This Handbook is designed to help you get acquainted with our program and rules. It won't answer all of your specific questions, but will help direct you as to where to find them. St. Joseph's staff provides supervision for daily living and activities, therapy, and has a fully accredited K-12 school on grounds.

Every child is respected as an individual and will receive the best possible care and treatment based on individual needs. St. Joseph's treatment approach uses the Teaching Family Model and behavior approach to help residents to learn and understand themselves better and to learn and practice more effective ways for solving their problems.

There are 6 living Units on campus. The Hart Center houses two units, the Bosco Center is home for two units, and McGovern Hall is home for one unit. The Newell Center has both boys and girls of all ages. There is one secure unit on campus which houses those residents that require closer supervision and restrictions due to more serious behavior problems. It is intended to be for a short time and then the child moves to one of the other living units.

HISTORY AND PROGRAM
OF ST. JOSEPH’S CHILDREN’S HOME

St. Joseph’s began as an Orphanage in 1930 and located at its present site in Torrington, Wyoming. For over 80 years St. Joseph’s has committed to serving the needs of children and families. In 1973 the name was changed to St. Joseph's Children's Home to better identify it as a treatment facility for children. In 1996 the program and facility was accredited by the Joint Commission on Accreditation (JCO) and has maintained those high standards for treatment and care. The Wyoming Department of Family Services (DFS) certifies St. Joseph’s as a Psychiatric Residential Treatment Facility for youth ages 6-17.
There are over 130 full time highly trained staff to serve children and families. Staff includes licensed therapists and licensed psychologists, registered nurses, a consulting psychiatrist as well as support staff and a fully accredited school with certified teachers. An intensive therapeutic environment and services are maintained in school, living units, and through numerous activities. Spirituality is considered an important part of the treatment.

FAMILY

Whether you are the biological parents, adoptive parents, foster parent, guardian, or extended family member, your role will be referred to as the ‘parent’ throughout this Handbook. Your involvement is essential to the treatment of the children in our care. We do not wish to, nor could we ever replace you as the parent. You are the expert on your child and family.

We at St. Joseph's Children's Home pledge to work closely with you throughout your child’s treatment. We strongly believe in and practice a family centered program.

We strongly recommend that you take the time to attend our Common Sense Parenting class at some time during your child’s treatment. This training is conducted on weekends and is usually offered four times a year.

Family therapy is an essential component to your child’s treatment. Preference would be for you to come to St. Joseph's Children's Home to attend family therapy with your child. We also realize that it is sometimes difficult to travel to St. Joseph’s. We will conduct family sessions by telephone in between visits and in some cases are able to use a Poloyconference where meetings can be conducted via live television. Close contact with your child’s therapist and supervisor of the living unit is encouraged.

CONTACTING YOUR CHILD AND ST. JOSEPH’S STAFF

TELEPHONE NUMBER
307-532-4197
This number is the same for all staff and your child. A receptionist or automated system will answer the telephone and direct your call.

MAIL
P.O. Box 1117
Torrington, Wyoming 82240
Physical address:
1419 Main Street
Torrington, WY 82240
CLOTHING and PERSONAL ITEMS

Suggested Clothing

As a general rule, residents should have enough clothing for a week as they will do their own laundry each week.

- 1-2 pair shoes (tennis shoes without shoe laces)
- 5-6 pair of underwear
- 5-6 pair of socks
- 3-5 pair jeans/slacks
- 5-6 shirts
- Belt
- Sleeping attire. Pajamas, no nightgowns. Prefer gym type shorts and loose fitting top shirt
- 2-3 Sport Bras for girls. No bras allowed that contain an ‘underwire’ or snaps and hooks
- 1-2 pair of walking or gym shorts
- 1 Coat – Variable to weather for the time of year. **Winter:** Heavy coat, cap, gloves  **Summer:** Light jacket
- Swim suit – One piece suits for girls

PERSONAL ITEMS: Residents may have personal items such as radios, stereos, games, and pictures in their possession providing behaviors are appropriate. They may be restricted and taken away if misused or behavior is placing the resident and/or others at risk. Items of high or of sentimental value should be left at home to prevent loss or damage.

