Calls can be made to the residential house phone or using a student’s cell phone or tablet. Video calls are encouraged as well.

|   |  |   |
|---|--|---|
| Policy Title: <b>Behavior Management and Support (9.1 Behavior Support)</b> |  |   |
| Guild Program: Youth  | Date Approved by CEO: 6/1/2023                             | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DEEC, DESE  |  | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:   | Legal Authority References: 603 CMR 46.00, 102 CMR 3.07(7) |   |

## Purpose

The Guild for Human Services shall have a written policy to establish guidelines for the use of behavior management procedures in accordance with the requirements of 603 CMR 46.00. The following guidelines are established to provide direction to Guild staff regarding the use of behavioral management procedures for the purpose of producing positive changes in individual student behavior.

The term "Behavior Management Procedures" refers to the systematic application of behavior change strategies and interventions that are based upon the principles of Applied Behavior Analysis (ABA). These empirically validated procedures encompass all types of programming including:

- **Antecedent Prevention:** arranging and adjusting the learning environment prior to the occurrence of problem behavior and clearly identifying and prompting appropriate and expected behaviors.
- **Skills Training:** explicitly teaching new behaviors to individuals to improve independent functioning and quality of life.
- **Behavior Reduction:** altering the consequence following problem behavior to reinforce alternative and desired behaviors while decreasing the frequency, duration, and intensity of behaviors that may result in injury to self and others, destruction of property, or interfere with skill acquisition.

## Basic Human Rights and Informed Consent

Individuals have the right to enjoy certain goods and services that may not be interfered with through behavioral programming. Under no circumstances will individuals at The Guild be:

- Subjected to cruel, hazardous, or abusive treatment
- Subjected to corporal punishment or verbal abuse
- Deprived of food as a form of punishment. No student shall be denied or unreasonably delayed a meal for any reason other than medical prescriptions.

- Secluded in a locked room
- Subjected to physical restraint as a form of punishment
- Deprived of sleep, shelter, or bathroom facilities as a form of punishment.

All behavior management procedures shall target only socially significant behaviors and be for the benefit of the individual and are not to accommodate staff. Behavior management procedures shall be a part of the individual's Behavior Support Plan (BSP) and attached to their Individual Education Plan (IEP) for annual review of changes to the plan and progress toward behavior change goals.

Whenever possible, individuals will be given the opportunity to participate in and/or consent to behavior management procedures. Parents/Guardians will be informed of and asked to provide consent to behavior management procedures both in the initial Guild's Placement Agreement and during annual Individual Education Plan (IEP) review meetings. Additionally, if significant changes are made to a behavior support plan, a behavior clinician will review these changes with parents/guardians prior to implementation.

### 1. **Methods for preventing student violence.**

The Guild utilizes behavior management procedures to help each individual served realize their full potential by acquiring the skills and behaviors necessary to live and work in the least restrictive setting. This is accomplished by creating a positive, structured environment with staff trained and motivated to provide positive reinforcement for appropriate behaviors, teaching of new skills, and consistent and effective responses to challenging behaviors.

Behavior Clinicians at The Guild complete comprehensive Functional Behavior Assessments (FBA's) to achieve three main goals:

1. To identify antecedent and setting events that may be precursors to targeted problem behaviors.
2. To identify new skills and replacement behaviors can be taught to the individual and reinforced across environments.
3. To identify the behavioral function of targeted problem behaviors and recommend function-based interventions.

Behavior Support Plans (BSP's) are developed to include antecedent strategies that arrange and adjust learning environments to prevent problem behaviors before they occur and to prompt and reinforce appropriate, alternative behaviors in challenging settings. BSP's also include guidelines for teaching specific, functionally equivalent replacement behaviors and outline individualized procedures for de-escalation and crisis response to potentially dangerous behavior.

The occurrence of maladaptive or problematic behavior should immediately prompt a complete examination of the individual's environment to determine if positive reinforcement is available to support more appropriate behavior. Generally, reducing problem behavior is accomplished by eliminating and/or controlling antecedents and teaching the individual new adaptive skills.

Behavior Clinicians review and chart data that is collected daily on an individual's target problem behaviors and employ data-based decision making when meeting with individuals, educational and residential teams, and parents/guardians. This data review may result in modifications to individual BSP's, additional training in behavior management procedures for Guild staff, and/or additional behavior assessment.

## 2. **Methods for preventing self-injurious behavior and suicide**

When the behavior of an individual endangers their own health and safety, either in the form of self-injurious behavior or suicidal or self-harm statements, Guild staff will follow specific behavior management procedures.

**Self-Injury:** Behavior Clinicians at The Guild complete comprehensive Functional Behavior Assessments (FBAs) for all individuals who engage in self-injurious behaviors to identify the functional relationship and environmental factors that contribute to the behavior and to develop an effective, function-based Behavior Support Plan (BSP). Staff members will be trained to implement preventative, antecedent interventions as well as protective, consequence-based interventions when an individual engages in self-injurious behaviors.

If an individual demonstrates a new or different topography of self-injurious behavior, or if an individual engages in self-injury with no prior history of the behavior, Guild staff should immediately examine the individual's environment to determine if positive reinforcement is available to support an alternative behavior. A Behavior Clinician, the Director of Behavior Services and/or the Chief Clinical Officer should be notified immediately, and the assigned Behavior Clinician should conduct an assessment of the behavior and modify the Behavior Support Plan as necessary.

**Suicide:** All Guild staff shall respond to statements or threats related to suicidal behavior with the highest degree of seriousness. A Mental Health Clinician, licensed psychologist, the Director of Mental Health Services, and/or the Chief Clinical Officer shall be notified immediately of all threats and attempts of suicidal behavior. The clinical team will assess the individual's level of risk and instruct Guild staff to implement specific safety precautions based on their assessment (e.g., increased supervision, removal of items from environment, coping/calming routines). Generally, Mental Health Clinicians will assess for the individual's ability to develop and implement a plan both immediately in the context of the threat and on an on-going basis during counseling sessions and regular clinical practice.



For individuals that may engage in suicide related behaviors on a frequent basis, the Behavior and Mental Health Clinicians will work collaboratively to develop a function-based intervention plan that addresses the mental health needs of the individual and creates a learning plan for coping/calming strategies and positive replacement behaviors. For these individuals, specific, evidence-based or emerging-practice procedures will be included in the Behavior Support Plan.

### 3. A description and explanation of the program's alternatives to physical restraint

The Guild utilizes a system of intervention for behavior change that implements the least restrictive procedure necessary to produce the desired behavior change. Physical restraints are NOT used as a behavior management procedure. Behavior Clinicians are responsible for developing function-based Behavior Support Plans (BSP's) that identify the appropriate, evidence-based, behavior change procedures for specific problem behaviors.

Behavioral interventions and management procedures are developed with consideration for the environment within which they will be implemented. A variety of behavioral management procedures are clearly defined and considered when developing individual BSP's. The Behavior Clinician (BCBA) recommends reinforcement (i.e., interventions designed to increase the future occurrence of a behavior) rather than punishment (i.e., interventions designed to decrease the occurrence of a behavior) whenever possible. If punishment procedures are necessary, the BCBA always includes reinforcement procedures for alternate behavior in the program. The BCBA modifies the Behavior Support Plan on the basis of data and continually reviews recommendations to ensure the least restricted procedure that is likely to be effective in dealing with a problem behavior is implemented.

**Note:** Meals shall not be withheld as a form of punishment or behavior management. No student shall be denied or unreasonably delayed a meal for any reason other than medical prescriptions.

**Note:** The Guild teaches Nonviolent Crisis Intervention which includes safe, non-harmful restraint positions developed by CPI (Crisis Prevention Institute.) CPI brings a focus on prevention skills to avoid physical interventions as much as possible. Physical restraint shall be used only in emergency situations of last resort, after other lawful and less intrusive alternatives have failed or been deemed inappropriate, and with extreme caution. Guild personnel shall use physical restraint with two goals in mind:

- To administer a physical restraint only when needed to protect a student and/or a member of the school community from assault or imminent, serious, physical harm; and
- To prevent or minimize any harm to the student as a result of the use of physical restraint.

For more information on Physical Restraint, please see the “Physical Restraint Policies and Procedures” document.

#### 4. A description of the program’s training requirements for staff

It is the policy and practice of The Guild to assure that all staff who provide direct services shall be trained in behavior management procedures. Training on behavior management procedures and behavior support plans is competency based and utilizes the Behavioral Skills Training model (i.e., instructions, modeling, rehearsal, and feedback). Behavior Clinicians and skilled trainers are responsible for facilitating these trainings.

- **Pre-Service:** New staff shall receive 3 hours of behavior management training within one month of their hire date or in the first month of the school year AND before they begin working independently with individuals. This training includes a review of the Guild restraint prevention and behavior management procedure policies as well as instruction regarding documentation and reporting requirements and investigation of injuries and complaints.
- **Annual Training:** Veteran staff shall receive a minimum of 2 hours of refresher training on behavior management each year during regularly scheduled staff professional development days. This training includes a refresher of the Guild restraint prevention and behavior management procedure policies as well as instruction regarding documentation and reporting requirements and investigation of injuries and complaints.
- **Individual Plan Training:** All staff will receive in-service training on the behavior support plans for the specific individuals that they are regularly assigned to work with. Individual plan training may occur individually or in small groups as needed. These trainings will occur when:
  1. The staff member begins working with an individual
  2. The staff member or supervisor requests additional training
  3. The behavior clinician observes procedural drift when monitoring the fidelity of behavior support plan implementation
  4. The behavior clinician makes a change to the individual's behavior support plan.

**Note:** Behavior support training must be provided to all program staff within the first month of the school year regarding the behavior support policies and the requirements when such procedures are implemented OR for employees hired after the school year begins, behavior support training must be provided and completed within one month of the date of hire of the employee.

#### 5. A description of the program’s reporting requirements and follow-up procedures

Per Guild Policy, all serious incidents are documented on the Incident/Accident (IA) form. By definition, restraint procedures are serious incidents. Each incident is reviewed by the Residential Manager, Chief Education Officer and the Restraint Coordinator(s).

The reporting procedures for restraints are as follows:

- Verbal report to Chief Education Officer/principal or designee as soon as possible;
  - Written report to Chief Education Officer/principal no later than next school working day; if the Chief Education Officer/principal is involved in the restraint, the Chief Executive Officer or Chief Operating Officer will receive the written report.
  - Inform Parents/guardians within 24 hours of restraint event verbally or via email;
  - Written documentation (the IA copy) within three school working days (SWDs) of the restraint, either by email or by regular mail and post-marked no later than three SWDs, in native language of parent, where appropriate. Included in the written documentation will be an invitation for Parents or Guardians to request a conference with Quality Assurance personnel, the Chief Education Officer and/or other members of the individual's team should they have any concerns, questions or input.
  - Any injuries to individuals requiring emergency medical care that occur as the result of the administration of a restraint are documented and reported to DESE.
  - Report all physical restraints to required licensing agencies, in the manner and form as directed by those agencies.
6. **For any complaints regarding behavior support policies please refer to the Guild's youth policy on complaints and grievances**
  7. **A description including timelines of the program's procedure for receiving and investigating complaints regarding behavior support policies.**
  8. **A description of the procedures to be followed for implementing the behavior support reporting requirements.**

All Guild staff are responsible for collecting data related to problem behaviors identified in Functional Behavior Assessments (FBA's) and included in Behavior Support Plans (BSP's). Behavior Clinicians develop data tracking forms and train Guild staff to accurately enter information into the form during in-service training. This data is then collected by the Behavior Clinician and charted on a weekly basis. Data and charts related to an individual's behavior shall be used by the Behavior Clinician when reporting to the individual's parents/guardians and educational team.

For all behavior management procedures included as part of the Individual Education Plan (IEP), the IEP Team will reconvene every twelve months. During this meeting, the Behavior Clinicians the Behavior Support Plan (BSP), will review current behavior data and informal and formal behavior assessments. Goals and objectives for behavior

management procedures will be developed and included in the IEP and reviewed by the individual's school district and parents/guardian.

In addition to the IEP annual review, quarterly Progress Review Meetings and written Progress Reports will include a review of current behavioral data and report progress toward IEP goals and objectives.

**9. A description of the program's procedure for making both oral and written notification to the parent.**

The reporting procedures for parents/guardians are as follows:

- Inform Parents/guardians within 24 hours of restraint event; Phone, email, in person
- Written documentation (the IA copy) within three school working days (SWDs) of the restraint, either by email or by regular mail and post-marked no later than three SWDs, in native language of parent, where appropriate. Included in the written documentation will be an invitation for Parents or Guardians to request a conference with Quality Assurance personnel, the Chief Education Officer and/or other members of the individual's team should they have any concerns, questions or input.

**10. A procedure for the use of time-out**

To support the safety and learning of each student at the Guild and to assist with the de-escalation and calming of unsafe behaviors, "Time-out"/Separation procedures may be implemented. "Time-out" shall mean a behavioral support strategy developed pursuant to 603 CMR 46.04(1) in which a student temporarily separates from the learning activity or the classroom, either by choice or by direction from staff, for the purpose of calming."

During a time-out/separation procedure, a student must be continuously observed by a trained staff member. Staff shall be with the student or immediately available to the student at all times. The door/exit should never be locked, held or blocked. If a student wishes to close a break room door, staff shall remain immediately available to that student and maintain continuous observation.

Seclusion is defined as "the involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving." 603 CMR 46.02 Seclusion is prohibited in public and private education programs, including The Guild School.

For more information on the use of Time-out, please see the "Student Separation Resulting from Behavior Support" document.

|  |  |   |
|--|--|---|
| Policy Title: <b>Bullying Prevention and Intervention Plan</b> |  |   |
| Guild Program: Youth Program                                   | Date Approved by CEO: 6/1/2023                   | Date Approved by Board: 6/8/2023            |
| Licensing Agencies: DESE                                       |  | Date(s) Approved by Licensing: January 2019 |
| Internal Procedure Reference:                                  | Legal Authority References: M.G.L. c. 71, § 37O, |   |

The mission of The Guild for Human Services is to educate, encourage and empower individuals with intellectual disabilities so they may achieve their full potential to lead high-quality lives and participate meaningfully in society. The Guild for Human Services Bullying Prevention and Intervention Plan is a comprehensive approach to addressing bullying, cyber-bullying and retaliation. The Guild for Human Services is committed to working with students, staff, families and law enforcement to prevent issues of bullying behavior.

All students who are part of the Guild for Human Services are supported by behavior support plans that support positive behaviors. Challenging behaviors such as aggression, inappropriate verbal comments, teasing and property destruction are outlined in the student's individualized plans with specific staff interventions to these target behaviors. These behaviors are addressed throughout the student's day and team members are constantly evaluating progress in these areas and adding additional interventions if needed.

The Guild for Human Services Bullying Prevention and Intervention Plan applies to students and members of a school staff, including, but not limited to educators, administrators, school nurses, cafeteria workers, custodians, bus drivers, athletic coaches, advisors to an extracurricular activity and paraprofessionals.

**Leadership**

Leadership at all levels of the Guild for Human Services administrative team will play a critical role in developing and implementing Bullying Prevention and Intervention Plan in the context of other whole school and community efforts to promote positive school climate. The Chief Officers and Directors at The Guild have a significant role in teaching students to be civil to one another and promoting understanding of and respect for diversity and difference. Through such structures as our employee code of conduct and agency wide Diversity Plan, The Guild has established expectations around respectful conduct. By implementing Positive Behavioral Interventions and supports, respect is operationalized and taught in all settings. Guild leadership will continue to set priorities by using data and staying current with best practices around bullying prevention. These individuals are responsible for setting priorities and for staying up-to-date with current research on ways to prevent and effectively respond

to bullying. It is also the responsibility of leaders to involve representatives from the greater school and local community in developing and implementing the Plan.

- A. Involvement in Developing the Plan:** The Guild will seek out public involvement in developing the Plan. As required by M.G.L. c. 71, § 37O, the Plan must be developed in consultation with teachers, school staff, professional support personnel, school volunteers, administrators, community representatives, local law enforcement agencies, students, parents and guardians. The plan will be shared with students, staff and parents and guardians as well as outside agencies as seen fit for feedback. Input from these individuals will be taken and implemented into the plan as appropriate.
- B. Assessing needs and resources:** The Guild for Human Services has a bullying curriculum that students participate in. If a report of bullying is submitted the Guild leadership reviews the incident and determines what follow up is necessary.

Annually Guild leadership will assess the adequacy of current programs; review current policies and procedures; and review available data on bullying and behavioral incidents; and assess available resources including curricula, training programs, and behavioral health services.

In addition to looking at the above information at least once every four years beginning with 2015/16 school year, The Guild for Human Services will administer a Department of Elementary and Secondary-developed student survey to assess school climate and the prevalence, nature, and severity of bullying at The Guild for Human Services. Additionally, The Guild School for Human Services will annually report bullying incident data to the Department.

The Guild for Human Services will also review bullying reports periodically to help to identify patterns of behaviors and areas of concern, and will inform decision-making for prevention strategies including, but not limited to, adult supervision, professional development, age-appropriate curricula, and in-school support services.

- C. Planning and Oversight:** The Chief Education Officer or designee is responsible for the oversight of the plan. Specific oversight responsibilities may include:

- Receiving reports on bullying
- Maintaining data on bullying and assessing procedures to reduce incidences of bullying
- Planning on-going professional development
- Planning supports for aggressor and target
- Developing or revising the Bullying Prevention and Intervention Plan
- Reviewing and updating the plan yearly
- Ensuring staff are trained on the plan

- Coordinate parent awareness of the Bullying Prevention and Intervention Plan
- Assessing additional resources, the agency may need surrounding this topic.

#### **D. Developing priority statements and Guild for Human Services Philosophy:**

The Guild for Human Services Bullying Prevention and Intervention Plan ("Plan") is a comprehensive approach to addressing bullying and cyberbullying, and is committed to working with students, staff, families, law enforcement agencies, and the community to prevent issues of violence. The Guild for Human Services has developed priority statements regarding the school's philosophy on bullying.

- The Guild for Human Service expects that all members of the school community will treat each other in a civil manner and with respect for differences.
- The Guild for Human Services is committed to providing all students with a safe learning environment that is free from bullying and cyberbullying. This commitment is an integral part of our comprehensive efforts to promote learning, and to prevent and eliminate all forms of bullying and other harmful and disruptive behavior that can impede the learning process.
- The Guild for Human Services recognizes that certain students may be more vulnerable to become targets of bullying, harassment, or teasing based on actual or perceived characteristics, including race, color, religion, ancestry, national origin, sex, socioeconomic status, homelessness, academic status, gender identity or expression, physical appearance, or sensory disability, or by association with a person who has or is perceived to have one or more of these characteristics. The Guild for Human Services will identify specific steps it will take to create a safe, supportive environment for vulnerable populations in the school community, and provide all students with the skills, knowledge, and strategies to prevent or respond to bullying, harassment, or teasing.
- The Guild for Human Services will not tolerate any unlawful or disruptive behavior, including any form of bullying, cyberbullying, or retaliation, in our school buildings, on school grounds, or in school-related activities. We will investigate promptly all reports and complaints of bullying, cyberbullying, and retaliation, and take prompt action to end that behavior and restore the target's sense of safety. We will support this commitment in all aspects of our school community, including curricula, instructional programs, staff development, extracurricular activities, and parent or guardian involvement.
- The philosophy of The Guild for Human Services is based on the belief that all students have the right to access a diverse array of services that will help them acquire the skills and behaviors necessary to live and work as independently as possible in the community.
- The Guild for Human Services expects that all community members will treat each other with respect at all times.

