



Dear Volunteer,

Welcome to Clearbrook, where our mission is to be a leader in creating innovative opportunities, services, and supports to people with disabilities. I hope you find your experience with us to be rewarding.

Since 1955 when a group of parents joined forces to create a place for their children to learn, Clearbrook has grown to include programs across the span of life for thousands of children and adults with intellectual/developmental disabilities and supports for their families.

Currently, Clearbrook has more than 50 facilities that offer an array of day and residential services, job training and employment services and clinical services for adults. The organization's footprint continues to expand with early intervention and home-based services provided in family homes in numerous counties.

In keeping with our mission, we strive to make the needs of all children and adults with disabilities and their families known to our legislature. The need will always be greater than the resources and we must be their voice.

We cannot do our job alone. We are always seeking new relationships with families, volunteers, interns and supporters. Together, these partnerships build a strong foundation on which the organization continues to build.

On behalf of all of us, I appreciate that you have chosen to be a part of the Clearbrook family. I look forward to meeting you, and I hope you find this Orientation Guide useful as you get to know our organization and, most importantly, the individuals and families who look to us for services and supports.

Tony Di Vittorio
President

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About Clearbrook

Clearbrook is a private, not-for-profit agency, dedicated to providing services to infants and toddlers with developmental delays and children and adults with intellectual/developmental disabilities. Our goal is to enable individuals who have disabilities to achieve their milestones and goals. We are glad that you have joined us in this important work.

Clearbrook was established in 1955 as a school for children with developmental delays by a group of parents who were unable to find schooling or services for their children. The first Clearbrook classes met in a barn in Rolling Meadows. Since that time, the agency has continued to grow and currently includes more than 50 facilities and supports more than 8,000 individuals and their families.

Clearbrook offers the following services/programs:

Home-Based Services (children and adults)

Children's Services

- Child and Family Connections (CFC)
- CHILD Therapy Services
- Take A Break Volunteer Program
- Family and Community Autism Resource Room

Adult Services

Residential Services

- Intermediate Care Facilities for Individuals with Intellectual/Developmental Disabilities (ICF/IID)
- Community Integrated Living Arrangements (CILA)

Day Services

- Developmental Training
- ACES (for aging adults)
- CAP (for persons with autism)
- CHOICE
- McHenry Naturally Gifted
- Pursuit
- PAL (Partners in Adult Learning)
- Community Employment Services

Clinical Services

- Behavioral Services
- Counseling
- Occupational Therapy
- Physical Therapy
- Speech and Language Therapy Services

Whether you have just started volunteering or have been at Clearbrook for a while, we are confident that you will find our agency a rewarding place in which to contribute your time.

This guide was created in order to give you some basic knowledge of the services that we provide and the clients that we serve, along with some initial advice to ensure that you and the clients have a great experience together. It contains only general, introductory information and is not intended to be comprehensive. If you would like to receive further training or information on a particular area, please speak to the Volunteer Services Coordinator, who can assist you with finding resources.

About Being a Volunteer

In addition to sharing your time and energy, these are some things we ask of you prior to, or during, your volunteer experience. . . .

Tuberculosis Testing

For the safety of our volunteers, clients, and staff, Clearbrook requires that all recurring direct service volunteers have the one-step Mantoux tuberculin test initiated prior to volunteer assignment or no later than 30 days after volunteer assignment.

You will need to have the test (a small amount of serum injected under the skin) at an elected time and it will need to be evaluated in 72 hours, as directed. This test is administered at no cost to you.

If you have had a reaction to tuberculin testing in the past, we will allow you to obtain a chest x-ray at one of the clinic or hospital sites that serves Clearbrook staff. The x-rays, if needed, are also free of charge to you. Please consult with the Volunteer Services Coordinator or the Human Resources Manager for further information.

Mantoux tests are administered by appointment with registered nurses employed at Clearbrook. Please consult with the Volunteer Services Coordinator or your supervisor for assistance in scheduling these appointments. Failure to complete this requirement may make you ineligible to volunteer.

