Jasper Mountain STATEMENT OF CLIENT RIGHTS

! At Jasper Mountain, all clients are to be treated with respect and dignity. A statement of client rights has been developed in the agency *Policies & Procedures Manual*, and these policies are included in this packet for your reference, and as described below.

■ Client Rights (Attached) These policies include the following areas: Accessibility, Rights in Treatment, Assistance with Communication, Restricting the Right of Uncensored Communication, Restrictions on Personal Property, Care of Resident's Personal Money, The Right of Spiritual Development, and rights regarding Outdoor & Strenuous Activities.

■ **Confidentiality (Please See Agency "Notice of Privacy Practices")** The agency's policies on confidentiality are described in our *Notice of Privacy Practices*, which clients receive upon admission into the Jasper Mountain program. A more detailed copy of these policies is available in the *Policies & Procedures Manual*, which is available to clients by request. Both formats of this information cover the following areas: Use or Disclosure of Protected Health Information within Agency Treatment Programs, Release of Information to Clients, and Releases of Information Outside of Agency.

■ Grievance Process (Attached) If concerns about services cannot be solved after attempts with the therapist or the program directors, a grievance process is accessible to help resolve the problem. The procedure is attached. Clients will not be penalized in any way for expressing concerns or for filing a formal grievance. In addition to the therapist and the agency program directors, the following people and resources are available to help solve any problem or to help clients make a complaint or grievance:

- Jasper Mountain Quality Assurance Coordinator: 541-747-1235
- Jasper Mountain Privacy Officer: 541-747-1235
- Oregon State Protection & Advocacy:
 - Oregon Department of Human Services, Children's Care Licensing Program: 201 High Street SE Suite 500 Salem, OR 97301 Phone: 503-947-2331
 - Oregon Health Authority Residential & Outpatient Behavioral Health Licensing & Certification 500 Summer Street, NE, E-20 Salem, OR 97301-1097 Child & Adolescent Programs Phone: 503-269-1146
 - Oregon designated protection and advocacy organization: Disability Rights of Oregon (DRO), 511 SW 10th Ave, Suite 200, Portland, OR 97205 Phone: 1-800-452-1694 M-F

In summary, the attached policies as well as the agency's *Notice of Privacy Practices* describe the rights of persons who receive services through Jasper Mountain. Individual Coordinated Care Organizations (CCO) or health insurance companies may also have additional rights and grievance procedures. If questions or concerns arise about any of this information, please feel free to ask.

CLIENT RIGHTS

It is the intention of this Agency to provide support and assistance to its service consumers. Consumers shall at all times be treated with respect, dignity, and the right to self-determination. The following client rights shall be posted in the administration waiting room and explained and a copy will be given at the time of admission. The child's rights shall be verbally explained in language the child can understand. The following client rights have been acknowledged:

2. H. 1. Service Accessibility

Jasper Mountain provides mental health services according to guidelines established by the county and state mental health division, state law, and by policies of the Agency. No services are denied due to race, religion, gender, ethnicity, age, handicaps, sexual preference, or ability to pay. Services are provided within facilities that are conducive to young children and their families. Age-appropriate accommodations are made for residents. Accommodations are also made for clients with physical disabilities. The intention of the Agency is to provide services to all consumers in a way that is optimally accessible and useful.

Accommodations are also made related to special communication needs. Bilingual clients will have the option of services in their language through bilingual staff or with the use of interpreters. Hearing impaired clients can have the availability of signing staff or sign language interpreters.

Particular care is to be given when clients of the Agency are receiving services or need services provided by managed care networks. When a consumer is eligible to use a range of services within a provider network (such as one operated by a managed behavioral health care organization) they are to be assisted in obtaining all needed services. This is accomplished through provided information or advocacy concerning available services as well as needed steps to access services provided by the managed care network.

Fees for Agency services are generally provided by contacts and not assessed to clients. The Agency believes that children deserve help regardless of the status of parents. On rare occasions that a contract does not cover the cost of services, third party insurance may be billed. In these cases, both the insurance carrier and the family will be provided with billing information including the fees for service, the manner of payment and any other condition including the consequence of non-payment. It is the Agency's goal not to have services to a child conditional upon payment issues.

