

School Hours: 3:00-6:00pm Summer Hours: 8:00am – 4:30pm



"A Program of the Clay County Health Department paid for in whole or in part by the 11 Department of Human Services."

Program Policies and Procedures

Clay County Health Department Health, Better Living

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Subject:	Free Meal and Snack Policy
Policy #:	BTB-1
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To create a supportive and healing environment during snack time, accommodating the needs of all youth and promoting well-being and healthy eating habits.

Procedure

- 1. Meals and Snacks: Meals and Snacks will be free to all enrolled youth, fostering an inclusive environment where no child feels excluded based on their ability to pay.
- 2. Choice and Autonomy: Youth will be encouraged to participate in selecting meals and snacks, giving them a voice and control over their food choices. This may include input on food types and preferences and respecting cultural and dietary needs.
- 3. Sensory-Friendly Environment: Meal times will be designed to minimize anxiety and sensory overload. Areas will be organized to prevent overcrowding, and quiet zones will be available for those needing a calming space.
- 4. Social Interaction and Support: Staff will facilitate positive interactions during meal times, promoting peer support and relationship building. Activities or discussions may be introduced to enhance social skills in a comfortable setting.
- 5. Nutrition Education: Staff will incorporate discussions on healthy eating habits and the importance of nutrition into the meal routine. Youth will be educated about the food offered, informed choices will be encouraged, and discussions will be held around healthy lifestyle practices.
- 6. Hygiene Practices: All participants (staff and youth) must wash their hands before meals to reinforce hygiene and cleanliness practices. Guidelines for handwashing will be prominently displayed.
- 7. Inclusive Practices for Special Needs: Staff training will ensure all personnel are aware of and sensitive to the unique needs of youth with trauma histories or special dietary requirements. Adaptations will be made to accommodate these needs without stigma.
- 8. Feedback Mechanism: Periodic reviews will be conducted to gather feedback and insights from staff and youth about the specific menu items and offerings. A simple feedback system (e.g., suggestion box) will be implemented to gather insights from youth about the meal program.

This Trauma-Informed Meal and Snack Policy aims to ensure that mealtime is not just about nutrition but also a pivotal space for healing, connection, and learning for all Teen REACH participants.

Reference

Illinois State Board of Education- Child and Adult Food Program. Retrieved from https://www.isbe.net/cacfp

United States Department of Agriculture-Summer Food Service Program. https://www.fns.usda.gov/sfsp/summer-food-service-program

Subject:	Medication Administration
Policy #:	BTB-2
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure the safe and sensitive administration of medications to youth, reflecting an understanding of trauma and its effects on youth health and responses. It is the policy of the Clay County Health Department to administer medications to youth utilizing the Center's services in accordance with the Illinois Licensing Standards for Day Care Centers Section 407.360 Medications.

Procedures for Medication Administration

- 1. The program shall maintain a written policy regarding medications.
- 2. Both prescription and non-prescription medication shall be accepted only in its original container.
 - a. Prescription medications shall be labeled with the full pharmacy label.
 - b. Over-the-counter (non-prescription) medication shall be clearly labeled with the participant's first and last name. The container shall be in such condition that the name of the medication and the directions for use are clear and legible.
- 3. Medication shall be administered in a manner that protects the safety of the participant.
 - a. A specific staff person shall be designated to administer and properly document the dispensation of the medication each day.
 - b. Prescription medication shall be administered as required by a physician, subject to the receipt of appropriate releases from parents which shall be on file and regularly updated. Prescription medication shall be used only for the child named on the label.
 - c. Over-the-counter medications may be dispensed in accordance with the manufacturer's instructions when provided by the parent with written permission.
 - d. The program shall maintain a record of the dates, times administered, dosages, prescription number, if applicable, and the name of the person administering the medication.
- 4. Medications shall be safely stored.
 - a. Medication containers shall have child-protection caps whenever possible.
 - b. All medication, whether refrigerated or unrefrigerated, shall be kept in locked cabinets, or other containers, that are inaccessible to children. Cabinets and containers will be designated and used for this purpose only.
 - c. Medications shall be kept in a well-lighted area.
 - d. Medications shall be kept out of the reach of children.
 - e. Medication shall not be kept in rooms where food is prepared or stored unless refrigerated in a separate locked container.
- 5. Medication shall not be used after the date of expiration.
- 6. When a child no longer needs to receive medication, the unused portion or empty bottle will be returned to the parent.

7. Any topical products, such as ointment, sunscreen, or insect repellant, whether supplied by the parent or the program, will be approved by the parent in writing before use on the child.

Key Components

- Safety and Trust: All staff administering medication will create a calm and private environment, understanding that some youth may have anxiety related to medication due to past experiences. Staff will greet each youth warmly and explain the process before administration.
- 2. Training Requirements: Staff will receive training in trauma-informed care, focusing on understanding the effects of trauma and the importance of building trust when administering medications. This includes recognizing signs of discomfort and responding appropriately.
- 3. Clear Procedures for Administration:
 - a. Medication Acceptance: Only prescription and over-the-counter medications in their original containers will be accepted. Prescription medications must be labeled clearly.
 - b. Individualized Approach: Each youth's individual needs shall be taken into consideration. Consent from parents must be re-evaluated annually, ensuring that any changes in medication or health status are communicated.
- 4. Documentation: A detailed record will be kept for each medication administered, including date, time, dosage, and the name of the nurse or staff administering the medication. This information should be available for review by parents upon request.
- 5. Confidentiality: Staff will respect the confidentiality of each youth and their medication instructions. No discussions regarding medications will take place within hearing distance of other youth.
- 6. Emergency Protocols: In cases of adverse reactions to medications, staff will follow prescribed emergency protocols. Staff should be trained to identify potential allergic reactions or side effects and to act decisively to ensure the youth's safety.
- 7. Parental Involvement: Parents will be engaged in the education of their youth regarding their medications and will be provided with information about trauma-informed care practices in the program. Communication regarding any concerns parents may have will be prioritized.
- 8. Field Trips and External Activities: For field trips involving youth who require medication, an additional protocol will be implemented that includes signed release forms from parents. Medication will be securely transported and administered only by designated staff.