Criminal Background Checks

All recurring direct service Clearbrook volunteers and unpaid interns must consent to a criminal background check. This must be done prior to or on the first day of service with Clearbrook. The type of background check that we will need to complete depends on the program in which you are working.

Some regulations specify a list of "Disqualifying Conditions" which are criminal convictions that prohibit potential volunteers from working with people with intellectual/developmental disabilities. If your background check returns with a conviction specified on this list, your service will be terminated immediately. The only exception to this is if you've already applied for and received a waiver that has been issued by the Illinois Department of Public Health or Illinois Department of Human Services.

Training

We want you to have the best possible experience while volunteering at Clearbrook. To enhance that experience, we provide our volunteers with training to assist them with the services that they will be providing. We are also governed by several regulatory and accreditation agencies that may require that we provide more specific training to persons volunteering in certain programs.

In addition to the annual mandatory requirements, volunteers are welcome and encouraged to attend trainings through the Clearbrook Training Department to learn more about our clients and how we strive to provide them with the best services possible. If there is an area in which you would like to receive more training, please don't hesitate to ask one of the Clearbrook managers, or your Volunteer Services Coordinator for assistance.

Annual Training Requirements for all recurring direct service volunteers:

- Bloodborne Pathogens (Preventing Disease Transmission)/Fire Safety
This training is completed online via webinar. Go to www.clearbrook.org, click on the Training tab and then choose "Training for Clearbrook Staff" from the drop-down menu.
- Rule 50 (Preventing Abuse and Neglect) Self-Study Packet
Your first packet is included at the end of this guide. Your site supervisor and the Volunteer Services Coordinator can then provide you with a copy of this packet annually. Each time, simply complete the questions on the last page, and return it to the Volunteer Services Coordinator.

Volunteer Policies and Procedures

As a volunteer or intern, there are some rules with which you must comply in order to protect the rights, safety, and health of the clients. There may also be some rules and procedures specific to the setting and possibly the person with whom you've been assigned to work. Those policies and procedures will be explained to you once a volunteer or intern assignment has been identified.

All volunteers are expected to respect Clearbrook's rules and those of our governing bodies. While not exhaustive, the following list of infractions could make you ineligible for further volunteer work:

violation of client rights, violating Clearbrook's Confidentiality Policy, client abuse, mistreatment, neglect or exploitation, theft or misuse of client or agency property,

failure to follow Clearbrook policies, unprofessional conduct, failing to follow safety instruction or procedures, performing unauthorized tasks for which you have not received training, failing to meet mandatory volunteer requirements.

Dismissal of a volunteer - volunteers who do not adhere to the rules and procedures of the organization or who fail to perform their volunteer assignments at a satisfactory level may be subject to dismissal. The termination will be immediate and could be subject to police intervention. Notice will be given at the discretion of Clearbrook's Volunteer Service Coordinator.

Clearbrook will request all regular direct care volunteers perform a written performance reviews assessments on an annual basis. Additionally, all volunteers will be surveyed once a year electronically by Clearbrook's Volunteer Service Coordinator.

Dress Code

While volunteering or interning at Clearbrook, you should dress with comfort and safety in mind. It is also important to remember that one of the most important functions that our volunteers and interns serve is to provide our clients with appropriate role models.

While most attire is acceptable, there are some articles that we request that volunteers not wear due to safety issues: high-heeled shoes, any sheer clothing, necklaces or dangling earrings, clothing that excessively accentuates the wearer's body, excessively baggy clothing, tank tops, halter tops, t-shirts with offensive, provocative, or inappropriate writing or advertising, and short shorts or mini-skirts.

About Interacting with Clearbrook Clients

Please use "People First" Language

A person's self-image is strongly tied to the words used to describe him or her. Most people who have been hospitalized even briefly understand how disconcerting it is to be known temporarily as "the heart in room 18" or "the liver in room 24." It doesn't take much imagination to understand how annoying it would be to hear yourself referred to as a "Down's" or a "paraplegic" for the rest of your life. It is no harder to say, "Charlie is a person with Down Syndrome" or "has a spinal cord injury" than it is to say, "Charlie is a 'Down's' or

'paraplegic'." The first suggests that disability is just one trait among many. The second implies that it summarizes the essence of all that Charlie is as a person.