**Suggested personal items include:** Hygiene items; baseball glove; small toys, such as hand games, Lego’s; books (must be appropriate); Bible; favorite blanket or stuffed animal; radio; hat; CDs & player; etc. Music with sexual content, violence, or drug subjects is restricted. In the secure and intensive unit, for residents that demonstrate more aggression, disruption, harm to self, and other intense emotional issues, there are more restrictions regarding personal items and you will need to discuss these with the Director of this unit. Personal items are not allowed in the resident’s possession or room but are stored in their individual “cubbies”. Video games, radios, music players, books, TV are provided by the unit.

**RESIDENT DRESS AND GROOMING CODE**

Students should be neat, clean and modestly dressed at school, unit, and for off campus activities. Footwear must be worn at all times and be safe and appropriate for activities in which the residents are participating.

**The following will not be allowed at St. Joseph's Children's Home:**

- Ripped, heavily patched types of clothing, “baggies” and bandanas
- “Sagging” clothes or “low rider” jeans that are below the waist and exposing skin and/or underwear.
- Excessively short, tight or revealing clothing. Shirts should appropriately cover the shoulders and torso and fit under the arms. The torso should not be exposed any time. Shorts or skirts must be no shorter than **5 inches** above the knee
- Undergarments which are exposed
- Bras with an underwire, plastic or metal clips. Should be a “sports bra” only.
- Thong type undergarments
- Low cut shirts
- String or “spaghetti” strap shirts. Straps must be at least 3 inches wide
• Clothing or accessories which advertise drugs or alcohol, violence, Satanism, gangs, heavy metal rock groups, or any messages that could be offensive to others
• The staff retains the authority for the final decision of what is not appropriate

COMMUNICATION

It is important to keep you, the parent/guardian informed of how your child is doing. While we can’t contact you for every problem we do notify you as soon as possible if there is a serious illness or injury that requires medical attention by a physician. Some scrapes and bruises can be handled by our staff nurse, who will assess if serious or not and will prescribe some topical medication or ice packs.

The Residential Supervisor will contact you each week, either by telephone, email, or a “parent note” mailed each week. This report will include any medical appointments during the week, any special treatment interventions that were required regarding your child’s behavior, and medication changes. If at any time you have a question or concern and would like to talk with the unit’s Residential Supervisor always feel free to call.

Your permission will be requested if a psychotropic medication is prescribed. We try to keep you informed of any changes in the dosage as well.

You are encouraged to contact your child’s Residential Supervisor or an administrator if you have any concerns regarding your child’s treatment. Most concerns can be resolved promptly.

MAIL

Residents are allowed to receive and send mail. Writing materials and postage will be provided if the child does not have these. If mail sent or received starts causing problems with the child’s treatment or illegal material is found, mail may be restricted. The treatment team, social worker, and parents will make this decision.

MONEY

Residents are not allowed to have money in their possession except under staff supervision. It will be kept in an individual account until needed. Any money (cash or checks) received in the mail is to be given to staff for safekeeping. Weekly allowances are earned to provide spending money.
TELEPHONE CALLS

Residents may receive and make telephone calls. Calls are limited to family members and are not allowed with friends. A list that the parent or guardian initiates is kept that shows who may call, visit, and who the child may call. Out going calls need to be made collect or with a calling card. Incoming and outgoing calls are usually made in the evening or on weekends so as not to interfere with the treatment program. Length of time for a call is usually limited to 15 minutes. The resident and their family are encouraged to keep in close contact. It is recommended that calls are made once a week as there are other children living on the unit who receive calls. Too frequent calls can sometimes interfere with the child’s progress. Considerations are made for the individual needs of the child.