By incorporating these trauma-informed elements into the Medication Administration Policy, the Teen REACH program ensures that the health and emotional well-being of all participants are prioritized, thus fostering a supportive and healing environment.

Reference

PART 407 Licensing Standards for Day Care Centers.

https://dcfs.illinois.gov/content/dam/soi/en/web/dcfs/documents/about-us/policy-rules-and-forms/documents/rules/rules-407.pdf

Subject:	Head Lice
Policy #:	BTB-3
Date Issued:	11/21/16
Next Review Date:	08/01/2025
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To implement and enforce the "No Nit" head lice protocol as a means of successful pediculosis control in the program.

Procedures

A "no nit" policy means...

- <u>**Removing**</u> all lice eggs (nits) and egg cases after treatment with a lice-killing product.
- **Excluding** a child with a lice infestation from program activities until *all* nits have been removed.
- Educating the community to ensure parents understand their responsibility under the "No Nit" policy.

Screening

A regularly scheduled screening program will be established as follows:

- Within one month after the start of the school year
- Within one week after winter break/vacation
- Within one week after spring break/vacation

An announcement will be made to parents and youth prior to each screening date. Handouts, current literature, and a copy of the meaning of the "No Nit" Policy will be available to parents. Should infestations be noted, more frequent screenings may need to be conducted.

(See Screening Children for Nits attached to this policy).

PROTOCOLS FOR INFESTATION

- When a youth is identified as having been infested, the parent must be immediately contacted to pick up the child from the program. The youth will be separated from other youth while awaiting the arrival of a parent/guardian. Staff will be sensitive when notifying the parent and separating the infested youth. Staff will be prepared to spend time teaching the parent about treatment options and the policy and procedure for returning to program.
 - a. Three Steps in the Management of Pediculosis:
 - i. treatment with a pediculicidal agent,
 - ii. nit removal,

- iii. environmental clean-up will be readily available to parents. (See attachment to this policy)
- 2. A **critical** element in the complete eradication of pediculosis is **nit removal**, regardless of the product used to kill lice and eggs. Because nits are the primary marker to determine the presence of head lice, it is important to remove all nits. Infested youth will not be allowed to return to the program until all nits have been removed from the hair. (See attachment)
- 3. Environmental clean-up consists of teaching the parent the process of cleaning the home to prevent reinfestation. (See attachment)
- 4. As reassessment is a crucial component of the screening process, an infested youth must report to the nurse upon returning to the program with a note describing the treatment he/she received. If the nurse finds nits, the youth will be returned home until he/she is completely nit-free.

ADDITIONAL OUTBREAK PREVENTION MEASURES

- 1. The youth's possessions will be stored in individual bags.
- 2. Coats will be hung separately with hats placed in the sleeves of coats/jackets.
- 3. Youth will be taught not to share clothing, headgear, or personal grooming articles.
- 4. Carpeted areas of the program facility will be vacuumed daily.

Screening Children for Nits

When screening your child for nits, keep the following points in mind:

- <u>Screen the child in natural light</u> (near a window) or with a magnification lamp for the clearest visibility of nits. Nits are good reflectors of UV light. If natural light or a magnification lamp is unavailable, a gooseneck lamp with at least a 60-watt bulb may be used.
- <u>Use disposable screening tools</u> wooden sticks, tongue depressors, toothpicks, or cotton applicators so that the person doing the screening does not have to touch the child's hair. Use 2 sticks to lift and separate the hair. Always use new sticks for each child you are checking. Gloves may also be used.
- **Conduct a thorough search**: Lice eggs are normally laid on the hair close to the scalp; however, in tropical climates, new eggs may be found away from the scalp, suggesting the need for a wider search.
- <u>Begin screening by separating hairs over</u> the ears or near the crown and the back of the neck, "favorite" places for lice because of higher humidity/temperature. If no nits are found in this area, continue to examine the rest of the head.
- <u>Differentiate nits from "pseudonits</u>", such as hair care product residues, dandruff, hair casts or desquamated epithelial cells (DEC plugs). All of these substances can be easily removed from the hair by blowing, rubbing, or brushing; nits won't budge unless "picked" or fine tooth combed.
- <u>Note the presence of any lice</u> or nits in the eyebrows or eyelashes-head lice only live in the scalp. If they are seen elsewhere, a secondary infestation (i.e., pubic or body lice) may be present. In such cases, normal treatment cannot be used; parents must consult a physician.

Reference

Subject:	Asthma
Policy #:	BTB-4
Date Issued:	11/21/16
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To welcome, encourage, and assist in the full participation of asthmatic program youth. Program staff understand what to do in the event of an asthma attack and will coordinate with parents and youth to ensure the successful implementation of this Asthma Policy.

Asthma is the most common chronic disease of childhood. It is a disease which when mild causes cough, breathlessness during exertion and sometimes wheezing. At its most severe, resistance to airflow might be enough to threaten life.

- 1. At the time of enrollment of youth in the Beyond the Bell program, parents/guardians will be required to provide the program with information about any medications taken by their child, including asthma medications.
- 2. In relation to asthma, parents/guardians will be asked to provide the following information:
 - the extent to which their child suffers from asthma
 - treatments required
 - what causes/triggers the asthma
 - the ability of the child to self-administer sprays and written permission from the parent/guardian to do so
 - notification to the program of any change in their child's condition/medication
- 3. The parent/guardian will be responsible for sending asthma medication with their child to the program, including asthma inhalants to ensure that asthmatic youth can access to medications at all times, especially before and during physical activities. The parents are to instruct their youth on the proper dosage and usage of asthma medication.
- 4. Youth will have access to their asthma inhalants at all times in the program.
- 5. A list of asthma sufferers will be kept on file at each site.
- 6. Staff will be given information about asthma and how to recognize asthma attacks. Each staff will be made aware of his/her responsibility in the case of a participant suffering an asthma attack during program activities.