People with disabilities are people first. Their disability is just one of many characteristics of the whole person.

Say:	Instead of:
people with disabilities	the handicapped or disabled
he has a cognitive disability	he's retarded
she has autism	she's autistic
she has a learning disability	she's learning disabled
he has a physical disability	he's a quadriplegic/crippled
typical kids, kids without disabilities	normal or healthy kids
brain injury	brain damaged
Uses a wheelchair	Confined to a wheelchair

Please respect our Clients' Rights and Confidentiality

During your volunteer time at Clearbrook, it is expected that you:

- Respect the rights of the clients, including the right to confidentiality, with whom you are working. Failure to respect the rights and confidentiality of the clients may result in loss of volunteering privileges.
- Promote an environment free of abuse, neglect, and exploitation. Information on abuse, neglect, and exploitation is contained in the self-study packet at the end of the Guide.
- While it is not anticipated that you will witness a violation of client rights or confidentiality during your service, in the event that you believe you've witnessed such an event, we require you to report it. If an on-site supervisor is not available, you can report client rights and confidentiality violations to Bernita Simani at 847.385. 5381.

Client Rights

Just as you have certain rights that are stated in the law, so do the clients of Clearbrook and all persons with disabilities. While they are similar to the rights of typical people without disabilities, they also extend further to assure that persons with disabilities are protected from being taken advantage of or abused, and also assured opportunities equal to those of others.

Clearbrook clients have a right to:

- Exercise their civil rights and privileges as dictated by state and federal law
- Receive services regardless of age, sex, race, religion, ethnic origin, marital status, disability, life style choice, or other groups protected by law
- Refuse services and seek alternative services
- Receive individualized services
- Privacy of self and records
- View their program and medical records
- Participate in service planning
- Have private and uncensored communication and visitation
- Be free from physical or chemical restraints and seclusion
- Receive prompt and professional medical and dental care
- Maintain and use personal property
- Maintain and use their money
- Not perform work unless they are being paid appropriate wages
- Voice complaints and grievances without reprisal
- Be free from abuse and neglect
- Have regular access to the phone
- Be informed of their rights and responsibilities in a language understandable to the client on an annual basis

Confidentiality:

It is the policy of Clearbrook, in compliance with federal and state law, that the right of each client to privacy and confidentiality in all matters be strictly obeyed. No information related to the clients, including pictures, may be shared or released to any person unless there is consent in writing by the client or their legal guardian. Volunteers and interns are not to request such a release.

You will be expected to read the Clearbrook Confidentiality Policy and sign an agreement to adhere to this policy as a condition of your volunteer or internship activities.

While in most circumstances you will not have access to the client's personal files, you may become aware of private, sensitive, or confidential information regarding the clients during the course of your service. It is your responsibility not to share or discuss any of this information with parties that are not employed by Clearbrook.

This policy is not intended to discourage you from discussing your experiences at Clearbrook. However, any discussion must be done in a manner that does not violate the privacy or confidential nature of client information. Things that should not be discussed with parties that are not employed by Clearbrook include, but are not limited to: client names, diagnoses/information about client's disabilities, addresses/phone numbers, information

about clients goals, service plans, or behaviors, and information about client's medications, medical history or medical treatment.

About Safety

During your volunteer time at Clearbrook, it is expected that you:

- Follow Clearbrook's workplace safety procedures to ensure your safety, the safety of Clearbrook's clients and of Clearbrook's staff.
- Complete your pre-volunteering tuberculin test within the established time frames.
- Perform only duties that you have been trained to provide. At no time should a volunteer or unpaid intern provide intimate personal care (i.e. toileting, showering), non-emergency medical services, emergency medical services (unless you possess valid certification), or physical aggression management.
- Report any unsafe or potentially unsafe situations to a supervisor as soon as they are identified.
- Don't allow yourself to be in a situation where agency staff cannot be accessed readily.
- Report any possible client abuse, neglect or mistreatment, as per Rule 50 of the Department of Human Services Administrative Code. See Appendix C.