#### **Training and Professional Development**

Professional development will take place yearly and staff will be trained on their roles and responsibilities under the law and teach them to prevent, identify and respond to bullying.

Training will include an overview of the steps that the Chief Education Officer or designee will follow upon receipt of a report of bullying or retaliation and an overview of the bullying curriculum that is offered at The Guild for Human Services. In addition professional development will be based on research and include the following information on:

- (i) developmentally appropriate strategies to prevent bullying
- (ii) developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents;
- (iii) information regarding the complex interaction and power differential that can take place between and among an aggressor, target, and witnesses to the bullying;
- (iv) research findings on bullying, including information about specific categories of students who have been shown to be at particular risk for bullying;
- (v) information on the incidence and nature of cyber bullying and
- (vi) internet safety issues as they relate to cyber bullying

Additional areas that The Guild for Human Services identified for professional development include:

- Promoting and modeling use of respectful language
- Fostering an understanding of respect for diversity and difference
- Building relationships and communicating with families
- Managing classroom behavior
- Using positive behavioral intervention strategies
- Teaching students skills including positive communication, anger management, and empathy for others
- Engaging students in behavior plan management and decision making
- Maintaining a safe environment for everyone

**Training Plan:** All staff will receive a copy of the bullying prevention plan as part of their orientation when hired.

All staff will receive annual training related to bullying prevention and the bullying response plan.

The training will include staff duties and responsibilities under the plan and an overview of the steps followed upon receipt of a bullying or retaliation report as well as an overview of the bullying curriculum offered. Professional development will address ways to prevent or respond to bullying or retaliation for students with disabilities that



must be considered when developing students Individualized Education Plans. In addition, staff will be trained on specific vocabulary related to bullying.

As required by M.G.L. c. 71B 3 as amended by Chapter 92 of the Acts of 2010, when the IEP team determines the student may participate in or is vulnerable to bullying, harassment, or teasing because of disability the IEP team will consider what should be included in the IEP to develop student's skills and proficiencies to avoid and respond to bullying, harassment, or teasing.

### **Access to Resources and Services**

The Guild for Human Services wants to ensure that the needs of targets, student aggressors, families and others are addressed. Students at The Guild for Human Services will participate in a bullying curriculum and if a bullying related issue arises they will address the specific incident with a counselor.

**Identifying Counseling and other resources:** The Guild for Human Services has mental health clinicians and behavior clinicians on staff. As part of the needs assessment the Guild will determine if the current staffing is sufficient to address the number of bullying related incidents that take place.

**Students with Disabilities:** As required by M.G.L. c. 71B, § 3, as amended by Chapter 92 of the Acts of 2010, when the IEP Team determines the student has a disability that affects social skills development or the student may participate in or is vulnerable to bullying, harassment, or teasing because of disability, the team will consider what should be included in the IEP to develop the student's skills and proficiencies to avoid and respond to bullying, harassment, or teasing.

### **Academic and Non-Academic Activities**

**Specific bullying prevention approaches-** Bullying prevention curricula will be informed by current research and among other things emphasize the following approaches:

- Using scripts and role plays to develop skills
- Empowering students to take action by knowing what to do when they witness other students engaged in acts of bullying or retaliation, including seeking adult assistance;
- Helping students understand the dynamics of bullying and cyber bullying, including the underlying power imbalance
- Emphasizing cyber safety, including safe and appropriate use of electronic communication technologies
- Enhancing students' skills for engaging in healthy relationships and respectful communications; and

- Engaging students in safe, supportive school environment that is respectful of diversity and difference
- Differentiate between types of bullying and be shown examples

**General teaching approaches that support bullying prevention efforts-** The following approaches are integral to establishing a safe and supportive school environment.

- Setting clear expectations for students and establishing school and classroom routines through the use of behavior treatment plans and daily schedules
- Creating safe school and classroom environments for all students, including for students with disabilities, lesbian, gay, bisexual, transgender students, and homeless students
- Using appropriate and positive responses and reinforcement, even when students require discipline;
- Using positive behavioral supports;
- Encouraging adults to develop positive relationships with students
- Modeling, teaching and rewarding pro-social, healthy and respectful behaviors
- Using positive approaches to behavioral health, including collaborative problem solving, conflict resolution training, teamwork, and positive behavioral supports that aid in social and emotional development;
- Using the internet safely; and
- Supporting students' interests and participation in non-academic and extracurricular activities, particularly in their areas of strength

Students at The Guild for Human Services will be provided age-appropriate curriculum on what bullying means and what to look for as well as the procedure for responding to bullying. Materials will be modified for student understanding.

### **Policies and Procedures for Reporting Incidents of Bullying and Retaliation**

Reports of bullying or retaliation may be made by the student, staff, parent, guardian or any other individual that witnesses the incident and may be oral or written. Oral reports made by a staff member must then be recorded in writing. The reports should immediately be reported to the Chief Education Officer or designee. A report made by students, parents or guardians, or other individuals who are not school staff, may be made anonymously. All Guild for Human Services staff are mandated to report an incident.

### **Responding to a report of bullying or retaliation**

Before an investigation into an allegation of bullying or retaliation the Chief Education Officer or designee will take steps to assess the need to restore safety to the alleged target and/or to protect the alleged target from possible further incidents. Responses may include but are not limited to, developing an individual safety plan, pre-determined classroom seating arrangements for the target and aggressor, pre-

determined classroom residential arrangements for the target and aggressor, lunch assignments for the target and aggressor and seating arrangements in vehicles for target and aggressor. In addition, the target will work with a clinician on processing the incident and if necessary the schedule of the target and/or aggressor may be altered.

The Guild for Human Services will implement appropriate strategies for protecting from bullying or retaliation a student who has reported bullying or retaliation, a student who has witnessed bullying or retaliation; a student who provides information during an investigation; or a student who has reliable information about a reported act of bullying or retaliation.

### **Obligations to notify others:**

1. Upon determination that bullying has occurred the Chief Education or designee will notify the parent/guardian of both the target and the aggressor of the incident and the procedures for responding to the incident. The Guild for Human Services may contact parents or guardians prior to or during the investigation. Notice will be consistent with state regulations at 603 CMR 49.00.
2. If the reported incident involves student(s) from another school or district The Guild for Human Services will promptly notify by telephone the principal or designee of that school(s) of the incident so each school may take appropriate action. All communication will be in accordance with state and federal privacy laws and regulations, and 603 CMR 49.00. In addition, once the Guild determines that bullying has occurred the Chief Education Officer or designee will notify the LEA of the sending district of both the target and aggressor.
3. At any point after receiving a report of bullying or retaliation, including after an investigation, if the Chief Education Officer or designee has a reasonable basis to believe that criminal charges may be pursued against the aggressor, the principal will notify the local law enforcement agency. Notice will be consistent with the requirements of 603 CMR 49.00. Also if an incident occurs on school grounds and involves a (former student under the age 21) visitors or volunteers who is no longer enrolled in the school, the Chief Education Director or designee shall contact the local law enforcement agency if s/he has a reasonable basis to believe that criminal charges may be pursued against the aggressor.

### **Investigation**

The Chief Education Director or designee will promptly investigate all reports of bullying and retaliation. In completing the investigation, all known information will be thoroughly reviewed.

During the investigation, The Chief Education Officer or designee may, among other things, interview students, staff, witnesses, parents/guardians and others as necessary. During interviews the Chief Education Officer or designee will remind the alleged

aggressor, target and witnesses that retaliation is strictly prohibited and will result in disciplinary action.

Interviews may be conducted by a member of the Clinical Division as appropriate. To the extent practicable, and given his/her obligation to investigate and address the matter, the Chief Education Officer or designee will maintain confidentiality during the investigation. In addition, a written record will be maintained of the investigation and results.

Procedures for investigating reports of bullying and retaliation will be consistent with the Guild policies and procedures for investigations.

### **Determinations**

The Chief Education Officer or designee will make a determination based upon all of the facts and circumstances. After a complete investigation if bullying or retaliation is substantiated, the Chief Education Officer or designee will take steps to prevent recurrence and to ensure that the target is not restricted from participating in all school, after-school and residential activities. The Chief Education Officer or designee will 1) determine what remedial action is required, if any, and 2) determine what responsive actions and/or disciplinary action is necessary.

Depending on the circumstances, the Chief Education Officer or designee may consult with the students' teacher, counselor and the target or aggressors parents or guardians, to identify any underlying social or emotional issue(s) that may have contributed to the bullying incident and to assess the level of need for additional social skills development.

A designated Guild team member will notify the parents/guardians of both the target and aggressor regarding the results of the investigation and, if bullying or retaliation is found, what action is being taken to prevent further acts of bullying and retaliation. All notice to parents must comply with applicable state and federal privacy laws and regulations. Due to legal requirements regarding confidentiality of student records, the Chief Education Officer or designee cannot report specific information to the target's parents or guardian about disciplinary action taken unless it involves a "stay away" order or other directive that the target must be aware of in order to report violations.

The Chief Education Officer or designee will inform the parent or guardian of the target about the Department of Elementary and Secondary Education's problem resolution system and the process for accessing that system, regardless of the outcome of the bullying determination.

### **Responses to Bullying**

The Guild for Human Services Bullying Prevention and Intervention Plan details strategies for building students' skills and awareness of bullying and retaliation. The

Guild utilizes a wide range of strategies that are individualized for student understanding.

**Teaching appropriate behavior through skills building-** Upon the determination that bullying or retaliation has occurred The Guild for Humans Services will use a range of responses that balance the need for accountability with the need to teach appropriate behavior. These may include:

- Offering individual or small group skill building sessions based upon the anti-bullying curriculum
- Implement positive behavioral supports to help students understand pro-social ways to achieve their goals
- Provide relevant teaching for students, in consultation with a clinician and other appropriate staff
- Modify individual behavior treatment plans to include a focus on developing appropriate social skills

**Taking Disciplinary Action-** If it is determined that disciplinary action is appropriate, the disciplinary action will be determined on the basis of facts that are found during the investigation, including the nature of the conduct, the age of the student(s) involved, and the need to balance accountability with the teaching of appropriate behavior. Discipline will be consistent with the Guild for Human Services Bullying Prevention and Intervention policy and The Guild for Human Services behavior management policies. Discipline procedures for students with disabilities follow the guidelines set forth by the federal individuals with Disabilities Education Act (IDEA).

**Promoting Safety for the Target and Others-** The Chief Education Officer or designee will determine if any changes need to be made to the school environment to enhance the target's sense of safety and that of others. Strategies that could be implemented include change of classroom or residence.

Within a reasonable period of time following the determination and the ordering of remedial and or disciplinary action, the principal or designee will contact the target and determine whether there has been a recurrence of the prohibited contact and whether additional supportive measures are needed. If so, the Chief Education Officer or designee will work with the appropriate school staff to implement appropriate measures.

### **Collaboration with Families**

The Guild for Human Services will make an effort to collaborate with students' families in order to increase the capacity of the school to prevent and respond to bullying.

**Parent Education and Resources-**The Guild for Human Services will offer information for parents and guardians on the parental components of the anti-bullying curriculum

offered. Bullying and Retaliation is a topic that may be addressed in Monthly Parent groups.

**Notification Requirements**-Each year The Guild for Human Services will inform the parents and guardians of enrolled students about the anti-bullying curricula being used. This notice will include information about the dynamics of bullying, cyber-bullying and online safety. The plan will be located on the website.

### **Prohibition against Bullying and Retaliation**

The Guild for Human Services prohibits bullying, cyber bullying and retaliation as defined above.

Acts of bullying, which include cyber bullying are prohibited:

- (i) on Guild school property and all Guild for Human Services residential property and property immediately adjacent to school grounds, at Guild sponsored events and related activities whether on Guild grounds or off Guild grounds on Guild owned or leased vehicles or used by a school district; or through the use of technology or an electronic device owned, leased or used by a school district or school, and
- (ii) at a location, activity, function, or program that is not school related through the use of technology or an electronic device that is not owned, leased, or used by a school district or school, if the acts create a hostile environment at school, or materially and substantially disrupt the education process or the orderly operation of a school

Retaliation against a person who reports bullying or provides information during an investigation of bullying is also prohibited.

### **VIII. Problem Resolution System:**

Chapter 86 of the Acts of 2014 amended Section 37O of chapter 71 of the General Laws to include (g) (v): The Plan shall inform parents or guardians of the target about the Department's problem resolution system and the process for seeking assistance or filing a claim through the problem resolution system. This information will be made available in both hard copy and electronic formats:

Any parent wishing to file a claim/concern or seeking assistance outside of the district may do so with the Department of Elementary and Secondary Education Program Resolution System (PRS). That information can be found at:

<http://www.doe.mass.edu/pqa>, emails can be sent to **[compliance@doe.mass.edu](mailto:compliance@doe.mass.edu)**.

### **Definitions**

**Bullying**, as defined in M.G.L. c.71, 370, is the repeated use by one or more students of a written, verbal, or electronic expression or a physical act or gesture or any combination thereof, directed at a target that:

- i. causes physical or emotional harm to the target or damage to the target's property;
- ii. places the target in reasonable fear of harm to himself or herself or of damage to his or her property;
- iii. creates a hostile environment at school for the target;
- iv. infringes on the rights of the target at school; or
- v. materially and substantially disrupts the education process or the orderly operation of a school

**Aggressor** is a student who engages in bullying, cyber-bullying or retaliation.

**Cyber bullying** is bullying through the use of technology or electronic devices such as telephones, cell phones, computers, and the internet. It includes but is not limited to, email, instant messages, text messages, and internet postings.

**Hostile environment** is a situation in which bullying causes the school environment to be permeated with intimidation, ridicule, or insult that is sufficiently severe or pervasive to alter the conditions of a student's education

**Retaliation** is any form of intimidation, reprisal, or harassment directed against a person who reports bullying, who provides information during an investigation of bullying or, who witnesses or has reliable information about bullying

**Target** is a student on whom bullying, cyber-bullying, or retaliation has been perpetrated.

#### **X. Relationship to Other Laws**

Consistent with state and federal laws, and the policies of the school or district, no person shall be discriminated against in admission to a public school of any town or in obtaining the advantages, privilege and courses of study of such public school on account of race, color, religion, ancestry, national origin, sex, socioeconomic status, academic status, gender identity or expression, physical appearance, sexual orientation, or mental, physical, developmental, or sensory disability, or by association with a person who has or is perceived to have one or more of these characteristics. Nothing in the Plan prevents the school or district from taking action to remediate discrimination or harassment based on a person's membership in a legally protected category under local, state, or federal law, or school or district policies.

In addition, nothing in the Plan is designed or intended to limit the authority of the school or district to take disciplinary action or other action under M.G.L. c. 71, §§ 37H or 37H½, M.G.L. c. 71, §§41 and 42, M.G.L.c 76 § 5, or other applicable laws, or local

school or district policies, or collective bargaining agreements, in response to violent, harmful, or disruptive behavior, regardless of whether the Plan covers the behavior.

|   |  |   |
|---|--|---|
| Policy Title: <b>Anti-Hazing Policy</b> |  |   |
| Guild Program: Youth                    | Date Approved by CEO: 6/1/2023   | Date Approved by Board: 6/8/2023            |
| Licensing Agencies: DESE                |  | Date(s) Approved by Licensing: January 2019 |
| Internal Procedure Reference:           | Legal Authority References: Massachusetts General Laws Chapter 269, Sections 17-19 and 603 CMR 33.00 |   |

**Policy**

The Guild for Human services will provide a safe environment that is free from any hazing behavior. Hazing means any act which willfully or recklessly endangers the physical or mental health of any student or other person. Hazing is a crime in the Commonwealth of Massachusetts.

**Procedures**

Under Massachusetts General Laws Chapter 269, Sections 17-19 and 603 CMR 33.00, The Guild for Human Services youth program will adopt anti-hazing policies as part of our disciplinary policies, and distribute copies of the anti-hazing law to all students enrolled full-time; to all student groups, teams, and organizations that are part of or are recognized by the school, or are permitted by the school to use its name and facilities; and to all known unaffiliated student groups, teams, or organizations.

Every year, the Chief Education officer or designee must collect a signed acknowledgement from a contact person for each student organization regarding distribution of information and agreement to comply with the law, and submit a report to the Department of Elementary and Secondary Education (“the Department”) certifying that the school has complied with the law. The reports must be filed with the Department on or before October 1. By November 1, the Department must notify the Attorney General of any school that has not filed a report.

In order to ensure that The Guild School is in compliance with the law, all students assigned to grades 9-12 will receive a copy of the anti-hazing law annually. Due to the cognitive level of the students who are served at The Guild School, the way which the law is presented will be modified for each student's understanding. Each student at The Guild School is treated with an Individual Behavior Treatment Plan that outlines target behaviors and staff responses. In a majority of cases, the students are monitored at all times by staff members and provided high rates of reinforcement for



appropriate behavior outlined in each student's Individualized Behavior Treatment Plan. If a crisis situation occurs, a team meets to discuss how to handle each individual case.

If an incident of hazing is reported, it will be investigated by an internal review committee and discipline will be determined based on the student's Individualized Behavior Treatment Plan in accordance with the 2004 amendments to IDEA, specifically **20 U.S.C. § 1415(k)**.

The Guild School is a private residential school and does not have any teams to which this anti-hazing policy is distributed. In the future, if The Guild School establishes any teams or organizations, the leaders of those organizations will be provided with copies of this policy and the signatures will be kept on file at The Guild School.

|   |   |   |
|---|---|---|
| Policy Title: <b>Student Separation Resulting from Behavior Support</b> |   |   |
| Guild Program: Youth Day Program  | Date Approved by CEO: 6/1/2023                                    | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC  |   | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:   | Legal Authority References: <b>603 CMR 46.00, 102 CMR 3.07(7)</b> |   |

**Policy**

In order to support the safety and learning of each student at the Guild, there are "Time-out" or separation procedures to support students deescalate and become calm.

"Time-out shall mean a behavioral support strategy developed pursuant to 603 CMR 46.04(1) in which a student temporarily separates from the learning activity or the classroom, from staff, for the purpose of calming." either by choice or by direction

Students are only separated from the group or programmed activities if one of the following occur:

- The procedures are written into a student's formal Behavior Support Plan.
- The situation is deemed unsafe due to severe aggressive and/or disruptive behaviors that compromise the safety of other students.
- Other students' learning and programming is impeded by the severity of the student's behaviors.

The persons responsible for implementing separation procedures are staff members who have been trained on the procedures written in the student's Behavior Support Plan.

During time-out, a student **must** be continuously observed by a staff member. Staff **shall** be with the student or immediately available to the student at all times. The door/exit should **never** be locked, held or blocked. If a student wishes to close a break room door, staff shall remain immediately available to that student and with ability for continuous observation.