- 7. As a measure of safety, asthma sufferers will be excluded from rigorous physical activities if they do not have their asthma spray with them. Youth are to be encouraged to keep their inhalants with them during exercise and other activities. *Physical activity is a trigger in 80% of asthmatic children.*
- 8. If a youth suffers an asthma attack and their inhalant does not appear to ease the situation, or is emptied or lost, program staff will remain with the youth to provide the necessary support. Parents and medical personnel will be contacted immediately.

Basic Management of an Asthma Attack:

- a. Have the youth stop all physical activity.
- b. If feasible, remove the youth from exposure to known asthma triggers.
- c. Assist the youth into an upright position and encourage the child to stay calm.
- d. Ensure that prescribed medications are delivered.
- e. Allow medication time to work.
- f. If the attack worsens or does not improve within 15-20 minutes, notify

emergency medical services.

g. Notify parent/guardian of all asthma episodes regardless of severity or

duration.

- Program staff will complete an incident report if a participant has an asthma attack during an activity. The original report will be placed in the participant's file and a copy will be sent to the parent/guardians in addition to the initial contact.
- 10. Those youth with asthma participating in field trips must have parental/guardian consent and must take their inhalers with them on the field trip, or other outside activities. Accompanying staff will be made aware of the youth with asthma.
- 11. Parents/guardians will be made aware of the asthma policy upon program enrollment.

Reference

Illinois Public Act 009-0843. 2017. http://www.ilga.gov/legislation/publicacts/99/PDF/099-0843.pdf

Subject:	Illness, injury, and emergency policy
Policy #:	BTB-5
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To implement the procedures for illness, injury, or emergency occurring during program hours. All staff will maintain CPR certification. In addition to standard emergency medical procedures, ensure that youth understand the processes being followed. Implement a supportive debriefing session after any crisis to process emotions and reactions collectively.

Procedures

Youth Illness / Injury

- 1. Any youth illness or injury occurring during program hours/activities will be reported immediately to the program staff.
- 2. Emergency first-aid procedures will be administered by staff for the affected youth as the situation requires. *Example: Remove youth from danger of further injury, assess youth for required first-aid measures such as control bleeding, assess for shock, maintain airway, etc.*
- 3. Promptly notify the youth's parent/guardian.
- 4. Secure life-saving emergency care as the situation warrants. *Example: Activate the EMS system by calling 911.*
- 5. Promptly complete a Clay County Health Department Incident Form.

In Case of Fire

- 1. Assist any person in immediate danger to safety, if it can be accomplished without risk to yourself.
- 2. Immediately activate the building fire alarm system to notify the fire department and get help on the way. It will also sound the fire alarm bells to notify all other persons and shut down the air handling units to prevent the spread of smoke. It is best to have the fire department respond and not be needed than to have them arrive too late for potential rescue.
- 3. Shelter in place if possible.
- 4. If the fire is small enough, use a nearby fire extinguisher to control and extinguish the fire. Do not fight a fire if the following conditions exist:
 - You don't know what's burning.
 - \circ $\;$ The fire is spreading rapidly.
 - You don't have the proper equipment.
 - You can't do so with your back to an exit.
 - The fire might block your means of escape.

- You might inhale toxic smoke.
- Your instincts tell you not to do so.
- 5. If the first attempts to put out the fire do not succeed, leave the building immediately.
- 6. Doors, and if possible, windows, should be closed as the last person leaves a room or area.
- 7. Upon evacuation of the building, all participants in attendance should proceed to the shopping center parking lot where head counts can be taken.
- 8. Never reenter the building without permission from the fire department.

Disaster Preparedness

- 1. Police, fire, and ambulance contact numbers will be posted in a conspicuous area for easy access.
- 2. Threats requiring evacuation will be announced.
- 3. Exit the building via posted evacuation routes.
- 4. Proceed to the predetermined gathering site (shopping center parking lot).
- 5. In the event of an *earthquake*, instruct youth to crouch under a desk or table, away from windows.
- 6. In the event of a tornado, proceed to the nearest hallway without windows, have youth sit down against a wall with feet drawn up close to the body and heads down or hide under a table or desk, or if possible, proceed to an interior room such as a restroom or closet and cover their heads.
- 7. Upon the all-clear signal, have youth proceed to the outside of the building to the designated assembly area (shopping center parking lot).
- 8. Conduct quarterly, unannounced emergency evacuation and life-saving procedures during program hours.

Severe Weather Precautions

Thunderstorms produce the greatest number of severe weather watches and warnings in our geographical area. In the event of a severe weather watch or warning, staff will follow the steps outlined below to assure the safety of all participants.

- 1. Activities being conducted inside the center may proceed without interruption.
- 2. Outside activities will be discontinued immediately upon notification of a weather watch or warning.
- 3. Staff will monitor reports from the National Weather Advisory regarding severe weather watches or warnings and act accordingly.
- 4. No youth will be allowed to leave the program alone while a severe weather watch or warning is in effect.

Subject:	Outreach, Referral and Program Improvement
Policy #:	BTB-6
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To conduct routine outreach activities prioritizing trauma-informed principles. Referral sources will be provided with written procedures for referring youth to the center while identifying program improvement strategies. We emphasize community education, highlighting the importance of supportive environments for youth, fostering a deeper understanding and engagement within the community.

Procedures

Trauma-Informed Outreach Activities

Program staff will engage in the following community and agency activities as part of the annual traumainformed outreach recruitment efforts.