Preventing Disease Transmission/ Universal Precautions:

A common myth regarding people with intellectual/developmental disabilities is that they are sick and that you can catch an illness from them. Individuals with intellectual/developmental disabilities have no more or no fewer health concerns than non-disabled individuals in the general population. However, since many individuals with intellectual/developmental disabilities live and work in congregate settings, the risk of exposure to illness can be much higher for both you and them.

To reduce the risk of transmitting or contracting a contagious infection, we ask that all volunteers and employees observe the principles of universal precautions. These principles are explained briefly below, and will be explained to you in much further detail in Bloodborne Pathogens class.

What are universal precautions?

Universal precautions are infection control guidelines designed to protect workers from exposure to diseases spread by blood and certain body fluids. Universal precautions stress that all patients should be assumed to be infectious for blood-borne diseases such as HIV and hepatitis B. Universal precautions should be applied to all body fluids when it is difficult to identify the specific body fluid or when body fluids are visibly contaminated with blood.

How can you prevent exposure to blood and body fluids?

Barriers are used for protection against occupational exposure to blood and certain body fluids. These barriers consist of:

Personal Protective Equipment (PPE) - PPE includes gloves, lab coats, gowns, shoe covers, goggles, glasses with side shields, masks, and resuscitation bags. The purpose of PPE is to prevent blood and body fluids from reaching the workers' skin, mucous membranes, or personal clothing. It must create an effective barrier between the exposed worker and any blood or other body fluids.

The most common PPE used at Clearbrook is gloves. It is only necessary to wear gloves when performing tasks in which you may come into contact with the clients' bodily fluids-- they are not necessary for casual contact. If you perform a task where you may need to wear gloves, it is important to remember that the gloves should only come in contact with the person with whom you are working. Always remove your gloves immediately upon finishing the task and wash your hands.

Engineering Controls - Engineering controls refer to methods of isolating or removing hazards from the workplace. Examples of engineering controls include: sharps disposal containers and bio-hazardous waste containers. Any materials that come into contact with potentially infectious bodily fluids should be disposed of in a bio-hazardous waste container, which are usually red or orange and are also identifiable by this logo:

Work Practice Controls - It refers to practical techniques that reduce the likelihood of exposure by changing the way a task is performed. Examples of activities requiring specific attention to work practice controls include: hand washing and cleaning commonly used equipment and areas.

The most effective means of preventing disease transmission is through proper and frequent hand washing.

Client Agitation and Aggression

It is important that you remember the following points:

- Volunteers and unpaid interns are not expected to intervene in the event that a client displays behavior that may affect his safety or the safety of others (also known as agitated or aggressive behavior).
- All program staff have been trained in methods of managing agitated and aggressive behavior. If you see signs of agitation or aggression, please contact a staff member as soon as possible.

The information presented in this section is not intended to frighten you or diminish your interest in volunteering at Clearbrook. The chance that you will be volunteering with an individual who becomes agitated or aggressive is not very likely. However, Clearbrook wants you to have an understanding of how to best handle a potentially volatile situation should you face one.

What are agitation and "aggressive behavior"? - Aggressive behavior can be defined as any behavior that puts the client at risk of hurting themselves or someone else. Agitation often precedes aggressive behavior. You may observe agitation in the client's body language, actions, or by what they are saying. Quick intervention when the client becomes agitated often prevents an aggressive incident. Should you observe signs of agitation, you should seek assistance from a staff person. Some signs of agitation might include:

- Loud verbalizations, shouting, or verbalizations in a different pitch or tone than usual.
- Fidgeting, pacing, or other unusual body movements.
- Facial expressions that indicate discomfort or anger.
- Any display of unusual behavior or sudden change in behavior.

