Center Point Day Program
Handbook

2014 - 2015
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Welcome to the Diakon Wilderness Center

You have been given the opportunity by your county to participate in a therapeutic program to help you address individual competency issues, and return to your family, and community better prepared to make decisions that reflect productive and positive C.O.R.E. values. In other words, to be a person of character who provides hope and inspiration on a daily basis?

Everyone at the Center Point Day Program is committed in providing students tools and resources, which will provide direction and connections in their community. At the center point of every student there’s a C.O.R.E., which will be molded and inspired in the day program.

One of the best ways to approach this program and be productive in your community, receive vocational/educational training, and be with your family, is to have a strong C.O.R.E.

Be COOPERATIVE and open in trying new experiences and doing what’s expected,
Take OWNERSHIP when a mistake is made and make no excuses,
Be RELEVANT in all things and believe in yourself. Be something to someone, somehow,
Understand that being ETHICAL means being honest, humble, and honorable.

Remembering and using this simple rule will help you focus and be attentive to your experience here, and become the person that has no limits.

Everyone at the Diakon Wilderness Center is committed to helping you learn the skills necessary to be successful. Ask questions, seek support, and remember this is an opportunity for personal growth and skill development that will remain with you long after you have moved on, if you take advantage of it.

Sincerely,

Jeremias Garcia
Program Director, Center Point Day Program
Center Point is Built on the **Five Pillars**

Every activity we do is based on the values that emerge from the Five Pillars.

You will be required to learn and define each one during your Orientation, and to use them throughout your enrollment in our Day Treatment Program.

**Respect**
- Holding yourself in high regard and treating others with dignity

**Responsibility**
- Doing what needs to be done and seeing it through

**Effort**
- Always doing your best

**Trust**
- Believing in yourself and being open to others

**Courage**
- Being true to yourself and being willing to try new things
DIAKON WILDERNESS CENTER
CENTER POINT DAY PROGRAM
PROGRAM DESCRIPTION

Program Mission

Changing lives in a challenging and supportive outdoor environment by engaging youth and their families to achieve accountability, build assets, develop competencies and learn to invest in the value of positive community life.

Goal

“Every Student a Successful Graduate” - Youth who are productive, connected and law-abiding members of their communities.

Objective

Students will build a foundation of knowledge and skills through successful completion of competency development activities encompassing the following domains:

1. Academic Skills
2. Pro-Social Skills
3. Moral Reasoning Skills
4. Workforce Development Skills
5. Independent Living Skills
6. Community Service
7. Vocational Skills
8. Family Reparation and Health

Program Overview

Center Point is designed to be a day program functioning Monday through Friday focused on behavioral management and progressive competency development. There is not a specific length of stay; a student can be in the program for a week or year or more, however it is required that a student have a suspended commitment to further placement should a student not be successful in the program. The program is offered at the Diakon Wilderness Center, a facility of Diakon Lutheran Social Ministries, located in Boiling Springs, Pennsylvania. The facility is shared among the Day Program, Diakon’s Weekend Alternative Program, and Diakon’s Wilderness Challenge Course program. Each program at the Wilderness Center embraces as its core values, the advancement of the Balanced Approach Restorative Justice (B.A.R.J.) principles of 1) community protection 2) accountability 3) competency development. The values contained in B.A.R.J. are taught through the programs’ five pillars of 1) Respect 2) Responsibility 3) Effort 4) Trust 5) Courage.
The program is designed as an option to avoid residential placement. The program accepts youth under the following guidelines:

- Delinquent and dependent youth, in need of behavioral and educational intervention in a community-based setting
- Male 11 – 19 years of age
- Female 10th -12th Grade
- Social misconduct
- Drug and Alcohol – the program offers psycho-educational program along with trips to AA groups. All students will be drug tested at a minimal of once a month.
- Psychological evaluations can be conducted through Diakon’s FLS on an as need basis; costs associated with evaluations will be billed to the county separately.
- School misconduct / Academic problems, including learning issues and truancy – youth will receive educational assessments in reading and mathematics, at both intake and discharge, using the Woodcock – Johnson III Tests of Achievement. Academic credits are provided through the Capital Area Intermediate Unit (C.A.I.U.). If warranted, and with proper authorizations, the C.A.I.U. can complete a Psychological Evaluation including I.Q. testing and screening for learning disabilities. Individual Educational Plans (IEP) can be coordinated on campus.
- GED testing and/or obtainment when needed/appropriate. Costs associated with testing will be billed to the county separately.
- Family dysfunction – three Family Development Meetings are offered during a student’s full participation with Center Point. Families may be required to attend evening activities through the week or Saturday events focused on building parental skills and reparation of parent/child relationships.
- Accountability for probation violations including for non-compliance related to Weekend Alternative Program discharges
- Medical clearance is a mandatory requirement – activities are physically challenging
- Youth on medication accepted.

The program does not accept youth with severe MH/MR issues, a history of repeated violent behavior, or sex offenders.

**Referral Process**

1. Contact the program’s Referral coordinator at 717-960-6700 or wildernesscenter@diakon.org to initiate the referral process. Center Point will make every attempt to accept a youth for placement with the first referral call.

2. Send all information pertinent to the referrals background including school records, medical history, psychological testing, diagnostic report, family/social history and recommendation (if available) for admissions staff review.

   FAX: 717-258-9408
   Diakon Wilderness Center
   P.O. Box 10
   Boiling Springs, PA 17007

3. If accepted, an intake packet must be completed, and start date determined based on availability of slot.
"Sluggards Crave Everything and Receive Nothing, but the Desires of the Diligent are Fully Satisfied"

**PROGRAM OVERVIEW**

**Center Point's Mission**

We strive to mentor teenagers in a challenging and supportive environment by engaging our students, and their families, on the path to: successful goal setting, taking accountability for actions, developing a healthy sense of self-sufficiency, and developing therapeutic coping skills.

**Center Point's Goals**

- To provide educational opportunities, such as school credit acquisition and GED test prep. (We assist with all facets of obtaining a GED.)
- To provide employment skills, vocational training, and job search opportunities.
- To work with families in an effort to increase positive communication and build strong relationships.
- To collaborate with county and agency workers to help students achieve a healthy self reliance by meeting all agency requirements and thus working toward freedom from the juvenile justice or child welfare system.
- To help students set and achieve personal and meaningful goals.

**Program Overview**

Center Point is a short-term, community-based day treatment program. Throughout each program week, we strive to mentor youth, ages 11-19, on the path to success. How do we define success? **Success is:**

- Receiving an education. (School credits or GED.)
- Having a strong and functional family unit.
- Building positive relationships with crime-free peers.
- Learning to trust Center Point workers and seek help with life’s struggles.
- Demonstrating your ability to follow rules and expectations at Center Point, at home, and in your community.
- Being a leader and holding yourself and others accountable.
- Striving to be your best through meaningful goal setting.
- Accepting feedback and engaging in self reflection.
- Achieving Level I, Level II, and earning the status: **Successful Graduate.**
At Center Point, we also collaborate with our partner programs, also based out of the Wilderness Center, as a way to: therapeutically intervene, hold students accountable with logical consequences, and build an effective treatment plan for each individual student.

Each program at the Wilderness Center embraces the core values of BARJ (Balance and Restorative Justice), which promote: 1) community enhancement, 2) accountability, and 3) therapeutic skills development.

Other Diakon Wilderness Center Programs are:

1. Weekend Alternative Program (WAP)
   a. This is a minimum 10-weekend program. Students participate in educational, therapeutic, and adventure-based programming each weekend. All students and program staff sleep outside in wilderness shelters based around our campus.

2. Bridge
   a. This community-based, in-home services program offers individualized program to help support students as they transition out of placement, or as a preventative measure to placement.

3. Wilderness Challenge Course Program
   a. This 31-day wilderness program teaches students how to work together as they backpack, rock climb, and canoe their way along a 40-mile section of the Appalachian Trail.

Program Components:
1. Community Service (Student can receive up to 4 hours per week.)
2. Goal Setting (Students are required to set family-based home goals and obtain parent feedback each school night.)
3. Education (Educational services provided by the CAIU)
4. Vocational Training (Small Engine Mechanics, Horticulture, Landscaping, Maintenance, Culinary Skills)
5. Therapeutic Skill Building (Drug and Alcohol Education, Victim Impact and Awareness, Moral Reasoning and Pro-Social Competency Groups, Self-Reflection, Accepting and Offering both Affirmative and Constructive Peer Feedback)
6. Accountability (We combat truancy, substance abuse, and crimenogenic behaviors with a consequence structure that contains logical, punitive, and incentive-based consequences.)
7. Family Development (Families are asked to participate in a series of Family Meetings in an effort to: encourage communication, receive support, and work together with their student as s/he learns new therapeutic coping skills and how to set and achieve personal goals.)
The Points System:

- In order to achieve Level 1, students must earn a 75% for at least 4 weeks.
- In order to achieve Level II, students must earn an 80% for at least 3 weeks.
- In order to Graduate, students must earn an 85% for at least 3 weeks.

