



Bradley Hospital

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CADD Residential Handbook



Dear Parent/Guardian,

Welcome to the Center for Autism and Developmental Disabilities (CADD) at Bradley Hospital, a major teaching affiliate of The Warren Alpert Medical School of Brown University. We understand that admitting your child to a residential program can be a challenging and emotional decision, particularly when your child has diverse abilities.

CADD is a community-based residential program specializing in behavioral, emotional, and developmental challenges, including autism and intellectual disabilities. Since 1993, we have provided intensive, family-centered care for youth ages 12 to 21. Our multidisciplinary team—including doctors, nurses, social workers, occupational therapists, art therapists, and speech therapists—works collaboratively to create individualized treatment plans for each resident.

Our program offers a safe, therapeutic environment where youth receive tailored services. For example, we offer individual and family therapy, social and life skills counseling, special education, and medication management. We take a strength-based, culturally competent approach that actively engages families and caregivers in decision-making, treatment planning, and establishing structured routines across home, school, and community settings.

Residents in our program attend school or other educational programming in the community. We collaborate with schools to ensure appropriate services and encourage family participation in educational meetings, such as Individualized Education Program (IEP) sessions. In addition, residents engage in therapeutic recreational activities and community outings, which promote social skills, life skills, and physical health.

Likewise, we also provide a trauma-informed environment that prioritizes safety, choice, and empowerment. Our staff are trained to communicate with sensitivity, validate residents' experiences, and promote healing through supportive relationships. This nurturing atmosphere helps residents develop healthy coping skills and work toward a brighter future.

Our comprehensive services include clinical assessments, collaborative treatment planning, occupational and speech therapy, family treatment, caregiver skills training and education, school consultation, 24-hour supervision, case management, and discharge planning. Daily living skills, such as hygiene and self-care, are taught using step-by-step approaches to promote independence.

We are committed to supporting your child as they overcome challenges and grow into a happy, productive individual. For more information about our program, please feel free to contact us with any questions.

We look forward to working with you.

Sincerely,

Lisa R. Landry, JD, LICSW

Clinical Director, CADD Residential Program

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Program Personnel

Residential Program Management Team

Peter Gillen, Psy.D

Lisa Landry, JD, LICSW

Shelley Grant, BSN, RN, PHN-BC

Melanie Morris

William Ferreira

Ashley Grenier

Jessica Guarneri, M.Ed.

Sherri Matheu, M. Ed.

Director of Children's Residential Services

Director of CADD Residential Program

Director of Residential Nursing Services

Residential Manager

Supervisor, Heritage House

Supervisor, Rumford House

Supervisor, Hill House

Supervisor, Exeter House

Contacting Us

The mailing addresses and telephone numbers for each of the residences are:

Rumford House	Heritage House	Exeter House	Hill House
2 Farrell Place Rumford, RI 02916 401-431-2969	170 Heritage Drive Warwick, RI 02818 401-886-8926	51 Widow Sweets Road Exeter, RI 02822 401-295-8795	306 Fruit Hill Avenue N. Providence, RI 02911 401-353-1274

In case of emergency: If you cannot reach your child's program, please call Bradley Hospital at 401-432-1000, and ask the operator to contact Lisa Landry.

Admission Meeting

Prior to your first meeting with our team, we have enclosed a Parent Questionnaire for you to complete. If you have any questions, please contact your clinician for assistance. The initial meeting/evaluation provides an opportunity for you to exchange valuable information with members of your child's treatment team. Your child's medical and developmental history, family history, and the events that led you to refer your child for residential placement are reviewed and discussed at this meeting. Additionally, we need a copy of your child's physical examination completed within the last year. Following the meeting, family members are provided with a tour of the house.

Parent / Guardian Involvement

We consider families to be crucial partners in a child's care and treatment. Who, after all, knows your child better than you? Your knowledge, understanding, and input are why CADD residential considers parents to be an integral part of their child's treatment team and encourages active participation including visitation, family therapy, and training in child behavior management skills. For parents and other members of the treatment team to be most effective, an individualized treatment plan is developed and agreed upon that outlines the expected involvement of everyone participating in your child's treatment. As a parent, you may review this plan as often as you wish with your family therapist.

If at any time during your child's stay you have concerns or questions that you feel have not been adequately addressed by your family therapist or your child's attending child psychiatrist, a larger meeting that includes all members of your child's treatment team may be arranged.