VISITS

Visits with family members are encouraged. Arrangements must be made in advance with the unit Residential Supervisor. It is preferred that visits occur on weekends. Visits are either on campus or off campus, depending upon the child’s progress and involvement in individual and family therapy.

Home visits are sometimes arranged on weekends or holidays, again this depends upon how the resident is doing in their treatment program and must be approved by the caseworker if in DFS custody and the treatment team. Home visits are limited to 14 days a year beginning at admission.

TIPS FOR VISITING YOUR CHILD

The following are listed to emphasize the importance of regular visits, which also include telephone calls that will make the experience positive for both you and your child.

- Make your visits a priority
- Never drink or use drugs before or during a visit. Do not come to the visit under the influence of drugs or alcohol. If you do, your visit will be stopped. This will only make things worse
- Do not change or cancel a visit unless you absolutely have to. Make sure you have a very good reason as it will be very difficult for your child

In the event your child is with you on a home visit and there is a crisis, you can obtain help:

- Contact the Department of Family Services. Contact the child’s Therapist/Residential Supervisor at St. Joseph’s 307-332-4197
- For Suicidal Behavior (Hotlines)
  - Wyoming Behavior Institute 1-800-457-9312
  - National Hotline: 1-800-784-2433
  - Life threatening situation: Call 911
• Be on time
• Plan ahead. Bring activities or find things that you and your child can enjoy doing together as this will make your time together more enjoyable. If at meal time, bring a healthy snack or meal if allowed
• It can feel painful to visit your child because you cannot take him/her home and they cannot leave with you. Do not let this interfere with your visits. Your child wants and needs to see you regularly, even though sometimes they may not act like it.

• During a visit, tell your child that you are glad to see them. Find nice things to say about him or her. Ask about them and their activities
• Let your child know that you are OK and they do not need to worry about you or things at home
• Visits are not the time to be critical or to bring up past problems. Save this for family therapy when there is a better chance of finding solutions
• Show support for your child and give encouragement for their program. Don’t make promises that you cannot keep
• Visitation is a time for you and your child to rebuild your relationship. Use your time together to practice new parenting skills with your child. Never hit, spank, or threaten your child. If you need help with discipline, ask a staff member
• Do not bring gifts for your child to every visit. You may feel like buying your child a special treat thinking it may help them to feel better, but is not a healthy practice. Spending time with you is what is important and therapeutic for your child.
• The end of visits can be difficult for both you and your child, especially the first few visits. Reassure your child that you still love them and that you will see them or talk to them soon. Say goodbye and smile at your child when the visit is over

THE TREATMENT PLAN

The resident’s Treatment Plan” is the "Road Map” that provide direction where everyone is headed.

We can think of Goals and Objectives in terms of Steps. Before reaching the top step or landing (the Goal), we must progress up each step (the Objectives) and of course, the less difficult the objectives, the easier it will be to be successful and reach the GOAL.
Once a Goal has been identified, the order of events that must occur before it will be achieved must be decided upon.

PLANS are then established to help for the Objectives to be met.
TREATMENT REVIEWS

Treatment Reviews are held once a month during the child’s stay at St. Joseph’s. A written report will be mailed shortly after the review summarizing what was discussed. The resident’s Treatment Team will attend with the child, and parents may attend via telephone if not able to travel to St. Joseph’s. The Treatment Review provides an opportunity for the parents, resident and others to learn and understand how the child is progressing with their Individual Treatment Plan and to discuss any new issue or concerns that arise.

THOSE ON THE TREATMENT TEAM INCLUDE

- Resident
- Therapist
- Teacher from the school
- Residential Supervisor or a Unit Family Teacher
- Department of Family Services Social Worker if in DFS Custody or a representative from the home school if a school sponsored placement
- The child’s Guardian ad Litem in many cases
- The child’s parent/guardian

THERAPY

Each resident will have a therapist who will help with the child and parents during their treatment program. The therapist will also keep in close contact with parents and social worker if indicated to keep everyone informed of the child’s progress. There are several types of therapy provided: individual therapy, group therapy, family therapy, and educational groups.