*Center Point has a NOVICE level for students who have earned Level II status and still need to achieve other treatment goals. Students must earn 90% while on this level.

Points are scored in the following categories:

1. Education
2. Progress on Therapeutic ISP Goals
3. Behavior During Transportation to and from Center Point
4. Goal Setting and Personal Responsibility
5. Therapeutic Skill Building and Vocational Groups

Points are scored with the following rubric:

5 = Above and beyond; Exceptional Leadership
4 = Met All Expectations
3 = Required Some Redirection to Meet ALL Expectations
2 = Had Difficulty Meeting Expectations
1 = Student violated a Policy Rule or Needed One-on-One Staff Intervention to Reintegrate Back
   With Peer Group

CENTER POINT SCHEDULE

Center Point is open every day of the calendar year, except Christmas Eve, Christmas, Thanksgiving, New Years,

PLEASE NOTE: Even when schools are off due to an in-service day, holiday, or other event, Center Point is most often open. Please check with the Program Director, at sarciaj@diakon.org, anytime clarification is needed.

Regular Center Point hours are 9am until 4:15 pm. Pick-ups and Drop-offs occur before and after that time.
*DAILY EXPECTATIONS*

**DINING HALL "TO DO"S:**

- Leaders stand at podium to run meal
- Enter SILENTLY
- SERVE and CLEAR SILENTLY
- No hats or jackets (hang all belongings in back)
- Sit in assigned seat
- KEEP YOUR FEET UNDER ON THE FLOOR, UNDER THE TABLE
- Use the BATHROOM after SERVE OR CLEAR
- Get everything while you are up
- 2 CUPS and 2 NAPKINS; OJ only at breakfast
- Fill WATER BOTTLES as needed when lining up after meal
- SCRAPE PLATES instead of BANGING against the garbage can
- KEEP CONDIMENTS CLEAN and TIDY
- WIPE TABLES and CLEAN any spills while clearing
- Head and arms off table
- LINE UP SILENTLY for dismissal in the following order: NOVICE, Level II's, Level I's, Orientation (Female Students Stay in Back of Line).

**GROUP or "COUNCIL":**

- One speaker at a time
- Refrain from side comments while someone else is speaking
- Put hand in and wait to be acknowledged before speaking
- Demonstrate self-control (control RUFUS)
- Sit upright with feet on floor and body off table or desk
- Build Up or Be Quiet (BBQ)
- Accept feedback (allow it to "digest" before responding)
- Be respectful and treat others as you would like to be treated
- Participate
- Say things that matter

**OUTDOOR/INDOOR RECREATION:**

- Follow the rules of the gym or other rec. area
- Practice good sportsmanship
- Keep your hands to yourself (ABSOLUTELY NO PHYSICAL CONTACT BETWEEN STUDENTS!)
- Refrain from Play Fighting/Horse Play at all times!
TRANSITIONS:

- Line up Silently
  - Novice or Level II Leadership leads the line, Level I’s follow, Orientation follows, Girls follow last
- Walk silently to circle up outside
- Debrief Activity
  - Share at least 1 POSITIVE aspect of the activity
  - Share at least 1 STRUGGLE group had during activity
  - Program staff or student leader can offer a “feedback sandwich” (bun=affirmation, meat=area for growth, bun=affirmation) to a student or the group as a whole
- Ask students to go over EXPECTATIONS for upcoming activity
- WALK SILENTLY in a SINGLE FILE LINE to next activity
- Enter the next activity in silence and wait for staff instructions

TRANSports:

- SIT IN ASSIGNED SEATS (as directed by Driver)
- WEAR your SEATBELT
- SIT UP STRAIGHT with FEET ON FLOOR
- DRIVER controls RADIO and TEMPERATURE CONTROLS
- RIDE QUIETLY; absolutely NO SHOUTING, YELLING, or CUSSING at the driver or other students
- Clean out all trash or left-behind items when you arrive at Center Point
- CONTRABAND IS PROHIBITED!
- REFRAIN from communicating or making HAND GESTURES with other vehicles or people
- Must face forward and only talk to students who are in your row unless the driver has prompted a group conversation.
- Daily Points start the minute you are picked up and end when you are dropped off.

CLASSROOM EXPECTATIONS:

- STAY AWAKE
- SIT WITH FEET ON FLOOR and BODY UPRIGHT
- DO ALL ASSIGNED WORK
- REFRAIN from DISTRACTING other STUDENTS with side conversations or inappropriate comments
- DEMONSTRATE RESPECTFUL INTERACTIONS WITH TEACHERS and ALL CAIU STAFF
- DEMONSTRATE RESPECTFUL INTERACTIONS WITH YOUR PEERS

**Please remember your end goal, TO GRADUATE, and act accordingly.**
Got WAP?

Important Tips to get ready for your weekend(s):
Please call us at 717.960.6700 with any questions.

- Please pack medication in the following manner: Send ONLY the amount of medication required for Friday evening, Saturday morning and evening, and Sunday morning. **Medication must be inside a prescription bottle that states the EXACT amount included in the bottle for the weekend. (This can be obtained at your pharmacy.)

- Due to the fact that WAP is a wilderness-based program, each student should come prepared to get dirty/wet/cold/hot, depending on the weather.
  - Please Note: Student sleep outside, in shelters or under tarps, in a very warm sleeping bag on top of a ground pad (all provided by Diakon).

  Clothing List: Fresh underwear, socks, sturdy clothing for community service projects or other outdoor activities, toothbrush and toothpaste, and towel and soap for optional shower.
  Seasonal items: Hat/gloves/coat during winter, swim shorts and water shoes in summer,
  *We have additional clothing to provide in case of emergency.

  - During winter months, wear WARM layers made of wool and polyester.

- NO CONTRABAND IS ALLOWED. (This included phones, money, food, jewelry, liquids, etc.)

- Students will stay on campus after Center Point dismissal to do work service projects (and earn community service hours) on Friday before transitioning to WAP when the other program participants arrive, at approximately 4:30 pm.

- Sunday, students are transported home to the following locations at the following times:
  Cumberland County Courthouse @ 2:00 pm (Corner of High and Hanover)
  Franklin County Juvenile Probation Office @ 3:00 pm (425 Franklin Farm Lane, Chambersburg)
  Adams County Juvenile Probation Office @ 3:45 pm (117 Baltimore St., Gettysburg)

  - Please note: We do our best to be on time, but if student or transportation issues arise, we may occasionally be late.

*Please let us know if your child has any special behavioral/medical/emotional conditions or needs that would be helpful for us to know about for this overnight program.
Dear Student:

As a member of the Weekend Alternative Program you have a personal obligation to utilize the program as a tool to support your personal growth and development. As a program we realize that things come up within our personal lives from time-to-time, however personal/family matters should be addressed prior to Friday. In our efforts to make this transition a smooth one for both staff and students we revised our Friday plan accordingly:

- Phone calls will not be permitted during transition periods. (between CP, and WAP)

- Special request to be excused from a Weekend needs to be approved by your County prior to Thursday the weekend is being served.

- Upon arrival on Fridays you’re expected to follow all rules and expectations of the program and its staff members without incident. Behaviors that may be determined as incident is as follows:
  
  o Disruptive behavior (having to be removed from peer group for any reason).
  o Disrespect to either peers/staff (name calling, threats or threatening language, as well threatening behaviors, refusal to comply).
  o Refusal to comply or appropriately respond to staff direction.
  o AWOL (walking away from designated area without permission).
  o Harm to self or others in any fashion.
  o Shutting down because of not getting “your way”.

If at any point a student fails to adhere to these expectations, they will call their county representatives to explain the situation prior to being transported home(by a parent, CP staff, or county representative...). If a student is transported home an emergency meeting will need to take place the following week, as a follow up to discuss their position in the program.

Below students are expected to sign each Thursday to ensure they understand the rules and expectations of the “Transition Period”. If student fails to sign, they put themselves at risk to be unsuccessfully discharged from the program.

Date: Name:
Date: Name:
Date: Name:
Date: Name:
Date: Name:
Date: Name:
Date:
Dear Parents:

Please be advised that __________ needs to complete _____ WAP (Weekend Alternative Program) Weekend(s) on ________________ for the following reason(s):

Here are some helpful tips for getting ready for the weekend. Please call Jeremias Garcia at 717-960-6745 with any further questions or needs you may have.

- Due to the fact that WAP is a camping-based program, each student should come prepared to get dirty/wet/cold/hot, depending on the weather.
  
  **Clothing List:** Undergarments, Socks, Sturdy clothing for community service projects or other outdoor activities, hat/gloves/coat during winter, swim shorts in summer, toothbrush and toothpaste, and towel and soap for optional shower.*We have additional clothing to provide in case of emergency.

  - Please Note: Student sleeps outside, in shelters or under tarps, in a very warm sleeping bag on top of a ground pad (all provided by Diakon).