The Agency does not provide treatment services to minors unless the legal guardian of the child consents to the treatment. If the Agency is contacted directly by a child, which is extremely rare, steps will be taken to gain the consent of the parent or legal guardian. If this cannot be obtained, appropriate referrals will be facilitated to ensure the child receives the help they need.

2. H. 2. Rights in Residential and Outpatient Treatment

The <u>residential client</u> has the right to:

- Consent to treatment
- Be involved in the treatment planning and revisions of the plan
- Be informed of alternate treatment options
- Know the risks of treatment
- Refuse some or all treatments, including medications, unless it is court mandated
- Have confidentiality as accorded by Oregon Revised Statues, Federal Laws and associated guidelines as outlined in Section 2.G., *Confidentiality*, as well as in the Agency's *Notice of Privacy Practices*.
- Have the right to religious freedom and its expression
- Have identifying and clinical information about the child be protected from publication, both internal and external
- Receive humane, culturally competent treatment free from abuse or neglect in the least restrictive environment that provides the child with protection from harm and preserves the dignity of the child and family
- Be free from seclusion and free from manual restraint unless it is an emergency to preserve safety in accordance with OAR 309-021-0175
- Have the right to file a complaint or grievance and be free from any retaliation afterward doing so
- Have the right to disagree with an agency report and be allowed to attach to the report their points in disagreement.
- Have an attorney for the family or child involved in treatment planning
- Have uncensored communication by mail, telephone, and visitation
- Retain personal possessions and personal clothing
- Have the right to personal gender expression consistent with our policy
- Receive educational services in the least restrictive setting, and speak to an IEP team member confidentially, if the student has an IEP.
- Refuse to perform routine labor tasks
- Receive compensation for work projects performed in the program
- Be free from unusual, hazardous, or experimental treatment procedures without voluntary informed consent
- Be free from special treatment procedures that are not consistent with Agency policy
- Be informed of rules and regulations of the program
- Have opportunity for regular participation in developmentally appropriate indoor and outdoor play and recreation, both on campus and in the community
- Receive informed consent in writing regarding any fees for services
- Be provided informed consent for activities of the child outside the treatment center
- Be provided informed consent for spending time and developing therapeutic relationships with staff on- and off-site.
- Be notified if being discharged from the program according to the care team's decision
- Be notified if the client's therapist is to leave the Agency, either for a planned or unexpected departure, and be assisted in transitioning to another therapist.
- Be provided authorization for disclosure of clinical records.
- Have the ability to exercise all rights granted by State rule.

<u>Outpatient clients</u> have the right to:

- Consent to treatment
- Be involved in the treatment planning and revisions of the plan
- Be informed of alternate treatment options
- Know the risks of treatment
- Refuse some or all treatments, including medications, unless it is court mandated
- Have confidentiality as accorded by Oregon Revised Statues, Federal Laws and associated guidelines as outlined in Section 2.G., *Confidentiality,* as well as in the Agency's *Notice of Privacy Practices*.
- Have the right to religious freedom and its expression
- Have identifying and clinical information about the child be protected from publication, both internal and external
- Outpatient treatment that is humane, culturally competent treatment free from abuse or neglect in the least restrictive environment that provides the child with protection from harm and preserves the dignity of the child and family
- Be free from seclusion and free from manual restraint unless it is an emergency to preserve safety in accordance with OAR 309-021-0175
- Have the right to file a complaint or grievance and be free from any retaliation afterward doing so
- Have the right to disagree with an agency report and be allowed to attach to the report their points in disagreement.
- Have an attorney for the family or child involved in treatment planning
- Be free from unusual, hazardous, or experimental treatment procedures without voluntary informed consent
- Be free from special treatment procedures that are not consistent with Agency policy
- Be informed of rules and regulations of the program
- Have opportunity for regular participation in developmentally appropriate indoor and outdoor play and recreation, both on campus and in the community
- Receive informed consent in writing regarding any fees for services
- Be provided informed consent for activities of the child outside the treatment center
- Be notified if being discharged from the program according to the care team's decision
- Be notified if the client's therapist is to leave the Agency, either for a planned or unexpected departure, and be assisted in transitioning to another therapist.
- Be provided authorization for disclosure of clinical records.
- Have the ability to exercise all rights granted by State rule.

