

# Youth Services Handbook



**The goal of treatment is to assist each patient in becoming a person with expressed gifts and talents.**



**Fairfax**  
*Hospital*

BEHAVIORAL HEALTH  
*Children, Adolescents, Adults*

10200 N.E. 132nd Street  
Kirkland, WA 9803  
425-821-2000

Dear Parents,

We recognize you have made a difficult decision to hospitalize your son or daughter. You may be experiencing many painful and conflicting emotions during your child's stay. Your child will certainly be experiencing a host of feelings. Those feelings range from anger, concern, relief, guilt and sadness during this period of crisis for the family. These feelings are normal and the Fairfax Hospital staff is here to help you. We want to work with you to provide the most positive therapeutic experience possible for you and your child.

The focus of treatment is to resolve family conflict and individual problems in order to assist your son or daughter to adapt in a more acceptable manner to the home and community. To do so, it is extremely important for the family to participate in the treatment process. This participation includes meeting with your child's doctor and/or case manager.

We understand that it is difficult to think of questions about the program during the admission process. We encourage you to make up a list of questions, and concerns you can discuss with the program staff. Your child's Psychiatrist, Program Manager, and/or the Youth Unit Case Manager are available to answer these questions.

The orientation packet will provide information regarding the expectations in treatment. If you have any questions please feel free to contact the hospital staff to assist you in this assignment.

## Introduction

Feel free to use this handbook as a resource to answer any questions you have. Please do not hesitate to contact us for clarification or for additional information. When calling the Youth Unit, please dial 425-821-2000 or toll-free at 800-435-7221 and ask for extension 1526

Program Coordinator: James Dauer , MA, Extension 1716

Patient Advocate: Darcie Johnson , Extension 1717

Youth Services Staff:           Extension 1526

### *All Visitors Must Bring Identification*

#### **Visiting Hours for Youth Services**

Monday through Friday   11:30 a.m.-12:30 p.m. & 5:00 p.m. - 6:30 p.m.

Saturday and Sunday     11:30 a.m. -12:30 p.m. & 3:30 p.m. - 5:30 p.m.

#### **Visiting Guidelines**

It is recommended that no more than three persons visit a patient at one time. Parents are responsible for the care of siblings they bring to visit the patient.

Whenever possible, visits are to take place off the unit (for example, in the dining room). When families have lunch or dinner with their child, they are requested to sit with their child only. Other patients are not to sit and visit with another patient's family.

It is suggested that families bring board games or card games to play with their child during visiting hours.

*Please be informed that there are surveillance cameras throughout the facility for your protection and to improve safety.*

### ***Best Times to Call Your Child***

8:30 a.m. – 9:00 a.m.    3:45 p.m. – 4:15 p.m.

12:10 p.m. – 12:30 p.m.    7:30 p.m. – 8:00 p.m.

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## Unit Guidelines

### Safety

Safety is our primary concern in caring for your child. In order to provide a safe environment, we have established general rules and guidelines we expect each child to follow. These guidelines are explained to each child.

Parents can help us maintain a safe environment. The following lists are established for the safety of the children on the unit.

### What your child should bring:

A pair of athletic shoes (no shoelaces, no metal toes). Slip-on shoes are preferred. Comfortable clothing (enough for three days, including extra socks and underwear).

### Please label clothes with your child's first and last name using a permanent marker.

Night clothes , Outdoor Jacket, Favorite Pillow,  
Blanket or Favorite Stuffed Animal,  
Comb/hairbrush,

### What your child may bring:

Pictures   Gameboys   Books   Journal

Fairfax Hospital cannot be responsible for belongings that are lost or damaged during the hospital stay; it is best to leave expensive items or objects of great personal value at home.

### What **not** to bring:

Cords	Tools	Medications
Metal	Mouthwash	Scissors
Aerosol cans	Pins	Glue
Belts/shoelaces	Radios	Jewelry
Drugs/alcohol	Nail files/polish/remover	
Cigarettes/matches/lighters	Perfume/aftershave/makeup	
Any item made of glass or clothes with drawstrings		

## *Youth Program*

### Structure for Success

#### Our goal is to:

Support and Validate  
Praise  
Encourage and Reward  
Challenge  
Instruct  
Allow  
Lead by Example

### Program Philosophy: Structure for Success

The Fairfax Hospital Youth Program is based on the underlying philosophy that each child has the ability to succeed given the opportunity and support. The biopsychosocial needs of each patient are identified, taking into consideration the child's unique experiences, strengths, and challenges.

#### Goal:

The immediate goal of the hospitalization is to stabilize the crisis and provide an opportunity for the child to learn more adaptive means of coping. Our approach is to structure the hospital environment in such a way that the child and family feel supported, validated, and held in unconditional positive regard. This goal is achieved through:

- A) Encouraging the child and family to talk about their feelings;
- B) Teaching and modeling more adaptive means of communicating and coping;
- C) Allowing the child to make good choices;
- D) Recognizing through positive reinforcement the good choices that have been made;
- E) Capitalizing on the child's strengths and teaching strategies for compensating

## 1-2-3 Magic Program

Magic 1-2-3 has been incorporated into the Youth Program as a behavior management model. This system is used for behaviors we are looking to stop, such as arguing, fighting, screaming, tantrums, and teasing. These are called the STOP Behaviors. We use a counting procedure ("That's one"... "that's two" (if non-compliant)... "that's three, take five" (time out) this allows the child several opportunities to correct their negative behavior. The 1-2-3 counting procedure is utilized to manage these behaviors without judgment. If the child pushes the limit to the count of three, resulting in a time out, the consequence is set and the time out enforced. After the time out is over, the child is allowed back into the activity without further delay. Minimal processing over these issues is conducted. The more consistently this system is used, the better the outcome. By incorporating this program, the staff on the unit have a universal language, which creates consistency in managing aggressive behaviors safely.