What causes aggressive behavior? - The clients that receive services from Clearbrook are as diverse in personality and temperament as the general population. Many clients do not and have never displayed any type of aggressive behavior.

Behavior is communication. Some clients cannot or have a limited ability to express discomfort, pain, frustration, or annoyance with words, so they must use alternate means to let people know that there is something that is bothering them, or that they need your help or attention.

There are generally three accepted classes of causes of aggressive behavior:

- Physical- There are things that cause a person to feel discomfort or pain. Some examples of things that may cause physical discomfort are: injury, illness, hunger, thirst, fatigue, and temperature.
- Psychological- Examples of psychological factors that may prompt aggressive behavior are: missing family or loved ones, teasing, jealousy, etc.
- Situational- Examples of situational factors may include- being in an overcrowded area, noise, dislike of activity or task they are participating in, etc.

Unfortunately often times it is very difficult and even impossible to determine the reason why a person has become agitated. Therefore, rather than trying to find out what caused the situation, emphasis is best placed upon how we react to the situation.

What can I do if faced with a client that has become agitated?- As previously mentioned, we do not expect volunteers or unpaid interns to intervene and staff have been trained to handle these situations. However, there are some things that you can do to lessen the likelihood that an aggressive incident will occur until you are able to receive staff assistance:

- Don't draw attention to the client or their behavior
- The more attention you focus on the upset person or on yourself, the greater the chances that the situation may get out of control.
- Remain calm. Do not show feelings of anxiety, fear, or anger. Showing these feelings will not help to calm the client.
- Do not put the client in a situation where they feel cornered.
- Never make a promise that you cannot keep.
- Never offer someone a reward for calming down.
- Rather than asking "why" a person is upset, it is best to ask "what happened?"
- Use your voice to exert a calming influence.

What can I do if faced with a client that has become aggressive?- If a client becomes aggressive, you should remove yourself from the situation and get staff assistance as quickly as possible. If there are other clients present and you are able to do so, you should remove them from the area as well.

Health Related Emergencies

It is important to remember the following points:

- Volunteers should only perform tasks in which they have been trained. If you are not currently certified in CPR, First Aid, etc., you should not perform these tasks.
- Always get staff assistance immediately when faced with a medical emergency. They have received training to handle these situations.
- If you are working with a client that has become injured or sick, please make sure to use universal precautions (gloves and hand washing) if you are at risk of coming in to contact with any potentially infectious material.

A volunteer can best assist the clients in protecting them from health-related emergencies. Here are some things to consider when working with the clients:

- Some clients have medical conditions, such as diabetes, choking risks, or allergies that require a specialized diet. Check with a staff person prior to offering a client any food or drink that is not provided by Clearbrook to ensure that the client is able to have it.
- Many clients, due to either illness or medication, may have unusual sensitivity climate extremes and sunlight. Make sure that if you are going outside that the client is dressed appropriately for the weather and protected from the elements.
- Be aware of your surroundings and recognize potential safety hazards. Inform staff immediately of dangerous situations.
- Report any injuries, symptoms of sudden illness, and unusual behavior to staff immediately. Symptoms of sudden illness may include: vomiting, changes in skin color, sweating, pain, difficulty breathing, changes in consciousness, and seizures.

Seizures- Many clients at Clearbrook have seizure disorders. Seizures are caused by disruptions of electrical activity in the brain due to a number of underlying conditions. Some seizures are more severe than others. They can range from mild blackouts that may appear as though the person is daydreaming to sudden, uncontrolled muscle contractions (convulsions) lasting several minutes.

While it may be frightening to you at first to see someone have a seizure, remember that most seizures only last a few minutes and the person usually recovers without any problems.