INDIVIDUAL THERAPY: The resident and their therapist will spend this time talking about the child’s feelings, problems, and about steps to start solving them. The therapist will also help guide the resident through their treatment program. Each resident meets with their therapist at least once a week.

GROUP THERAPY: This is much like individual therapy, except it will include their peers. The other members in the group all have similar concerns. It is often helpful to share ideas with others having the same issues on how to make changes. This is also an opportunity for the child and their peers to support and encourage each other.

FAMILY THERAPY:

These meetings are attended by the resident, parents and therapist. The sessions are intended to help the family and the child with talking, listening, and problem solving. It gives everyone a better idea of how they feel, share what makes people angry, and to find solutions to problems that may be found in the home. The goals are to help the child and family become closer and supportive of each other.
EDUCATIONAL GROUPS: Educational groups offer information, ideas, and practice of skills that will help the resident with issues that may be causing problems. These groups are often conducted by other staff members who work with the child on the living units. Many of the ideas presented during these groups and in school will be talked about and practiced during group and individual therapy. Some of the educational groups include:

- Values
- Recreational/Leisure
- Stress Management
- Anger Management
- Health Education
- Healthy Choices
- Respecting Boundaries
- Substance Abuse Education
- Social Skills

DAILY LIVING ON THE UNITS

Living on the unit is much like living with a family, only with more brothers or sisters about the same age.

Residents are expected to:
- Help each other
- Respect the rights of others
- Follow directions by adults
- Learn to disagree and express themselves appropriately
- Learn to solve daily problems
- Learn skills to get along with others

The adults who work on the Living Units are called FAMILY TEACHERS. They will help teach new skills and provide guidance and supervision much like parents would in a home.

At least once a day, a meeting is held with the staff and other residents on the unit. This is called a FAMILY CONFERENCE. Some of the things talked about during this meeting include:
- Information sharing
- Unit problem solving
- Unit activity planning

POINT SYSTEM: St. Joseph’s uses the Teaching Family Model for motivation and building on social skills. Staff are extensively trained in the Model. Points are used to help both the resident and staff see how the child is doing with treatment. Positive points are earned for expected behavior and negative points are earned for those that are not okay. Points that are lost can be made up in several ways and in a short time and staff will work with the child to help get back on track.

Privileges, levels of trust, and responsibility are earned or lost with points.

The Family Teachers on the unit will explain how this works. Residents catch on to this in a very short time.

DAILY SCHEDULE:
- During the week when school is in progress, wake up is at 6:00 AM
- Bedtime between 8:00 and 10:00 PM depending upon the unit, age, and behaviors.
Residents will attend school between 8:00 AM until 3:00 PM with academics, activities, and treatment exercises. Homework, and recreation are after school and in the evening.

Wake up and bedtime may be different on weekends and holidays.

**CHORES:** All residents are expected to help keep the unit looking neat and clean. Chores will be assigned and all will take turns. Residents are also expected to make their bed and keep their room picked up, “deep cleaning” is done weekly.

**MEALS:** Meals are prepared in the main kitchen and served on the Living Unit. During school, lunch is served in the main dining room. Daily snacks are also provided.

**LAUNDRY:** The child will do their own laundry. Washers and dryers are furnished on the unit and time will be scheduled for weekly laundry.

**SCHOOL**

St. Joseph’s school is like the school in your community, but class size may be smaller. You take classes very similar to those in your public school. The regular school year is from August to May and goes from 8:00 AM until 3:00 PM, Monday through Friday. There are vacations for Thanksgiving, Christmas and other school breaks. If you are here in the summer you will attend summer school. During the summer months, physical education will include swimming. There is a week break between the regular school sessions and summer school.