- Please pack medication in the following manner: Send ONLY the amount of medication required for Friday evening, Saturday morning and evening, and Sunday morning.
  **Medication must be inside a prescription bottle that states the EXACT amount included in the bottle for the weekend. (This can be obtained at your pharmacy.)

- NO CONTRABAND IS ALLOWED. (This included phones, money, food, jewelry, etc.)

- Students will stay on campus after Center Point dismissal on Friday and then transition to WAP when the other program participants arrive.

- Sunday, students are transported home to the following locations at the following times:
  Cumberland County Courthouse @ 2:00 pm (Corner of High and Hanover)
  Franklin County Juvenile Probation Office @ 2:30 pm (425 Franklin Farm Lane, Chambersburg)
  Adams County Juvenile Probation Office @ 3pm – 3:15pm pm (117 Baltimore St., Gettysburg)

*Please let us know if your child has any special behavioral/medical/emotional conditions or needs that would be helpful for us to know about for this overnight program.

Please sign below to acknowledge you received this and please keep the second copy for your reference.
**CENTER POINT WATER BOTTLE RULES**

* Please hold the water bottles by the bottle and not by the strap attached to the top, they will break!

* Please place the water bottles on the ground instead of throwing them, rolling them, or tossing them. Center Point had to pay for them, so if you break them you will owe community service hours to pay for a new one!

* Please only put water in the bottles—no juice, milk, etc.

* Water bottles stay at CENTER POINT! Please do not take them home. They must be placed in the green bin before you leave each day. Water bottles will not be handed out on Friday’s in order to ensure that they are all returned and put away by Thursday night.

* Each student will be assigned a water bottle by number. Please only use your water bottle. No sharing water bottles with or borrowing water bottles from another student. Do not touch another student’s water bottle at any time.

* Please do not peel the number sticker off of the water bottle.

* Please do not scratch, draw on, or chew on the water bottle.

* Don’t worry, the water bottles are washed often so no germs are on them from previous students—or from you!

* If you break these rules, you will lose your water bottle privileges ☹️ They’re super duper awesome, so please take care of them! Or you will have to use an icky plastic water bottle for the remainder of your time at Center Point!!

_I understand and agree to the rules of using a Center Point water bottle. I know that if I am caught breaking the water bottle rules, I will be required to return the awesome water bottle and will not be allowed to use it again._

Student Signature: _____________________________ Date: ______________
The Beginner’s Guide for How to Graduate Successfully:

1. Earn your points and pass each week on time. (Orientation = 4 weeks at 75% or above; Level I = 3 weeks at 80% or above; Level II = 3 weeks at 85% or above)
   *NOVICE level for students who have earned Level II status and still need to achieve other treatment goals. Students must earn 90% or above.
2. Pass your drug tests.
3. Attend the program EVERY day.
4. Follow the ISP TREATMENT PLAN you created with your family, JPO/CW, and Center Point Program Staff.

PROGRAM POLICIES

Attendance

- If a student is absent, they are required to have a doctor’s excuse for their absence or the absence will be UNEXCUSED.

  o Students will receive one WAP weekend for each unexcused absence.
    * If a student accrues three Excused Absences during their time in the program, a treatment team meeting may be held to discuss the student’s truancy.

  o If a student has an Excused Absence for any reason, that student must complete a make-up packet in order to receive full points for the day missed.
    * Once the assignment is given, work must be turned in the NEXT school day.

  o If a student has an appointment scheduled during Center Point hours, a parent is asked to submit a written notification to the Director at least 1 WEEK in advance.
    * PARENTS: Please confirm, and receive permission for, the Excused Absence with the county worker before you contact Center Point.
Tardiness

- All students must arrive before 11:00 am, or s/he will accrue an Unexcused Absence.
  - Students will receive one WAP weekend for each unexcused absence.
  - If a student misses the AM transportation run for any reason, s/he must find their own way in to Center Point by 11 am.
    - Exception: A student must arrive to Center Point by 10 am on Fridays in order to prevent an Unexcused Absence.
    - Any student who has more than one tardy will be subjective to a tardy review and an “Attendance Plan” will be discussed with a COACH.

Drug Tests

- All students receive a 12-panel, urine analysis at the following times:
  - Intake.
  - Once a month.
  - Randomly as deemed fit by Center Point staff, family members, and county workers.
- Consequences for Failing a Drug Test (after Intake; also, see “Exception” below):
  - Students will be sanctioned 2 WAP weekends.
    - Every 21 days the student will be sanctioned additional WAP weekends for positive THC tests at the following rates: 2nd time = 3 additional weekends, 3rd time = 4 additional weekends, etc.
    - If a student tests positive for any other substance, s/he will receive weekly sanctions at the rate listed above.
  - Weekly Drug Tests will be administered.
  - Levels will be frozen or pushed back until the student can test negative for all substances.
    - The time it takes for a student to test clean will not count toward successful weeks on those levels. (For example: If a students tests positive for THC, and it takes him/her 3 weeks to test clean, those three weeks do not count on that current level and must be made up.)
  - GED Test Dates will be canceled and/or postponed

*EXCEPTION: INTAKE—When a student tests positive for a substance during intake, s/he will be required to complete the following assignments:
- 1 page written reflection on the effects of drugs on their family, their community, their future, and the physical effects of that substance on the human body
- Attend at least 1 community support meeting for people who are drug/alcohol dependent (AA/NA) and write a reflection on their experience.
- The student will be given one calendar week to attend a meeting and complete the written assignments.
- If the student does not complete their assignments on time, they will be required to participate in BARJ (Balance and Restorative Justice), instead of recreation time, until their written assignments are complete. If a student does not attend the meeting, s/he will be assigned an alternative logical consequence.
• Students who test positive for THC at Intake will be allotted 21 days to test clean before 2 WAP weekends will be sanctioned.

• Students will be allotted 7 days from Intake to test clean for any other substance.

Contraband

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<th>Parent</th>
<th>Student</th>
<th>CP Staff</th>
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• Students should have nothing but clothing on their person at Center Point.
  o Exceptions
    ▪ Advancement Journal (Home Goal Set and Signed with Parent Feedback)
    ▪ Therapeutic Workbook
    ▪ Writing Journal

Contraband includes, but is not limited to:
Any electronics
Any jewelry
Any amount of money
Chapstick
Pens and pencils
Lighters
Pocket knives and other weapons
Cigarettes
Prescription and non prescription drugs
Food or gum
Liquids
Wallets, purses, gym bags, etc.
“Trash” in any clothing pockets

Important Things to Know About Contraband:

• 1st Offense if a student is caught with contraband during check in, or at any other time upon arrival:
  o S/he will be assigned 2 WAP weekends.
  o The item will be confiscated.
    ▪ A parent/guardian must pick up the item up from Center Point.
    ▪ In collaboration with Center Point, it is possible a county worker can act as a guardian ad litem and return the confiscated item to the student.
      • If the item can cause harm to the self or others, it will be confiscated and not returned at any time.
      • If the item is illegal, law enforcement will be notified.

• 1st Offense if a student hands in contraband as they load in to the van
  o The item will be confiscated.
    ▪ A parent/guardian must pick up the item up from Center Point.
    ▪ In collaboration with Center Point, it is possible a county worker can act as a guardian ad litem and return the confiscated item to the student.
      • If the item can cause harm to the self or others, it will be confiscated and not returned at any time.
      • If the item is illegal, law enforcement will be notified.

• 2nd Offense if a student hands in contraband as they load in to the van:
  o The item will be confiscated.
  o 2 WAP weekends will be assigned.
EXCEPTION: The following items are acceptable with written permission from a parent/guardian.

***All items must be turned in, with the note, to the driver BEFORE loading in the vehicle in the morning.
  - Photo ID for GED tests (bring ID in a plastic sealable bag)
  - House keys
    - Any other request to bring in items must be in writing from a parent/guardian to the Center Point Director.

Violence and Student Interactions

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<th>Student</th>
<th>CP Staff</th>
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- Center Point Day Program is committed to non violence. We aim to achieve the highest level of physical and emotional safety among our student body and program staff.

*The following is not tolerated and could be reasons for an unsuccessful discharge:

- Threats against another student
- Threats against a program staff member
- Subversive aggression
- Bullying
- Destruction of Property
- No physical contact - OF ANY KIND- between any students

  - We are a NO CONTACT program. (This includes swiping or shaking hands, shadow boxing, and play fighting.)

  - CENTER POINT STUDENTS ARE NOT PERMITTED TO CONTACT EACH OTHER OUTSIDE OF PROGRAM HOURS!!!!
  - CENTER POINT STUDENTS ARE NOT PERMITTED TO GET TATTOOS WHILE ATTENDING CENTER POINT!!!!

    - This includes, but is not limited to: Facebook, My Space, Texting, Calling, Hanging Out, etc.