If you should witness a seizure, you should do the following:

- Remain calm
- Obtain staff assistance
- Do not leave the person alone
- Loosen any tight fitting clothing
- If available, place some sort of padding (e.g. clothing) under the person's head and remove any potentially harmful objects from the area.
- Turn the person on their left side to provide an airway. You may observe vomit, blood or saliva drain from his mouth.
- Do not attempt to restrain the person's movement
- Never put anything in the person's mouth. Contrary to popular belief, they will not swallow their tongue.
- Do not give the person anything to eat or drink following the seizure.
- Reassure the person having the seizure
- If able, note when the seizure began and ended.

Fire, Environmental, and Weather Related Emergencies

Because of the uniqueness of Clearbrook's different programs and sites, each site has a different safety or evacuation procedure for fire, severe weather and tornado warnings, and bomb threats. You will be trained at your volunteer or internship site as to the proper procedures in these circumstances. It is important for your safety and the safety of the clients to follow any direction given when there is an emergency situation.

Appendix A: General Guidelines for Fostering Positive Interactions

Whether being at Clearbrook is your first experience with persons with intellectual/developmental disabilities or you come to Clearbrook with experiences you can expand upon, there are some basic principles that will provide both you and the clients with the best experiences.

The following guidelines are designed to increase your comfort level when speaking and interacting with people who have disabilities. They are also intended to give you ideas on how to "teach teachable moments" to make the most out of your interactions with the clients.

The best thing to remember is that if you do not know what to do or say: ASK. Allow the person with the disability or the person's staff to assist you.

- When talking with someone who has a disability, speak directly to that person.
- Treat adults as adults. Call a person by his or her first name only when you're extending this familiarity to everyone present.
- Relax. Try starting a conversation with a topic that you think the client may be interested in. If the client doesn't respond, you can repeat the question. Point to an object to encourage the client's response.
- Don't be embarrassed if you happen to use accepted, common expressions, such as "see you later" or "got to be running along," that seems to relate to a person's disability.
- Don't be embarrassed if you cannot understand the client. Let him know that you didn't understand or request that he slow down or repeat what he said. It may be helpful to point to something that will assist with your understanding or ask a staff person for assistance. Don't give up! Your persistence will pay off for both of you.
- People with disabilities are entitled to the courtesies that you extend to anyone. This includes their personal privacy. If you don't generally ask people about their complexions or their incomes, then don't ask people with disabilities about theirs.
- You may find that the client asks you a question that you find to be inappropriate or embarrassing. Part of interacting with the clients is being a role model for appropriate behavior. Politely let the client know that the question or remark was inappropriate and suggest another topic.
- You may find on occasion that a client interrupts your conversation with others or attempts to monopolize your time. If these types of occurrences happen, use them as teaching opportunities for appropriate social skills. It is absolutely fine to excuse yourself from a conversation or let the client know that you are currently talking with someone else, but you'll gladly talk to them after you've finished your conversation.

- If you don't make a habit of leaning or hanging on to people you're with, then don't lean or hang on someone's wheelchair. Wheelchairs are an extension of personal space for people who use them.
- You may offer assistance to a person with a disability, but wait until your offer is accepted before you help, and listen to any instructions the person may want to give.

Appendix B : Interacting with people with various disabilities

Many people feel uncomfortable around individuals with disabilities. Much of this discomfort stems from lack of personal contact with people with disabilities and a sense of awkwardness and uncertainty as to how to speak and act in their presence.

The following section offers suggestions for increasing effective communication and reducing anxiety when interacting with people with specific disabilities.

Hearing Impairments

- Do not make assumptions about a person's ability to communicate or the way in which they do it. Always ascertain which communication medium the person intends to use.
- When interacting with people who prefer lip reading, use a well-lit, glare-free area.
- Face the person directly and continue speaking at a normal volume and rate.
- Rephrase sentences rather than repeat them.
- Do not cover your mouth or look away from the person, such as to take notes, while you are talking.
- Communicate with gestures, signs, or pictures if necessary
- When a sign language interpreter is present, it is best to face the person and speak normally.