Reports are sent to your home school district on a regular basis and you will continue to earn high school credits. Students who are in Special Education will continue to follow their Individual Education Plan.

You will be tested when you enter and leave St. Joseph’s to measure how much you have learned. The improvement of reading, writing and social skills is our school’s three goals for all students.

Many students are able to advance extra grade levels during their treatment.
Medical services, to include eye and dental care, are provided by local doctors. Our Registered Nurse is here to help with any emergency and minor medical problems. A psychiatrist will meet with each resident on a regular basis to make assessments and evaluate need for medications. Medications are kept in a secure place by staff and are provided to the resident at the times they are ordered by the doctor. Residents are expected to take all of their medications when offered. If there are concerns about medication, the resident will need to talk about this with a Family Teacher, therapist, nurse and/or the doctor. Before a psychotropic medication is prescribed, the parent/guardian will be notified and asked to give permission. Parents who would like additional information about medication prescribed or have any concerns should notify the Nurse who will then arrange for a conference with the psychiatrist if necessary.

The resident will visit with the Consulting Psychiatrist every week for the first 4 weeks they are in residence after this they see the psychiatrist on a rotating basis with the units and as needed if there are issues to be addressed. The psychiatrist will monitor the medications and make adjustments when necessary.

**ACTIVITIES**

*There are also interesting and fun things to do.*

Numerous activities are part of the program at St. Joseph's.

They include: a 4-H program where residents work on projects like crafts, gardening, livestock grooming and County Fair exhibits. A horse program during the spring, summer and fall gives an opportunity for learning to care for horses and to participate in horseback riding. Music and choir is offered on a voluntary basis.
Swimming during the warm months in St. Joseph’s heated pool

Trips to parks and attending community events are frequent. In the past, groups have gone to Cheyenne Frontier Days, University of Wyoming football and basketball games, and Colorado Rockies, and Denver Nuggets games. Occasionally there are plays and dramas performed by those wishing to participate and events to attend in the community.

HOLIDAYS AND VACATIONS
When there are breaks in school home visits may be arranged for those able to go on home visits.

SPIRITUALITY
Spirituality plays a very important role in the treatment process. As a Christian facility, St. Joseph's Children's Home introduces residents to Christianity and incorporates Christian spirituality and values into the treatment program by offering services and activities for all residents. Children and
parents who do not wish their child to participate are not required to attend.

OUTSIDE CHURCH ATTENDANCE: Every effort will be made to honor specific requests from the parent or guardian for a resident to attend another church. When requested, pastors from other denominations are available and encouraged to visit with the resident.
CONDUCT AND EXPECTATIONS

All residents are expected to conduct themselves in a respectful and safe manner. Profane or vulgar language, threats to hurt others, aggressive action, assaultive behavior, property damage, or severe disruption of the treatment setting is not tolerated.

St. Joseph’s philosophy provides for the safety and well being of all residents. The use of any physical interventions or involuntary isolation (Seclusion) is intended to be used only as a last resort to provide for the safety of all residents.

Local, State, and Federal laws will be obeyed. Any violation of laws may be reported to local law enforcement agencies for prosecution.

SAFETY CONCERNS

If the resident/parent/guardian have concerns regarding any safety issues of the resident, they are encouraged to notify either the Residential Supervisor of their Living Unit, Residential Director, child’s Therapist, or the Executive Director immediately.

GRIEVANCE PROCEDURE

Residents and parents have a procedure to address any complaints or concerns about their treatment while at St. Joseph’s.