Dress Code:

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<th>Parent</th>
<th>Student</th>
<th>CP Staff</th>
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- No jewelry may be worn or carried on your person.
- You may not wear clothing or hats that promote drugs, alcohol, sex or violence.
- You may not wear gang colors, bandannas or other clothing promoting street values.
- Pants must stay at your waist, which means they must rest on your hips. You will be asked to wear pants with an elastic band if you do not comply.
- Holes in pants or any other attire are not permitted.
- Dress with modesty.
  - Tank tops and sleeveless shirts are not permitted.
  - Female students are not permitted to show cleavage of any kind, or wear shorts/skirts that are higher than a dollar length inches above their knee.
  - Students are not permitted to wear spandex, stretchy jeans/shorts.
Female students are also asked to be mindful that Center Point male students outnumber Center Point female students, and dress accordingly.

- Please wear looser fitting clothing.
- Please wear seasonal clothing. **Jackets are required in colder months** and must be removed while indoors.
  - If you need clothing or warm layers, Center Point can loan you items on an as needed basis.
- Hats may be worn, but must be removed in all buildings. Baseball hats must have brim to the front or back.
- Shoes must be properly tied. No sandals or other types of open toed shoes.
  - Remember: You will be working and traveling in a wilderness area, where mud, water, dirt, and rocks are prevalent. Please wear appropriate footwear.

Please initial next to all program policies and procedures to signify each has been fully explained in detail.

Please sign below to acknowledge understanding of all program policies.

__________________________ ___________________________
Center Point Staff Signature Date

__________________________ ___________________________
Parent/Guardian Signature Date

__________________________ ___________________________
Student Signature Date
Medicine Received Form

Student Name:

Medication: ________________________ Dosage: ________________________

Day: _____  Date Received: ______  Parent Initial: ______  Staff Initial: ______

M ________________________________

T ________________________________

W ________________________________

Th ________________________________

Fri ________________________________

Sat ________________________________

Sun ________________________________

Date and Amount Received:

______________________________

______________________________

______________________________

______________________________

______________________________

Signatures:

Staff: ____________________________  Date: ____________________________

Parent/Guardian: ______________________  Date: ________________________

- Medication Received Form must be filled out if your student is bringing medication to either Center Point or to the Weekend Alternative Program. Also, the form and medication must be handed to the transport prior to the student entering the transport vehicle.
- NO Student is allowed to have ANY medication on their person or belongings.
CENTER POINT FAMILY DEVELOPMENT MEETINGS

MISSION:
To mentor, support, and empower youth and their family members to work towards self-sufficiency through learning and practicing:

✓ Healthy communication skills
✓ Facilitation of regular family meetings
✓ Effective goal setting skills

GOALS of Family Development Meetings:

➢ To meet with students and family members for 2 hour sessions every 3 weeks
➢ To identify, evaluate, and build on student and family Strengths, Concerns, Resources, and Goals
➢ To brainstorm SMART Goals (Specific, Measurable, Attainable, Realistic, and Time-Bound)
➢ To encourage, model, and practice effective communication and conflict resolution skills
➢ To examine student’s progress at Center Ppoint and revisit End Goals
➢ To assess student’s understanding and progress with regard to Probationary and/or CYS expectations

Meeting One Agenda:
➢ Identify Student and Family Strengths, Concerns, Resources, and Goals
➢ Brainstorm ways to achieve and assess each goal
➢ Collaborate to create S.M.A.R.T. Goals. (Specific, Measurable, Attainable, Relevant, Time-Bound)
➢ Create a Family Plan based on the SMART Goals

Meeting Two Agenda:
➢ Revisit, Review, and Revise the Family Plan
➢ Develop and Practice methods for effective communication and conflict resolution skills through a variety of experiential activities
➢ Create an Amended Family Plan based on the outcome of the meeting

Meeting Three Agenda:
➢ Revisit, Review, and Revise the Family Plan
➢ Explore concepts of values and belief systems
➢ Each family member will create a “DreamScape” or “Bucket List”
➢ Create an Amended Family Plan based on the outcome of the meeting
Center Point Day Program
FAMILY DEVELOPMENT OVERVIEW

At Diakon Wilderness Center, we value families and their participation in each student’s Treatment Plan. Throughout the course of a student’s enrollment in Center Point Day Program, we respectfully request family participation in the following events:

1. ISP (Individual Service Plan)
   a) Scheduled approximately 1-2 weeks after intake.

   ISP Date and Time: ___________________________ / ___________________________

2. Two Family Development Meetings

   1st Family Meeting: ___________________________ / ___________________________
   2nd Family Meeting: ___________________________ / ___________________________

3. Transition Interview
   a) Scheduled the morning of Graduation

   Potential Graduation Date: ___________________________ / ___________________________

Purpose of Family Development Meetings:

1.) To meet with students and families to identify and build on strengths, resources (people, places, things), and goals.
2.) To develop meaningful and realistic Treatment Plans for students starting with an ISP.
3.) To track goals and plans so that students can stay on tract to successfully graduate Center Point.
4.) To assist students with transference of new skills they are learning at Center Point to home with their families and communities.
Center Point Summer Schedule
S.O.S. ~ (Summer of Success 2014)

- 7am -9am .................. AM Transport
- 9:30am ..................... Breakfast
- 10am-10:15am.......... Group
- 10:15am-12:30pm......... GED/School enrichment/Credit Acquisition
- 12:30pm .................... Lunch
- 1:00pm .................... Events (vocational/community service/activity)
- 3:30pm ..................... Dinner
- 4pm ......................... PM Transport

* From June 17th– July 23rd Summer School ( ... Enrichment/Summer School Credit/ GED).
  M, T, W, only

Weekly Schedules and Themes

Week 1 ... Spirit Week
June 2nd – June 6th
Monday 2nd .......... Regular programming (Hat day)
Tuesday 3rd .......... Regular programming (Crazy Hair Day)
Wednesday 4th....... Regular programming (Team Shirt Day) Graduation Ceremony
Thursday 5th......... Regular Programming (AM with JFC staffing in AM, then REC)
CAIU – Last Day (staff only)
Friday 6th.......... Regular Programming

Week 2 ... Wilderness Trip
June 9th – June 13th
Monday 9th .......... Regular programming
Tuesday 10th......... Ohiopyle Trip ...Leave
Wednesday 11th...... Ohiopyle Trip...Trip
Thursday 12th....... Ohiopyle Trip...Return
Friday 13th......... CP Closed

Week 3 ... Football Camp/Health & Wellness
June 16th– June 20th
* 17th is the first day of Summer School
* 19th is first day of Five-Star (1:30pm-3:30pm) ...7 weeks
* 10:30am-12:30pm (Girls Circle- Expect Respect, Salvation Army)

Monday 16th ........... CP Closed
Tuesday 17th......... Football Camp/Health & Wellness (1pm -3:30pm)
Wednesday 18th....... Football Camp/Health & Wellness (1pm -3:30pm)
Thursday 19th........ Football Camp/Health & Wellness (10:30am -12:30pm) ...Five-Star (1:30pm-3:30pm)
Friday 20th.......... Reflection ...Game Day (9:45am-10:30am = Student Game 10:30-11:45am Staff vs. Student Game)
Week 4
June 23rd – June 27th
Monday 23rd........ Regular programming
Tuesday 24th ......... Regular Programming
Wednesday 25th........ Regular Programming
Thursday 26th........ Regular Programming
Friday 27th........ Reflection

Week 5
June 30th – July 4th
Monday 30th.........Regular programming
Tuesday 1st......... Regular Programming
Wednesday 2nd........ Regular Programming
Thursday 3rd ..........Reflection
Friday 4th...........CP Closed

Week 6
July 7th – July 11th Vocation
Monday 7th ............Regular programming
Tuesday 8th...........Regular Programming
Wednesday 9th.........Regular Programming
Thursday 10th.........Regular Programming
Friday 11th..........Reflection

Week 7
July 14th – July 18th
Monday 14th ..........Regular programming
Tuesday 15th..........Regular programming
Wednesday 16th........Regular Programming
Thursday 17th.........Regular Programming
Friday 18th..........Reflection

Week 8
July 21st – July 25th
*23rd is the Last day of Summer School
*24th A.R.T. Completed
Monday 21st ............ Regular programming
Tuesday 22nd...........Regular Programming
Wednesday 23rd........ Regular Programming
Thursday 24th..........Regular Programming
Friday 25th..........Reflection

Week 9 ... Basketball Camp
July 28th – August 1st
*29th Course Start
*31st – Last Day of Five -Star
Monday 28th .......... Regular programming
Tuesday 29th........ Basketball Camp (10:30am-12:30pm)
Wednesday 30th........ Basketball Camp(10:30am-12:30pm)
Thursday 31st..........Basketball Camp (10:30am-12:30pm)
Friday 1st..........Games Begins at 9:15am
Week 10
August 4th – August 8th Trip Prep
Monday 4th ............ Regular programming
Tuesday 5th............. Trip Prep pm
Wednesday 6th........ Trip Prep pm
Thursday 7th............ Trip Prep pm
Friday 8th............. Reflection

Week 11 ... Wilderness Week
August 11th – 15th
Monday 11th .......... Students Leave for trip
Tuesday 12th............ Students at trip
Wednesday 13th........ Students Return from trip
Thursday 14th......... School Closed
Friday 15th............. School Closed