Licensing Rule 413-215-0046 on the Children and Families Rights Policy and Grievance Procedures was amended on 1/1/2019 to include the following on the rights of children in care and families served by the child-caring agency. A child-caring agency must guarantee the rights of children in care and the families the child-caring agency serves. A child-caring agency must enact and adhere to a policy ensuring those rights. A written copy must be distributed to all children in care and families served by the child-caring agency and must be afforded the following rights. Except as provided in paragraph (B) of this subsection, the child in care's right to uncensored communication with legal guardians, caseworkers, legal representatives, and other persons approved for communication by the legal guardian or as provided in a court order.

- (A) This right cannot be waived, including voluntarily. Restriction on communication between a child in care and his/her/their legal guardian may not be a condition of participation in the program.
- (B) A child-caring agency may place reasonable limits on communication, but only as provided in the child-caring agency's policy. Reasonable limits include, but are not limited to, having set time periods during the day for visitation and phone calls and imposing moderate limits on the duration of calls or visits. However, a limitation is not considered reasonable if it prevents the ability to meaningfully communicate, such as not allowing contact with a child in care's attorney during regular business hours.

All children in care have the right to the following:

- The child in care's right to participate in service planning or educational program planning.
- The child in care's right to privacy.
- The child in care's right to fair and equitable treatment.
- The child in care's right to file a grievance, if the child in care or family feels that they are treated unfairly or if they are not in agreement with the services provided.
- The child in care's right to have adequate and personally exclusive clothing.
- The child in care's right to personal belongings.
- The child in care's right to an appropriate education.
- The child in care's right to participate in recreation and leisure activities.
- The child in care's right to have timely access to physical and behavioral health care services.

The legally responsible guardian of the child in the program always retains the right to refuse continued treatment of their child, in part or in whole, if this right is allowed under court order or state statute. A child can be withdrawn from any treatment program at any time by the legal guardian. In addition, some aspects of treatment can be rejected by the guardian after the issue is discussed with the program. Depending upon the rejected treatment (such as the refusal of arecommended medication), there may be anticipated consequences for the child or a change in the course of treatment. When possible, the Agency will work with the concerns and desires of guardians. As a part of this process, Agency personnel are to explain any risks and potential benefits of treatment approach with the child which the Agency believes to be critical, the child may be terminated from the program after discussions with the guardian(s) and referrals to other services. The goal is to ensure that all parties in the treatment process are in agreement with the direction of treatment and the desired goals. In the event of an involuntary termination of services, the client has the right to be given prior notice, information regarding available alternative resources, and information regarding the Agency's grievance procedures.

Consumers have the right to freedom of choice in services and may pursue services of other agencies at any time. They also have the right to all decisions concerning their treatment being made in a professional and ethical manner. All Agency personnel shall conduct their roles with the interests of consumers primary over self-interest.

2. H. 3. Assisting with Communication and Restricting the Right of Uncensored Communication

Effective communication is fundamental to providing services. The Agency is to do its best tofacilitate good communication between the Agency and clients, their families, their caseworkers, attorneys, and advocates. At times, good communication will require dealing with language barriers. The Agency has bilingual staff, but if there is a need for a language that is not spoken by staff, steps will be taken to identify interpreter assistance. Other assistance may be in the form of sign language interpreters. Interpretive services are to be provided in person whenever possible. In addition, the Agency will not rely on family members to provide interpretation services. The Agency will do what isnecessary to obtain communication assistance in order to facilitate the treatment process.

It is critical that while children are in intensive Agency services that positive supportive contact with the child's support system be maintained. Positive inclusion into the Jasper Mountain treatment family is an important step but this is only a vehicle to transition the child to a community family following treatment. Because of this goal, the positive connections that will support the child following treatment must be maintained and integrated into the process of treatment. Agency staff shall take whatever steps necessary to support and facilitate communication with family members and other members of the child support system, including the caseworker, attorney, Court Appointed Special Advocate (CASA), and others who have legal access to the child. Facilitating communication includes making the child available for planned visits, available for phone contact, and providing a place where the child can speak freely with his/her/their family.