- 1. Educational Presentations: The program will deliver presentations to students, school personnel, local agencies, clubs, and organizations on an as-needed basis, focusing on trauma-informed practices and the benefits of supportive environments for youth.
- 2. Diverse Advertising Avenues: Collaborate with schools to inform students and parents about program offerings through the distribution of
 - a. Special event flyers that emphasize trauma-informed care.
 - b. Notes in grade cards reminding parents of the homework help available at the program, framed within a supportive context.
- 3. Develop special sponsorship packages with various organizations throughout the year that align with trauma-informed principles.
- 4. Partner with WNOI for Public Service Announcements (PSAs) that raise community awareness about the importance of trauma-informed support for youth.
- 5. Community Engagement Events:
 - a. Participate in the annual Lights on After School Community Day.
 - b. Use PSAs to encourage the community to keep their porch lights on to symbolize support for youth and the Beyond the Bell program.
 - c. Invite local media to cover the event, highlighting the importance of trauma-informed care.
- 6. County-Wide Events: Apple Knocker, festivals, and parades to foster community connections.
- 7. Referral Information Review:

- a. Contact schools and social service organizations annually to review referral information and discuss program updates, ensuring that all communication reflects trauma-informed practices.
- 8. Local Media Engagement:
 - a. Utilize local news outlets to share stories and information that promote trauma-informed support for youth.
- 9. Social Media Communication:
 - a. Use social media accounts to communicate with youth and parents about upcoming activities, emphasizing the supportive and trauma-informed nature of the program.

Program Improvement: Trauma-Informed Strategies

Enhanced Recruitment Program

The recruitment program will include:

- 1. Visiting area schools to share trauma-informed resources.
- 2. Regular check-ins with school administrators to foster collaborative relationships.
- 3. More detailed monthly family nights that focus on trauma-informed practices.
 - a. Coordinator will host informational meetings with parents to explain the program in detail, emphasizing how trauma-informed practices can support their children's well-being and attendance.
- 5. Active participation in community events to raise awareness about the program.
- 6. Implementing an incentive program for enrolled youth Raffles that encourage participation.

By embedding trauma-informed principles into our outreach and program improvement strategies, the program aims to create a supportive environment that fosters resilience and growth for all youth in our community.

Subject:	Discipline and Conflict Resolution
Policy #:	BTB-7
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To assist all participants in developing healthy conflict resolution and positive decision-making skills through the use of the behavior modification system, rewards, and trauma-informed discipline. Youth may lose program privileges and activities. By integrating trauma-informed principles into behavior modification policies, the program can effectively support the youth we serve and foster resilient and empowered communities. Corporal punishment and measures of discipline are not allowed or condoned in the program.

Trauma-Informed Behavior Modification Policy Objective

This policy aims to promote positive behavior among youth participants by understanding the impact of trauma on behavior and fostering an environment that supports healing and personal growth.

Definitions

Trauma-informed care is an approach that recognizes and responds to the impact of trauma. It emphasizes physical, psychological, and emotional safety for both providers and survivors and helps youth rebuild a sense of control and empowerment. Below is the program's trauma-informed approach to discipline.

- Understanding Behavior: Staff will receive training in trauma-informed practices to recognize signs of trauma and its effects on behavior. Understanding that behaviors often stem from past experiences will guide staff interactions. Support from the Illinois Collaboration on Youth Trauma Training will be utilized.
- 2. Positive Reinforcement Opportunities: Participants can earn incentives by making good choices, which include:
 - a. Attending scheduled activities such as Homework Help and Life Skills workshops.
 - b. Demonstrating strong problem-solving skills and good communication.
 - c. Volunteering for clean-up jobs or helping peers and staff.
 - d. Exhibiting good sportsmanship and manners.
 - e. Completing assignments successfully, such as earning 'A's on homework or maintaining a completed agenda book.
 - f. Incentive Types: Incentives are varied and may include:

- i. Special privileges such as opportunities to participate in field trips or other exclusive activities.
- ii. Tokens of achievement, including prizes or raffle entries, will be based on attendance hours and positive participation.
- 3. Behavior Recognition: The program emphasizes recognizing behavioral improvements.
 - a. For instance, a youth who previously struggled with anger management may receive greater acknowledgment for finding a positive way to cope in a challenging situation than another youth for whom positive behavior is consistent. Positive feedback will be given frequently to reinforce constructive behavior and build self-esteem. Every success, regardless of size, will be celebrated.
- 4. Restorative Practices:
 - a. In instances of conflict or misconduct, youth will be involved in discussions to express their feelings and perspectives regarding incidents (using the Narrative 4 storytelling curriculum).
 - b. Encourage peer mediation, allowing youth to devise solutions that are acceptable to all parties involved collaboratively.
 - c. Support will be given to youth in learning to resolve their conflicts independently where appropriate.
- 5. Non-Punitive Responses: Traditional punitive measures will be minimized. Instead of automatic discipline protocols, staff will:
 - a. Focus on understanding the underlying causes of behaviors.
 - b. Implement interventions that teach coping mechanisms and emotional regulation skills.
 - c. Use de-escalation techniques and support during challenging situations instead of suspensions or expulsions.
- 6. Peer Mediation and Involvement: During conflicts, youth are encouraged to engage in peer mediation, fostering a collaborative atmosphere where they participate in conflict resolution. This approach supports their understanding of accountability within the community.
- 7. Mental Health Support: Encourage youth to access mental health resources.
 - a. If a youth is experiencing significant emotional or behavioral challenges, staff will work with parents/guardians to refer them to appropriate support services. The program facility employs a "calming room" to support participants' mental health and well-being.
- 8. Ongoing Communication: Youth will be regularly checked in to ensure they feel heard and supported. School and family involvement will be fostered through communication channels and regular family engagement events.
- 9. Feedback and Improvement: At the end of each program cycle, the behavior modification strategies will be reviewed and adjusted based on feedback from youth, families, and staff to ensure that the strategies employed remain effective and support all youth participants.

Subject:	Confidentiality
Policy #:	BTB-8
Date Issued:	11/21/16
Next Review Date:	08/01/2025
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To maintain confidentiality of information relating to participants and their families, including names and addresses (individually or by list), information contained in program reports and files, information about financial resources, information contained in notes or other documents obtained from or about the participants and their family to include medical information, and school and other institutional records. Information shall be kept confidential except in the following cases: (1) with parental/guardian written consent and (2) confidential information of character is preserved.