Week 12 – School
August 18th – 22nd
Monday 18th............. Regular programming
Tuesday 19th............ Regular Programming
Wednesday 20th ......... Regular Programming ...... In service day .... Family Day
Thursday 21st .......... Regular Programming/Trip Prep
Friday 22nd .......... Reflection

Week 13 – School – Wilderness Week on Campus
August 25th – August 29th
Monday 25th .......... Regular Programming
Tuesday 26th .......... Regular Programming /Trip prep
Wednesday 27th ......... Wilderness – Overnight-Harbor
Thursday 28th .......... Wilderness . Family
Day 9:30am - 12pm
Friday 29th .......... CP Closed

* Monday September 2nd – CP Closed
Center Point Contacts
(717) Area Code

**Director:**
Garcia, Jeremias 960-6745  garciaj@diakon.org
Family Development Specialist:
Buzulak, Renee 960-6713  buzulakr@diakon.org
COACH:
Woodward, Heather 960-6703  woodwardh@diakon.org
COACH:
Butts, Marvin 960-6736  buttsm@diakon.org
COACH:
Office Manager:
Fensterbush, Kit 960-6734  fensterbushk@diakon.org
BRIDGE Caseworker:
Barnett, Danielle 557-4197  barnettd@diakon.org
BRIDGE Caseworker:
Thomas, Alex 669-9844  thomasa@diakon.org
Activities Assistant:
Griggs, Hassan 557-8291  griggsb@diakon.org
Activities Assistant:
Thompson, Stephanie 386-3532  thompsons@diakon.org
Activities Assistant:
McHugh, Colleen 315-5022  MchughC@diakon.org

**PICK-UP TIME:**

**Students must be ready for pick-up 15 minutes prior to their time and call their transport if they’re not picked up by 15 minutes afterwards.**

**If students can’t get in contact with their transport, then they are to call the Director of Center Point-Mr. Garcia if it is before 8:30 a.m.; **AFTER 8:30 a.m.** contact Kit Fensterbush at: 717-960-6734.**

**CAIU:** (not available in the summer. All calls go to the office number below):

Teacher Wendy Shaver 960-6700  wshaver@caiu.org
Teacher Kevin Fatherree 960-6700  kfatherree@caiu.org
Teacher Krista Weiner 960-6700  kwerner@caiu.org

**Administrative:**
FAX 717-258-9408
Office 717-960-6700
Website [www.diakon.org/youth-services/](http://www.diakon.org/youth-services/)

**Address:**
571 Mountain Road
Boiling Springs, PA 17007
How to sign up for Mr. Garcia's Center Point Alert(s) messages:

To receive messages via text, text @centerpo to (571) 384-3599. You can opt-out of messages at anytime by replying, 'unsubscribe @centerpo'.

To:
(571) 384-3599

Message:
@centerpo

Text this message

*Standard text message rates apply.

Or to receive messages via email, send an email to centerpo@mail.remind101.com. To unsubscribe, reply with 'unsubscribe' in the subject line.

WHAT IS REMIND101 AND WHY IS IT SAFE?
Remind101 is a one-way text messaging and email system. With Remind101, all personal information remains completely confidential. Teachers will never see your phone number, nor will you ever see theirs.

Visit www.remind101.com to learn more.
What is Remind101?

WHAT IS IT?

Remind101 provides a safe way for teachers to text message students and stay in touch with parents for free.

Teachers use remind101.com, the Android app or the iOS app to send texts to students and parents phones without ever having to share their own phone number.

Students and parents also never have to share their phone number with teachers. Ever.

WHAT MAKES IT SAFE?

Teachers never see their students’ phone numbers. Students never see theirs. Remind101 is a one-way broadcast system. Teachers cannot send individual messages to students or parents, and students/parents cannot reply.

Remind101 also keeps a log of all message history, which can never be edited or deleted. Teachers never see their students’ phone numbers. Students never see theirs. Remind101 also keeps a log of all message history which can never be edited or deleted.

HOW MIGHT YOU USE IT?

Field trip reminders, motivational messages, homework, exam reminders, schedule changes, fun facts, and trivia. It’s a great way to communicate information to students and parents safely!

HOW CAN I GET STARTED?

Go to remind101.com on your computer, or download the Android or iOS app, then create your first class to see how it works. It takes less than two minutes to get started!

HOW DO STUDENTS OR PARENTS JOIN?

Students and parents sign up by sending a text message or email. They never need to visit the Remind101 site or create an account.

REMIND101 FEATURES

Add your Remind101 messages to your class website or blog with the simple, embeddable, and beautifully designed Remind101 widget.

You can also pre-schedule all your messages to be sent at a later date or time!

GET STARTED TODAY FOR FREE AT  www.remind101.com

Remind101 Inc. A safe way for teachers to text message students & keep in touch with parents. Standard text messaging rates apply.
YOUTH SCHOLARSHIP APPLICATION

Last Name, First Name, Middle Initial ________________________________
Street Address __________________________________________________________________________
City, State, Zip __________________________________________________________________________
Date of Birth (and age) _____________________________________________________________________
Home Phone _______________________________________________________________________________
Cell Phone _______________________________________________________________________________
Email Address ____________________________________________________________________________
Name of Parent/Guardian _____________________________________________________________________
Parent or Guardian phone/email address __________________________________________________________________________
Today's Date _____________________________________________________________________________

INQUIRY DETAILS

In which Diakon program(s) did you participate?

___ Wilderness Challenge
___ Weekend Alternative
___ Center Point
___ In Home Services
___ Family Life Services
___ Turning Point
___ Flight
___ Foster Care and/or Adoption
___ Other (please describe) ___________________________________________________________________

Please provide the details of your request:

Item requested (ex. Tuition, laptop, books) ________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

Exact amt. requested for each item ________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

* Supporting documentation in form of copy of college bill or receipt from vendor required with submission (many stores will allow you to put your items on "lay-away" and provide a receipt).

* If you are requesting support with rent, you must provide a signed renter's agreement.

* Your request may not exceed $3,000 in a calendar year.

* Allow 4-6 weeks for your application to be processed and reviewed and checks issued.
ESSAY QUESTIONS

Response should be two pages double spaced and address all of the following:
1. How did Diakon programming help you? What are a few of your favorite memories?
2. What are your future plans, in terms of a career?
3. Why is this scholarship important to you?
4. How do you plan to use the funding available?

SCHOLARSHIP REQUIREMENTS

1. You must be 17 to 25 years of age and you must have participated in a Diakon program (you did not have to complete the program to be eligible).
2. Refrain from illegal activity of any kind.
3. Provide documentation of acceptance or enrollment at a college, trade school or certification/training program (attach a copy with this application).
4. Have completed and submitted, F.A.F.S.A. form* – the standard financial aid form used to determine additional financial aid needed for college or trade school (attach a copy with this application).
   *If you need assistance, contact your guidance office or your college’s financial aid office.
5. Fully complete application, including the two-page essay.
6. Provide documentation of expenses (receipt, college bill, renters agreement).
7. If you have received support from the Diakon Youth Scholarship before, you have the additional requirement of providing a copy of your transcripts showing a 2.0 GPA “C” average in order to be eligible to reapply.

Complete this form and forward all relevant forms and documentation to:

c/o Diakon Youth Scholarship Review Team
571 Mountain Road, Boiling Springs, PA 17007
Email: carothersc@diakon.org
Fax: 717-258-9408

DATE APPLICATION WAS RECEIVED ____________________________

Staff who accepted application:
ED Adoption Foster Care ________
ED Family Life Services ________
ED Adjudicated Youth Services ________

DATE FORWARDED TO REVIEW TEAM ____________________________

Review Team recommendation: Approved ________ Denied ________

Need additional information ________

Comments: ______________________________________________________________

DATE FORWARDED FOR APPROVAL TO SENIOR MANAGEMENT ____________________________

Date approved __________________________________

Payer source information __________________________________________________________
Child’s Rights