Visual Impairments

- Ask if any particular assistance is needed.
- Orient the person to the area, explaining where major furniture is located. If the person has been there before, you should inform him/her of any changes or new obstacles.
- Keep doors fully open or closed to prevent accidents.
- Offer to read written information for a person with a visual impairment, when appropriate.
- If you are guiding someone, let him/her take your arm just above the elbow, and guide rather than lead or propel the person. Give him/her clear instructions such as 'this is a step up' as opposed to 'this is a step.'
- When giving directions, use specific words such as "straight ahead" or "forward." Refer to positions in terms of clock hands: "The chair is at your 2:00." Avoid vague terms such as "over there."
- Don't assume the person will recognize you by your voice even though you have met before. Identify yourself by name, maintain normal voice volume, speak directly to the person, and maintain eye contact.

Cognitive and/or Speech Impairments

- Listen patiently and avoid completing sentences for the person unless she/he looks to you for help.
- Don't pretend to understand what a person has said just to be polite. Ask them to repeat the statement or work together to find another mode of communication
- Ask the person to write down a word or point to an object if you're not sure what she/he is saying.
- Allow the person time to answer, it may take them longer.

Mobility Impairments

- Ask if assistance is required.
- Do not remove a person's mobility aid, for example crutches, without the person's consent.
- When talking to someone who is in a wheelchair and the conversation continues for more than a few minutes, sit down or kneel to be eye level. This avoids neck strain and is much more positive.
- Don't lean on a person's wheelchair unless you have his/her permission--it's his/her personal space.

Appendix C: Clearbrook Volunteer Abuse, Neglect, Rule 50 Training Packet

Instructions: Please read the following information pages carefully and then complete the quiz that is attached. Return the completed quiz to your on-site supervisor or the Volunteer Services Coordinator for signature; You can contact your supervisor or the Clearbrook Training Department with any questions (847.870.7711).

What is the definition of abuse?

- There are several types of abuse we need to be watchful for: physical abuse, mental abuse and sexual abuse.
- Physical abuse is something that a staff member or a caretaker does to a client that is a wrong, a harm, or an injustice, the effect of which can or does damage a body part of a client. Examples include: hitting, pinching, shoving, slapping, punching, kicking, biting, hair pulling, etc.
 - Physical abuse causes bodily harm. Bodily harm is any injury, damage, or impairment to a client's physical condition, or making physical contact of an insulting or provoking nature with a client
 - Accidental injury is not considered physical abuse (although it should still be reported to a supervisor)
 - You do not need to see visible proof or injury (red marks, bruises, scratches, etc.) in order to be able to report physical abuse. Often there will not be visible evidence.
- Mental abuse is harm caused by an act or omission of or by a staff member or caretaker that causes or could have caused emotional distress or maladaptive behavior, including the use of words, signs, gestures, threats or other actions toward or about and in the presence of a client (s). Examples include: calling clients names, swearing at or yelling at clients, threatening clients with harm or punishment, locking clients in rooms/closets, purposely scaring or being mean to clients to control their behavior, etc.
 - Mental abuse does not have to be verbal. It can be difficult to prove but it should always be reported.
 - Just because someone is a staff member, parent, family member, or caretaker of a client does not mean that they are allowed to mistreat a client. All families receiving services from Clearbrook programs must adhere to Clearbrook's abuse and neglect policies and procedures.

- Sexual abuse is any act of sexual contact, sexual penetration, sexual coercion, sexual exploitation, or intimate physical contact of a client by a staff member or caregiver. Examples include: intercourse; touching of genital areas for pleasure, gratification, or arousal; forcing clients into sexual acts.
 - Effective October 2, 2015, sexual abuse also includes an employee's actions that result in the sending or showing of sexually explicit images to an individual via computer, cellular phone, electronic mail, portable electronic device, or other media with or without contact with the individual; or an employee's posting of sexually explicit images of an individual online or elsewhere whether or not there is contact with the individual.
- Sexual abuse does not include allowing individuals to, of their own choice, view movies or images of a sexual nature, or read text containing sexual content unless the individual's guardian prohibits the viewing of such movies or images or reading of such material.
 - "Sexually explicit images" includes, but is not limited to, any material which depicts nudity, sexual conduct, or sadomasochistic abuse, or which contains explicit and detailed verbal descriptions or narrative accounts of sexual excitement, sexual conduct, or sadomasochistic abuse. This does not include those images contained in sex education materials used by employees to educate individuals.
 - There is no such thing as a consensual sexual relationship between a client and a staff member or caregiver.
 - Many staff members and caregivers engage in personal care activities with clients (changing, toileting, etc.) that involve touching of clients' genital areas. This should NOT be construed as sexual abuse when it is done within the scope of daily living activities or job duties.