Procedures

- 1. Participant documents will be given to the Program Coordinator, who will copy and file all documents. Files will be maintained in participants' folders.
- 2. All participant documents will be kept in a locked office. Participant documents will not be left on desks or any other open area where they may be viewed by visitors or other participants.
- 3. Confidential information stored on computers will be password protected. Furthermore, computer screens should be positioned such that passers-by cannot view such information. Before leaving the computer workstations, documents containing confidential information should be closed.
- 4. Youth assistants will not be given access to participant documents containing any information previously classified as confidential.
- 5. There must be a signed Release of Information Form for each enrolled participant on file before any information is released to any organization or clinic outside of the Clay County Health Department. Please note that for youth aged 12 and over, the youth's signature will be required when releasing information to outside entities.
- 6. The program shall comply with the Local Records Act which regulates the destruction and preservation of public records within the State of Illinois. All records will be retained for six years following the close of the fiscal year to which the records pertain.

Reference

http://www.citizenadvocacycenter.org/uploads/8/8/4/0/8840743/localrecordsactbrochure.pdf

Subject:	Visitors
Policy #:	BTB-9
Date Issued:	11/21/16
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To ensure the safety of staff and youth, the program requires all visitors to sign in.

- 1. The Program Coordinator will ensure a sign-in sheet is available at the start of every business day.
- 2. Visitors, defined as anyone who enters the program facilities for any reason and intends to stay for any period of time, will be asked to sign-in with their name and arrival time.
- 3. If a staff member notices a visitor who is not signed-in, the staff member shall approach the visitor and ask the visitor to sign-in.
- 4. If a visitor refuses to sign-in, he/she will be asked to leave the premises.
- 5. If visitor refuses to leave premises local law enforcement and authorities will be notified.

Subject:	Youth Sign-in and Sign-out
Policy #:	BTB-10
Date Issued:	11/21/16
Next Review Date:	08/01/2025
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To ensure the safety of staff and youth, the program requires all youth to sign in and out on a daily basis.

- 1. The Program Coordinator may designate a staff member to oversee the sign-in/sign-out sheet each day.
- 2. Youth are required to sign-in upon arrival to programming. The student will record the youth's name and the time he/she arrived.
- 3. If a youth refuses to sign-in, he/she will be asked to leave the premises.
- 4. If a youth refuses to leave premises local law enforcement and authorities will be notified.
- 5. Youth are required to sign-out when leaving the program facilities indicating the time exiting the premises and method (walking, riding to where and by whom)
- 6. Upon exiting the program, youth may not return unless granted permission by program staff (usually allowed only for doctor appointments or when requested by a parent).
- 7. The program expects parents to notify their youth of the approved and designated list of individuals who may provide transportation from the program facilities, as well as the mode in which the youth may leave (walk or wait for ride).
- 8. If a youth is asked to leave programming early, an attempt will be made by program staff to contact the youth's parent or guardian and provide details of the situation.

Subject:	Transporting Youth
Policy #:	BTB-11
Date Issued:	06/01/02
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure availability of after-school transportation of program youth. The Flora School District #35 offers transportation to students from Floyd Henson Jr High and Flora Elementary. The program will transport youth from Flora High School, Clay City Schools, North Clay Schools, and Full Armor Christian Academy, as needed. During the summer months, transportation is offered as needed.

- 1. When there is a need to transport youth, the vehicles owned by the Clay County Health Department should be utilized, if available. Personal vehicles should not be used to transport program youth.
- 2. In all cases of youth transportation, program participants are required to fasten seatbelts before the vehicle is placed in motion.
- 3. Upon school release, youth riding the bus from Flora Unit Schools must designate "Beyond the Bell" as the permanent drop-off site for the entire school year.
- 4. Youth riding the school bus must follow all the school bus rules and all school rules until they enter the program facility.
- 5. Youth riding in program-provided transportation must follow all posted rules or risk losing transportation privileges.
- 6. In the event of inclement weather, transportation will not be offered from Clay City or Louisville. Weather forecasts will be used to determine the possibility of inclement weather, and transportation will be determined before the end of the school day. Participant safety will be paramount in the decision, and if the weather is questionable, transportation will not be offered that day. If school is canceled in the Flora School District due to inclement weather, transportation will not be offered anywhere in the County that day.

Subject:	Handwashing
Policy #:	BTB-12
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure sanitary conditions and limit the spread of disease through frequent handwashing.

- 1. Program participants, including staff and students, are expected to frequently wash their hands and always in the following circumstances:
 - a. Before touching anything used to prepare food, and before touching food that will not be cooked;
 - b. After working with raw meat, fish, and poultry;
 - c. After handling trash and taking out garbage;
 - d. After visiting the restroom.
- 2. Proper handwashing procedures:
 - a. Wet both hands with warm water
 - b. Use an appropriate amount of soap
 - c. Rub hands briskly together to loosen any dirt and germs. Take twenty seconds or more to do a thorough job. Pay special attention to fingernails where germs can hide.
 - d. Rinse hands under clean warm water.

Subject:	Inclement Weather
Policy #:	BTB-13
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To communicate and follow the procedures regarding inclement weather and other weather-related conditions that necessitate the program hours. The program will close its facilities upon the Flora Unit School District's decision to close schools due to inclement weather and/or weather-related conditions. The program facilities will open early upon the Flora Unit School District decision for early dismissal of students due to inclement weather and/or weather and/or weather-related conditions.

- 1. The program will be closed, if Flora Unit Schools are not in session due to inclement weather.
- 2. The program will open early, if Flora Unit Schools dismiss early due to the inclement weather.
- 3. Upon early dismissal of Flora Unit Schools, the program will not provide transportation of youth from North Clay Schools or Clay City Schools.
- 4. Upon weather-related closure of Flora Unit Schools, program youth who utilize the Flora Unit Schools bus transportation system will ride the bus to the program facilities as a measure to reduce any burden and confusion.
- 5. Maintaining Recommended Staff-to-Youth Ratios: Due to the schedules of program staff, recommended ratios of staff-to-youth may not be as low as desired at the beginning of programming. Therefore, program activities may be limited until all staff have arrived.
 - a. On days with limited staffing, parents may be asked to pick up their youth as soon as possible to ensure safe and timely transportation.