The space used for time-out must be clean, safe, sanitary, and appropriate for the purpose of calming. At The Guild, this can include:

- any of the break rooms designated for student calming
- any classroom space that is clear of other students

1. Any Time-out or separation procedure lasting longer than thirty minutes must be approved by the Chief Education Officer, Chief Officer on-call , Chief Operating Officer or designee.
  - Staff shall contact the authorizing Chief or designee
  - Staff shall make request for extending separation for more than 30 minutes
  - Staff shall give context of situation
  - The Chief officer or designee may review next steps including but not limited to contacting a member of the clinical team for increased support
2. As soon as a student has returned to a baseline level of calm behavior, the Time-out or separation should end.

Staff support and behavior plans should be designed toward supporting return to the classroom or learning activity.

**Seclusion** is defined as “the involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving.” 603 CMR 46.02  
 Seclusion is **prohibited** in public education programs.

|   |  |   |
|---|--|---|
| Policy Title: <b>Physical Restraint Policies and Procedures</b> |  |   |
| Guild Program: Youth Services                                   | Date Approved by CEO: 6/1/2023                             | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DEEC, DESE                                  |  | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                                   | Legal Authority References: 603 CMR 46.00, 102 CMR 3.07(7) |   |

**Purpose**

The Guild for Human Services shall have a written policy on the use of physical restraint and administer physical restraint in accordance with the requirements of 603 CMR 46.00 and 102 CMR 3.07(7)

**Policy**

The Guild for Human Services maintains that Physical restraint shall be used only in emergency situations of last resort, after other lawful and less intrusive alternatives have failed or been deemed inappropriate, and with extreme caution.

**Methods for engaging parents and students in discussions about restraint prevention and use**

The Guild for Human Services recognizes the immense responsibility it assumes when a decision is made to employ physical restraint. Communication with parents and students about responding to emergency situations should begin during the admissions process. Prospective students and families and guardians learn about the Nonviolent Physical Intervention model and review the steps within the de-escalation process. This review includes understanding other aspects of the behavior management system and ways that Guild staff support positive behaviors. Parents and guardians may also receive an overview of how the Guild utilizes Nonviolent Crisis Intervention via the Crisis Prevention Institute (CPI).

Ongoing communication about behavior support, crisis prevention and physical restraint will continue to be part of updates to parents and guardians by members of the student's team. As leaders of a student's care, teachers and residence managers will be in contact with parents and guardians about any crisis prevention and when physical restraint is employed. It is Guild policy that parents and guardians are notified verbally within 24 hours of physical restraint and that they receive the written report within three school days.

Behavior Clinicians and Mental Health Clinicians work with and support each student at the Guild. These professionals provide clinical supports to students and their educational team, including families and guardians. This support includes debriefing events before, during, and after a physical restraint was utilized, additional training for staff related to behavior support plans, revising behavior support plans when necessary, and attending to any potential impact related to past trauma.

**A description and explanation of the method of physical restraint used by the program in an emergency situation**

The Guild teaches Nonviolent Crisis Intervention which includes safe, non-harmful

restraint positions developed by CPI (Crisis Prevention Institute.) CPI brings a focus on prevention skills to avoid physical interventions as much as possible. Physical restraint shall be used only in emergency situations of last resort, after other lawful and less intrusive alternatives have failed or been deemed inappropriate, and with extreme caution. Guild personnel shall use physical restraint with two goals in mind:

- (a) To administer a physical restraint only when needed to protect a student and/or a member of the school community from assault or imminent, serious, physical harm; and
- (b) To prevent or minimize any harm to the student as a result of the use of physical restraint.

### Physical Methods of Response

#### a) Disengagement

The Guild teaches escape and evasion as a part of the CPI Certification and Refresher trainings. There are low, medium and high level disengagement techniques.

Specifically, the following Disengagement Techniques are taught:

- The Supportive Stance
- Punch and kick blocks
- Avoiding the Power Area
- One and two handed wrist grab releases
- One and two handed hair pull releases
- Front and back choke releases
- Clothing grab releases
- Hug releases
- Bite releases

#### b) Transports and Escorts

The Guild differentiates between an escort and a transport. An **escort** is taught as a non-invasive support to walk with individuals to a designated location with only light guiding touch or no touch. A **transport** implies physical holds to reduce the likelihood that an individual can break free from staff, thereby, creating an unsafe situation for the individual, other individuals or for staff. As indicated in the restraint curriculum, staff are taught to transport individuals utilizing a variety of possible safe holds. Because transports restrict range of motion and freedom of movement they shall be documented as restraints.

- CPI medium or high level standing hold and transports
- Traditional CPI transport position
- Reverse transport position

#### c) Physical Restraint Holds – Standing Restraints, Seated Restraints, Moves to the floor and Floor Restraints.

Staff are trained to assess each individual behavior and to always employ the least restrictive restraint procedure. Effective January 1, 2016, legislation in the Commonwealth of Massachusetts prohibits the use of prone restraints except with

special permissions due to the increased risk of restraint related positional asphyxia. The Guild provides training in non-floor restraint procedures as safer restraint alternatives to floor procedures. Specifically, trainers emphasize positive behavioral supports, and flexible use of non-floor procedures such as the seated and standing low, medium and high level standing holds, Team Control (standing) and the seated Team Control procedures. The Guild will continue to work closely with CPI to enhance training for all staff in less intrusive restraint and non-restraint procedures. (Please see the Physical Restraint Curriculum \* for details about the physical restraint holds.)

During restraints monitoring the individual for signs of distress is the responsibility of all staff involved in the restraint. Each staff involved has different visual and /or auditory perspective of the individual being restrained. Should all available staff people be directly involved with the restraint, one person on an arm should act as the monitor and take responsibility to assure that the IA form is completed. Otherwise a staff person who is not directly involved in the restraint will serve as Monitor. If any significant signs of respiratory distress are observed, the restraint will be immediately released. Clear communication between staff is critical. Any staff person who has concern for the safety of the individual during a restraint must communicate this concern clearly to the primary staff person, who then must make a decision to modify or discontinue the restraint. The following are examples of situations which should result in the release from a restraint:

- Calm behavior
- Respiratory distress as evidenced by coughing, wheezing, gasping for air, pale skin color, blue discoloration of the lips.
- Seizure activity
- Vomiting
- A serious injury of the individual, unless the hold is to prevent further injury
- If staff is unable to safely hold the restraint

The staff person who documents the restraint and who assists the others involved in the restraint with observing the individual for signs of distress during the restraint should circle the word "monitor" under their signature on the Incident/Accident (IA) form to indicate that they were the monitor. There may be multiple monitors designated during the course of a restraint. Any injury to the individual should be documented on the form as well as the type of follow-up intervention (e.g. nurse, doctor or hospital). Staff are trained to complete a body check form with each restraint to assess possible injuries to the individual, resulting from the restraint.

Restraint holds are to be released as soon as it is safely possible. All staff participating in the restraint must communicate with the primary staff person who will make the determination as to when it is safe to attempt a release of the restraint. During the restraint, staff will use only as much pressure as is needed to maintain the restraint. The primary staff will determine when it is safe to release the individual either all at the same time or to have a graduated approach, where one area of the body such as

the legs are released earlier to help gauge the level of safety. Staff will maintain close proximity in the event that the restraint must be reapplied due to the continuance of unsafe behavior.

At times the primary staff may decide to release the restraint before the individual is calm and has met other release criteria in an attempt to shorten the need for restraint and to offer the individual an alternative to their aggressive behavior. In this event, upon the command to release the restraint, staff will step away from the individual giving them enough space to maintain safety through greater distance.

Individuals who have been restrained should be offered an opportunity to process the event and to communicate about the restraint. The spirit of this policy seeks to offer individuals respectful and therapeutic input into any physical interventions deemed necessary to keep them and/or others safe. From an ethical standpoint it is key that staff always maintain a therapeutic stance when considering and engaging in a physical intervention so that the process of therapeutic rapport may be enhanced at the conclusion of the restraint procedure. One consideration relative to offering students an opportunity to process a restraint too soon after the release is that this may agitate the student again, thereby extending the dangerous behavior that required the restraint in the first place. Thus, this should be assessed on a case-by-case basis and completed under the direction of a Behavior Clinician and/or Mental Health Clinician or following a procedure outlined in the individual's behavior support plan.

### **Prohibited Practices**

To maintain the greatest degree of safety, the following practices are prohibited from use with our residents:

- Choke holds, headlocks, full nelsons, half nelsons, hog-tying, or use of pressure points to inflict pain.
- Mechanical Restraints
- Seclusion
- Chemical or Medication Restraints
- Contact with the neck
- Procedures that put pressure on the chest, abdomen and back below the shoulders
- Prone restraints (January 1, 2016) unless permitted under 603 CMR 46.03 (1) (b)

### **Physical restraint is an emergency procedure**

Physical restraint is an emergency procedure and should only be used as a last resort, after all other lawful and less intrusive interventions have been considered, tried and failed to safely manage the emergency situation. Restraint is only used when needed to protect a student or member of the Guild community from assault or imminent,

serious, physical harm. Staff are expected to practice the approved methods of physical intervention to prevent or minimize any harm to the student.

### **Data Review and Documentation**

The Guild will implement the following procedures for data review on the program's use of restraint. The data review is focused on two areas:

- Individual student review (weekly)
- Administrative review (monthly)

#### **Individual student review**

The principal or designee shall conduct a weekly review of restraint data to identify students who have been restrained multiple times during the week. If such students are identified, the Chief Education Officer/principal or designee shall conduct a restraint reduction review to assess each student's progress and needs. The assessment shall include at least the following:

- review and discussion of the written reports submitted in accordance with 603 CMR 46.06 and any comments provided by the student and parent about such reports and the use of the restraints;
- analysis of the circumstances leading up to each restraint, including factors such as time of day, day of the week, antecedent events, and individuals involved; This analysis will include the consideration of whether the pattern is determined baseline for student and/or identification that a decreasing trend is occurring.
- consideration of factors that may have contributed to escalation of behaviors, consideration of alternatives to restraint, including de-escalation techniques and possible interventions, and such other strategies and decisions as appropriate, with the goal of reducing or eliminating the use of restraint in the future;
- agreement on a written plan of action by the program when data analysis prompts additional or modified action steps.

#### **Administrative review**

The Chief Education officer/principal or her designee shall conduct a monthly review of school-wide restraint data. This review shall consider patterns of use of restraints by similarities in the time of day, day of the week, or individuals involved; the number and duration of physical restraints school-wide and for individual students; the duration of restraints; and the number and type of injuries, if any, resulting from the use of restraint. The Chief Education Officer or her designee shall determine whether it is necessary or appropriate to modify the school's restraint prevention and management policy,

conduct additional staff training on restraint reduction/prevention strategies, or take such other action as necessary or appropriate to reduce or eliminate restraints.

The Guild's Safety Committee serves as the designated interdisciplinary committee to provide the administrative review in accordance with the steps specified above.

### **Training requirements for all staff**

Support personnel who do not provide direct services to Guild students will participate in the verbal de-escalation component of CPI.

It is the policy and practice of The Guild for Human Services to assure that all staff who provide direct services shall be trained in the crisis prevention, crisis intervention and physical management skills as taught in the curriculum of the Crisis Prevention Institute (CPI). New staff shall receive 16 hours of CPI training within one month of their date of hire or in the first month of the school year and before they begin working independently with individuals. Veteran staff shall receive 8 hours of refresher training each year on or before the anniversary of the previous year's training.

This in-depth training includes but is not limited to:

- The role of the student, family, and staff in preventing restraint;
- The program's restraint prevention and behavior support policy and procedures, including use of time-out as a behavior support strategy distinct from seclusion;
- Interventions that may preclude the need for restraint, including de-escalation of problematic behaviors and other alternatives to restraint in emergency circumstances;
- When behavior presents an emergency that requires physical restraint, the types of permitted physical restraints and related safety considerations, including information regarding the increased risk of injury to a student when any restraint is used, in particular a restraint of extended duration;
- Administering physical restraint in accordance with medical or psychological limitations, known or suspected trauma history, and/or behavioral intervention plans applicable to an individual student; and
- Appropriate procedures for preventing the use of physical restraint, including the de-escalation of problematic behavior, relationship building and the use of alternatives to restraint;
- A description and identification of specific dangerous behaviors on the part of students that may lead to the use of physical restraint and methods for evaluating the risk of harm in individual situations in order to determine whether the use of restraint is warranted;
- The simulated experience of administering and receiving physical restraint, instruction regarding the effect(s) on the person restrained, including instruction on monitoring physical signs of distress and obtaining medical assistance;



- Instruction regarding documentation and reporting requirements and investigation of injuries and complaints;
- Demonstration by participants of proficiency in administering physical restraint; and,
- Instruction regarding the impact of physical restraint on the student and family, recognizing the act of restraint has impact, including but not limited to psychological, physiological, and social-emotional effects."

### **A description of the intensive training for staff who serve as restraint resources for the program**

The staff trainers who provide training to staff in Crisis Prevention, Intervention and in Physical Restraints must meet the criteria set for trainers as established by the Crisis Prevention Institute (CPI). At present the requirement is that trainers must receive updated training every two years. Staff training is provided to help assure the Care, Welfare, Safety and Security for all staff and individuals served.

### **Reporting requirements and follow-up procedures for reports to parents/guardians and to the Department**

Per Guild Policy, all serious incidents are documented on the Incident/Accident (IA) form. By definition, restraint procedures are serious incidents. Each incident is minimally reviewed by the Residential Manager, Chief Education Officer and the Restraint Coordinator(s).

The reporting procedures for restraints are as follows:

- Verbal report to Chief Education Officer/principal or designee as soon as possible;
- Written report to Chief Education Officer/principal no later than next school
- Inform Parents/guardians within 24 hours of restraint event by email, phone or in person.
- Written documentation (the IA copy) within three school working days (SWDs) of the restraint, either by email or by regular mail and post-marked no later than three SWDs, in native language of parent, where appropriate. Included in the written documentation will be an invitation for parents or guardians to request a conference with Quality Assurance personnel, the Chief Education Officer and/or other members of the individual's team should they have any concerns, questions or input.
- Any injuries to individuals that occur as the result of the administration of a restraint are documented and reported to DESE using the Restraint Injury Form with a copy of the principal's record of physical restraints for 30-day period prior within three working days of administration of the restraint.

Report all physical restraints to the DESE Data base. Quarterly restraint reports shall be submitted to EEC, **Guild procedure for receiving and investigating complaints regarding restraint practices**

**Please see the Guild Youth Policy and Procedures for complaints and grievances**

**Maintaining an ongoing record of Restraint Data and Review**

The Chief Education Officer or her designee shall maintain an ongoing record of all instances of physical restraint. All incidents involving restraint are documented on the Incident/Accident form (IA). If staff have any medical/physical or psychiatric concerns these can also be documented on the IA form which helps to contextualize the raised concern. Additionally, each restraint is logged into a database indicating the type of restraint, duration, and staff involved. For any restraint occurring in the residence and outside of the day program, staff involved will include the administrator who gave consent to continue the restraint and who served as monitor. Restraint data is reported monthly to the Guild’s Safety Committee, quarterly to EEC and annually to DESE, in the manner and form directed by the Department. **Note:** The Guild for Human Services Youth Residential Educational program must comply with ESE restraint requirements under 603 CMR 46.00 during school hours and EEC restraint requirements under 102 CMR 3.00 during residential hours.

**Note:** A program within a program or facility subject to M.G.L. c. 123 or Department of Mental Health Regulations must comply with the restraint requirements of M.G.L. c. 123, 104 CMR 27.12 or 104 CMR 28.05, where applicable.

|  |  |   |
|--|--|---|
| Policy Title: <b>Complaints and Grievances</b> |  |   |
| Guild Program: Youth Programs                  | Date Approved by CEO: 6/1/2022   | Date Approved by Board: 6/1/2022                      |
| Licensing Agencies: DEEC, DESE                 |  | Date(s) Approved by Licensing: DESE 2022<br>DEEC 2022 |
| Internal Procedure Reference:                  | Legal Authority References: 102 CMR 3.04(3)(i); 603 CMR 18.05 (1.b.16) |   |

**Policy**

The Guild for Human Services recognizes and respects the rights of parents and students and encourages them to voice any concerns or complaint to their student's team and work as a team to find resolution. When a satisfactory resolution cannot be reached to a complaint, a formal grievance can be made. Any Grievance must be

reviewed and addressed by members of the Guild's leadership team in a timely manner with clear communication to the individual who raised the concern.

**Procedures**

Grievances may be presented either verbally, in writing or using adaptive communication methods. Guild students may register a formal grievance and will have access to social stories and accessible tools for individuals to communicate. Grievance should be submitted to the Chief Operating Officer. The Chief Executive Officer will also be notified of the grievance.

Reports of potential or suspected student abuse or neglect are referred to the Internal Abuse Investigation Committee (IAIC). IAIC meets within 24 hours of the complaint and determines what follow-up is necessary (e.g. internal investigation, filing of a 51-A or DPPC complaint, notification to DESE, DEEC, parents and LEA). (Note: Please see the Student Abuse and Neglect Policy.)

After a grievance is reviewed, it will be responded to within five (5) working days of receipt. The response may be by telephone or a meeting with a following written response. The person making the grievances can request a conference with the Chief operating Officer should they have any concerns, questions or input. The Chief Executive Officer maintains open communication with parents/guardians and students and wants to hear about any unresolved concerns, grievances or complaints.

The Guild's Human Rights Officer and Internal Abuse Investigation Committee may be petitioned for an appeal of a grievance falling under their purview. A student, parent or guardian will have a right to appeal to the Chief Executive Officer and ultimately to the Board of Trustees should they not be satisfied with the process of investigation into their complaint. Appeals will be requested and responded to in writing.

|   |  |  |
|---|--|--|
| Policy Title: <b>Student Abuse/Neglect Policy</b> |  |  |
| Guild Program: Youth                              | Date Approved by<br>6/1/2023                       | Date Approved by Board:<br>6/8/2023    |
| Licensing Agencies: DEEC                          |  | Date(s) Approved by<br>Licensing: 2022 |
| Internal Procedure<br>Reference:                  | Legal Authority References: DEEC 102 CMR 3.04 (3)e |  |

**Purpose**

To establish guidelines and procedures for the identification, investigation, reporting, and intervention of suspected emotional, physical, sexual abuse or neglect.

## Policy

Any student served by the Guild for Human Services has the right to be “free from” abuse or neglect. Students will be protected from abuse, neglect, and harm while they are receiving services from The Guild. No abuse or harm of any type will be tolerated.

The Guild recognizes the importance of employee training and involvement in the prevention, detection, investigation, intervention of student abuse or neglect. As professionals in the field of Human Services, it is every employee's responsibility to protect the student from possible permanent physical, sexual or emotional damage by detecting and reporting any suspected abuse or neglect immediately to the Chair of the Internal Abuse Investigation Committee or another member of the IAIC and/or Department of Children and Families or Disabled Persons Protection Commission.

It is further recognized that this is not only a moral responsibility but also a legal one. Massachusetts Law requires that mandated reporters report suspected abuse or neglect. Failure to do so may result in a fine of up to one thousand dollars. The purpose of this law is to protect the student and to prevent further abuse or neglect.

## Definitions

**Student:** refers to any individual enrolled and receiving services at The Guild regardless of age.

**Abuse:** refers to the non-accidental commission of any act by a caretaker upon a student which causes, or creates a substantial risk of, serious physical or serious emotional injury, or constitutes a sexual offense under the laws of the Commonwealth.