Generally, children have the right to uncensored communication through visits and/or phone contact with family members as well as caseworkers, attorneys, and CASAs. There are times when it is not in the best interests of the child to have uncensored contact by phone, mail, or personal visit with some individuals. Jasper Mountain does not make such decisions, although staff may make a recommendation concerning restrictions on communication in some cases. When this issue arises, the decision is to be made by the caseworker as a representative of the court. Jasper Mountain will only restrict communication in circumstances where it is acting on instructions from the legal guardian, court, or when the best interests of the child warrant the restriction. At such times, any restriction will be documented in the child's file as to the reasons for the action, including the anticipated harm that might be caused. The restriction on communication is to be proportional to the risk that is of concern,

and the matter is to be reviewed weekly by the therapist and monthly bythe clinical review team. Written notice of limited communication will be given to the parent or guardian and explained to the child in understandable terms.

When appropriate restrictions are not applicable, children should have free access to incoming and outgoing mail, reasonable phone access in a private setting, and a suitable space for personal visits within the rules of the program. Children are to have unencumbered communication with the child's attorney and others permitted by state department rules, including but not limited to, the child's caseworker, CASA, Guardian ad Litem (GAL), Disability Rights Oregon (DRO) advocate, and other advocates (as permitted by administrative rule).

2. H. 4. Restrictions on Personal Property

Personal property is allowable as long as it safe, developmentally appropriate, and does not interfere with the child's plan of care. Adequate storage space is to be provided for the child's clothing and other possessions. Reasonable restrictions can be placed on possessions, such as clothing with inappropriate symbolism, violent toys, videos or music, sexually suggestive material, or other items that would be of harm to an individual child or could facilitate a HIPAA violation, such as recording devices. When restrictions are placed on personal possessions, written notice of the restriction is to be given to the child's family and verbal notice to the child. Documentation shall be placed in the child's file.

In the residential programs, children have the right to privacy when dressing in sleeping areas and in bathrooms. Children have the right to be safe from threats and the emotional externalizations of other residents, particularly at night in their rooms. Every effort will be made to provide this safety. Residents have the right to have staff indicate they are entering their bedroom prior to walking in. Residents have the right to reasonable privacy of diaries and possessions. Possessions are to be searched for stolen or inappropriate items only after a team leader has agreed there is reason to have a concern justifying the search. Residents have the right to be free of video surveillance technology in living areas. Monitoring by motion detectors will be used in bedrooms to ensure the protection of residents. Residents have the right to have a safe place to store their belongings free from access by other residents.

2. H. 5. Client Treatment Information Access

Clients have the right to review their treatment file. Oregon Law ORS 179.505 provides parents and legal guardians the right to immediate inspection of treatment reports and the child's file. This right is provided to non-custodial parents who maintain legal parental rights. Because of the age of residents, children are not routinely shown their file unless there is a therapeutic reason for doing so. Further description of the client/guardian's access to treatment information is addressed in the *Policies*, Section 2.G. *Confidentiality,* as well as in the Agency's *Notice of Privacy Practices*.

2. H. 6. Consumer Grievance Procedure

If a consumer (child, adult, or family member) is displeased with the service they receive or the way they have received it, they are encouraged to bring the concern to the attention of the assigned therapist or to the program director. The Agency encourages consumers to speak out about any dissatisfaction with the services they receive, and every attempt shall be made to resolve the issue.