1. Residents have the right to file a grievance.
2. Residents may make grievances directly to any staff member.
3. Residents may seek remedy for any complaint.
4. Residents may file a grievance either in writing or verbally to any staff member. Pen, paper, envelopes, postage and access to a telephone will be provided upon request. Assistance shall be provided if the resident is unable to read or write.
5. Residents may have direct access to the Executive Director or Residential Director at some point in the grievance process.
6. Residents may make grievance directly to:

   Executive Director
   St. Joseph's Children's Home
   P.O. Box 1117
   Torrington, Wyoming 82240
   (307)-532-4197

7. Any staff member who receives a resident grievance or complaint is to report the incident within 24 hours to the Residential Director. The Residential Director investigates the incident, writes a grievance report, and informs the Executive Director.
8. When appropriate action is determined, a report of the resolution is written and reviewed by the Executive Director within seven calendar days.
9. In the case of resident abuse, neglect, or exploitation, the Executive Director is notified immediately.
10. Complaints, which are not resolved, by the Residential Director in conjunction with the treatment team are forwarded to the Executive Director.
BILL OF RIGHTS AS A RESIDENT

1. You have the right to considerate and respectful care and treatment.

2. You have the right to obtain from staff complete and current information concerning your diagnoses, treatment, and prognosis in terms you can be reasonably expected to understand. When it is not clinically advisable to give such information to you, the information shall be made available to an appropriate person on your behalf. You have the right to know by name the consultants responsible for supervising your medical and psychological treatment.

3. You have the right to meet with staff members to participate in the development of your individualized treatment plan and to have the plan periodically reviewed.

4. You have the right to receive information necessary to give your informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include, but not necessarily be limited, to the specific procedure and/or treatment, any risks involved, and the probable duration of treatment. Where alternatives for care or treatment exist, or when you request information concerning alternatives, you have the right to such information and to the opinion of an outside consultant. You also have the right to know the name of the person responsible for the procedures and/or treatment.

5. You have the right to refuse treatment, including medication, to the extent permitted by law, and to be informed of the medical consequences of your action.

6. You have the right to a safe environment with every consideration of your privacy concerning your own care. Case discussion, consultation, examination, treatment sessions, and communications are confidential and shall be conducted discretely. Those not directly involved in your care must have your permission to be present. You have the right to expect that all records pertaining to your care should be treated as confidential.

7. You have the right to expect St. Joseph's Children's Home to make every reasonable effort to respond to your request for services. When necessary, a child may be transferred to another facility for care, but only after you have received an explanation of the reasons, which make transfer necessary or desirable. You also have a right to be given complete information about any action taken. The institution to which transfer is sought must have agreed to accept you.

8. You have the right to obtain information regarding any relationship of this program to other health care and educational institutions insofar as your care is concerned. You have the right to obtain professional information regarding individuals responsible for your care, and relationships among those individuals.

9. You have the right to be advised if St. Joseph's Children's Home proposes to engage in or perform human research affecting your care or treatment. You have the right to refuse to participate in such research projects without compromising access to services to which you are otherwise entitled.

10. You have the right to expect that your treatment will be free of mistreatment, abuse, neglect, and exploitation. You can voice complaints and recommend changes without being subject to coercion, discrimination, reprisal, or unreasonable interruption of care, treatment and services.
11. Residents and/or their legal guardian have the right to direct a grievance or complaint to the State agency that provides certification for St. Joseph’s Children’s Home. Any grievance or complaint should be sent to:

- State Department of Family Services
- 2300 Capitol Ave., Hathaway Bldg.
- Cheyenne, WY 82002

OR

- Joint Commission
- One Renaissance Blvd
- Oakbrook Terrace, IL 50181

12. You have the right to complete information regarding the cost of your treatment, terms of insurance coverage and any limitations (if applicable.)

13. You have the right to receive visitors on the premises as approved by parents and/or legal custodian and to communicate with persons outside St. Joseph's Children's Home unless restricted for therapeutic reasons. You have the right to privacy and confidentiality when other residents are receiving visitors.

14. You have the right to expect continuity of care after you leave St. Joseph's Children's Home, and that the need for aftercare and its extent will be explained to you and your family. You have the right to request an advocate through your Residential Supervisor or your Therapist.