**Neglect:** refers to the failure by a caretaker, either deliberately or through negligence, to take those actions necessary to provide a student with minimally adequate food, clothing, shelter, medical care, supervision or other essential care.

**Physical Abuse:** refers to the non-accidental physical injury which may include severe beatings, burns, human bites, broken bones, hair pulls, pinches, choke holds, etc.

**Sexual Abuse:** refers to the exploitation of a student for the sexual gratification of an adult. This may include rape, incest, fondling of the genitals or exhibitionism.

**Emotional Abuse:** refers to excessive, aggressive, or unreasonable parental/caretaker behavior that places demands on the student to perform above the student's capabilities.

**Caretaker:** refers to a student's parent, guardian, or other person responsible for a student's health or welfare, whether in the same home as the student, a relative's

home, a foster home, or any other residential setting. If a staff member has reasonable cause to believe any student at the Guild has been abused or neglected, then it is a reportable incident. Likewise, if a staff member has reasonable cause to believe that a student has been abused or neglected at home or during a home visit, it is a reportable incident. When in doubt, report.

**Mandated Reporter:** includes any person in charge of a medical or other public or private institution, school or facility, or designee who has been notified by a member of his/her staff of a reportable condition. Mandated reporters also include any person paid to care for or work with a child in a public or private facility. All staff at the Guild should consider themselves Mandated Reporters.

**Professional Mandated Reporters include:** Physicians, public or private school teachers, social workers, day care workers, direct care providers, medical interns, educational administrators, foster parents, firefighters, Psychologists, guidance or family counselors, police officers, nurses.

**Reasonable Cause:** refers to a basis for judgment that rests on specific facts, either directly observed or obtained from reliable sources, and that support a belief that a particular event probably took place or that a particular condition probably exists.

**Reportable Condition:** refers to a serious physical or emotional injury resulting from abuse or neglect, or the commission of any act by a caretaker with a student which constitutes a sexual offense under the criminal laws of the Commonwealth, or the physical dependence of a child upon an addictive drug at birth, or emotional injury resulting from the threat of physical harm.

**Report:** refers to an oral/written communication to the Department of Children and Families (DCF) informing them of a reportable condition. Child care staff have the option of filing a report directly to the Department of Children and Families or the Disabled Person's Protection Commission or reporting the incident to the Internal Abuse Investigation Committee (IAIC) of The Guild.

**Substantiated:** means it was found by DCF / DPPC that there is some credible evidence of a reportable condition.

**Unsubstantiated:** means it was found by DCF / DPPC that there is a lack of any credible evidence of a reportable condition.

## Procedures

- 1.0 All employees will be screened prior to employment at The Guild.
  - 1.1. A written record of all reference checks will be kept in the employee's personnel file.
  - 1.2. Copies of certifications or other credentials, verifying employee's qualifications will be retained in the personnel files.
  - 1.3. Employees will be subject to a review of Criminal Offender Record Information (CORI) and DCF background check. Employees will not have unmonitored contact with students until results from these processes have been obtained.
- 2.0 All employees will be required to attend comprehensive in-service training on the subject of student abuse and neglect.
  - 2.1 In-service training will include the following:
    - Definition and description of the various types of student abuse and neglect.
    - Identification of emotional, physical, and sexual abuse through observation of student behavior and physical evidence.
    - Moral and legal responsibilities of staff members, and mandated reporter procedures.
    - Procedures to be followed in allegations of student abuse and neglect by staff members.
    - What should be reported as suspected student abuse or neglect.
    - Confidentiality of suspected student abuse reports and related information.
  - 2.2 Additional in-service training on students' Human Rights will be attended by all employees.
- 3.0 All students will receive training on their rights and responsibilities for telling staff of possible abuse by adults.
  - 3.1 Additionally, students will continue to participate in their Human Rights.
- 4.0 All Guild employees are mandated reporters of child abuse and neglect as well as the abuse and neglect of adult persons with disabilities. Employees are expected to follow all legal mandates of reporting to the Department of Children and Families (DCF) or the Disabled Person's Protection Committee (DPPC). Additionally, employees are to report suspected cases of student abuse or neglect immediately to the Internal Abuse Investigation Committee of The Guild.

If an employee chooses to call DCF or DPPC directly, it is encouraged the employee notify the Chair of IAIC or designee of the incident and that such a call to DCF or DPPC was made.

- 4.1 The Chair of the Internal Abuse Investigation Committee or designee will notify the other IAIC members of the report of suspected abuse or neglect and will convene the committee as necessary.
  - 4.1.1 The IAIC immediately will determine what, if any, emergency action should be undertaken to protect the student from all potential risk.
  - 4.1.2 If after reviewing preliminary information, the IAIC determines there is reasonable cause to believe that abuse or neglect has occurred, the Chair of the IAIC or his/her designee will immediately file a report with DCF/DPPC.
  - 4.1.3 DEEC, DESE, the LEA and guardians will be notified of the filing by the Chair of the IAIC or designees.
- 5.0 If the Guild is informed that a 51A has been filed externally, the following steps will be undertaken:
  - 5.1 The Chief Executive Officer and the IAIC will be notified immediately.
  - 5.2 Department of Early Education and Care (DEEC), Department of Elementary and Secondary Education (DESE), and any other involved parties will be notified as soon as possible (within 24 hrs.)
  - 5.3 The IAIC will determine what immediate emergency action, if any, should be undertaken to protect a student from all risk. **This may include the need to place the employee on “NO unmonitored contact with students” status or administrative leave. Only with DEEC approval can the employee be cleared to return to work and have unmonitored contact with students.**
- 6.0 Concurrent with filing a report of suspected abuse or neglect with external agencies (DCF, DPPC), The Guild's Internal Abuse Investigation Committee will convene as soon as possible following notification of an allegation. Investigative procedures which will be held at the highest levels of confidentiality, will include, but not be limited to the following:
  - 6.1 Interviews will be conducted with person(s) making the allegations.
    - 6.1.1 If the person is a staff member, the staff member will be required to complete an unusual Incident/Accident Report and submit it to the IAIC.
    - 6.1.2 If the person is a student, the student will be interviewed to the best of their ability and the student's records/history will be reviewed by the IAIC.
  - 6.2 Interviews will be conducted with the student who was allegedly abused if deemed necessary.
    - 6.2.1 The student's records will be reviewed by the IAIC.
    - 6.2.2 The School Nurse will determine the need for a physical exam/body check if necessary.

- 6.3 If the alleged abuser is an employee or volunteer at The Guild, interviews with that employee will be conducted.
    - 6.3.1 The employee's training and performance evaluation records and any other pertinent files will be reviewed by the IAIC.
  - 6.4 Interviews will be conducted with any other employee and/or student which the IAIC feels will provide pertinent information.
  - 6.5 Camera footage from the time of the alleged incident will be reviewed by the IAIC Chair or designees. A minimum of two IAIC members must review the camera footage.
- 7.0 Following a complete internal and any external investigations, the IAIC in conjunction with its licensing agencies, will determine whether the allegation(s) can be substantiated and what follow up action steps are required.
- 7.1 The Guild will provide a written report of the IAIC investigation to DCF/DPPC and DEEC; the report will include the name of the student; name and date of the employee filing the report; who the incident was reported to; a brief description of the incident; the nature of the incident; the need for any emergency action to ensure student safety; and follow-up action required.
  - 7.2 The Guild's IAIC will consult with any investigating agencies regarding their findings and recommendations.
  - 7.3 A separate confidential file will retain all records of the investigation. Personnel records of involved employees will retain any finding or corrective action plans related to the investigation.
  - 7.4 If a report filed with DCF or DPPC is substantiated the Guild will make a determination regarding the alleged abuser's employment status. All reports or files will be part of the personnel records.
  - 7.5 The IAIC will determine any necessary follow up regarding the involved student and will collaborate with the members of the student's team, as deemed necessary (counseling, medical follow-up, parental counseling, home visits, etc.).
  - 7.6 The IAIC will hold an investigation de-briefing with the necessary teams to review any internal/external findings, any corrective action(s)/citation(s), recommendations from the IAIC.

Below is the written plan for how to notify the IAIC team (copies of this plan are visible in every residence and at the day program):

## **STUDENT ABUSE & NEGLECT NOTIFICATION**

### **The Guild for Human Services**

ALL employees are to report suspected cases of student abuse or neglect immediately to any member of the Internal Abuse Investigation Committee. Employees may contact the Department of Children and Families (DCF) or the



Disabled Person's Protection Commission (DPPC) directly. If you call DCF or DPPC, please be sure to notify a member of the IAIC immediately thereafter. A written report regarding the filing must also be completed and faxed in by the employee within 48 hours of making the oral report.

|  |  |
|--|--|
| <p>AT ANY TIME:<br/>24 Hours/Day, 365 Days</p> | <p>ON-CALL<br/>NOTIFICATION PROCEDURES</p> |
|--|--|

|                      |   |
|----------------------|---|
| <p>CHAIR of IAIC</p> | <p>Kim Saad – Director of Quality Assurance<br/>Cell Phone: 781-330-5101 or ext. 5175</p> |
|----------------------|---|

|  |  |
|--|--|
| <p>ANY Member of IAIC<br/><br/>(You must speak to someone directly. In the event you are unable to reach any of the IAIC members after 15 minutes, please proceed with contacting the appropriate agency listed below)</p> | <p>Jennifer Smith- Director of Health Services<br/>Cell Phone: 781-254-3240 or ext. 5152<br/><br/>Michael Clontz- Chief Operating Officer<br/>Cell Phone:<br/><br/>Matthew Carmichael- Director of Human Resources<br/>Ext.<br/><br/>Carl Moran- Training Coordinator<br/>Ext.</p> |
|--|--|

|  |  |
|--|--|
|  |  |
|--|--|

|                               |  |
|-------------------------------|--|
| <p>* Staff May Also Call:</p> | <p>DCF Hotline (students up to age 17): 1-800-792-5200<br/>DPPC (students age 18-22 &amp; ADULT SERV.): 1-800-426-9009</p> |
|-------------------------------|--|

|   |   |                                  |
|---|---|----------------------------------|
| Policy Title: <b>Runaway and Missing Students – All Guild Sites</b> |   |                                  |
| Guild Program: Youth Programs                                       | Date Approved by CEO: 6/1/2023  | Date Approved by Board: 6/8/2023 |
| Licensing Agencies: DCF, DESE, DEEC                                 |   | Date(s) Approved by Licensing:   |
| Internal Procedure Reference:                                       | Legal Authority References: 102 CMR 3.07 (10,11); 110 CMR 7.115; 603 CMR 18.05 (10) |                                  |

**Policy**

The Guild for Human Services is committed to the safety and wellbeing of the individuals served. Due to potential risk of students wandering from the area, bolting, or running away, it is imperative that preventive measures for individuals be in place and that a rapid response plan is in place should an individual go missing.

**Prevention**

Prevention begins with an emphasis and training for all Guild program staff on engagement, behavior support and how to provide proper supervision of students. A consistent focus on engagement in child specific activities also serves as a prevention method. All program staff are trained in de-escalation strategies to support students who are experiencing frustration and distress. Student specific behavior plans often indicate antecedent behaviors for staff to attend to prevent bolting behaviors. As a secondary prevention system, The Guild utilizes various alarm systems in all its residences to prevent occurrences of student elopement. These systems include hard-wired alarms, motion detectors and battery-operated window and door alarms; the specific system used depends on the needs of the students in that particular residence. The Guild recognizes no alarm system can replace human supervision and monitoring and the primary emphasis in training and coaching continues to focus on staff supervision and engagement.

**Notification**

When any student is found to be missing, after an initial search, the site's staff will immediately call the police describing: height, weight, eye color and hair color of student (refer to student's Emergency Fact Sheet in their record book), a description of what the student is wearing, and information about the student's ability to demonstrate safety skills. The site's staff will then notify the Residential Manager or Overnight Supervisor who will then notify the appropriate on-call supervisor according to the posted on-call schedule. If not already notified, the manager or supervisor taking the call will notify the On-Call Residential Administrator, Director of Youth Residential Services, Chief Education Officer, or the Chief Executive Officer.

**Specific Search Plan:** A specific set of steps has been identified in order to systematically and thoroughly search for the missing student, while notifying the appropriate people in a timely fashion.

**Training:** No new employee will be solely responsible for the supervision of any student until they have attended the training for this policy. During their onboarding, new staff will be trained on behavior plans for students who have a history of bolting/running behavior or have the potential to exhibit such behavior.. Staff will be trained on preventative measures to reduce the likelihood of such behavior occurring.

**Documentation:** Data will be collected on student wandering, bolting and running away as it occurs, so as to improve the student's behavior management program and to take measures to prevent further occurrence. Data will also be collected on staff performance to ensure that professional conduct and compliance with policies and procedures is upheld.

### **Search Procedures: Student Missing from the Day Program**

Spend no more than five minutes conducting this search before next steps. If a student is discovered missing, an all school "Amber" alert will be announced and all available staff will meet in main lobby.

#### Day Program Building

- The following areas will be searched by staff:
  - the entire day program building including closets, bathrooms, kitchen, loading dock.

#### Immediate Outside Area

- Designated staff will also search:
  - the wooded area to the north and south of the school building,
  - the north and south parking lots,
  - the Guild Administrative wing and
  - the general business park property.

After the initial search of the building and surrounding property

The Chief Education Officer or designees will call the Concord PD

- Staff will search by car in each of the two directions on Virginia Road. When possible, a cell phone should be brought in the car. Staff should call the school every 5 minutes with updates.

## Notification Procedures for Missing Students

Associate Director of Education who will then notify the Chief Education Officer or Designee

Any Chief Officer can be notified if the above administrators are not reached

The Chief Education Officer or Designee will notify the Concord PD as needed

## Search Procedures: Student Missing from the Residence

Spend no more than two minutes conducting this search before next steps

### Search of Residence

- Immediately search the inside of the residence for the student, including all closets, the attic and basement, and all common areas as well as the immediate outside property. - If the student is not found within two minutes, call the police, and the Residential Manager, manager on-call or Overnight Supervisor
- After the police and the Residential Manager or Overnight Supervisor has been called, continue to search closets, attic, basement and all common areas.

### Search of Immediate Outside Area

- After the police have been notified of the missing student(s), and backup staff and the Residential Manager or Overnight Supervisor has been notified, continue to search the outside of the residence, including neighboring yards, sidewalks, and streets
- If staff cannot search the neighboring area without compromising their ability to provide appropriate supervision to the students in the residence, backup staff and/or the on-call supervisor will conduct the search.

### Search of Community

- If staffing is sufficient, one staff person will search the neighboring area by car.
- If staffing is not sufficient, the staff person on site will immediately call the on-call supervisor and back-up house for assistance with the search.

### Agency Notification

- DEEC and DESE will be notified within 24 hours by the Chief Executive Officer or designee
- The student's Clinical case manager and the will also be notified at this time (refer to student's Emergency Fact Sheet in their record book)
- The student's LEA will be notified by the on the next school day

- If for any reason a supervisor (Residential Manager, On-Call Residential Administrator, ,Director of Youth Residential Services, Chief Executive Officer) cannot be reached via cell phone or at home, the on-site supervisor will implement the aforementioned plan.

### Once Student Is Located

- The person finding the student will notify the residence staff, who will immediately notify the Residential Manager, Overnight Supervisor or School Administrator
- Residential Manager, Overnight Supervisor or School Administrator will ensure that arrangements have been made to inform all program staff/supervisors, parents/guardians and any outside agencies that have been contacted
- Staff should react neutrally and calmly to the student's return
  - If there is an established consequence for the particular student, it should be implemented immediately.
- If the student is returned during the night, the student will be directed to go to bed
  - An extra staff person will be assigned to provide direct supervision of that student
- The Residential Manager, Overnight Supervisor or Day Program Manager must complete an Incident/Accident report and write a Critical Incident Report (CIR) . The CIR should be submitted to the Director of Quality Assurance, Chief Operating Officer and CEO.
- If a student leaves Guild property two or more times in less than 60 days, the need for a formal behavior program will be assessed.
  - If child is in DCF custody, this review should be convened by DCF area director

### On-Call Notification Procedures: Residential Day

Call First:  
Residential Manager

Call Second:  
If you can't reach the Residential Manager, call the On-Call Administrator

Call Third:  
If you can't reach the On-Call Administrator, call the Director of Residential Services  
If you can't reach this person, call the Chief on-Call

On-Call Notification Procedures: Overnight  
10 p.m. – 8:30 a.m.

Call First:  
Overnight Supervisor

Call Second:  
If you can't reach the Overnight Supervisor, call the On-Call Administrator

Call Third:  
If you can't reach the On-Call Administrator, call Chief on-Call

### **Search Procedures: Student Missing from the Community**

- Immediately call the police to report the student as missing providing identifying information including: name, height, weight, eye color and hair color of student, a description of what the student is wearing, and information about the student's ability to demonstrate safety skills
- Notify the Residential Manager or Overnight Supervisor
  - The Residential Manager or Overnight Supervisor will notify On-Call Residential Administrator, the Chief Education Officer and the Chief Executive Officer.

If initial search is not successful, immediately call the police to report a student is missing

### **Notification of Others After Police Have Been Called**

- Notify the Residential Manager, Overnight Supervisor or Day Program Manager immediately after notifying the police
- The Residential Manager, Overnight Supervisor or Day Program Manager will notify others as follows: Director of Youth Residential Programs, Chief Education Officer the On-Call Administrator and Chief Executive Officer

### **Parent/Guardian Notification**

- the student's parents/guardians within 15 minutes or as soon as possible
- If the student is in DCF custody, the student's case worker will be notified

If the student's disappearance occurs during non-workday hours then the DCF hotline will be notified.

| <b>Policy Title: Transportation Safety and Use of Vehicles by Program Staff</b> |  |                                     |
|---|--|-------------------------------------|
| Guild Program: Youth  | Date Approved by CEO: 6/1/2023           | Date Approved by Board: 6/8/2023    |
| Licensing Agencies: DEEC  |  | Date(s) Approved by Licensing: 2022 |
| Internal Procedure Reference:   | Legal Authority References: 606 CMR 3.07 |                                     |

**Subject**

To establish a written policy regarding the transportation safety, vehicle usage and reporting functions by staff of The Guild.

**Policy**

The Guild shall provide the transportation necessary to implement each student’s service plan. All parts of the Guild youth programs will have available means to transport students in cases of emergency. In order to provide safe transportation all Guild employees will implement the following procedures.

**Driver’s License:** Upon hire, the employee will give a copy of their current driver’s license to Human Resources. When an employee has renewed their driver’s license, the employee will give a copy of their renewed driver’s license to the Human Resource Coordinator.

**Day Program Sign Out**

- Reserve vehicle by signing it out for day/time at Front Desk.
- Ask Receptionist for vehicle clipboard with mileage sheet and keys.
- Sign out of building on sign-out sheet at Front Desk. Include staff and student names, time leaving, destination, and telephone number, if available.
- Upon return park vehicle in assigned parking area.
- Ensure interior of car is free of any trash or debris.
- Lock all doors and windows.
- Record end of trip mileage and number of miles driven on trip (see 4.1).
- Return clipboard with keys to Receptionist immediately.
- Sign back in with time of return.