1. A child may not be discriminated against because of race, color, religious creed, disability, handicap, ancestry, sexual orientation, national origin, age or sex. (32a)
2. A child may not be abused, mistreated, threatened, harassed or subject to corporal punishment. (32b)
3. A child has the right to be treated with fairness, dignity and respect. (32c)
4. A child has the right to be informed of the rules of the facility. (32d)
5. A child has the right to communicate with others be telephone subject to reasonable facility policy and written instructions from the contracting agency or court, if applicable regarding circumstances, frequency, time, payment and privacy. (32e)
6. A child has the right to visit with family at least once every 2 weeks, at a time and location convenient with the family, the child and the facility, unless visits are restricted by court order. The right does not restrict more frequent family visits. (32f)
   - For mobile programs, face to face visits are not required. However, mobile programs must provide at least telephone contact between family and children at the once every two weeks interval
7. A child has the right to receive and send mail. (32g)
8. Outgoing mail shall not be opened or read by staff persons. (32g1)
9. Incoming mail from federal, state, or county officials, or from the child’s attorney, shall not be opened or read by staff persons. (32g2)
10. Incoming mail from persons other than those specified in 32g2, shall not be opened or read by staff persons unless there is reasonable suspicion of contraband, or other information or material that may jeopardize the child’s health, safety or well being, may be enclosed. If there is reasonable suspicion that contraband, or other information that may jeopardize the child’s safety may be enclosed, mail may be opened by the child in the presence of a staff person. (32g3)
11. A child has the right to communicate and visit privately with his attorney and clergy. (32h)
12. A child has the right to be protected from unreasonable search and seizure. A facility may conduct search and seizure procedures, subject to reasonable facility policy. (32i)
13. A child has the right to practice the religion or faith of choice or not to practice any religion or faith. (32j)
14. A child has the right to appropriate medical, behavioral health and dental treatment. (32k)
15. A child has the right to rehabilitation and treatment. (32l)
16. A child has the right to be free from excessive medication. (32m)
17. A child may not be subjected to unusual or extreme methods of discipline which may cause psychological or physical harm to the child. (32n)
18. A child has the right to clean, seasonal clothing that is age and gender appropriate. (32o)
19. A child cannot be deprived of specific or civil rights. (33a)
20. A child’s rights may not be used as a reward or sanction. (33b)
21. A child and the child’s family have the right to lodge a grievance with the facility for an alleged violation of specific or civil rights without fear of retaliation. (Refer to written grievance procedures). (31e)

*The following rights are not applicable to Center Point Day Treatment – 32f, 32g, 32g1, 32g2, 32g3, 32k, 32o, 33c

This is a copy of the Diakon Youth Services’ Child’s Rights Document for parental records. These rights have been explained to your child during their orientation to the program. Should you have any questions or concerns regarding these rights please contact Jason Brode at brodej@diakon.org or 717-960-6724.

Revised: February 2013/jeb
Nondiscrimination in Services

Admissions, the provision of services, and referrals of clients shall be made without regard to race, color, religious creed, disability, ancestry, national origin, age or sex.

Program services shall be made accessible to persons with disabilities through the most practical and economically feasible methods available. These methods include, but are not limited to, equipment redesign, the provision of aids, and the use of alternative service delivery locations. Structural modifications shall be considered only as a last resort among available methods.

Any residential/client/patient/student (and/or their guardian) who believes they have been discriminated against may file a complaint of discrimination with:

Bureau of Civil Rights Compliance
Department of Public Welfare
PO Box 2675
Harrisburg, PA 17105-2675

Office for Civil Rights
U.S. Department of Health and Human services
Region III, PO Box 13716
Philadelphia, PA 19101

Pennsylvania Human Relations Commission
101 South Second Street
Suite 300
Harrisburg, PA 17105
Diakon Wilderness Center
Policies & Procedures

Court-Mandated Reporter

All Diakon Wilderness Center employees are Court-Mandated Reporters. Therefore, we are obligated to report any confidential issues you may disclose regarding unsafe or abusive home situations of either a physical or sexual nature to your caseworker or probation officer according to the State Childline policies. We will include you in this process as much as possible and work to help you gain control over your situation.

Discipline Policy

As a participant of the Diakon Wilderness Center Programs, you will be expected to abide by rules and to behave appropriately at all times. Inappropriate behavior will be treated with natural and logical consequences, none of which will be intentionally, physically or emotionally abusive.

Search Policy

To ensure a safe environment free of contraband that may put students, staff, volunteers and visitors at risk, you and your belongings will be searched upon arrival to the Diakon Wilderness Center Programs. When enrolled in the Weekend Alternative Program, you will be searched every Friday upon arrival on campus and when enrolled in the Center Point Day Program, you will be searched as part of morning check-ins Monday through Friday. If you wish to see program specific search guidelines, copies can be provided at your request. If, after this initial search, there exists reasonable cause to believe you are in possession of contraband, an additional, more extensive search may be performed. Parent/Guardian and Placing County Agency will be informed prior to the performance of a more extensive search and all search guidelines to be followed will be explained at that time. An incident report will be completed and placed in your file.

Grievance Procedures

If, as a participant of the Diakon Wilderness Center Programs, you have a complaint or concern regarding your personal safety and welfare, you have the following options, in this order:
1. Talk to one or all of your instructors/personal counselors.
2. Complete a grievance form to be reviewed by Program supervisor
3. Write a request to the Director of the Program requesting a meeting regarding grievance.

A copy of this document has been sent to parent/guardian for their review
Diakon Wilderness Center
Search and Seizure Policy and Procedure

3800.32i - A child has the right to be protected from unreasonable search and seizure. Any facility may conduct search and seizure procedures subject to reasonable facility policy.

Policy: The Diakon Wilderness Center will provide an environment that is safe and secure for youth and staff.

Purpose: Establish a criteria and procedure for reasonable search and seizure of youth coming to the Wilderness Center campus.

Criteria:
• Reasonable suspicion of contraband, defined as items contrary to the health, safety, or welfare of youth or staff, being brought onto the campus.
• Reasonable suspicion of theft from the facility, other youth, or stemming from community involvement.
• Youth routinely outside Diakon Wilderness Center staff care, custody and control.

A search will be conducted of the personal belongings of any youth arriving onto the campus entering into the Weekend Alternative Program, Center Point Day Program and/or the Wilderness Challenge program. These routine searches are conducted on Friday check in time in the Weekend Alternative Program and M-F check in times in the Center Point Day Treatment Program. Searches will be conducted of all items carried in, to include bags, outerwear, shoes, hats. Students will be scanned with metal wand scans to ensure they are not concealing weapons that may put other students at risk. Students are also required to turn out pockets and are visually scanned for contraband.

A search may be conducted of a youth or youths under reasonable suspicion of the above criteria while youth is engaged in programming in a Diakon Wilderness Center program. This search will follow the above guidelines. A search may be conducted of the sleeping area of youth under reasonable suspicion of the above criteria.

If more intrusive searches are warranted, these searches will be subjected to parental and county notification prior to the search. Approval must also be given by the Administrator of Diakon Youth Services prior to a more intrusive search being conducted. If reasonable suspicion exists that a student is in immediate possession of dangerous or illegal contraband, and this is creating a danger to the health, safety, or welfare of youth or staff, immediate contact will be made to outside authorities (State Police) prior to any search being conducted internally. A report will be made with the state police and all required documentation will be completed following the resolution of the incident.
I. **Standard:** The Diakon Wilderness Center will coordinate transportation for medical services in case of an emergency, based on the necessity of the situation and condition of an injured client, staff member, visitor or volunteer.

II. **Operating Procedure:** When facing a medical emergency requiring the transport of an injured individual, the following procedures will be followed. In the case of incidents in a wilderness environment, time may become a crucial factor in the response needed to treat an injured individual, therefore a direct care staff is required to use their “best judgment” in guaranteeing the well-being of all concerned and in critical situations should contact emergency support (911) directly prior to contacting supervisor.

- Contact the program director or supervisory staff and explain the situation. The program director/ supervisory staff will either determine an evacuation/emergency transport to be conducted by Diakon staff or coordinate professional assistance from outside agency.
- If professional emergency assistance is deemed necessary, the supervisory staff will coordinate with direct care staff and responding rescue personnel.
- Diakon staff are responsible for supervising all students in their care and must maintain relevant staff-to-student ratios.
- Supervisory staff will create a log of all events, contacts and responses concerning the injured individual and the care and response being provided. Field staff are responsible for maintaining and turning in all SOAP notes to their supervisor for incident reports.
- Medical Insurance, Medical History, and Consent forms will be accessed from the students file and arrangements will be made to have copies of this information available to outside professionals giving treatment.
- Insurance information, court orders, and consents to treat will be provided to care providers for payment reasons.
- All students in the care of the Diakon Wilderness Center will be accompanied by staff during treatment/assessments.
- All emergency contacts will be made by supervisory staff to include county emergency on call workers and youth’s listed emergency contact. Arrangements will be made to maintain open contact with family members and transition care, if necessary, to youth’s primary care giver.
- Documents/Items which must accompany student in the event of an emergency transport include the following:
  1. Student Emergency Packets
  2. All student specific (prescribed) medication/Medication log.
- If patient receives medical care, return any doctors orders, medication, instructions and paper work to the Program Director / Supervisory staff. All medical paperwork must be copied for students records and originals transferred to patients primary care giver.
III. Medical Protocols

- Emergency treatment of medical conditions and injuries will follow protocols provided in Wilderness Medicine Training Center’s First Responder Training, Wilderness First Aid Training (also covered through similar WFA/WFR certification trainings through WMA, SOLO, WMI & RMI) & Basic First Aid and CPR protocols provided by American Heart Association (also covered through similar trainings provided by Red Cross).
- The field staff/direct care staff possessing the highest medical certification will assess the situation and determine what response actions/steps will be taken.
- Situations that require immediate evacuation include (as outlined in Diakon’s Emergency Medical Plan policy number DCFM WC 113):
  - Critical Injuries affecting breathing
  - Cardiac arrest / distress
  - Excessive Bleeding (internal and external)
  - Shock (anaphylactic, volume, toxic, neurogenic)
  - Heat and Cold injuries (hypo / hyperthermia, heat stroke / heat exhaustion, frostbite)
  - Loss of consciousness for any period of time
  - Fall from more than 3 times body height
  - Whenever epinephrine is given
  - Fractures / dislocations
  - Serious burns (hands and face, around limbs, covering 10% of the body
  - Head injuries
  - Near drowning (water in the lungs)

IV. Documentation:

- A Diakon Wilderness Center Incident Report must be completed for all medical emergencies treated internal by Diakon staff or when utilizing outside professional assistance.
- A DPW Reportable Incident must be filed via the HCSIS reporting system in instances requiring police, fire, or emergency rescue involvement or when youth receives inpatient treatment at the hospital or outpatient treatment for serious injury or trauma not to include minor injuries such as sprains or cuts.