If the consumer is still not satisfied, the consumer may file a complaint (verbally or in writing), called a grievance action. The subject of a formal complaint or grievance is to be dissatisfaction or concern about services or lack of services that are the responsibility of the Agency. Consumers should feel confident that expressing a complaint will not result in any form of retaliation. There are several steps available to the consumer to be followed *in the order listed below* until the issue is satisfactorily resolved:

- Discuss the situation with the assigned therapist.
- Bring the matter to the attention of a program director either verbally or in writing.
- Submit a written grievance (complaint) to the executive director. If the consumer needs help putting the complaint in writing, assistance is available. Please contact the front office for matters regarding letters of grievances and for assistance in writing a letter of grievance.
- If the grievance is not remedied after following the three listed steps above, consumers may submit a written grievance to the Jasper Mountain Board of Directors: 37875 Jasper-Lowell Rd. Jasper, OR 97438.

Filing a Complaint: Formal complaints should be submitted to a program manager within the Agency or directed to the Agency's Quality Assurance Coordinator. Formal complaints can be made in writing, describing the issues of concern and requesting action from the Agency. No special form is needed. If the consumer should want assistance in writing the complaint, he/she should feel free to ask for help, and the Agency will arrange for any assistance that is needed. Formal complaints can also be made verbally. To do so, the consumer should present the complaint verbally to a supervisory or managerial staff person, or to the Agency's Quality Assurance Coordinator and say that the complaint is to be considered a formal complaint. If the issue is not able to be resolved by the appropriate program director, the verbal complaint is now to be put in writing, so that the Executive Director or Board of Directors can best understand what is being requested. If the matter has not been resolved with two previous attempts to do so, a written complaint will assist in providing clarity as to exactly what the concern entails. If the consumer should want any assistance in putting the complaint in writing, such help can be arranged.

Once a Formal Complaint is Received: The staff person who receives the written formal complaint is to give the information to a program director, who is initially responsible for responding to the written concern of the consumer. When a formal complaint is received, it is to be reviewed by the director of the program. If the situation can be immediately resolved by either treatment team staff or the assigned therapist, the director is still to review the matter. The consumer is informed of the right to appeal the process at each step until the matter is resolved. If the matter is to be handled by a program director or the Executive Director, there is to be a written response to the formal complaint or grievance within five calendar days. If the matter is referred to the Board of Directors, the consumer is to receive a written response within thirty calendar days of the Board receiving the written grievance.

Other Grievance Resources: If the consumer is a Trillium (or other mental health CCO) Member, he/she/they also has a right to the CCO grievance procedure. The consumer also may have the right to take a grievance to a State Agency or advocacy organization such as the Department of Human Services (DHS) or the Department of Education. Any grievances or concerns can also be referred to OHA (503-945-7818, 500 Summer St. NE Salem, OR 97301) or Disability Rights of Oregon (1-800-452-1694, 620 SW Fifth Ave. #500, Portland, OR 97204), depending upon the situation. Any unresolved grievance will be brought to the attention of the Board of Directors and pertinent contact source.

2. H. 7. Expedited Grievance

There are some situations in which time is of the essence. Clients may initiate an expedited grievance under the following cases: 1) In the client's opinion, the immediate health and safety of the child is at issue, 2) The issue involves currently prescribed medications or relates to an important medical issue for the child, 3) The issue cannot wait to be resolved in the regular timetable because of factors related to specific care of the child and not client convenience or how strongly the client feels about the issue.

An expedited grievance must be in writing, must state the reason a quick process is necessary, and what problems are likely to result if the normal grievance process is used. The written request for an expedited grievance will be reviewed by the Executive Director or designee and a decision regarding the expedited process will be provided the client within 24 hours of the request being received. If the expedited process is denied by management staff, the client can appeal to the Board of Directors and a decision on the expedited process will be given within 24 hours of being received by the Board. In cases where the issue clearly meets the three criteria for an expedited process, the Agency will approve the request as quickly as possible within the 24-hour time limit. If an expedited grievance is approved by the Agency, a written decision will be available, faxed, or e-mailed within 24 hours of the expedited process being approved. If the issue is clearly an immediate concern, the decision will be made as quickly as possible within the 24-hour limit.