**Vehicle Keys**

- Vehicle keys must be locked up in the residence’s medication room/area when the vehicle is not in use.

- Students must *never* hold vehicle keys or clipboard for any reason.
- Never leave vehicle keys in unattended vehicle and never leave vehicle running unattended. If you are not sitting in the driver's seat, the keys must be in your possession or locked up.
- Always check to see if the vehicle keys are locked up before the previous shift's staff leaves. If staff have taken keys home, you must call them and they must return the keys immediately.
- Extra keys can be accessed from the Director of Facilities and Fleet or designee. These keys must be returned even if the original keys are not located.

### Reporting Damage to Vehicles

- All vehicle damage must be reported, including student related damage.
- As soon as possible after the incident, complete a maintenance slip in the on-line maintenance system and inform your residential manager or the on-call manager and the on-call residential administrator, who will notify the Director of Facilities or designee.
- You will need to complete an accident report form, you need to complete the form accurately and before leaving your assigned shift.
- If you are driving a vehicle and hit or are hit by another vehicle, you must report the incident, even if there is no apparent damage to either vehicle. Also, if an item (e.g., hubcaps, antenna, etc.) is lost/misplaced on vehicle while on an outing, this too must be reported. If you hit something and there is no noticeable damage, you still need to report it. Remember there is no consequence for reporting vehicle damage.

### Vehicle Safety

- All vehicles have first aid kits and work requirements in the glove compartment. Glove compartments should be locked at all times. Please notify the Nursing Department if supplies from the first aid kit have been used, so they may be replaced.
- All students must wear seat belts.
- Only students who are 13 years old or older and over 80 pounds can sit in the front seat.
- Always use safety when loading and unloading students from the side of the vehicle opposing traffic flow.
- All vehicles must be parked in designated spaces at residences with all doors locked and all windows completely closed.
- When parking in the community, staff must park vehicles in legal parking spaces. Please take care when students are entering or exiting vehicles, (e.g., students opening door and hitting vehicle parked alongside of you). Students must always exit the curb side of vehicle when parked on street.



- Before locking the vehicle ensure that everyone has exited the vehicle.
- Please always remember to inspect vehicle completely for damage before entering it. This means *anytime* you get into vehicle.
- Staff must follow the speed limit at all times.
- Use of a cell phone while driving is prohibited. If you need to use the cell phone for an emergency purpose, pull the vehicle over to a safe location. Each vehicle has a cell phone for GPS and emergency use.

### Vehicle Maintenance

- There is no smoking, eating or drinking allowed in any vehicle.
- Vehicles must be cleaned out after every use, i.e., pens, students' points, schedules, coats, hat, etc.
- The vehicles are maintained on a regular basis.

**Vehicle Kill Switches.** All vehicles have ignition kill switches.

### On the Road Emergencies

Should you have an accident, mechanical problem or other problem with a vehicle which makes it unusable or unsafe to drive: Staff should call roadside assistance and:

- If possible move vehicle to a safe location and have one staff member phone for assistance. Additional staff should remain with or near vehicle and with students (either inside vehicle or close to it). If alone, put on flasher lights, lock vehicle, remove keys and take students with you to call for assistance.
- Staff should call the Guild Day Program (during school hours), on-call residential administrator or on-call maintenance and report the problem with the following information:
  - location of vehicle
  - as much information as you can about the problem with vehicle,
  - your location, if it is not with vehicle,
  - number of staff and students
  - Ask for approximate time you can expect assistance.
- If the road emergency occurs during the evening or weekend, the residence staff will call the Residential Manager or On-Call Residential Manager and give her/him the above information.
- In the event of a motor vehicle accident, parents and guardians, human service agencies, Department of Early Education and Care, and the Department of Elementary and Secondary Education will be notified immediately.

**For any vehicle damage during residential staffing hours, the Residential Manager maintains the following responsibilities:**

- The Residential Manager or designee is responsible for notifying the Director of Facilities and Director of Residential Services of vehicle damage, a vehicle accident, or the vehicle's mechanical failure.
- The Residential Manager or designee will request necessary documentation and specify how that information will be relayed to The Guild.
- The Residential Manager or designee, if requesting a vehicle be towed, should inform the on-call maintenance and on-call residential manager. If unable to reach this individual, a message should be left on this individual's voicemail/or email.
- The Residential Manager or designee will notify on-call residential administrator concerning any vehicle damage.
- The Residential Manager or designee in conjunction with the Director of Facilities and Fleet will arrange for a spare vehicle to be located at the Residence in the event of an emergency.

**Staff Training**

Training on these policies and procedures is part of the initial Guild Staff orientation onboarding and is followed up with additional trainings including overall transportation safety and specific student needs as part of continued orientation to their assigned residence. Staff shall receive an annual safe driving refresher training.

No vehicle, including personally owned vehicles, shall be used to transport residents unless the licensee has assured that the following minimum amounts of liability are provided: proof must be given to Human Resources.

|                     |              |
|---------------------|--------------|
| Injury per person   | \$100,000.00 |
| Injury per accident | \$300,000.00 |
| Property damage     | \$5,000.00   |

|                                   |   |                                     |
|-----------------------------------|---|-------------------------------------|
| Policy Title: <b>Water Safety</b> |   |                                     |
| Guild Program:                    | Date Approved by CEO: 6/1/2023              | Date Approved by Board: 6/8/2023    |
| Licensing Agencies: DEEC          |   | Date(s) Approved by Licensing: 2022 |
| Internal Procedure Reference:     | Legal Authority References: 102 CMR 3.08(5) |                                     |

**Policy**

To ensure the safety of all Guild students, there will be specific safety procedures and staffing ratios in place to provide for and monitor safety around swimming areas.

## Procedures

1. Only those facilities (beaches, lakes, pools, etc.) which have prior approval may be used.
2. A certified lifeguard must be on duty or the students DO NOT go in the water.
3. There must be adequate emergency medical assistance readily available.
4. Students on seizure or other related medications must wear life jackets and be especially monitored (i.e., 1:1 staff).
5. On each outing students should demonstrate their level of swimming proficiency when first entering the water. Documentation of the student's level of swimming proficiency is to be included in the student's record (fact sheet, Adapted Physical Education or leisure/recreation section of IEP). In addition, the Guild will maintain a list of all students with their level of proficiency.
6. Upon arriving at any swimming location, the staff member supervising the activity will introduce him/herself to the lifeguard on duty and provide information about the number of children swimming and their level of proficiency.
7. At all times, the staff (who swim) to student ratio must be a minimum of one-to-three (1:3) in the water. (1:2 if any students are 9 or under). If the majority of students are non-swimmers, additional staff may be needed. Students requiring one-to-one (1:1) staff to student attention for any reason, must only go in the water when a staff member (who swims) is in the water specifically with them. Examples: Three (3) staff (all of whom swim) to six (6) students - two (2) of the students require 1:1 - remaining four (4) *cannot* go in the water. Three (3) staff (one of whom does *not* swim) to seven (7) students - one of the students require 1:1 - only four (4) students may be in the water at one time if the student requiring 1:1 is one of them. If the student requiring 1:1 is not in the water, the other six (6) students may be (with staff who swim).
8. Students requiring one - to - one (1:1) staff to student attention for any reason, must only go in the water when a staff member (who swims) is in the water specifically with them. A Buddy system should be employed for all students.
9. Suntan or sun-filtering lotion is required for all students. Hats and umbrellas are also necessary for students taking medication.
10. Students who splash, run, push or exhibit other inappropriate behavior which might result in an accident or injury to themselves or others must leave the water and/or pool area. If this results in a change in the above stated staff to student ratio or coverage, then staff/student (s) must leave the water area.
11. Staff must communicate to one another which children they are watching and should count heads periodically.
12. Any boats utilized for recreational purposes must comply with any required federal, state or local registration, and meet safety standards.

13. All students engaged in boating activities shall wear personal floatation devices and must be accompanied by staff. It is important to make sure the label on the floatation device is Coast Guard Approved.
14. Before embarking on any boating activities, staff must obtain authorization from the Chief Education Officer or designee; if during Residential hours the or Director of Residential Services. Information will be provided regarding the location of the boating trip, which staff and students will be attending, and the duration of the trip. The trip cannot take place unless authorization has been obtained.

|  |  |   |
|--|--|---|
| <b>Policy Title: Food and Wellness Program</b> |  |   |
| Guild Program: Youth                           | Date Approved by CEO: 6/1/2023                               | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC                 |  | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                  | Legal Authority References: 603 CMR 18.06:7, 102 CMR 3.07(6) |   |

**Goals**

The Guild for Human Services (GHS) will take a multifaceted approach to provide a school environment that enhances the health and wellness of both students and staff through the promotion of healthy foods and beverages, physical activity, and nutrition education initiatives.

**School Food Service**

The school food service department will:

- Provide meals that meet the United States Department of Agriculture’s (USDA) Federal & Massachusetts School Meals Standards for nutritional content and portion sizes.
- Follow the USDA ‘Dietary Guidelines for Americans.’
- Follow the Hazard Analysis & Critical Control Points (HACCP)-based school food safety plan which includes Standard Operational Procedures.
- Make nutrition information available to students for non-prepackaged competitive foods and beverages served in the cafeteria.

## School Breakfast

Since The Guild is a residential and day program, most students eat breakfast at their residence before school. The students and staff may also eat breakfast in the school cafeteria. The daily breakfast menu will follow the nutritional standards set forth by the current) USDA & Massachusetts National School Breakfast Program. The school breakfast menu consists of a selection of whole grain cereals, a gluten-free cereal, oatmeal, fat-free or low-fat milk, lactose-free milk or soy milk, non-fat yogurts or soy yogurt, a selection of four fresh fruits, 100% fruit juices and pure water. Breakfast selections are available all day.

## School Lunch and Breakfast Program

Our school and residential programs will follow school lunch and breakfast standards outlined in the current (USDA) "Nutrition Standards in the National School Lunch and School Breakfast Programs."

Our school lunch program will offer:

- Seasonally designed menus to reflect fresh produce availability.
- A minimum of four fresh fruits daily. These are available throughout the entire school day, free of charge.
- A daily salad bar featuring seventeen selections, which will include: fresh vegetables, fruits, lean protein sources, beans/peas (legumes) and low fat salad dressings.
- A daily hot lunch menu including a variety of vegetable subgroups (3/4 – 1 cup) serving size, such as from dark green, red/orange, beans/peas (legumes) & starchy vegetables.
- A variety of (100%) whole grains (10-12 oz. equivalent minimum weekly.)
- Lean protein and protein alternative sources (10-12 oz. equivalent minimum weekly.)
- Foods containing <10% of total calories from saturated fat.
- Trans fat 'free' foods (zero grams per serving.) The Federal Drug Administration (FDA) allows products with less than .5 gm per serving to count as zero.
- Low-fat unflavored (1% or less) and fat-free milk (including alternative beverages such as lactose-free and soy.) Serving size is 8 oz.
- 100% juice. Serving size is 4 oz.
- Reduced sodium foods.
- Foods and beverages that do not contain any artificial sweeteners.
- Pure water throughout the day free of charge.
- Lunches that contain no more than 850 calories.
- Nutrition information daily to students for non-prepackaged competitive foods and beverages served in the cafeteria.

## Competitive Foods and Beverages

Competitive foods include all foods and beverages sold or provided as a la carte items in the school cafeteria, school buildings, including classrooms and hallways, school stores, snack bars, vending machines, booster sales, fundraising activities and school-sponsored or school-related events and any other location on school property. All competitive foods and beverages are not part of the School Breakfast and Lunch Programs, which is regulated by the USDA and Nutrition Service. These standards do not apply to competitive foods and beverages sold up to 30 minutes before or 30 minutes after the school day.

The Guild for Human Services will follow the MA Department of Public Health (DPH) and the (2014-15) MA Department of Elementary and Secondary Education (ESE) nutrition standards for competitive foods served or sold during the school day.

All competitive foods and beverages shall reflect a healthy school environment. Purchases of all school snacks will follow the Massachusetts School Nutrition Guidelines for Competitive Foods and Beverages to Promote a Healthier School Environment and will be selected from the John Stalker Institute of Food and Nutrition's Massachusetts 'A' List.

## Competitive Food Standards

The standards listed below are taken from the 'Massachusetts School Nutrition Regulations for Competitive Foods and Beverages At-a-Glance' from the 'Healthy Students, Healthy Schools: Guidance For Implementing The Massachusetts School Nutrition Standards For Competitive Foods And Beverages.'

- Juice: 100% fruit or vegetable juice; no added sugar.
- Juice – Portion Size Limit: No more than 4-ounce servings.
- Milk: Low-fat (1% or less) and fat-free milk. (including alternative beverages such as lactose-free and soy):
- Milk – Portion Size Limit (including alternative beverages such as lactose-free and soy): No more than 8-ounce serving.
- Milk – Added Sugar (including alternative beverages such as lactose-free and soy): Flavored milk with no more than 22 grams of total sugar per 8 ounces.
- Water: No added sugars, sweeteners or artificial sweeteners. May contain natural flavorings and/or carbonation.
- Beverages with Added Sugar or Sweeteners: Any beverages with added sugar or sweeteners are prohibited. A school may provide or sell flavored milk or milk substitutes that contain the same amount or less sugar than plain, fat-free or low-fat milk.
- Other Beverages (Soda, sports drinks, teas, waters, etc.): No beverages other than juice, milks, milk substitutes and water may be sold or provided.

- Calories: Foods shall not exceed 200 calories per item; except a la carte entrees which shall not exceed calories of comparable NSLP entrée items.
- Total Fat: No more than 35% of total calories from fat per serving with the exception of 1 oz. nuts, nut butters, seeds or reduced fat cheese.
- Saturated Fat: No more than 10% of calories from saturated fat.
- Trans-Fat: Must be trans- fat free.
- Sugar: No more than 35% of total calories from sugars. Exceptions include 100% fruits with no added sugar; and non-fat or low-fat yogurt, including drinkable yogurt, with no more than 30 g total sugar per 8 oz.
- Sugar Exemptions: 100% fruit juice; low-fat or non-fat yogurt (including drinkable yogurt) with no more than 30 grams of total sugars, per 8-ounce serving.
- Sodium: No more than 200 mg of sodium per item; except a la carte entrees which shall contain no more than 480 mg sodium per item.
- Grains: All bread and other grain-based products shall be whole grain i.e. whole grain should be listed first in the ingredient statement. These include crackers, granola bars, chips, bakery items, pasta, rice, etc.
- Caffeine: No food or beverage may contain more than trace amounts of caffeine.
- Artificial Sweeteners: No food or beverage shall contain an artificial sweetener.
- A packaged item may contain no more than one serving per package.
- Maximum Portion Sizes: Chips, crackers, popcorn = 1.25 oz.; Cookies, cereal bars = 2 oz., Bakery items (whole grain) = 3 oz.; Trail Mix, nuts & seeds = ≤ 1.25 oz. & Nut butters = 4 Tbsp.

## Green School Policy

Over the past year, (GHS) has implemented 'green school' initiatives, which will become part of our wellness policy. These include:

### Cafeteria

- Replacing all Styrofoam products with environmentally-friendly paper products (Cafeteria and Coffee Shop.)
- Recycling plastic cups and flatware.
- Using only environmentally-friendly cleaning products.

### School (General)

The school will follow the trash and recycling guidelines set forth by the town of Concord. Other recycling measures include:

- Paper recycle bins are now located in each classroom.
- Students now help recycle plastic, bottles & cans.
- The Facilities Maintenance Department continues to recycle light bulbs, batteries, computer ink.

- Using environmentally-friendly cleaning products throughout the school.

### **Classroom Snacks**

Purchases of classroom snacks will follow the Massachusetts School Nutrition Guidelines for Competitive Foods and Beverages to Promote a Healthier School Environment. Selection of snacks will be taken from the John Stalker Institute of Food and Nutrition's Massachusetts 'A' List.

### **Student Incentives/Rewards**

Staff and adults should refrain from using foods and beverages as rewards for discipline or academic performance (unless outlined in a student behavior plan or IEP) and should seek age-appropriate non-food alternatives.

### **Classroom, Birthday Parties, Celebrations, Special Events & Holidays**

Staff members will limit the use of high fat, high sugar candy, snack foods and beverages in the classroom and on school campus for birthday parties, celebrations, special events and holidays. To create a healthy eating environment, mainly nutritious foods and beverages should be offered.

### **Fundraising**

Fund raising activities in general will not include foods and beverages of minimal nutritional value and should follow the USDA & Massachusetts National School Nutrition Program standards. However, occasional bake sales are permitted.

### **Nutrition Education**

The main goal of our nutrition education program is to influence healthy eating behaviors. Two nutrition classes are offered during the school year. The curriculum shall include, but not limited to the following essential components designed to help students learn age appropriate nutrition knowledge and engage in interactive classroom sessions.

At the middle and secondary school level, the students will learn:

- The role of nutrients for growth, development, and health.
- The fundamentals of a healthy diet by exploring myplate.gov
- To identify teenage eating trends.
- Factors that influence food choices.
- How the media influences food & beverage choices.
- Understanding food portions.



- Meal planning.
- How to read food labels.
- Set personal healthy eating goals.
- Food safety and sanitation skills.
- Simple healthy food preparation / reading a simple recipe.
- Kitchen math measurement skills.
- Field Trips: Visit local farms & Farmers' Markets during the spring, summer and fall seasons.
- Nutrition class activities are sometimes linked directly to the cafeteria. Students often conduct 'taste-tests and surveys' for new or seasonal foods such as fruits and vegetables.

### **Physical Education/Physical Activity**

The main goal of our physical education & recreation curriculum is to offer daily physical education/recreation activities to help maintain adequate levels of physical fitness for health and wellness and motivate students to adopt a physically active lifestyle.

Our program will:

- Offer year round daily opportunities for all students to participate in scheduled physical/recreational classes or activities.
- Provide opportunities for students to participate in scheduled physical activities after school and weekends recreationally and through local youth sports programs in coordination with our residential program.
- Foster the development of motor skills.
- Help secondary students learn how to develop and assess individual fitness goals.
- Conduct a GHS fitness assessment for each student on quarterly basis during the school year.

### **Staff Wellness**

Our staff should serve as role models to our students for healthy eating and physically active lifestyles. We encourage staff to:

- Maintain a physically active lifestyle by offering incentives to join a local health club.
- Participate in ongoing health and wellness initiatives at The Guild.
- Dine in our school cafeteria, which offers a wide variety of healthy foods
- Select snacks if desired from our school's vending machines, which are stocked with healthy food & beverage choices recommended from the Massachusetts John Stalker 'A' List.

## Residential Program Wellness Policy

The residential program's wellness policy will be an extension of our School Wellness Policy. These guidelines are outlined below. Each residence will follow the current (2010) USDA Dietary Guidelines for Americans.

### Daily Breakfast Menu\*

The daily breakfast menu will follow the nutritional standards set forth by the USDA & Massachusetts National School Breakfast Program for meal planning for their specific age group.

**\*Alternative Breakfast Option:** If a student refuses breakfast before school at their residence, they will be offered a second opportunity to eat breakfast at the school cafeteria. The school breakfast menu consists of a selection of whole grain cereals, a gluten-free cereal, oatmeal, fat-free or low-fat milk, lactose-free milk or soy milk, non-fat yogurts or soy yogurt, a selection of four fresh fruits, 100% fruit juices and pure water.