V. Phone Numbers

- Carlisle Hospital: 717-249-1212
- Holy Spirit Hospital: 717-763-2100
- State Police – Carlisle 717-249-2121
- Mount Holly Police 717-486-7615

VI. References:

- 3800.149(a)
Diakon Wilderness Center
Grievance Form

Complete all sections of this form. Sign it and return to Center for follow-up.

My grievance is: ________________________________________________________________

Date issue occurred: ______________ Location issue occurred: ______________________

Steps that I have taken to resolve this matter (use other side of sheet if necessary):

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Reasons why I feel the issue was not resolved: ________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Complainant's Signature/Date __________________________ Director's Signature/Date __________

Comments:

____________________________________________________________________________

Assistant Administrator, Central Region Signature/Date
Director's signature indicates the matter has been reviewed and resolved.
DIAKON LUTHERAN SOCIAL MINISTRIES
NOTICE OF PRIVACY PRACTICES

Effective Date: April 14, 2003
(updated July 2007)

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Protected health information is any health information that identifies you or for which there is a reasonable basis to believe the information can be used to identify you. In this notice, we refer to all protected health information as medical information. This notice will inform you about how we may use and disclose your medical information. This notice will also inform you about your rights and our duties with respect to your medical information and how to file a complaint if you believe we have violated your privacy rights.

Diakon Lutheran Social Ministries and its programs and facilities (listed on Exhibit A) are required by law to maintain the privacy of your medical information, provide you with information about your individual rights and to abide by the terms of this notice. Diakon and its programs and facilities will be collectively referred to in this notice as "we," "us" or "Diakon." Diakon reserves the right to change this notice at any time. Any change in the terms of this notice will be effective for all medical information that we are maintaining at that time. We will always post a copy of our current notice at our service locations and facilities and on our website at http://www.diakon.org and will make additional copies available to you upon request. If any change is made to this notice, we will provide you with a written revised notice upon request.

When you receive this notice and each time you receive a revised copy of this notice, please sign the Acknowledgment on the last page and return it to your caseworker, counselor or facility administrator.

CONTACT INFORMATION - QUESTIONS, COMMENTS OR REQUESTS

If you have any questions or comments about this notice or if you wish to obtain further information, please contact our Privacy/Contact Officer:

Richard Reed R.N., Esquire
Chief Compliance Officer
Diakon Lutheran Social Ministries
798 Hausman Road, Suite 300
Allentown, PA 18104-9108
(610) 682-1266

All communications to our Privacy/Contact Officer must specify your name and contact information, as well as the facility or program in which you are a patient, resident, client or otherwise receiving our services, in order for us to efficiently address your request.
I. HOW WE MAY USE AND DISCLOSE MEDICAL INFORMATION ABOUT YOU

We may use or disclose your medical information as necessary for your treatment, payment and our healthcare operations. We have provided examples of the types of uses and disclosures listed below. Not every use or disclosure in these categories will be listed; however, all of the ways in which we are permitted to use and disclose your medical information will fall within one of the categories listed in this notice.

A. For Treatment. We may use medical information about you to provide you with medical treatment or services. We may disclose medical information about you to physicians, nurses, therapists, counselors or any of our personnel who are involved in taking care of you at the facility in which you reside or the program from which you receive services. We may also disclose medical information about you to people outside of our facilities or programs who may be involved in your medical care while you are receiving services from us or when you are transferred to a hospital or other facility or when you are discharged from any of our facilities or programs. For example, we may disclose your medical information to a pharmacy to fill a prescription or to a hospital, hospice or home health agency or other type of health care provider to which you are transferred for treatment.

B. For Payment. We may use and disclose medical information about you so that the treatment and services you receive from us and other providers may be billed and payment may be collected from you, an insurance company or another third party such as Medicare and Medicaid (Medical Assistance). For example, we may disclose your medical information to your health insurance company or to Medicare and Medicaid (Medical Assistance) to determine whether a particular service is covered or if you are eligible for Medicaid (Medical Assistance). We may also need to disclose your medical information to your health insurance company or for Medicare or Medicaid reimbursement to demonstrate the medical necessity of the services provided to you or for your stay at one of our facilities or for any other service provided to you. We may also disclose your medical information to another health care provider involved in your care for that provider's billing. For example, we may disclose your medical information to a doctor who provided your care so that the doctor may obtain payment for those services.

C. For Health Care Operations. We may use or disclose your medical information for our own health care operations in order for us to provide quality care to our residents, clients, patients or other persons receiving our services. For example, we may use medical information to review our treatment and services and to evaluate the performance of our staff in caring for you. We may also combine medical information about many residents, clients or other persons receiving our services to decide what additional services we should offer. We may disclose information to doctors, nurses and other facility personnel for review and learning purposes.

II. OTHER USES AND DISCLOSURES THAT MAY BE MADE WITHOUT YOUR AUTHORIZATION

In the event that state or other federal law affords more protection with respect to disclosing your medical information, we are required to follow such state or other federal law.

A. Business Associates. We may disclose medical information to "business associates" who provide contracted services such as accounting, legal representation, claims processing, accreditation,
and consulting. If we do disclose medical information to a business associate, we will do so subject to a contract that provides that such information will be kept confidential by the business associate.

B. Individuals Involved in Your Care or Payment for Your Care. Unless you object, we may release medical information about you to a friend or family member who is involved in your medical care. We may also give information to someone who helps to pay for your care. We may also inform your family or friends about your general condition, location or death.

C. Appointment/Visit Reminders. We may use and disclose medical information to contact you for a reminder about your scheduled home health or hospice visits, counseling services or for any other scheduled appointment with any of our facilities or with any of our personnel.

D. Fundraising Activities. We may contact you to request financial support for our facilities and our services and programs. We will use only information such as your name, address, telephone number and the dates of treatment in our program or dates of your stay at our facility. If you do not wish to be contacted for fund-raising efforts, please notify the Privacy/Contact Officer, in writing, at the address identified on the first page of this notice. We will not share your information with anyone else for another entity’s fundraising purposes.

E. Organ and Tissue Donation. If you are an organ donor, we may release medical information to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank, as necessary to facilitate organ or tissue donation and transplantation.

F. Workers’ Compensation. We may release medical information about you for Workers’ Compensation or similar programs.

G. Public Health Activities. We may disclose information about you for public health activities. These activities generally include, but are not limited to: prevent or control disease, injury or disability; report births and deaths; report child abuse or neglect; or report reactions to medications or problems with products.

H. As Required by Law. We will disclose medical information about you when required to do so by federal, state or local law.

I. Research. We may allow your medical information to be disclosed for research purposes, provided, however, that the person or entity performing the research adheres to certain privacy practices.

J. Health Oversight Activities. We may disclose medical information to a health oversight agency for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure actions or other legal proceedings. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.

K. Inmates. If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release medical information about you to the correctional institution or law enforcement official. This release would be necessary: (1) for the institution to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.
L. **Victims of Abuse, Neglect or Domestic Violence.** We may disclose your medical information to a government authority authorized by law to receive reports of abuse, neglect, or domestic violence, if we believe you are a victim of abuse, neglect, or domestic violence. We will only make this disclosure if we are required or authorized to do so by law or if you agree to such disclosure.

M. **Judicial and Administrative Proceedings.** We may disclose medical information about you in response to a court or administrative order. We may also disclose medical information about you in response to a subpoena, discovery request, or other lawful process by someone involved in the dispute, but only if efforts have been made to notify you about the request or to obtain an order protecting the information requested.

N. **Law Enforcement.** We may release medical information if asked to do so by a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, reporting criminal conduct in our facility or program, complying with a court order or subpoena and other law enforcement purposes.

O. **Coroners, Medical Examiners and Funeral Directors.** We may release medical information to a coroner or medical examiner. This may be necessary, for example, to determine the cause of your death. We may also release medical information about our residents, clients, hospice or home health patients or any other recipients of our services to funeral directors as necessary for them to carry out their duties.

P. **National Security and Intelligence Activities.** We may release medical information about you to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.