Subject:	Youth Grievance
Policy #:	BTB-14
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure every youth has the opportunity to formally express their concerns or dissatisfaction with a particular incident or series of incidents.

- 1. Youth who believe they have been wronged must file a written, formal grievance and turn it in to the Program Coordinator or his/her designee within 2 days of the incident being grieved.
- 2. The grievance must include:
 - a. Name of youth
 - b. Date/Time
 - c. Place of Incident
 - d. Youth Involved/witnesses
 - e. Staff involved
 - f. Brief description of incident being grieved
 - g. Brief description of why the youth feels he/she has been wronged
 - h. The desired outcome of the grievance
- 3. The Program Coordinator will investigate the incident and respond within 2 days.
- 4. Decisions may be appealed to the Director, then to the Clay County Health Department Administrator and the Clay County Board of Health.

Youth Grievance Form

Name:		
Date/Time/Place of Incident:		_
Youth involved/witnesses:		
Staff Involved:		
Briefly describe what happened.		
Briefly describe why you think you were treated unfairly.		
What would you like the result of this grievance to be?		
Youth Signature:	Date:	-

Subject:	Document Retention
Policy #:	BTB-15
Date Issued:	01/01/06
Next Review Date:	08/01/2025
Revised:	01/15/2025

To maintain all program-specific documents for five years following the completion of the contract period.

- 1. All program-specific documents are filed according to type and year upon receipt or collection.
- 2. At the beginning of the fiscal year (July 1), documents from the previous fiscal year are labeled and stored away for reference.
- 3. Current documents are filed and kept in the Program Coordinator's office until the end of the fiscal year.
- 4. Stored documents are reviewed at the end of each fiscal year and documents that have exceeded a five-year period will be disposed.

Subject:	Tracking Inventory
Policy #:	BTB-16
Date Issued:	01/01/06
Next Review Date:	08/01/2025
Revised:	01/15/2025

Policy Objective: (Clay County Health Department Policy)

To ensure the proper recording and accountability of the fixed assets and supplies inventory utilized by the program.

Procedures

Fixed Asset Inventory

- 1. The Accounts Payable Clerk must enter all equipment items on an inventory control list. The list must be reviewed for accuracy at least once a year. The "Inventory Control" list will contain the following entries, whenever possible:
 - a. item number
 - b. description of the property
 - c. date of acquisition
 - d. cost of item
 - e. location of item
 - f. funding source
 - g. Disposition
- 2. When equipment is no longer usable, it is removed from use by indicating on the list the reason for its removal and how it was disposed of. All inventory records about disposed equipment shall be maintained for three years following the disposition of equipment. If applicable, we shall notify, in writing, the agency that funded the purchase of property of such disposition.
- 3. All equipment valued at \$100 or more shall be assigned an inventory number. The assigned number shall be physically attached to the equipment and shall correspond directly to the Inventory Control Sheet.
- 4. On February 1 of each year, the Accounts Payable Clerk will give each Program Coordinator a listing of equipment items and location to be verified by the Coordinator or their designee.
- 5. Each item should be physically located and checked off on the sheet. Any location changes should also be noted.
- 6. The completed physical inventory sheet should be turned in to the Accounts Payable Clerk within 30 days.
- 7. All employees shall be responsible for continuously monitoring all office business machines to ensure they are in proper working order. At any time an employee becomes aware of equipment that in not operating properly, the employee should notify the Administrative Services Director.

Supplies Inventory

- 1. Inventory will be taken of all supplies purchased by the health Department and used for client services at each month end or twice per year as noted below.
- 2. Items that should be inventoried and the person responsible for completing the inventory include the following:
 - a. Private Stock Vaccines (Monthly) TB/CD Coordinator
 - b. Immunization Supplies (Dec 30, June 30) TB/CD Coordinator
 - c. WIC Supplies (Dec 30, June 30) MCH Coordinator
 - d. Family Planning Supplies Accounts Payable Clerk
 - e. Birth Control Pills/Dep-Provera (Monthly)
 - f. All Other Supplies (Dec 30, June 30)
 - g. Diabetes Testing Supplies (Dec 30, June 30)
 - h. Beyond The Bell Food Program Supplies (Monthly) Food Program Cook
 - i. Home Health/Hospice Medical Supplies (Dec 30, June 30) Home Health Support Staff
 - i. A log sheet should be kept each month showing beginning inventory, items used, and items received each month for Home Health/Hospice Medical Supplies. The Home Health Support Staff will calculate the ending inventory each month and post a new log sheet for the staff to mark on with the ending inventory amount from the previous month being moved to the beginning inventory column for the current month. These log sheets should be turned in to the Staff Accountant to be kept on filed and compared with the actual counts.
- 3. All supply inventory counts should be turned in to the Accounts Payable Clerk by the 3rd of the following month.
- 4. The Accounts Payable Clerk will enter the quantities on hand and the unit cost for each items in an Excel spreadsheet to calculate the total ending inventory amount. These Excel spreadsheets will then be passed on to the Staff Accountant by the 15th of the month.
- 5. The Staff Accountant will write-up the appropriate inventory adjustment entries by comparing the balance in the inventory accounts to what is currently on hand and give the entries to the Accounting Director by the 20th of the month.
- 6. The Accounting Director will post the inventory adjustment entry to the General Ledger.

Subject:	Screening and Background Checks of Staff, Volunteers, and Interns
Policy #:	BTB-17
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure all hired program staff, adult volunteers, and interns who have one-on-one contact with youth have completed a background check and the result of each background check placed in their personnel file. Files are confidential and maintained in a locked cabinet in the Program Coordinator's office.