### Lunch Menu\*

The lunch menu is served on weekends, school vacations and snow days. This menu will follow the nutritional standards set forth by the USDA National & Massachusetts School Lunch Program for meal planning for their specific age group. Whole grains, lean proteins and protein alternatives, fat-free or low-fat dairy products or substitutes, fresh vegetables & fruits, 100% fruit juices and pure water is highlighted. The students will help design menus as well as take part in the food shopping process. On occasion, the students will have the opportunity to dine out at local restaurants.

**\*Alternative Lunch Option:** If a student refuses the prepared dinner, they will be offered an alternative meal of the day

Our daily dinner menus will follow the nutritional standards set forth by the USDA ChooseMyPlate.gov for meal planning for their specific age group. Whole grains, lean proteins and protein alternatives, fat-free or low-fat dairy products or substitutes, fresh vegetables & fruits, 100% fruit juices and pure water is highlighted. The students will help design menus as well as take part in the food shopping process. On occasion, the students will have the opportunity to dine out at local restaurants.

**\*Alternative Dinner Option:** If a student refuses the prepared dinner, they will be offered an alternative meal of the day

### Beverages and Snack Foods

Each residence will follow the beverage standards outlined in the National School Lunch Program. Healthy snack choices are a priority. The staff will refer to the Massachusetts

“A-acceptable” Snack List prepared by the John Stalker Institute of Food and Nutrition for guidance when purchasing healthy snacks and beverages.

### **Physical Activity**

Residential staff will:

- Follow the physical activity guidelines outlined in the USDA Dietary Guidelines for Americans, by encouraging students to be physically active for at least 30 to 60 minutes on most days.
- Encourage students to participate in planned daily leisure physical activities and in community sponsored recreational physical activities or sports programs on a regular basis.

### **‘Green’ Residence Policy**

**Recycling:** Each school residence will follow the recycling rules set forth by its city/town. In addition, the school’s Facility Maintenance Department routinely collects and recycles batteries, light bulbs and computer ink cartridges.

**General:** Residences will not purchase water in plastic bottles. Environmentally-friendly water bottles are used for traveling outside the residences when needed.

### **Student Incentives/Rewards**

Staff and adults should refrain from using foods and beverages as rewards for discipline or academic performance (unless outlined in a student behavior plan or IEP) and should seek age-appropriate non-food alternatives.

### **Birthday Parties, Celebrations, Special Events & Holidays**

Staff will limit the use of high fat, high sugar candy and snacks for parties, celebrations, special events and holidays. The staff will promote a healthy eating environment by also serving nutritious foods and beverages outlined in our School Wellness Policy above.

### **Food Safety**

To avoid food-borne illness, staff and students will follow the food safety guidelines outlined in the USDA’s ‘Dietary Guidelines for Americans, 2010.

|   |   |   |
|---|---|---|
| <b>Policy Title: Staff Training and Development</b> |   |   |
| Guild Program: Youth                                | Date Approved by CEO: 6/1/2023                                      | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC                      |   | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                       | Legal Authority References: 603 CMR 18.05(11)(g)(h) 102 CMR 3.04(7) |   |

**Policy**

The Guild recognizes the importance of staff training in order to fully develop the potential of staff and students. As professionals in the field of Human Services it is our responsibility to teach our staff all the skills necessary to work with the specific population served.

The Guild further recognizes that licensing agencies require that all new employees receive an orientation to the program. Licensing agencies also require that full-time and supervisory staff must attend a minimum of 24 hours of training per calendar year; part-time and weekend staff must also attend a minimum of 24 hours of training per calendar year. The Guild will provide an average of two hours per month of in-service training to all staff. The training will be consistent with the needs of the population served.

**Pre-service Training**

Pre-service training is conducted for all full and part time employees. All Direct Program Employees are required to attend orientation and pre-service. These courses cover topics that enable our staff to work with the residents and students of the Guild. Topics may include and not be limited to:

- Introduction to The Guild
- Human Resource Policies
- Employee Benefits
- Quality of Life
- Characteristics of the Individuals Served
- The ABCs and Functions of Behavior- Behavior Plans and Data Collection
- Adult Program Behavior Support Plans
- Student Abuse and Neglect – Mandated Reporting
- Bullying Prevention
- Completing Incident/Accident Reports
- CPR/First Aid
- Universal Precautions
- Defensive Driving Training/Transportation Safety/Driving Test

- Medication Administration MAP (Residential Staff only)
- Health Monitoring and Epi-pen administration
- Basic Human Rights
- Emergency and Evacuation Procedures
- Vocational Services
- Child Runaway/Missing Person Policy and Procedures
- Crisis Prevention/Intervention De-Escalation skills and Physical Intervention (16 hrs)
- Trauma Informed Care
- Exploring Diversity

### **Training for Interns and Volunteers**

Interns who are enrolled in an accredited undergraduate or graduate program may obtain an intern training experience at The Guild for Human Service. Interns must meet the same training criteria established above for all paid staff. If an intern does not meet the minimum training criteria established, then they cannot meet the requirements for their internship and will not be able to work independently with any of the individuals served.

Volunteers who have been interviewed and wish to provide direct services to the individuals served may not work independently with those individuals. They must be accompanied, at all times, by a Guild employee who has received all of the required training.

Preservice is conducted within the first month of a new employee's start date. Instruction for Preservice topics are given in a variety of learning modalities including lectures, video, written modules, group problem solving, assignments, role-playing, and classroom observation. Embedded within the training sessions are competency-based activities including written exams, verbal checks, and visual demonstrations.

### **Ongoing Training**

All staff are required to attend ongoing in-service training programs in order to gain knowledge or acquire skills. All staff must receive 24 hours of training each year.

CPI/Physical Restraint, CPR, First Aid and Exposure Control Plan are in-services that all program staff are required to attend annually or bi-annually and hold valid training cards. CPR/AED and First Aid training are provided by certified Red Cross certified trainers. If, for some reason, it is not possible to provide the CPR/AED/First Aid training by an in-house certified trainer, staff will be required to attend training at an outside facility. The Guild has staff who are certified as CPI/ Physical Restraint trainers. . CPI/ Physical Restraint and CPR/AED/First Aid training sessions are scheduled on a regular basis.

**Supplemental In-Service Training:** This refers to training sessions that occur outside the agency. If the workshops are appropriate for our population and staff training needs, the information is then passed on to appropriate supervisory staff. Supervisors decide if they will attend or if it is appropriate to send one of their employees. After the employee attends the workshop and if it is determined that the workshop could be useful information for other members of the agency, the employee may then be asked to in-service other staff. Undergraduate and graduate level courses in a related course of study are encouraged and can receive training credit at a rate of 10 hours for each credit hour at an accredited college or university

**Training Plan Implementation and Coordination:** The Director of Professional Development shall be responsible for the development of the Annual Training Calendar, and shall coordinate all Orientation, Preservice, Formal In-service and Informal In-service Trainings. In addition, the Director of Professional Development will coordinate training needs with Program leadership to plan, create and schedule in-service training programs.

**Procedure for the Recording of Trainings:** Training attendance is either recorded on a Staff Training Attendance Sheet/Log or tracked electronically. All staff Training attendance should be handed in to the Training manager. Training hours are tracked for each employee. If pertinent, a copy of any training certificates or post-tests is placed in the employees' personnel file. College/University transcripts may be offered as evidence of relevant training hours.

|  |                                |   |
|--|--------------------------------|---|
| Policy Title: <b>Unusual Incident/Accident Reporting</b> |                                |   |
| Guild Program: Youth                                     | Date Approved by CEO: 6/1/2023 | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC                           |                                | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                            | Legal Authority References:    |   |

Unusual Incident/Accident Reports are legal documents reviewed by a number of outside regulatory agencies including the Human Rights Officer. These reports part of a students' permanent records.

Incident Reports should be filled out as soon as possible after an incident and no later than 24 hours after the incident.

Unusual Incident/Accident Reports should be filed in cases where

- A student's movement is suppressed (for example, restraint)
- A student has been involved in an accident
- An unusual incident such as a major aggression or disruption has occurred
- Any bolting behavior has occurred
- A student reports that his or her human rights have been violated
- Any sexual incident between students
- Any disruptive or aggressive behavior in Guild vehicles

When filling out an Incident/Accident Report

- Fill out **all** sections of the form.
- Only one student's last name may appear on an incident report. All other students will be referred to by the student's initials.
- If other students are involved in the incident, separate Incident Reports must be written for each student.
- Complete signature and title of staff writing the incident. If the incident involved a restraint then all staff involved in the restraint must sign.
- **Administrative designee** refers to those people who need to be notified when **any** restraint occurs (and who can give permission to continue a restraint beyond certain time periods).
- Those people who participate in a restraint, no matter what their position, cannot take on the Administrative Designee Position and grant approval for restraints.

An Administrative Designees needs to be notified if a restraint lasts longer than 20 minutes.

**Processing** refers to the student receiving an opportunity to discuss why s/he was restrained and alternative responses they could have exhibited to avoid the restraint. Based on cognitive functioning levels processing is offered to those students who possess the ability to gain insight into the inappropriate nature of their behavior without being inadvertently reinforced by the 1:1 attention of the processing. Each students Behavior Program specifies if s/he has processing as a component.

**Follow-up actions** refer to what staff will do to minimize the likelihood of future restraints for this student (e.g. team meeting to discuss Behavioral Program revisions, etc.).

**Medical Care** refers to if either the student or staff involved received an injury and was seen by the nurse. The nurse will comment on an as needed basis to the follow-up they provided and initial their statement.

**Behavior after incident** refers to how the student is behaving following the incident. It is important that the student be "on-track" and earning there scheduled reinforcement as soon as possible after an incident to help foster appropriate behavior.

|  |   |   |
|--|---|---|
| Policy Title: <b>Disaster Plan for all Guild Sites</b> |   |   |
| Guild Program: Youth Programs                          | Date Approved by CEO: 6/1/2023                              | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC                         |   | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                          | Legal Authority References: 603 CMR 18.05(10); 102 CMR 3.08 |   |

The purpose of these procedures is to insure the safety of students and staff when there is emergency situation that may cause closure of any part of The Guild. These emergency situations can include, severe weather, fire, structural damage to any of the buildings, or ongoing threat to a specific Guild location. In those cases, a disaster plan will be followed.

Each Guild site has an Emergency Action Plan for individuals and staff to follow in case of fire or other emergency. The Emergency Action Plan includes:

- Procedures for evacuating individuals in case of emergency. This includes provision for transportation and immediate, temporary relocation when necessary.
- Procedures to follow in case of flood, natural disaster, power or heat failure, bomb threats or other workplace threats.
- Procedures to follow in case of medical emergency.
- Procedures to follow in case of clinical emergency.
- How to access on-call personnel.
- Required notifications during and after emergencies.

All residences are required to conduct a drill of the emergency plan at least once per quarter. This needs to include at least one overnight drill per year and drills at differing times of day and days of the week.

### **Disaster Plan – Day Program**

Certain emergency situations may require that The Guild's main building at 521 Virginia Rd, Concord, Massachusetts be evacuated for a period of time. In case of an evacuation, the following procedures should be followed:

1. For situations requiring an evacuation period of one day or less, occurring during day program hours, the following options are available:



- a. Early dismissal of students;
  - b. Relocation of students and staff to residences and providing programming at residences;
  - c. Participation in appropriate community activities.
2. For situations expected to last beyond one program day, but for a short period of time, the following options are available:
    - a. Day students remain home for the period;
    - b. Residential students remain in the residences and staff provide programming at the residences;
    - c. Participation in appropriate community activities;
    - d. Any combination of the above.
  3. For situations expected to last a longer period of time, an alternative facility will be located.
  4. In all emergency situations, the Chief Education Officer and the Chief Officer on-call, and/or their designee must be notified. They will arrange for notification of DESE, DEEC, DCF, DDS, parents, police, fire department, hospitals and others as appropriate.
  5. See Emergency Phone Number list, located in Policy/Procedure Book.

### **Disaster Plan – Residential Program**

Certain emergency situations may require that a residence be evacuated for a period of time. All staff should be aware of the Evacuation Procedure for the residences. In case of an evacuation, the following procedures should be followed:

1. For situations requiring a short evacuation period (a few hours) or occurring during day or early evening hours, the following options are available:
  - a. Relocation of students and staff to one or more of the other residences:
    - i. If relocation is necessary, Single residential sites can relocate to a nearby Guild residential site. All students should be transported via the residential vehicles, unless accessing it would present a danger. In this instance, go to the nearest neighbor and telephone for assistance.
    - ii. Relocation to the Main Building;
    - iii. Participation in an appropriate community activity.

The On-Call Residential Administrator or Overnight Supervisor, in conjunction with the Residential Manager, should make the decision to evacuate. The Chief Officer on-call should be notified.

2. For situations occurring during the late evening or night-time hours or expected to last overnight, the following options are available:
  - a. As many students as possible should be relocated to other residences without exceeding the maximum licensed capacity per residence;
  - b. Arrangements should be coordinated by the Chief Officer on-call for the accommodation of the remaining students and staff at the Main Building for the night;
  - c. Alternative arrangements may be made at the discretion of the Chief Officer on-call.

The On-Call Residential Administrator or Overnight Supervisor, in conjunction with the Residential Manager, should make the decision to relocate. The Chief Officer on-call should be notified. The Residential Manager(s), On-Call Residential Administrator, Chief Officers and Maintenance personnel will be notified of the evacuation and those available to assist will immediately proceed to designated evacuation sites.

3. In all emergency situations, the On-Call Residential Administrator or Overnight Supervisor must be notified. They will arrange for notification of all other personnel including the Chief Officer on-call, parents, police, fire department, hospitals and others as appropriate. If relocation is necessary, the Chief Officer on-call will notify DEEC (508) 798-5180 within 24 hours. (Please refer to emergency fact sheet for this information).

See Emergency Phone Number list, posted at each residence.

|   |  |                                     |
|---|--|-------------------------------------|
| Policy Title: <b>Protocol for Security Cameras and Visually Recorded Data</b> |  |                                     |
| Guild Program: Youth  | Date Approved by<br>CEO: 6/1/2023                          | Date Approved by<br>Board: 6/8/2023 |
| Licensing Agencies: DEEC, DESE  |  | Date(s) Approved by<br>Licensing:   |
| Internal Procedure Reference:   | Legal Authority References:<br><br>FERPA 20 U.S.C. § 1232g |                                     |

**Purpose:**

To establish guidelines and procedures for use of cameras and visually recorded data to ensure a safe and secure environment in The Guild School and The Guild's youth group homes.

**Policy:**

The Guild for Human Services works to maintain a safe and secure environment for students, staff, and visitors. This also includes the protection of facilities and school property from theft and vandalism. Anyone identified on security cameras in violation of Guild program or personnel policies may be subject to disciplinary actions.

**Camera Placement:** To help ensure the safety of students, staff, visitors and facilities, The Guild may use security cameras both outside and inside youth program buildings, including the Guild school and administrative offices as well as at each youth group home... Security cameras may be used in locations as deemed appropriate by the CEO and COO in consultation with best practices, licensing regulations, law enforcement officials, and security experts. Security cameras may be used in any area, inside or outside of buildings, where there is no reasonable expectation of privacy. The cameras shall not be placed in areas where there may be a reasonable expectation of privacy (e.g. the interiors of restrooms, guidance and nurse's offices, private offices, or student bedrooms in group homes).

**Signage and Notification:** The Guild shall notify students and staff that security cameras have been installed and may be used at any time. This Employee Handbook serves as notice to staff that anyone identified on security cameras in violation of Guild program or personnel policies may be subject to disciplinary actions. Students, staff, and visitors shall be notified that video surveillance will occur on school property through use of the signage. Signage will be posted in public entryways and other conspicuous locations as needed to inform the public. The posted signs will read as follows: "Surveillance Cameras in Use."

**Limited Access to Recordings:** Only authorized personnel or their designee, including but not limited to the CEO, COO, Director of Quality Assurance, Chief Education Officer, Chief Officer on-call, program administration, and law enforcement, will have privileges involving viewing, disclosure, retention, disposal, and security of video recordings or photographs from security cameras in accordance with applicable laws and regulations. All video recordings used for security purposes on Guild property shall be the sole property of The Guild. All video recordings will be stored to ensure confidentiality in accordance with applicable laws and regulations. Law enforcement and emergency response officials shall be granted access to video recordings or the security system by the CEO, CFO, COO or their designee.

**Parental Access:** Parents may request a viewing of specific footage related to their child and a specific incident or event as defined in the **Family Educational Rights and Privacy Act (FERPA)**, including but not limited to an incident that resulted in student discipline, injury or health emergency. To ensure the privacy and legally ensured rights of staff and students, neither parents nor members of the public at large may request a viewing without appropriate cause. Still photos, or "screenshots," from the feed may at times be shared with a parent or legal representative.

**Short Term Data Storage:** All security footage is stored a set time period of no less than 20 days and then automatically deleted from the data storage. Any footage that has been identified as related to an ongoing investigation or incident will be saved and stored in a secure manner. All such recordings shall be treated as confidential and shall not be released to individuals or agencies outside of The Guild except through subpoena or other court order requiring such release. Any law enforcement or state investigative agency may be provided with a duplicate of the recorded materials in conjunction with an investigation by that agency. Notification to the COO shall take place for each duplication of data.

**Access in the Event of an Emergency Situation:** In the event of an emergency situation in a Guild building, the safety of students and staff supersedes the above policy, and local law enforcement may access the feed in real time The Guild, from time to time, may issue further guidance that is consistent with current laws, newly adopted technology, and this policy.

|  |  |  |
|--|--|--|
| <b>Policy Title: Administration of Routine Medical Care and Preventative Health Care</b> |  |  |
| Guild Program: Youth   | Date Approved by<br>CEO: 6/1/2023            | Date Approved by<br>Board:<br>6/8/2023 |
| Licensing Agencies: DESE, DEEC   |  | Date(s) Approved by<br>Licensing:      |
| Internal Procedure Reference:  | Legal Authority References: 606 CMR 3.06 (4) |  |

**Policy:**

The Guild for Human Services will provide coordination of all routine medical and dental care for residential students through the school's nursing and licensed medical practitioners. Upon admission an annually thereafter, the health services department will obtain documentation of the most recent physical exam, dental exam and list of immunizations. If the annual exams have occurred greater than one year prior, these exams will be scheduled within two weeks of admission. In addition to the above, Students requiring emergency admission will be required to have a documentation of a recent medical exam or within seven days of admission.

Guardians of residential students may choose to use outside medical providers, providing they provide the medical staff a means of communication with such providers, including consultation forms and provider notes for all medical appointments. An authorization of informed consent for routine and preventative care is obtained at the time of entry to The Guild by the student or the student's legal guardian. All other medical care, except care provided in emergency situations, shall be administered only with specific authorization with informed consent by the student or the student's legal guardian.