Q. **To Avert a Serious Threat to Health or Safety.** We may use and disclose medical information about you when we determine it is necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.

R. **Military and Veterans.** If you are a member of the Armed Forces, we may use and disclose your medical information as required by military command authority. We may also use and disclose your medical information about foreign military personnel as required by the appropriate foreign military authority.

S. **Treatment Alternatives/Health Related Benefits and Services.** We may use or disclose your medical information to inform you about treatment alternatives and health-related benefits and services that may be of interest to you.

T. **Disaster Relief.** We may disclose your health information to an organization assisting in a disaster relief effort.

U. **Facility Directory.** If you are a resident of one of our residential communities, unless you object, we will include certain limited information about you in our internal facility directory. This information may include your name, your location in the facility, your general condition and your religious affiliation. Our directories do not include specific medical information about you. We may release information in our directories, except for your religious affiliation, to people who ask for you by
name. We may provide the directory information, including your religious affiliation, to any member of the clergy.

III. OTHER USES OF MEDICAL INFORMATION REQUIRING AUTHORIZATION

Other uses and disclosures of medical information not covered by this notice or the laws that apply to us will be made only with your written permission. If you provide us with permission to use or disclose your medical information, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose your medical information for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and we are required to keep records of the care that we provided to you.

IV. YOUR RIGHTS REGARDING MEDICAL INFORMATION ABOUT YOU

You have the following rights regarding medical information we maintain about you:

A. Right to request restrictions.

You have the right to request that we restrict the uses or disclosures of your medical information to carry out treatment, payment, or health care operations. You also have the right to request that we restrict the uses or disclosures we make to: (a) a family member, other relative, a close personal friend or any other person identified by you; or (b) to public or private entities for disaster relief efforts. For example, you could ask that we not disclose medical information about you to your brother or sister. We are not required to agree to any requested restriction, but will tell you in advance if we cannot comply. However, if we do agree, we will follow that restriction unless the information is needed to provide you with emergency treatment.

You must submit your limitation or restriction request in writing to your caseworker, counselor, or facility administrator. In your request, you must tell us (1) what information you would like to limit or restrict, (2) whether you wish to limit the use or disclosure, or both, and (3) to whom you would like the limits to apply, for example, disclosures to your spouse. Your request must also specify your name and contact information as well as the facility or program in which you are a patient, resident, client or otherwise receiving our services in order for us to efficiently address your request.

We may terminate your restriction if: (a) you agree or request the termination in writing; (b) you orally agree to the termination; or (c) if we inform you that we are terminating our agreement to your restriction, except that such termination will only be effective for your medical information that is created or received after you receive our notice of termination.

B. Right to receive confidential communications.

We will accommodate reasonable requests to receive communications about your medical information from us by alternative means or to alternative locations. For example, you may ask that we only contact you by mail or at work. We will not require you to tell us why you are asking for the confidential communications. If you want to request confidential communications, you must make your request in writing to your caseworker, counselor or facility administrator. Your request must also specify your name and contact information as well as the facility or program in which you are a patient, resident, client or otherwise receiving our services in order for us to efficiently address your request.
C. Right to inspect and copy protected health information.

With a few very limited exceptions, you have the right to inspect and obtain a copy of your medical information. To inspect or copy your medical information, you must submit your request in writing to your caseworker, counselor or facility administrator. Your request should specifically state what medical information you want to inspect or copy. Your request must also specify your name and contact information as well as the facility or program in which you are a patient, resident, client or otherwise receiving services in order for us to efficiently address your request. We will ordinarily act on your request within 30 days of our receipt of your request. In the event that state or other federal law requires us to act on your request within a shorter time frame, we will comply with such law. We may charge a fee for the costs of copying, mailing or other supplies associated with your request and will tell you the fee amount in advance.

We may deny your request to inspect and copy in limited circumstances. If you are denied access to your medical information, you may submit a written request that such denial be reviewed to the Privacy/Contact Officer at the address indicated on the first page of this notice. In certain circumstances you will not be granted a review of a denial. Otherwise, your denial of access will be reviewed by a licensed health care professional designated by us who did not participate in the original decision to deny access. We will ordinarily act on your request for review within 30 days.

D. Right to amend protected health information.

You have the right to request an amendment to your medical information for as long as the information is kept by or for us. Your request must be submitted in writing to the Privacy/Contact Officer and must specifically state your reason or reasons for the amendment. Your request must also specify your name and contact information as well as the facility or program in which you are a patient, resident, client or otherwise receiving our services in order for us to efficiently address your request. We will ordinarily act on your amendment request within 60 days after our receipt of your request.

We may deny your request to amend medical information if we determine that the information: (1) was not created by us; (2) is not part of the medical information maintained by us; (3) would not be available for you to inspect or copy; or (4) is accurate and complete.

If we grant the request, we will inform you of such acceptance in writing. We will make the appropriate amendment to your medical information and we will request that you identify and agree that we may notify all relevant persons with whom the amendment should be shared: (a) individuals that you have identified as having medical information about you and (b) business associates that we know have your medical information that is the subject of the amendment.

E. Right to receive an accounting.

You have the right to request an "accounting of disclosures" for disclosures of your medical information that are made after April 14, 2003. The list of disclosures does not include disclosures: (a) for treatment, payment and healthcare operations; (b) made with your authorization or consent; (c) to your family member, close relative, friend or any other person identified by you; or (d) for national security or intelligence purposes. Additionally, under certain circumstances, government officials can request that we withhold disclosures from the accounting.
To request an accounting of disclosures, you must submit your request in writing to your counselor, caseworker or facility administrator. Your request must state the time period for which you would like an accounting which may not be longer than 6 years and cannot include dates before April 14, 2003. Your request must also specify your name and contact information as well as the facility or program in which you are a patient, resident, client or otherwise receiving our services in order for us to efficiently address your request. Your first accounting request within any 12-month period will be provided to you free of charge. For additional accounting lists, we may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred.

We will ordinarily act on your accounting request within 60 days of your request. We are permitted to extend our response time for a period of up to 30 days if we notify you of the extension. We may temporarily suspend your right to receive an accounting of disclosures of your medical information, if required to do so by law.

F. Right to a paper copy of this notice.

You have the right to a paper copy of this notice. You may request a copy of this notice at any time from any Diakon facility or program or on our website at http://www.diakon.org. Even if you have previously agreed to receive this notice electronically, you are still entitled to a paper copy of this notice.

V. COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with Diakon Lutheran Social Ministries or with the Department of Health and Human Services, Office of Civil Rights. Complaints to Diakon Lutheran Social Ministries must be submitted in writing to the Privacy/Contact Officer at the address specified on the first page of this notice.

To file a complaint with the United States Secretary of Health and Human Services, send your written complaint to: Region III, Office for Civil Rights, U.S. Department of Health and Human Services, 150 S. Independence Mall West, Suite 372, Public Ledger Building, Philadelphia PA 19106-9111.

You will not be penalized for filing a complaint.
Exhibit "A"

The following are owned, operated, and/or managed by Diakon Lutheran Social Ministries and are bound by the terms of this Notice of Privacy Practices:

**Corporate Entities**
- Diakon Lutheran Social Ministries
- Diakon Housing and Development, Inc.

**Family and Community Ministries**
- Diakon Adoption & Foster Care
- Diakon Adult Day Services
  - Manatawny Manor
  - Mountain Glade
  - Ravenwood
- Diakon KidzStuff Child Care
- Diakon Home Health
- Diakon Hospice Saint John
- Statewide Adoption Network
- Diakon Pregnancy Services
- Diakon Family Life Services
- Diakon Youth Services
- Diakon Community Services for Seniors
- Diakon Volunteer Home Care
- RSVP
- Diakon Help at Home

**Community Outreach Services**
- The Brandywine Program
- Congregational Ministries

**Senior Living Services**
- Buffalo Lutheran Village
  - Nursing Care Center
  - Assisted Living
  - The Cottages and The Villas
- Frey Village
  - Nursing Care Center
  - Assisted Living
  - Apartments
- The Lutheran Home at Topton
  - Henry Health Care Center
  - Bredigam and Buehrle Assisted Living
  - Luther Haven, Tower Court, Koch-Knauss Apts.
- Ohesson Manor
  - Nursing Care Center
  - Cottages
- Ravenwood Lutheran Village
  - Nursing Care Center
  - Assisted Living
  - Cottages
- Twining Village
  - Nursing Care Center
  - Assisted Living
  - Apartments
- Cumberland Crossings Retirement Community
  - Nursing Care Center
  - Assisted Living
  - Cottages
- Luther Crest
  - Nursing Care Center
  - Assisted Living
  - Apartments
- Manatawny Manor
  - Nursing Care Center
  - Assisted Living
- Pocono Lutheran Village
  - Assisted Living
- The Village at Robinwood
  - Assisted Living
  - Cottages
- HUD Housing
  - Frostburg Heights
  - Heilman House
  - Luther Meadows
  - Lutherwood