- 1. Each applicant must submit a written application, a disclosure statement and references. Each applicant is required to give written consent for the program to obtain Illinois State Police criminal background checks and a DCFS CANTS report (No person will be hired or allowed to serve in the capacity of a volunteer or intern without this written consent).
- 2. Each applicant for program staff positions is hired through a comprehensive personal interview.
- The results of the Illinois State Police Criminal Background check and the DCFS CANTS reports will be kept in the employee, volunteer or intern file in Human Resources at the Clay County Health Department.
- 4. All program volunteers and interns are required to sign an acknowledgement of receipt and understanding of the Beyond the Bell Program Volunteer Handbook. Individuals will not be allowed to volunteer in daily programming or program-sponsored events without receipt of the volunteer handbook.

Subject:	Suspected Agency Abuse/Neglect
Policy #:	BTB-18
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure the safety of all clients and employees in accusations of abuse or neglect by program staff, volunteers, or interns.

Procedures

The Clay County Health Department and Teen REACH program will initiate the following procedures:

- 1. A full investigation will be conducted by the Administrator or his designee and/or local authorities, if appropriate.
- 2. Program staff member(s) will be immediately suspended with pay while the investigation is conducted.
- 3. If the client desires continued services from CCHD while the investigation is ongoing, the Administrator will:
 - a. Ensure two staff members provide services while investigation is ongoing; or,
 - b. Discontinue services and ensure client is provided with referrals to other agencies.
- 4. Two outcomes are possible upon completion of the investigation:
 - a. If the accusation is determined to be without cause, the employee will be re-instated with full pay, benefits, and seniority. In addition, CCHD will no longer provide services to the client.
 - b. If the accusation is valid, the employee will be permanently relieved from his/her position. In addition, if the client so desires, CCHD will continue to provide services.

In an effort to minimize accusations of abuse/neglect, CCHD employees should take the following precautions when interacting with clients whenever possible:

- 1. Whenever possible, see clients in teams of two.
- 2. Leave doors open or work with clients in open spaces.
- 3. If discussion is confidential, notify another staff member of the situation and ask him/her to wait outside the office during the consultation.
- 4. When transporting clients, limit one-on-one interaction whenever possible.
- 5. Document any suspicious interactions and immediately notify the Program Coordinator, Director(s), and Clay County Health Department Administrator.

Subject:	Reporting Suspected Family Abuse/Neglect
Policy #:	BTB -19
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure all program staff serve as mandated reporters and follow the guidelines of the Child Abuse and Neglect Reporting Act of 1975.

Procedures for Suspected Family Cases of Abuse or Neglect:

- 1. All program staff will receive training regarding abuse, copies of *The Abused and Neglected Child Reporting Act* and a *Manual for Mandated Reporters*. Staff will be made aware of his/her responsibility as a mandated reporter during the orientation process and required to sign acknowledgment of Mandated Reporter status.
- All mandated reporters are to call the Child Abuse Hotline 1- 800-252-2873 when they have reasonable cause to suspect a child has been abused or neglected. (Report to the Program Coordinator and Directors). A copy of the State of Illinois Department of Children and Family Services Written Confirmation of Suspected Abuse/Neglected Report: Mandated Reporters shall be placed in the participant's file.
- Follow the guidelines in the Manual for Mandated Reporters regarding information to report to the Hotline. https://www.illinois.gov/dcfs/safekids/reporting/Documents/cfs_1050-21_mandated_reporter_manual.pdf
- 4. All parents/guardians will be informed about the responsibility of program staff as Mandated Reporters upon program enrollment. This information will also be included in the Youth and Parent Handbook and all orientation materials.
- 5. All program staff will sign the form in acknowledgment of review and acceptance of the Abused and Neglected Child Reporting Act and the *Manual for Mandated Reporters*, as well as of acknowledgement and acceptance of their role as a Mandated Reporter.

Subject:	Internet Blocking Software for Youth-Accessible PCs
Policy #:	BTB-20
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure that all PCs used by program youth are equipped with internet blocking software to protect the youth from accessing harmful internet content.

- 1. All computers access by program youth will be equipped with internet blocking software.
- 2. Program staff will provide supervision of youth's computer usage.

Subject:	Staff and Family Communication
Policy #:	BTB-21
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To maintain staff clear and effective communication through several channels. The program believes that good staff communication translates into a better program for the youth served. The program aims to keep open lines of communication between all staff and families.

- 1. Program staff are oriented to the chain of command upon employment.
- 2. Program staff meet on a bi-weekly basis with the Program Coordinator, prior to the arrival of youth to share work experiences, ask questions, and prepare for daily programming.
- 3. Program staff have an individual monthly professional development meeting with the Program Coordinator or Director(s).
- 4. Monthly program schedules are posted and shared with staff one month in advance, allowing time to plan activities, share ideas, and ask questions.
- 5. Program youth and parents will be provided with a calendar of events and will be available at the program facility and sent home with youth. Parents will also be provided with program update email communication, texts, phone calls, and/or newsletters.
- 6. The program will host monthly themed Family Nights help foster youth and parent interaction.
- 7. Based on the needs of the community and families served, additional services may be offered:
 - a. Parent Support Groups/Parent Education
 - b. Parent Involvement on Beyond The Bell Advisory Board
 - c. Grandparents Raising Grandchildren Groups
 - d. Family Events/Seasonal Celebrations
 - e. Parent Meetings/Orientation

Subject:	eCornerstone Data Entry
Policy #:	BTB-22
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure that all required data is entered into the eCornerstone system in a timely manner and meets the standards set forth by the Illinois Department of Human Services.

- 1. The Program Coordinator will be responsible for entering all participants into the eCornerstone system upon enrollment. All information of the participant's enrollment form must be entered into the system within a reasonable amount of time.
 - a. If out of the office for an extended period of time, the Program Coordinator will ensure the participant's information is entered in a timely manner.
- 2. Grade reports will be entered into the eCornerstone system within a reasonable amount of time, upon receipt from the cooperating school. The Program Coordinator or designee will be responsible for entering the grade reports.
 - a. Director assistance may be requested if information cannot be completed in a timely manner.
- 3. The Program Coordinator will check data each Monday to ensure that all data is being entered in a timely manner.
- 4. All data entry on the eCornerstone system shall be done during regularly scheduled working hours and all data entry must be done from a Clay County Health Department computer.
 - a. Participant information or attendance data will be taken from the program facilities to be entered at an off-site location (i.e., the home of the Program Coordinator or other program staff).