2. H. 8. Service Denial

Jasper Mountain seldom denies services to children or families. However, if this does occur, the client has rights under the Agency, the mental health organization, and the Oregon Health Plan rules. In the process of developing the plan of care for a child or family, if a requested service is denied by the Agency, the client may appeal this denial. The client is to put in writing the service they are requesting and the reason they believe the service will assist in meeting the goals of the treatment plan. This written appeal will be reviewed by the executive director and a written response will be provided within five working days. The written response will include: the referenced service, a statement of reversal of the denial or statement of sustaining the denial, the basis for denial, and notification of the appeals process external to the Agency, and the process and time frame for further appeal. A *Notification of Denial* letter will also be sent to the appropriate Mental Health Authority in the event of such a denial for services.

2. H. 9. Hearing Request

For all clients, including Medicaid or CHIP eligible children, and parents or guardians who consent to treatment, an appeals process is available in the event of service denial or denial of a grievance. At the point that all Agency remedies have been exhausted with no satisfactory resolution, a hearing may be requested with at least three representatives of the Agency's Quality Assurance Committee and Board of Directors. The hearing is to take place within ten working days and a written decision will be provided the client within five working days. If the client continues to be dissatisfied with the decision, they may appeal to the State Division Administrator or designee, located on the official website for the State of Oregon.

The Quality Assurance Coordinator is assigned to assist with grievances, receive or assist the client with information about the process, and keep documentation of the formal complaint. All formal complaints

will be kept in a file and will have information on the issue, including who filed the grievance, the date of the initial complaint, the nature of the concern, and the resolution of the matter and the date of resolution. The grievance process is to be explained verbally and a copy given to clients at intake. No client is to be the recipient of retaliation for exercising any rights granted to him/her/them, including the right to a formal grievance or hearing.

2. H. 10. Children's Rights (Language for Children)

Most children who come to Jasper Mountain's residential programs have been treated badly by others, and many have treated others badly themselves. The Agency's programs are safe places where children have rights as well as duties. Having rights does not mean that children will always get what they want, or that they do not have some painful growing to do. Having rights does mean that the program must help children achieve treatment goals and not make it more difficult for them. It is important that all children in the program understand their rights:

- Staff are to treat children in a manner that is both kind and firm. Children have the right to not be mistreated or to be hurt. If there is a problem, children can tell a staff member or their therapist.
- Children should not be treated differently than other children because of their gender, race, ability, or any other difference.
- Children can talk to adults and say things that are private and that they don't want other children or non-staff to know.
- Children can have family or friends visit if they are on the visiting list.
- Children can go places and do things outside SAFE or JMC with staff as long as they are acting in a responsible and safe manner.
- If someone destroys or steals a child's things, they can have them returned or replaced.
- Children can ask to contact their caseworker, CASA, DRO advocate, or attorney when they need them. They can also ask to talk to one of the adults on the school goal team (called an IEP team) in private, and staff will make sure this can happen.
- If a child isn't being treated well, they can complain to staff or to their caseworker and they will help you fix the problem.
- Children can always eat meals unless they decide not to; meals will not be taken away.
- Children will not be physically punished or intentionally hurt.
- The more effort a child puts into the program and the more they cooperate, the more decisions they get to make and the more privileges they will receive.
- Children have the right to their feelings and to expressing those feelings in safe and respectful ways.

In 2021, Senate Bill 710 was enacted to help protect children from injury during physical interventions. A physical intervention is defined as any action by which movements of another are restricted and is an act of care and control aimed at ensuring the safety of the youth and others.

According to Licensing Rule 413-215-0078 enacted 9/1/2021, each child in care receiving services from a child-caring agency must be given the following:

• Instruction regarding how a child in care may report suspected inappropriate use of restraint or involuntary seclusion.

- Assurance that the child in care will not experience retaliation for reporting suspected inappropriate uses of restraint or involuntary seclusion.
- The telephone number for the toll-free child abuse hotline described in ORS 417.805, and the contact information for the program's licensing agency, and the child in care's caseworker, attorney, CASA, and DRO advocate.

The information must be provided by:

- The Department of Human Services, if the department placed the child in care in the child-caring agency.
- The Oregon Youth Authority, if the child in care has been committed to the custody of the authority.
- The child-caring agency for all other children in care.