**Procedure:**

- Upon admission, the nursing department will obtain documentation of the most recent physical exam, dental exam and list of immunizations. If this greater than one year prior, these exams will be scheduled within two weeks of admission. Annually thereafter, a Physical exam and updated immunization list will be provided to the health services department. Medical services provided at the Guild; include routine yearly physical exams with routine vision screening and postural screenings for all residential students.
- Annually the Nursing department will complete an Individual Health Care Plan for each student. This plan will address both preventative and existing health issues of the student. This plan will be reviewed at each quarterly IEP review
- Specialist exams will be scheduled yearly, by request, or as needed, with consent from the legal guardian/student. Communication of need for special appointments with rationale will be provided to legally designated care provider.
- Family planning information will be provided or arranged for with the permission of parent/legal Guardian or student over 18 who has not been adjudicated as incompetent

|  |   |                                     |
|--|---|-------------------------------------|
| <b>Policy Title: Emergency Health Care</b> |   |                                     |
| Guild Program: Youth                       | Date Approved by<br>CEO: 6/1/2023             | Date Approved by<br>Board: 6/8/2023 |
| Licensing Agencies: DESE, DEEC             |   | Date(s) Approved by<br>Licensing:   |
| Internal Procedure Reference:              | Legal Authority References: 606 CMR 3.06 (4), |                                     |

In the event of a medical emergency, emergency medical care will be provided on site prior to transport to the closest medical facility. Some medical situations will require 911 emergency services.

- Examples of such situations are as follows but not limited to: an injury to the head causing loss of consciousness (even if transient) and respiratory distress in which breathing is labored. CPR should only be administered by staff with current Red Cross CPR certification.
- In the event a student makes a complaint of sexual abuse or sexual abuse is suspected, Nursing will refer the individual for a medical or psychiatric evaluation by an outside person with expertise and training in this area.

**Training:**

All staff providing direct care will receive formal CPR/AED and emergency first aid training. AEDs are available at 521 Virginia Road, Concord, MA. The AED is stored at the desk at the student entrance.

**Emergency Medical Supplies:**

All residences, the school program and vehicles will maintain first aid supplies. First aid supplies will include, but are not limited to: bandages, gloves, gauze, adhesive tape, hydrogen peroxide or other cleaning solutions. Copies of the Health Care Manual will be kept in each residence and with each first aid kit at the 521 Virginia Road site. The Health Care Manual will

outline procedures for providing first aid, specific treatment for minor ailments and emergency health care.

- In the residences, first aid supplies will be in a locked storage unit on each floor.
- At the 521 Virginia Road site, first aid supplies will be maintained in the nursing suite, staff lounge, the cafeteria, the student lobby desk and visitor lobby desk, and in the physical education area.
- Each Guild vehicle will have a first aid kit in the glove compartment.

**Emergency Contact Information**

- Emergency contact sheet is posted by the phones in all residences and in each education coordinators'/specialists' office in the day program. Poison control and local hospitals will be included on the list
- Each student will have an emergency fact sheet at his/her residence, in the Health Services office, and in the student record in the main building. The sheet will clearly define:
  - Existing medical conditions, including allergies
  - Name and telephone number of parent or legally designated person/entity
  - Primary care physician's name and phone number
  - Religious preferences
  - Medical Insurance

**Reporting**

Parents and/or legal guardians will be notified of a medical emergency as soon as the individual has been safely transported to a medical facility. All aspects of medical emergencies will be clearly documented, including diagnosis, treatment, medications and follow-up care.

In the event the parent/legal guardian cannot be reached, the emergency contact listed for the student will be contacted. Events requiring medical hospitalization are reported to DESE and EEC following the event.

|   |  |                                     |
|---|--|-------------------------------------|
| <b>Policy Title: Nurse On-Call and Consultation</b> |  |                                     |
| Guild Program: Youth                                | Date Approved by<br>CEO: 6/1/2023          | Date Approved by<br>Board: 6/8/2023 |
| Licensing Agencies: DESE, DEEC                      |  | Date(s) Approved by<br>Licensing:   |
| Internal Procedure Reference:                       | Legal Authority References: 606 CMR 3.06:4 |                                     |

**Policy:** Nursing consultation is available to all staff 24 hours per day, 365 days per year to staff for ALL medical/medication concerns for residents. Staff will notify the nurse on-call for all medical issues and medication questions. This includes any incident that may result in an injury. The nurse on-call should be notified any time a student has hit their head.

**Procedure:**

- To reach the Nurse on-call, refer to the monthly Nurse on-call schedule.
- The monthly Nurse on-call schedule is posted in each residence and saved for access by the administrators on-call.

- The schedule will provide you with the name and number of the Nurse on-call.
- Please note each Nurse has their own contact number.
- Please contact the Nurse listed on the schedule.

For emergency situations, ED visits, hospitalizations the nurse on-call will notify the Director of Health Services and the On-Call Residential Administrator.

|  |   |                                     |
|--|---|-------------------------------------|
| <b>Policy Title: Infectious Disease / Infectious Control</b> |   |                                     |
| Guild Program: Youth   | Date Approved by<br>CEO: 6/1/2023             | Date Approved by<br>Board: 6/8/2023 |
| Licensing Agencies: DESE, DEEC                               |   | Date(s) Approved by<br>Licensing:   |
| Internal Procedure Reference:                                | Legal Authority References: 606 CMR 3.06 (4), |                                     |

**Policy:** It is The Guild's policy that an individual (student or staff) who meets eligibility requirements be eligible for enrollment or employment without discrimination on the basis of an infectious disease. The Guild strives to provide a safe and nurturing environment ensuring optimal social functioning. In an effort to protect all students and staff from the transmission of any blood-borne pathogens (known or unknown), The Guild follows universal blood and body fluid precautions in which all students and staff are to be considered potentially infected and treated in a like manner.

**Procedures:**

**Infectious Disease Prevention:** The most effective way of preventing the transmission of infectious diseases is through using caution. Infectious diseases become communicable when simple precautions are not carried out. Prevention is achieved when proper infection control procedures are maintained.

**Infection Control:** This infection control procedure is followed when cleaning up body fluids and blood of any student or staff at The Guild. Students should not participate in the clean up their own spills.

**Required Materials:** In order to facilitate proper infection control, the following items are stored in a designated area:

- disposable wipe cloths / sponges
- paper towels
- disposable rubber / vinyl gloves
- liquid soap in a hand help dispenser
- disinfectants: household bleach (10% solution of water/bleach) and isopropyl alcohol (70%)
- bio-hazard bags
- micro shield: mouthpiece for CPR
- Surgical grade face masks
- Isolation gowns
- Face shields

**Universal Cleanup Procedure:** Employees will wear gloves whenever contact with body fluids and blood of another individual occurs. Staff will wear gloves when handling items/ surfaces contaminated with blood / body fluids. Face masks and face shields are available as needed.

- Any spills are covered with paper towels and absorbed for one (1) minute.
- Spills are disinfected by pouring disinfectant (when spill is on tile/wood) or alcohol (when spill is on a rug or cloth furniture) in a circle around the spill.
- Spills are wiped with sponges and/or disposable wipes.
- Materials used in cleanup procedure are disposed of in plastic wastebaskets.
- Persons involved in the clean-up should wash their hands using the following procedure:
  - Use soap and running water
  - Rub your hands back and forth
  - Wash all parts of your hands
    - Back of hands
    - Wrists
    - Between fingers
    - Under fingernails
  - Rinse with water
  - Dry hands with a paper towel
  - Turn off water using a paper towel

**Isolated Situations:** Certain situations require the need of additional materials:

- Disposable gloves are worn when evaluating / treating any cut or wound.
- Disposable sheaths are used on thermometers when taking a student's temperature.
- Thermometers are cleaned with isopropyl alcohol after each use.
- CPR micro shields are encouraged to be used when resuscitation / mouth to mouth contact is needed.
- Used disposable syringes and needles are placed in the puncture resistant container.

**Student / Staff Confidentiality:** Steps are taken to protect the confidentiality of sensitive clinical information to every extent possible. Only those individuals who have a need-to-know will be made aware of this information.

- Need-to-know is based on direct responsibility or accountability for the care of the student.
- The determination of need-to-know is made on a case by case basis by medical personnel and management team and will include: discussion with student, when appropriate, and student's family/guardian, consultation with legal counsel
- Newly diagnosed infectious diseases are to be reported to the Massachusetts Department of Public Health by the physician responsible for the care of the individual.

**HIV Testing:** Testing for the HIV virus is not routinely indicated and antibody testing is made on a case by case basis at the recommendation of the physician.

- Informed consent is required prior to any HIV testing. If the student is incapable of



giving informed consent, the student's legal guardian is responsible for giving consent.

**In-Service Training:** All staff are presented with basic Infection Control procedures during Orientation (training that is required in the first three months of hire). Comprehensive In-service training is completed during Exposure Control. Exposure Control is one of several trainings that must be completed within the first months of hire in order to continue employment.

- Staff are trained on the Infection Control Procedure on a regular basis.
- Students will receive infection control training, supports in prevention practices. Curriculum is modified to meet accessibility needs.

|  |   |                                     |
|--|---|-------------------------------------|
| <b>Policy Title: Isolation Precautions</b> |   |                                     |
| Guild Program: Youth                       | Date Approved by<br>CEO: 6/1/2023             | Date Approved by<br>Board: 6/8/2023 |
| Licensing Agencies: DESE, DEEC             |   | Date(s) Approved by<br>Licensing:   |
| Internal Procedure Reference:              | Legal Authority References: 606 CMR 3.06 (4), |                                     |

**Policy: If it has been determined by medical personnel that isolation is appropriate then any staff or day student with an infectious disease will be restricted from school until s/he is no longer contagious. The Department of Public Health (DPH) will be contacted. DPH guidelines will be followed. Unless otherwise advise by the Department of Public Health, the following measures will be instituted by The Guild.**

**Procedure:**

- Infectious Diseases will be reported by the Nurse to the local health department as required by Massachusetts General Law, Chapter III, Section 6: (Please see Infectious Disease/Infection Control Policy).
- Isolation procedures will be established by the school's nursing department and physician consultant in accordance with the Department of Public Health Standards as needed for individual situations.
- The Guild Health Services department or designee will notify all parents, guardians, and referring agency of the reported communicable disease within the school
- Residential students with an infectious disease will be served at the residence. They may return to school when the infection period is over with written confirmation from a Licensed Practitioner.
- The student will not be allowed to attend classes or work. He/she must have as little contact with the others as possible.
- Meals should be placed on paper plates and disposable utensils used. Use of a private bathroom will be provided as needed depending on the type and nature of the illness in conjunction with the recommendations of the Department of Public Health.
- Staff will wear protective equipment as indicated and should wash hands very carefully

after attending to this student.

|   |   |                                     |
|---|---|-------------------------------------|
| <b>Policy Title: School Program Medication Administration</b> |   |                                     |
| Guild Program: Youth  | Date Approved by<br>CEO: 6/1/2023             | Date Approved by<br>Board: 6/8/2023 |
| Licensing Agencies: DESE, DEEC                                |   | Date(s) Approved by<br>Licensing:   |
| Internal Procedure Reference:                                 | Legal Authority References: 606 CMR 3.06 (4), |                                     |

Many students at The Guild receive regularly-scheduled prescribed medications which are crucial to their wellbeing. Timely and correct administration of medication is a fundamental program priority.

#### **Medication Authorization:**

- Prescription medications may not be administered to any student without either the written or verbal order of a physician and the consent forms appropriately signed and dated by the student's legal guardian or a student over the age of 18 who has not been adjudicated incompetent, annually.
- No prescription or over the counter medication shall be administered to a student without the written order from a practitioner with authority to prescribe medications (Health Care Provider).
- Any change in medication or dosage must be authorized by a new written order from the Health Care Provider.
- Staff will be trained on monitoring and reporting side effects of medication. Significant side effects of medications will be recorded and reported to the Nurse On-Call and or Physician immediately.

#### **Medication Administration and Documentation:**

- Students requiring medications during day school hours (Monday through Friday 8:30 a.m. to 3:30 p.m.) are administered by the nursing staff. Documentation of the daytime medication administration is kept in a clearly marked book located in the Nursing Office. As with any narcotic administered it is documented in the controlled substance book as well as documented in the medication administration book.
- Each time a medication is added, changed or discontinued a written doctor's order must be evidenced to document the change. No medications may be brought from the student's family home for administration without a doctor's order.
- If a student is going to be out of the day school building during the time a student is to receive a medication administration without the presence of a nurse then the MEDICATION DELEGATION IN DAY PROGRAM POLICY will be followed.

#### **Storage and Disposal:**

- Up to a thirty day supply of medication for each student will be maintained at the school for nursing staff to administer medications. Provisions will be made for refrigeration of medications when necessary.
- Any medication to be discarded (i.e., outdated medication, unused or defective, etc.) shall be disposed of via a bio-hazard management system. No medications shall be disposed of in trash bins or other receptacles where students may find and

ingest them.

- All toxic substances and sharp objects are kept in a locked secure cabinet.

**Review:**

- All prescription medications administered shall be reviewed in each quarterly report for each student.
- Students on psychiatric medications will be evaluated at least every three months by psychiatry.

**MEDICATION DELEGATION IN THE DAY PROGRAM**

If a student is going to be out of the day school building during the time a student is to receive a medication administration, without the presence of a Nurse, then the following protocol will be followed:

- The Nurse who is designated for medication delegation (the Nurse Leader) will delegate the administration of medication to staff while out on a community trip.
- The Nurse will pack the medications in an envelope clearly labeled with the student's name on the packet, the medication name, the medication dose, the medication strength, and the date/time of administration or will otherwise identify the pills in the envelope.
- The Nurse will review with the person who will be administering the contents of the packet, the name of the medication(s), what time to administer the packet, the reason why the student receives the medication, and side effects to look for following the administration of the packet.
- The Nurse will have the staff person sign for receiving the packet as well as for acknowledging they were told of the aforementioned.
- The Nurse Leader will provide the staff with her/his contact information in the event s/he has medication related questions.

|  |   |                                     |
|--|---|-------------------------------------|
| <b>Policy Title: Residential Medication Administration</b> |   |                                     |
| Guild Program: Youth                                       | Date Approved by<br>CEO: 6/1/2023             | Date Approved by<br>Board: 6/8/2023 |
| Licensing Agencies: DESE, DEEC                             |   | Date(s) Approved by<br>Licensing:   |
| Internal Procedure Reference:                              | Legal Authority References: 606 CMR 3.06 (4), |                                     |

**Residential Medication Administration**

Many students at The Guild receive regularly scheduled prescribed medications, which are crucial to their well-being. Timely and correct administration of medication is a fundamental program priority and should be recognized by all staff.

The nurse leader may assign medication administration to residential staff that have passed Medication Administration Program (MAP) certification and have been authorized to administer medications by a registered nurse employed by The Guild for Human Services.

**Authorization for Medication Administration**

- No medication is administered to a student without written authorization from a parent/guardian or the student, if the student is over 18 and has not been adjudicated incompetent. Such authorization shall be renewed annually.
- No prescription or over-the-counter medication shall be administered to a student without the written order from a practitioner with authority to prescribe medications (health care provider).
- Any change in medication or dosage must be authorized by a new written order from the health care provider.
- Staff will be trained on monitoring and reporting side effects of medication. Significant side effects of medications will be recorded and reported to the nurse on-call and/or physician immediately.

### Medication Administration Documentation

- Each residence shall maintain a medication book that will be stored in the designated medication room/area. This book will contain physician orders for medications and medication administration records for each individual student.
- Each monthly medication administration record will include the student's name, allergies, medication with dosage, and specific number of pills and times to be administered.
- Each staff person who administers medications will sign off on the appropriate medication at the appropriate time with his/her initials.
- At the end of each month, nursing will remove these sheets from the residences and file them at The Guild's headquarters. Archived documents may be stored at a secure location outside of The Guild's headquarters.
- Countable controlled substances will be tracked in a controlled substance book and counted prior to and after medication administration.

**Staff Training:** Residential staff must pass MAP certification training and be authorized by the Health Services Department as a medication administrator prior to giving any medications or treatments to Guild students.

- Once MAP training and certification is complete, residential employees assigned to administer medications are required to demonstrate successfully the medication administration procedure at their assigned residence with a Guild registered nurse. Following a positive demonstration of the procedure, the residential manager and residential administrators will be notified in writing that this person is considered a designated medication administrator.
- In addition to MAP training, all employees will receive a health training during The Guild's pre-service training. The health training includes instruction on medications, specifically psychoactive medications, their potential side effects and monitoring precautions. The health training should not be confused with the medication administration training.
- Staff must remain current with MAP certification to continue administering medications in the residence.
- Medication systems and medication administration will be reviewed in each residence annually with any staff authorized by the Health Services Department as a medication administrator.

**Staff Responsibility**

- Only one staff person per residence should administer medications and treatments at any given time.
- The medication administrator is designated with the word "med" on the staff schedule for every residential shift.
- Medications and treatments are delegated for administration daily in the morning (prior to 8:30 a.m.) and after 3:30 p.m. Monday through Friday. On weekends, a medication administrator will be designated to administer all daily medications. At the beginning of their shift, the medication administrator should check to see that medications have been given by the previous shift.
- A nurse is available 24 hours a day, seven days per week for consultation. There is a nurse on-call schedule posted in each site.

**Medication Storage**

- All medications and treatment supplies are stored in a locked medication cabinet in the designated medication room or area. Keys should be secured in the locked key box at all times when they are not in use.
- The medicine room/area will be clearly divided and marked to define and separate consumable and non-consumable items (i.e., drugs taken internally separated from drugs or medical preparations for external usage).
- Each residence has a set of medication keys.
- All medications to be administered in the residential group homes will be first reviewed by nursing to ensure they match the health care provider order and the medication administration record.
- Nursing will remove from the program any medications in need of disposal. Any medication to be discarded (i.e., outdated medication, unused or defective, etc.) shall be disposed of via a bio-hazard management system. No medications shall be disposed of in trash bins or other receptacles where students may find and ingest them.

**Medication Packaging for a Student Leave of Absence**

- If a student is going to be out of the residence during the time in which medications are to be administered, then the medications should be identified using the medication administration protocol and held by a designated medication administrator to be administered at the proper time. Medications will only be packed by staff who have completed the medication administration training. This protocol also applies when a student is going home to visit family.
- A leave of absence (LOA) form needs to be completed and signed off by the person packaging medication, the person giving the medications to the parents and the parents.
- All medications for a home visit should be packaged, including frequently used, as needed ("PRN") medications.
- Medications packaged for a leave of absence (LOA) will be documented in the medications administration record by the person preparing the medications with "LOA" for leave of absence.

|  |  |                                     |
|--|--|-------------------------------------|
| <b>Policy Title: Self Medication Plans</b> |  |                                     |
| Guild Program: Youth                       | Date Approved by<br>CEO: 6/1/2023          | Date Approved by<br>Board: 6/8/2023 |
| Licensing Agencies: DESE, DEEC             |  | Date(s) Approved by<br>Licensing:   |
| Internal Procedure Reference:              | Legal Authority References: 606 CMR 3.06:4 |                                     |

The individual's team, including at a minimum the nurse case manager, residential manager and teacher determines if a student is ready to participate in the Self-Medication Training Plan. Permission from the students prescribing practitioners will provide permission before a student will begin to self-administer medications. Health Services, in concert with the team will monitor the progress of the training and the student will be deemed competent to self-administer once complete all levels of the training program and are deemed competent and safe to self-administer their medications.