Subject:	eCornerstone Termination & Chronic Absences
Policy #:	BTB-23
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To deactivate youth who have not attended the program within the last 30 days from the eCornerstone system. To meet the average dosage in days and hours guidelines set forth by the Illinois Department of Human Services.

- 1. The Program Coordinator will monitor attendance of all program youth on a weekly basis.
- 2. When the Program Coordinator observes that a youth has not attended the program within the last 30 days, an attempt will be made to contact the youth or parent/guardian to determine the cause of absences over the previous 30 days.
- 3. The program will attempt to alleviate chronic absences and increase retention of program youth. Chronic absences affect attendance and staff will make strong efforts to address these absences.
- 4. If no reason or cause exists for chronic absences or communication cannot be completed with the youth or parent/guardian, the Program Coordinator will deactivate the youth from the eCornerstone system.
- 5. In the event that a youth who has been deactivated returns to the program, he/she will be re-enrolled in the eCornerstone system at that point in time.

Subject:	Staff Conduct toward Program Youth
Policy #:	BTB-24
Date Issued:	11/21/16
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure all program youth are treated with consideration and respect, recognizing their dignity, right to privacy, and confidentiality. Program staff will reinforce a culture of safety and support, will receive training in trauma-informed care, will know and understand signs of trauma and its impacts on youth behavior. Staff will utilize a relationship-building approach to engage youth and provide consistent support rather than punitive measures.

- 1. Expected to be honest with youth about topics staff can and cannot discuss.
- 2. Expected to advise youth when additional consultation is needed (from supervisor, parents, etc.).
- 3. Prohibited from offering their personal services (giving rides in their personal vehicle, escorting them to events) unless previously arranged with the youth's guardian or selling goods to program youth and families.
- 4. Prohibited from meeting alone with program Buth under the age of 18, except in extreme circumstances and with the full knowledge of the Program Coordinator and the youth's parent/guardian.

Subject:	Continuous Improvement and Consistency in Policy Implementation
Policy #:	BTB-25
Date Issued:	08/15/2024
Next Review Date:	08/01/2025
Revised:	01/15/2025

To conduct an annual (or as needed) review and revision of program policies and procedures.

Procedures

- 1. Annual review and revision of policies and procedures. This ensures policies remain relevant and incorporate feedback from program staff and participants.
- 2. Staff Training and Development: Provide regular, consistent training sessions for all program staff on policy updates and trauma-informed practices. Training should include role-play scenarios to help staff understand how to apply policies consistently during real-life situations.
- 3. Clear Communication Channels: Establish clear communication channels between program staff and participants to ensure all parties understand policy implementation.
 - a. Various channels and media may be used to ensure regular, consistent communication.
- 4. Behavior Modification and Conflict Resolution: Ensure all program staff consistently apply behavior modification policies. Create standardized staff training of conflict resolution practices and incentives. (Complete the form on the backside of the behavior modification paperwork.)
- 5. Documentation Procedures: Utilize electronic systems to streamline documentation processes, including attendance tracking, incidents of behavior, and consistent policy enforcement.
- 6. Data-Driven Decision-Making: Implement a data collection system to analyze patterns in participant behavior and program engagement. Use this data to inform policy adjustments and program improvements.
- 7. Youth Feedback Mechanism: Involve youth in the policy development process by seeking program experience feedback and policy improvement. Forums and/or surveys may be utilized to gather feedback.
- 8. Emergency Protocols and Drills: Regularly schedule and conduct emergency preparedness drills to ensure all program participants understand and follow emergency protocols and safety measures.

By implementing these strategies, the program can enhance the effectiveness of its policies, ensure consistency and effectiveness, and improve the overall experience for all participants.

Subject:	Staff Professional Development
Policy #:	BTB-26
Date Issued:	08/15/2024
Next Review Date:	08/01/2025
Revised:	01/15/2025

To ensure all staff members comply with the established policies and procedures and promote a unified, supportive environment for all participants.

Procedures

- 1. Clear Expectations: All program staff will be made aware of their responsibilities and the behavioral standards expected from all participants. This is initiated through orientation sessions detailing each policy and procedure.
- Training and Development: Ongoing training will be provided to all program staff to reinforce the importance of policy consistency. Regular workshops will cover trauma-informed practices, behavior management strategies, and effective communication techniques. Staff will participate in bi-weekly meetings to discuss practices, share experiences concerning policy applications, and promote accountability.
- 3. Documentation and Reporting: Program staff will maintain accurate records of incidents involving participant behavior, disciplinary actions taken, and communications with all participants. Implementing a consistent documentation procedure across all staff ensures uniformity in how cases are handled.
- 4. Peer Oversight: Program staff will be encouraged to collaborate and support each other in maintaining policy adherence. Establish pairings whereby staff can observe and provide constructive feedback on each other's interactions with youth.
- 5. Feedback Mechanism: Program staff will regularly solicit participant feedback about program experiences and policy enforcement, fostering an atmosphere of openness and capacity for improvement.
- 6. Performance Evaluation: Consistency will be a key metric in annual staff evaluations. Program staff must demonstrate adherence to program policies and procedures as part of their performance reviews.
- 7. Communication with Families: Families will be kept informed about policies, fostering better understanding and support for staff actions. Regular, consistent communication and meetings will serve as platforms for parents to discuss policies and provide feedback.
- 8. Crisis Planning: Include provisions for handling emergencies to ensure that all program staff understand their roles in maintaining authoritative consistency during unforeseen circumstances.

By implementing this Staff Consistency Policy, the program will provide a predictable and secure environment for all participants, enhance engagement, and meet program outcomes.