2. H. 11. Rights for Children in Residence

The following rights are acknowledged for residents of Jasper Mountain's residential programs as well as those outlined in 2.H.2. A copy of these rights has been written in words the children understand (see "Children's Language" above) and are to be explained to each child. The child is to indicate their understanding by telling his/her/their counselor.

Children have the following rights:

- Safe, respectful care in harmony with the treatment plan and the physical and emotional needs of the child.
- Fair nondiscriminatory treatment.
- Confidentiality consistent with the Agency's open treatment policy.
- Visits by family or friends consistent with the overall plan developed by DHS and the SAFE or JMC treatment plan.
- Opportunities to interact with the community at large in school, field trips, outings and special events outside SAFE and JMC.
- Appropriate access to communication with people in the community when this is approved by the legal guardian and is deemed by the clinical team to be in the child's best interests.
- Protection of personal property. If property is destroyed or damaged by negligence of theprogram, its staff or other residence and not by the owner's behavior or carelessness, the resident has the right to compensation.
- Contact as applicable with the DHS caseworker, CASA, DRO advocate, IEP Team Members, and personal attorney.
- Grievance procedure.
- Safety and security from physical harm or material need of food, clothing or medical care.
- Self-determination within the bounds of the program's policies and procedures.

2. H. 12. The Right of Spiritual Development

Because of the age of the children in the program, they are developing understanding of ethical and moral questions and issues. The program assists their development by including exposure to spiritual and religious beliefs of a general and nondenominational nature. Weekly groups cover important spiritual/moral issues and children can express beliefs in the form of prayer before meals, at bedtime or at other times at their discretion. If parents or children have religious observances important to

them, these observances are to be respected by the program. Within the expectations of the program for safety of the child and the community, attendance at religious services is arranged. No coercion shall exist in the program regarding religious decisions.

In 2021, the Jasper Mountain Agency instituted a Diversity, Equity, and Inclusivity (DEI) Committee. This committee is comprised of volunteer advocates that plan and implement Diversity, Equity, and Inclusivity awareness presentations and activities for residents. When available, the Jasper Mountain Agency partners with the University of Oregon's International Cultural Service Program (ICSP) to allow residents the opportunity to hear directly from individuals who are native to countries around the world. Seasonally, the DEI Committee plans and implements weekly diversity celebrations led by volunteer staff members. Topics may include any societally relevant DEI advocacy effort. Guardians are made aware of Jasper Mountain's advocacy for cultural competency during the admission process. If a guardian would prefer their child to opt out of participation or to participate in the individual family's core beliefs instead, they may request to, and the Agency will do its best accommodate these requests within the Agency's capacity.

2. H. 13. Care of Resident's Personal Money

For the best interests of the residents, no cash is allowed in the possession of residents during their stay in the program. Any money at intake is placed in an account through the Agency business office in the name of the child. Residents have access to money in their account for a variety of activities and purposes during the child's treatment. The resident is to get permission to spend money from this account from the program director. This process is not to be difficult, but one that ensures supervision of purchases or uses of the money. Parents or guardians may obtain access to the child's account when desired. The amount in the account will be provided to the child's guardian atdischarge.

2. H. 14. Gender Identity

The issue of gender identity has received considerable attention in the last few years. There has been more social acceptance of a variety of variations related to gender. What used to be called gender identity disorder is now being viewed less as a disorder than a non-binary view of gender. It is not the job of Jasper Mountain staff to determine the gender identity of the children it serves. Many emotionally disturbed children have confusions and yet many also look for issues to cause confusion among adults. This is the context in which the following policy has been developed.

- It will be the responsibility of the parents/legal guardian to inform Jasper Mountain if they wish a child to align with a gender other than that assigned at birth.
- Sexual development is like any other developmental issue and a child who is exploring their gender identity will be assisted in their growth and in feeling confident in who they are as a person.
- When families/legal guardians wish a child to assume a gender other than their gender assigned at birth, the child will not share a room with other children to maximize their comfort in their identity exploration.
- Children do not come to Jasper Mountain due to gender identity issues, therefore our focus will remain on the child's overall mental health and any behavioral disorders that significantly impact their development or cause impairment in their daily life.