We encourage parents/guardians to learn 1-2-3 Magic and follow up with the program at home.

## Level System

### Purpose of the Level System

The Youth Program is based on the philosophy that it is important to encourage each child to work at his/her maximum level of performance. Positive choices are rewarded in the program and children have opportunities throughout the day to earn points which can be exchanged for prizes and privileges.

### Level I

Harming self or others, refusing groups, threatening/posturing, disrespectful, poor impulse control, property damage, no investment in treatment.

### Level II

Is trying but has not exhibited role model behavior, attends structured activities but needs redirection, Moderate level of investment in treatment.

### Level III

Is a role model for his/her peers, helping others, actively participating in groups and activities, uses positive problem solving, earns special privileges (use of Nintendo, free time, prizes), earns the opportunity to perform leadership roles in the community (e.g. line leader, special helper), is fully invested in their treatment.

### Safety Level

Has engaged in behavior deemed dangerous to self or others and remains on unit for all activities.

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## S.O.D.A.S. Method

This is a step-by step guide to problem solving that we use on the Youth Unit. It is an acronym that stands for the following:

S = STOP. Wait; don't let your emotions get the best of you! It's hard to think when you are angry or frustrated.

O = OPTIONS. Identify the problem. Brainstorm options.

D = DECIDE. Weigh the pros and cons. Evaluate the consequences.

A = ACT. DO IT! Don't back down—you've come this far.

S = SELF-EVALUATE. Are you happy with the results? What could you do better next time? Take responsibility for your action.

We help patients practice the use of the SODAS techniques in order to gain more control over their impulsive decisions and behaviors, and encourage parents/guardians to use SODAS at home.

## Explanation of Groups and Structure

### **Animal Assisted Therapy**

A specially trained therapist works with her trained and certified dog to teach children subjects that include the importance of hygiene, respecting others, focus and concentration.

### **Community Meeting**

Patients meet with staff and other members of their team to identify personal goals and establish unit guidelines and the daily schedule.

### **Conflict Resolution**

A specially trained Program Specialist teaches a curriculum regarding problem-solving that is taught in many local school districts.

### **Crafts**

Through artistic projects and activities patients learn to express feelings and make adaptive use of leisure time.

### **Digestion Time**

Free time while patients relax after meals.

### **Hygiene**

With the assistance of staff as required by each individual patient, patients perform

their bathing and other personal hygiene functions.

### **Leisure Time**

Under the supervision of staff, patients are given an opportunity to engage in self-directed leisure activities in the milieu.

### **Levels**

Nursing staff give feedback to patients regarding their clinical progress and compliance with expectations regarding behavior in the milieu.

### **Life Skills**

In a classroom setting, patients are taught various topics that may include animals and nature, current events, and history.

### **Outdoor Play**

Under the supervision of staff, patients play in our self-contained outside play area.

### **School**

If your child has homework, we can accommodate this into his or her program.

### **Recreation Therapy**

Staff teach and supervise patients in formal recreational activities that foster self-confidence and cooperation.

### **Skill Building**

Staff teach vital skills for successful living that include interpersonal relationships, adaptive coping, communication strategies, and problem solving.

### **Small Groups**

Specially trained staffs meet with groups of 4 patients or less to address clinical issues.

### **Structured Play**

Under the guidance and supervision of staff, patients engage in specific games and activities that foster a sense of teamwork and cooperation.

### **Drama Therapy**

A creative interactive group experience where patients participate in song, activity exercises and story telling to build on their communication skills and their ability to express their feelings.

## What will happen while my child is in the hospital?

### After admission to Fairfax, your child will:

- ~ Be introduced to staff members and other patients on the unit.
- ~ Have unit activities explained.
- ~ Receive a physical examination and routine laboratory tests.

### Every day, your child will:

- ~ Begin the day with appropriate personal hygiene and responsibility for the living environment.
- ~ Be assisted to participate in activities.
- ~ Be provided with helpful feedback regarding clinical issues.
- ~ Be assisted in changing maladaptive behavior.
- ~ Learn new skills for coping and maintaining positive behavior.
- ~ Be given the chance to practice new skills in a safe environment.
- ~ Have the opportunity to build positive relationships with adults and talk about clinical issues.
- ~ Receive three meals and two snacks.

## Commonly Asked Questions

- Q. The doctor wants to start my child on medication. What do I need to know? Will I be notified of changes?*
- A. The doctor will discuss the medication regimen with the child's legal guardian and obtain consent prior to starting the child on medication. We have printed information available on most medications and you can obtain this information from nursing staff. You will be notified of medication changes and are encouraged to call the doctor about any questions you have regarding the medication.

## Youth Unit

### Staff Responsibilities

Program Coordinator  
James Dauer, MS

Is responsible for the administrative operation of the program.

Psychiatrist  
(Your child's doctor)

Works closely with the treatment team in providing quality care for the patient. Directs the medical management of the patient.

Registered Nurses

Supervise the unit, the patient's daily activities and medical/emotional needs; participate in behavior management of patients; administer medications as ordered by the physician.

Program Specialists

Assist with daily activities of patients and supervise the patients, facilitate program groups and activities, including recreation therapy, skill building and art therapy.

Case Manager

Works with the psychiatrist, treatment team, patient, and family to formulate the patient's treatment and discharge plans. With consent of the legal guardian, communicates with the patient's community team, including school staff and outpatient clinicians. You may expect contact with the Case Manager at least one time per week.