Visits, Phone Calls, & Mail

Upon your child's admission to our residential program, you will be asked to provide a list of people who are approved to visit and/or have telephone contact with your child. We also ask that all visits be scheduled **24-hours in advance**. Our team schedules recreational activities that residents participate in during evening hours, after-school, and on weekends. Therefore, we would like to know when you are coming to visit to ensure that your child is at the house when you arrive. Our nursing staff needs time to pack medication prior to your arrival. Similarly, if there is a change in your visit plans, please contact your child's house as soon as possible. We encourage you to visit with your child as often as you like, and we consider family involvement an integral part of treatment. Residents look forward to weekly visits and spending time with their families during the holidays.

Visits

- Parents/guardians are expected to visit one to two times per week.
- Weekend and holiday visits may be scheduled anytime during the day and evening. We ask that visits end by 8 p.m., as a courtesy to other residents living at the house.
- In-person visits at the residential program will take place in a designated private area for about 1-2 hours, allowing you to spend quality time with your child.
- When arriving and concluding visits, you will be asked to sign your child in and out. Any pertinent information will be exchanged at this time, including medication, behaviors, expected return times, scheduling a subsequent visit, etc.



Phone calls

- We ask that incoming phone calls occur between 8 a.m. - 5 p.m. and 6 - 7:30 p.m., unless there is an emergency. Here, again, we have put this schedule in place to avoid early and late calls, as well as calls during dinner, as a courtesy to other residents living in the house. It also is important to point out that your child may be involved in a treatment activity, such as group therapy, when you call. We hope that you will not mind being asked to call back later when the activity has concluded.
- Parents/guardians may call at any time to speak with a residential care counselor about how their child is doing. Children may place telephone calls to parents, clergy, and social workers at any time other than during school hours and after 8:45 p.m.

Mail

- Your child may send and receive mail while in the residential program.

Types of Treatment

A wide variety of treatment approaches are used within the Center for Autism and Developmental Disabilities, depending on the individual needs of each child and family. Types of treatment available include:

- **Residential care counseling:** a safe, organized, and structured therapeutic environment is provided for your child throughout the day. This includes attending to your child's individual needs, while teaching him or her about personal, social and community responsibilities using rewards, logical consequences, and a structured life skills curriculum.
- **Individual psychotherapy:** difficult personal issues and behaviors may be examined and addressed in a safe, confidential, one-to-one setting.
- **Family therapy:** issues such as improved communication and family dynamics can be addressed.
- **Pharmacotherapy:** medication is used to treat a specific disorder and/or enhance the effectiveness of other treatment approaches. Parental consent is obtained prior to any use of medication.
- **Group therapy:** problematic behavior and emotional issues are addressed within the social setting of a peer group.

Medical Appointments

On admission, nursing and parent/guardian will discuss who will be responsible for scheduling all appointments. Parents/guardians are encouraged to attend all appointments. Attending appointments helps parents stay informed about their child's treatment plan and changes in medication or therapy. Additionally, some medical decisions may require parental consent, especially for minors or individuals with guardianship arrangements. Similarly, parents can work alongside residential staff and healthcare providers to ensure consistent care and follow-through on recommendations.

Treatment Team

The treatment team, including all the professionals involved in your child's care, meets regularly to review your child's progress, and modify your child's treatment plan, as necessary. Your input is considered extremely valuable by the treatment team. Your ideas, suggestions and questions are brought to the team by your family therapist.

Behavior Management

Our philosophy is to empower each child in residential treatment to take responsibility for managing their own behavior to the best of their ability, with the support and guidance of our staff. Frequently, however, a child needs help in exercising self-control and learning to meet their personal and social responsibilities.

Some of the interventions we may use to help your child include:

- Positive reinforcement
- Verbal and physical prompting
- Redirection of behavior
- Behavioral contracts
- Clear expectations
- Structured environment
- Taking space

Physical restraint is a safety management approach that is used only after it has been determined that no other way was available to keep your child, and others around your child, safe. The Center for Autism and Developmental Disabilities at Bradley Hospital adheres to strict state and federal guidelines regarding the use of physical management, which may be used only in the case of an emergency and must be approved by a doctor and reviewed with parents. Similarly, we strive to avoid the use of PRN medications unless that is the only feasible option to maintain everyone's safety.

Emergency care: In the event of any type of medical or psychiatric emergency, 911 will be called.

School Placement

Our residential program is strongly committed to the successful integration of children into community-based activities, including schools. It is a requirement for all residents to be enrolled in the local school, transition program, or day program during their residential stay. Our residents attend local schools, and the Bradley School or other alternative school programs. The local school district will collaborate with you to determine the best placement for your child. Our staff provides behavioral consultation in planning and monitoring individualized education programs (IEPs). Our staff are also happy to meet with the school's multidisciplinary team, as needed, for consultation.