Nursing will utilize the MAP "Self-Administration Assessment form" to assess a person's ability to self-administer their medications. This assessment will be documented. Per this assessment the individual's level of self-medication will be determined. If the individual is learning to self-medicate, a teaching plan including goals to be achieved over a set time frame will be included in the IHP. Individuals on a self-medication plan will be assessed regularly for their ability to continue on their current teaching plan.

|  |   |                                     |
|--|---|-------------------------------------|
| <b>Policy Title: Medication Errors</b> |   |                                     |
| Guild Program: Youth                   | Date Approved by<br>CEO: 6/1/2023           | Date Approved by<br>Board: 6/8/2023 |
| Licensing Agencies: DESE, DEEC         |   | Date(s) Approved by<br>Licensing:   |
| Internal Procedure Reference:          | Legal Authority References: 606 CMR 3.06:4, |                                     |

**Definition:**

A medication error is when there is a breach in the five rights of medication administration. (right person, right time, right medication, right route, right dose)

**Notification:**

In the event of a medication error, the staff member administering the medication or finding the error should:

- Notify your Program Nurse and the Residential Manager immediately of the error.
- If after hours, contact the Nurse On-Call and the On-Call Residential Administrator.
- The Nurse will contact the student's Physician to report the medication error and ask for directions.
- The Nurse will contact the Legal Guardian of the medication error.
- the Nurse will instruct group home staff accordingly

**Reporting:**

Medication incident report will be completed by the nurse receiving notification of the error.

- The completed medication error form will be first reviewed by the Director of Health Services
- If copy of the form will be provided to the Residential Manager, associate residential manager and Director of Youth Residential Services
- Medication error forms will be stored in a secure folder by the Director of Health Services
- Medication error trends will be reviewed by the Director of Health services and Director of Quality Assurance or their designees
- Any error resulting in medical attention will be reported to DPH within 24 hours.

**Staff Follow-up and Retraining:**

- All medication errors will be reviewed with staff with a Nurse prior to the next time they are to administer medications.
- The Nurse will review the error and medication retraining specific to the error and circumstances around the error will be provided prior to administering the medications again.

For subsequent errors, The Nurse will supervise a full medication pass in addition to the training above. If a staff is making frequent errors, the staff's performance will be discussed with the administrative team to determine their ability to continue administering medications and or perform their duties as staff

|   |   |                                  |
|---|---|----------------------------------|
| <b>Policy Title: Psychotropic Medications</b> |   |                                  |
| Guild Program: Y                              | Date Approved by CEO: 6/1/2023              | Date Approved by Board: 6/8/2023 |
| Licensing Agencies: DESE, DEEC                |   | Date(s) Approved by Licensing:   |
| Internal Procedure Reference:                 | Legal Authority References: 606 CMR 3.06:4, |                                  |

The Guild considers behavioral and educational programming as the primary treatment modalities for behavior reduction and skill acquisition. Psychotropic medications should only serve as temporary, ancillary, or supplemental means of treatment.

If a student is over 18 years old, has a legal guardian, and needs antipsychotic medications, a Roger's Order from the Probate Court will be required. Roger's Order is obtained by the Guardian, who petitions the court, and provides medical evidence from doctors that explains the need for the medication. The Clinical case manager and Nursing will provide family assistance and educate families with regard to facilitating the guardianship process.

The prescription of psychotropic medications (including antipsychotic medications) shall be limited to maladaptive behaviors which pose a substantial threat to the physical well-being of the student or others and to severe problematic behaviors which consistently, regularly, and

predictably interfere with the acquisition of adaptive survival skills.

Psychotropic medications will be prescribed only for a period of time deemed necessary by the prescribing physician after consistent monitoring and review of the student's behavior.

**Informed Consent:**

- The prescribing physician and the Guild team will submit a written report detailing the specific target behaviors for which the medication is being prescribed along with baseline data on the frequency of their occurrence; a brief description of the treatment plan to be used in conjunction with the medication; the behavioral and diagnostic criteria for discontinuing the medication; any special monitoring requirements; and possible side-effect
- If the student is in the custody of his/her parents (under 18 years of age), written parental consent will be obtained for antipsychotic medication use. If parents do not give consent or are not available for consent, the student's referral source may be notified and judicial approval may be sought.
- If the student is 18 years of age or older and is his/her own legal guardian, written consent will be obtained from the student. Parents and referral source(s) will be notified in writing. A student may refuse to give consent for medication. In this situation, parents and referral sources will meet with The Guild to determine what further action, if any, is necessary.
- If the student is 18 years of age or older and is his/her own legal guardian but has been assessed by the clinical team as not being able to give informed consent, parents and referral source will be notified and judicial approval will be sought. If the student is in the custody of a person other than the parent, a placement agency or an out-of-state public or private agency, the referral source may be notified and judicial approval may be sought.
- A student, 12 years of age and older, (consistent with the student's capacity to understand) will be informed of medication(s) along with the reasons for the prescription and the potential side effects.
- A parent, guardian or student who is 18 years of age or older and is his/her own legal guardian, may revoke consent at any time under the care of a doctor. A meeting with the Clinical Team before revoking consent is highly recommended.

**Documentation:**

- Students entering The Guild on antipsychotic or other psychotropic medications should have documentation and/or a court order stating the name and dosage of the medication, a list of the target behaviors for which the medication was prescribed, a list of potential side-effects and the name of the prescribing physician. Informed consent from the parent/legal guardian or student will be obtained for medication administration.
- Documentation shall be kept in each student's medical file concerning current medication(s), dosage, list of target behaviors and potential side effects along with staff monitoring requirements.
- The Guild will provide graphed data on all behaviors; a motivational analysis of the targeted behaviors; a list of behavior management procedures tried; a written



behavior management program to be used in conjunction with the medication; and a detailed monitoring system for assessing medication effects.

- All (or specific) target behaviors will be graphed on at least a weekly basis. All medication(s) and medication changes will be noted on the graphic summaries.
- Medication orders and medication administration records will be part of the students record

**Emergency Situations:**

- In an emergency situation, antipsychotic medication may be administered for treatment purposes without parental consent or prior judicial approval if an unforeseen combination of circumstances or the resulting state calls for immediate action and there is no less intrusive alternative to the medication. The treating physician must determine that medication is necessary to prevent the immediate substantial and irreversible deterioration of a serious mental illness. If the treating physician determines that medication should continue, informed consent or judicial approval must be obtained as required by 18.05(9)(e).

**Staff Training:**

- All staff will receive in-service training on psychotropic (including antipsychotic) medications including; potential side effects and monitoring requirements. Antipsychotic and other Psychotropic medications will **not** be used as chemical restraints at The Guild.

|                                 |  |                                  |
|---------------------------------|--|----------------------------------|
| <b>Policy Title: VNA Visits</b> |  |                                  |
| Guild Program: Y                | Date Approved by CEO: 6/1/2023   | Date Approved by Board: 6/8/2023 |
| Licensing Agencies: DESE, DEEC  |  | Date(s) Approved by Licensing:   |
| Internal Procedure Reference:   | Legal Authority References: Department of Elementary and Secondary Education (DESE): 18.05 (9) (f) 9; Department of Early Education and Care (DEEC): 3.06(4)(k); Department of Developmental Disabilities (DDs): 20.09 |                                  |

Visiting Nurse may at times be resourced to assist in maintaining the medical needs of an identified student. If this is determined a necessity by the health services team, this will be discussed with the legal guardian and student.

- The need for VNA supports will be determined on an ongoing basis by the health services department, referring providers and the VNA.
- The guardian and or parent will complete the necessary paperwork and consents with the VNA to initiate services.

- No visiting nurse will be left alone with a student. A Guild Staff will be with the Visiting Nurse at all times while they are in a Guild residence.

|  |   |                                     |
|--|---|-------------------------------------|
| <b>Policy Title: Concord Headquarters Fire Alarm and Evacuation Drills</b> |   |                                     |
| Guild Program:   | Date Approved by CEO: 6/1/2023                                    | Date Approved by Board: 6/8/2023    |
| Licensing Agencies: DEEC   |   | Date(s) Approved by Licensing: 2022 |
| Internal Procedure Reference:  | Legal Authority References: 603 CMR 18.05(10); 102 CMR 3.08(2)(a) |                                     |

**Subject**

To establish a written policy regarding the conducting of fire drills as part of its fire Safety program. The instruction, duties and guidelines are intended to organize an effective safety and emergency program for all students, staff and visitors. The plan is intended to cover emergencies, such as fire, safety, bomb threats and emergencies that require evacuation.

**Policy**

The Guild for Human Services will implement, maintain, review and make available for all employees a written policy regarding the practices related to the conducting of fire safety drills as part of the fire safety program. All Guild Staff will follow this policy in assisting the students to learn of fire safety.

**Procedures**

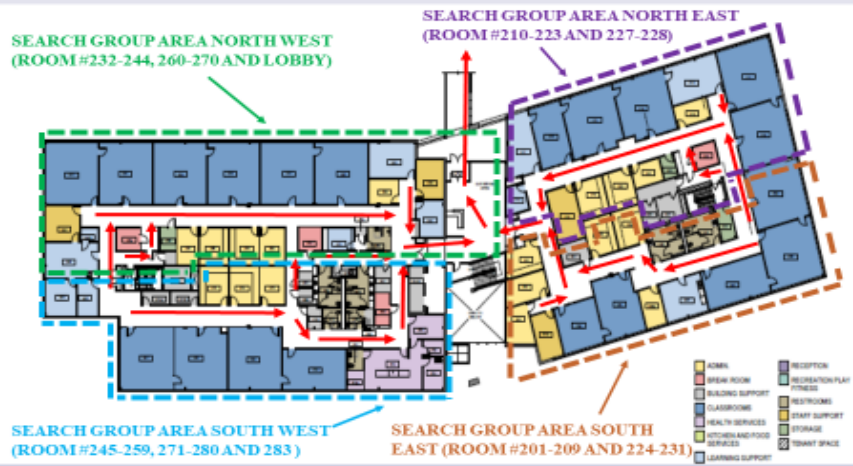
- Fire drills should be conducted at least quarterly at The Guild School and Headquarters.
- Record the results of every fire drill in the fire drill log.
- The Director of Facilities or designee will schedule the fire drill. Staff will not be notified that it is scheduled.
- Notify the Director of Quality Assurance, Chief Operating Officer and Chief Education Officer to confirm date and time of drill. The designated on-site Bay Path Administrator will also be notified
- Call J&M Brown fire and monitoring service at 617-522-6800 to take the fire alarm system off line. A buffer of three hours will allow enough time to conduct drills without the risk of a false alarm if a shorter time frame is exceeded.
- Call Paradigm Properties (Landlord for the other park buildings) to notify of the fire drill event. Also notify the Concord Fire Department of the planned event.

- Confirm all student lists are updated and are provided to the monitors prior to the drill.
- Check walkie-talkie to ensure batteries are in good condition, all units are operational and they are programmed to the correct channel.
- Timing of the drill will start when the alarm is activated and ending when the last student and staff have exited the building.
- Staff, students and visitors will exit according to the posted emergency exit routes
- Silence the fire alarm after the drill has ended and put the system back on-line.
- Confirm attendance has been taken and all students and staff are outside of the building and at the designated safe areas.
- Students may not re-enter the building until all of the students have been accounted for and the alarm is off
- After attendance has been completed students and staff may file back into the building slowly.
- The Guild's Director of Facilities will gather the attendance sheets and attach them to the fire drill evacuation report.
- Fire drill reports will be reviewed with the Director of Quality Assurance, Chief Operating Officer and Chief Education Officer for signatures, performance and process changes (if needed).
- All reports will be stored and accessible to the Chief Operating Officer, Director of Quality Assurance, Chief Education Officer and Director of Facilities.

### **Designated assembly areas**

- Staff, students and visitors exiting the second floor west will turn left and proceed to the Playground lawn area on the Northwest side.
- Staff, students and visitors exiting the second floor East will turn right and proceed to the side parking and tree lawn area north East side.
- Staff, students and visitors exiting the first floor east will turn right and proceed to the Playground lawn area on the Northwest side.
- Staff, students and visitors exiting the lower lobby will turn right and proceed around the building to the parking and tree lawn area on the Northwest side.
- Occupants in the Bay Path side (first floor East) will, proceed down the walkway and turn left on to the side parking and tree lawn area on the north East side.

**SECOND FLOOR EAST AND WEST EMERGENCY SEARCH AREAS AND EGRESS ROUTES**



**FIRST FLOOR WEST EMERGENCY SEARCH AREAS AND EGRESS ROUTES**



|   |   |   |
|---|---|---|
| <b>Policy Title: Residential Fire Alarms and Drills</b> |   |   |
| Guild Program:  | Date Approved by CEO: 6/1/2023                                    | Date Approved by Board: 6/8/2023                    |
| Licensing Agencies: DESE, DEEC                          |   | Date(s) Approved by Licensing: DESE 2022, DEEC 2022 |
| Internal Procedure Reference:                           | Legal Authority References: 603 CMR 18.05(10); 102 CMR 3.08(2)(a) |   |

## Subject

To establish a written policy regarding the conducting of fire drills as part of its fire safety program within the Residential Program of The Guild for Human Services.

## Policy

The Guild for Human Services will implement, maintain, review and make available for all employees a written policy regarding the practices related to the conducting of fire safety drills as part of the fire safety program of its residential program. All Guild Staff will follow this policy in assisting the students to learn of fire safety.

## Procedures

- Fire drills should be run at least once a month at each residence.
  - Fire drills must be run on the day of admission to the residence for any new student or any student transferring to the house from another Guild house (and on the first night of opening any new house)
- Fire drills each quarter will include
  - A regular awake drill
  - A drill on all shifts (weekend day, afternoon, and overnight.)
    - Alternately (every other month)
    - An asleep drill
    - A blocked-exit drill
- Staff may select to use an incidental fire drill as their monthly drill, however, asleep/blocked drills must also be run that quarter regardless of the number of incidental drills
- Record the results of every fire drill in the fire drill log.
  - To run a regular awake drill
    - The residential manager or designee may or may not tell all staff on duty they are going to have a drill.
    - One staff should be available to "pull" the alarm.
    - Whenever possible make sure that the students are wearing shoes and weather appropriate clothing.

- While staff should allow students the highest level of independence during a fire drill, verbal and physical prompts should be given as indicated in a student's self-preservation assessment and IEP
- Staff must allow students who have been assessed as independent in self-preservation at least one minute without any prompts
- After this time, staff should go into the house to assist the student in evacuating out of the house using the least restrictive prompts possible
- All students must remain outside until everyone is out of the house
- Staff may not shut the alarm off until all of the students are outside
- Students may not re-enter the house until all of the students have been accounted for and the alarm is off
- ALL students must evacuate each time the fire alarm goes off, regardless of the time of day or activity
- All students must remain in the designated area until staff indicates it is okay to reenter the residence
- To run a blocked exit drill
  - Follow the above procedures EXCEPT
    - One staff should remain inside to block the usual exit Staff should stand in front of the door and shake their head "no"
    - To avoid confusion for the students
      - Staff may want to run through possible scenarios with students before the drill
        - For example, "What if the fire is in the front hall?"
    - Proceed with the drill as usual, using the least restrictive cues to evacuate the students.
- To run an asleep drill
  - Follow the awake procedures EXCEPT
    - Drill should be run either 30 minutes after the start of the overnight shift or 15 minutes before all students are to get up (i.e. between 10:30 p.m. and 6:30 a.m.)
    - The overnight supervisor or assistant overnight supervisor will work with the overnight staff to select the best time for these drills based on the needs of the residence
    - Before pulling the alarm
      - Staff should gather the students' shoes and coats, bathrobes, blankets, whatever items are necessary
      - Have the items waiting outside for students
    - Use the least restrictive cues necessary to evacuate all of the students
- If a student refuses to evacuate during a drill or requires a great level of assistance than is routine for that student (i.e. a student who requires verbal cues

needs physical prompts to evacuate) a repeat fire drill should be conducted within 48 hours

- If the student is still unsuccessful in meeting their baseline level a teaching strategy should be developed to support that student in safely evacuating the residence
- If the fire alarm goes off for no apparent reason- or- you cannot reset the fire alarm after a routine drill DO NOT allow the students to remain inside the residence while the alarm is active
- All students must evacuate every time the alarm sounds
  - DO NOT reset the alarm
  - Place the controls for the fire alarm on “TROUBLE SILENCE”
  - Now, go through the entire house checking each smoke detector
    - Each detector is equipped with a warning light
    - If the detector is working, the light should be blinking
    - If the light is solid red or off, that is your trouble spot
  - Call the Residential Manager or Overnight Supervisor
    - Have information regarding the current problem with the alarm
    - The Residential Manager/Overnight Supervisor will determine if the problem can be resolved or if the On-call Residential Administrator needs to be contacted
    - The On-call will determine if the Chief Residential Officer needs to be called
  - If all of the smoke detectors appear to be functioning correctly, you must check each of your pull stations to make sure they are in the “up” position.

|  |   |   |
|--|---|---|
| <b>Procedure: Severe Weather Affecting Day/Residential Program</b> |   |   |
| Guild Program: Youth   | Date Approved by<br>CEO: 6/1/2023                                 | Date Approved by Board:<br>6/8/2023                       |
| Licensing Agencies: DESE, DEEC                                     |   | Date(s) Approved by<br>Licensing: DESE 2022,<br>DEEC 2022 |
| Internal Procedure Reference:                                      | Legal Authority References: 603 CMR 18.05(10); 102 CMR 3.08(2)(a) |   |

The purpose of this procedure is to insure the safety of students and staff when there is a threat of hurricanes, tornados, blizzards and other such weather.

Every attempt will be made so that the school and offices will remain open every regularly scheduled day, regardless of weather conditions. All employees, including support staff, are expected to be present. Students will be transported to the day program unless transport is determined to be unsafe by the Chief Education Officer,

Chief Officer on-call or their designees. If transport is deemed unsafe, students will remain in the residences and Day staff will be assigned for coverage.

If in the judgment the Chief Officer on-call and On-Call Residential Administrator such conditions appear to exist that students would be unsafe remaining in a residence(s), during a time period such as weekends, holidays and/or evenings, the following procedures will be implemented:

### **Procedure**

1. The Chief Officer on-call and On-Call Residential Administrator will decide if a residence(s) is unsafe and will call all the residence(s) and let staff know that the premises should be evacuated and all students and staff should proceed immediately to 521 Virginia Road, Concord, MA.
2. The Residential Manager(s), On-Call Residential Administrator, Chief Officers and Maintenance personnel will be notified of the evacuation and those available to assist will immediately proceed to 521 Virginia Road.
3. All staff on duty at the residence will accompany students to The Guild and bring pillows and blankets. Sleeping bags and cots are also available at 521 Virginia Road.
4. As needed, Maintenance personnel will be responsible for boarding windows at residences and/or 521 Virginia Road from the inside as well as providing additional flashlights, auxiliary lighting and other supplies.
5. Guild vehicles from the evacuated residence(s) not stored in garages will be driven to 521 Virginia Road and parked in the lot.
6. All day and support staff will report to the day school and offices for their next regular workday as soon as it is safe to travel.
7. Students will remain at 521 Virginia Road until it is safe for them to return to their residence(s).