2. H. 15. Outdoor and Strenuous Activities

While Jasper Mountain, activities that provide children with an opportunity to better experience their abilities and skills are provided. The Agency does not put children in situations of heightened risk. All activities are chosen for their therapeutic value and not for considerations such as inducing fear, pushing children through their resistance, or other coercive practices.

As a part of the initial intake process, informed consent is received from the parent/guardian for the various types of outdoor or strenuous activities which may be available to the child. This consent includes potential benefits, risks and precautions taken to ensure maximum learning for the child. The parent/guardian has the right to withhold permission for any of these activities.

In addition, all outdoor and strenuous activities are voluntary. At times, a child's presence may be necessary for the program, but the child is not forced to exert himself/herself/themselves in an activity if he/she/they chooses not to participate.

2. H. 16. Access to Enriched Activities

Recent Federal and State Laws have emphasized the needs of children in substitute care to have opportunities while growing up that other children not in substitute care have access to. Although some children are away from their families for short periods, such as some of the children at the SAFECenter, others may be in care for years and may miss many normal opportunities other children have. While encouraging activities that can enhance a child's confidence as well as enjoyment, there must also be priorities on what is safe for the children and the community as well as what individual children can use as positive experiences.

At Jasper Mountain, we have a unique challenge to provide normalized experiences for children who are far from the norm regarding safety and responsible behavior. One of the best ways to balance activities with appropriateness to the child is enhanced opportunities within the treatment environment. Admittedly, these activities may not always include peers from the community or what many families offer to their children, but it is also true that many children in their own homes do not have many of the enriched activities of our children in treatment, such as equestrian therapy, gardening, creative expression, daily therapeutic recreation, adult mentors, support and relationship building, and much more.

To balance access to activities and opportunities for enjoyment and personal growth with assurances of safety and appropriateness for the specific child, the Federal and State laws outline the considerations that must be considered including age, maturity level, developmental level, and any inherent risks. To this excellent list, we must add the treatment needs of the individual child. Jasper Mountain is not a place where children find themselves because they need a home. Only children with significant developmental and psychological challenges are referred and admitted to our programs. Therefore, the reason the child is in our care is to receive some of the most intensive mental health treatment of any environment in our system of care. When activities are considered, safety must be a priority and not just the physical safety of the child and others involved in the activity, but also emotional safety. Not all children at Jasper Mountain are prepared to engage with community peers in activities safely or reciprocally. While in treatment, these skills are honed. The following are guidelines within Jasper Mountain programs to promote access to enriched activities for the children in our care.

- Priority on the needs of the individual child; for instance, what one child may grow from may not be appropriate for a child with different treatment needs.
- While in treatment, the priority must remain on why the child is in an intensive environment and the treatment environment must take precedence over normalized opportunities unless otherwise indicated for a specific child.
- Program Managers have the responsibility to ensure the treatment environment has many built-in enriched activities for all children as well as meeting the needs of individual children.
- Program Managers are also responsible to ensure safety for all children with the enhanced activities including therapeutic recreation.
- The Care Teams for individual children will determine what specific children needs may be in the area of enriched activities.
- Cultural issues must be integrated into enriched opportunities both within the program and in the community.

One of the advantages of a holistic treatment environment is the opportunity to design the setting for what children can best enjoy and learn from. Throughout the history of Jasper Mountain, we have continually received feedback that our programs create a healthy, holistic environment that children enjoy more than any other treatment setting. This includes sports, an academic experience designed for how high needs children learn best, therapeutic recreation, cultural activities, creative expression, equestrian therapy, and more. We pledge to continue this aspect of our treatment environment based upon the belief that children best heal when they are active and enjoying themselves.

Activities in Treatment Foster Care: Within our Treatment Foster Care Program the issue of access to community opportunities is more pronounced. We want to encourage participation when it is indicated for the child in the home. Unnecessary barriers to opportunities must be removed with the help of our treatment foster care staff. One resource for foster parent training to encourage access to enriched activities while in care is the State promoted training video found at https://www.youtube.com/watch?v=hHnQpclkxLc.