Community Involvement

We view our residential students as valuable members of the community. Therefore, they are encouraged to participate in activities throughout the state. Your child's treatment team reviews all community-based activities to ensure that they are in your child's social and therapeutic best interest. There are also common or routine trips within the community that have been reviewed by Bradley Hospital. We will review these trips with you and obtain your consent for your child's participation.

Some community-based activities may require notifying you and obtaining your permission in writing (e.g., roller-skating, amusement parks). If, at any time, you prefer that your child not participate in an activity, please inform the staff, the house supervisor, or your family therapist. If you do not want your child to participate in an activity, an alternative will be offered.

Spiritual Life

We would like to know about and support your family's spiritual beliefs and religious practices. We hope you will discuss them with your family therapist so we can mutually support this important area of your child's life. We invite you to take your child to spiritual or religious events in the community. If you are unable to take your child to a religious service, please let us know, and we will help to arrange services to meet your needs.



Typical Weekday Schedule

6:30 - 8 a.m.

Wake up, Self-care, Morning responsibilities, Breakfast, Transport to school.

8:30 a.m. -
2:30 p.m.

School

2:30 - 4 p.m.

Transition to group home, Snack, Leisure time

4 - 5 p.m.

Afternoon activities (outdoor activities, community trips, art activities, home economics, gym activities, recreation room, family visits, family therapy, etc.)

5 - 6 p.m.

Dinner, Self-care, Leisure time

6 - 8 p.m.

Evening activities (similar to afternoon activities; opportunities for social skills development, family visits)

8 - 10 p.m.

Self-care, Snack, Bedtime (dependent upon resident's age)





Personal Finances

Accounts are established within the residential program for your child's money. Depending on the house your child is placed in, he or she may earn a spending allowance each week, earn money from a vocational job, and/or receive money from the family. These monies will be placed in an account based on the source of the income.

- Personal account – Money earned within the program.
- Primary account – All other money

To teach budgeting and responsibility, there are times and events when your child may spend only dollars earned and deposited in his or her personal account.

When possible, we collaborate with residents and families to establish an account at a bank. For safety reasons, please note that residents may carry no more than \$5.00 on their persons at any given time.

Personal Items

To maintain a safe environment, all personal items being brought to CADD residential must first be checked by a nurse or supervisor.

CADD Residential Clothing List

General

- Socks, underwear
- Pajamas
- Long sleeve shirts or t-shirts
- Pants / jeans or shorts
- Bathing suit
- Shoes / sneakers
- Slippers

Winter

- Hat
- Gloves
- Snowpants
- Boots
- Coat

Miscellaneous

- Can bring their own bedding, otherwise bedding will be provided.
- Towels / face cloths will be provided.
- Toiletries are provided unless residents have purchased preferred products

Residents wash their clothing at the house. As part of your child's practice of life skills, they will assist with their laundry under the supervision of a residential care counselor. All clothes should have your child's name marked on an inside collar or waistband. If you do not want your child's clothes washed here and prefer taking responsibility for maintaining clean laundry for your child, please inform your family therapist.

At times, we may ask you to take home some clothing due to limited storage space and seasonal changes. We thank you for considering our needs in this area.

Finally, despite our best efforts, articles of clothing are occasionally misplaced, damaged, or lost.



Items not permitted within the houses:

- Any item containing alcohol including aerosol sprays
- Knives or any item that may be used as a weapon (e.g., baseball bat)
- Cigarettes, vapes, lighters, or matches
- Alcohol, drugs, or substance-use paraphernalia
- Pins, needles, thumbtacks
- Plastic bags
- Pornographic, violent, drug-oriented, or other inflammatory, offensive magazines, posters, literature, or outerwear (e.g., t-shirt, jacket)
- Clothing with reference to sex, violence, drugs, or alcohol
- CDs, DVDs, video, or audiotapes of a violent or sexually explicit nature
- Items containing glass or ceramic.

Items permitted in bedrooms:

- Personal bed linens*
- Blankets, comforter*
- Posters
- Pictures (without glass in frames)
- Books, magazines*
- Special toys, stuffed animals, etc.
- Radio, CD player, tape recorder (All electronic equipment is required to be checked by the hospital electrician prior to use.)
- Musical instruments

Items permitted in the house, but will be locked in the staff office when not in use:

- Personal hygiene products in non-breakable containers* (shampoo, soap, hair spray, deodorant, lotion, toothpaste, etc.)
- Curling irons
- Perfume, cologne

Items that may be discussed at intake:

- Special snack foods
- Electronics

** Signifies items provided by the residential programs, but may be substituted with personal products, if desired.*

Thank you.



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