What is the definition of neglect?

- Neglect is the failure by a staff member or caregiver to provide adequate medical or personal care or maintenance to a client that could have resulted or does result in physical or mental injury to a client or in the deterioration of a client's physical or medical condition. Examples include: not feeding a client, not giving a client needed medication, leaving a client alone who must be under supervision, not adequately dressing a client for weather, not taking a client to a doctor or dentist when needed, not providing a safe home/program environment for a client, not changing or toileting a client, etc.
 - You should report suspected neglect even if the client is not injured or has not suffered. Neglect is reported when injury or harm did occur or could have occurred.

What is the definition of exploitation?

- Exploitation is taking advantage of a client and gaining something of value (financial or otherwise).
 - Examples include: taking a client's money, using client funds, making clients do work without pay

What is Rule 50 and what does it cover?

- Rule 50 governs all facilities/agencies licensed by the State of Illinois to provide services to people with disabilities. This includes services provided to clients in their own homes as well as in Clearbrook homes, programs, and facilities. The rule specifically explains the procedures for managing allegations of abuse and neglect.
- The Rule states that if an official State investigation finds substantiated evidence of physical or sexual abuse, financial exploitation, or egregious neglect of a client, that employee's (the abuser's) name will be placed on a registry (computer database) and the employee cannot work for a facility/agency that serves people with disabilities in this State. Names will not be placed on the registry for substantiated findings of mental abuse or simple neglect; however, staff can face disciplinary action, up to and including termination, for these offenses.
- The State of Illinois' Office of the Inspector General (OIG) is the agency responsible for investigating most abuse/neglect claims by staff against adult clients. OIG also has a domestic branch, which is responsible for investigating claims by family members or caregivers of adult clients in homes in the community. **The OIG Hotline number is 1.800.368.1463.**

You should report any witnessing, knowledge, reports, or suspicion of abuse or neglect of a client to your supervisor (or the Volunteer Services Coordinator) immediately, regardless of the client's age, program, or who you suspect may be abusing or neglecting the client.

Who Should I Report?

- You should report parents, family members, caretakers, paid caregivers, volunteers, Clearbrook employees, or anyone else you suspect may be abusing or neglecting a client.
- In DCFS cases, there may be circumstances (based on who is suspected of abusing/neglecting a child) that would prevent DCFS from investigating. A report should still be made to the DCFS Hotline and to your supervisor.

What is DCFS and who does it cover?

- The Department of Children and Family Services (DCFS) is the State agency responsible for conducting investigations of child maltreatment in Illinois.
- DCFS conducts its own investigations of abuse or neglect of clients under the age of 18 in homes in the community. The DCFS Hotline number is 1.800.25.ABUSE.
- **You should report any witnessing, knowledge, reports, or suspicion of abuse or neglect of a client to your supervisor (or another supervisor) immediately, regardless of the client's age or who you suspect may be abusing or neglecting the client.**

What is a Required Reporter?

- A required reporter is someone who, by law and by agency policy, is required to report any witnessing, knowledge, reports, or suspicion of abuse or neglect of a client.
- You are a required reporter. Every employee/staff member of Clearbrook is also a required reporter. Other mandated reporters include vendors and contractors.

What gets reported to the OIG or DCFS hotline?

- **When you witness, suspect, or are informed of a possible case of abuse, neglect, or exploitation, that should be reported to your supervisor and then to the hotline.**
- To the extent that it is available, the following should be reported:
 - Names, DOB/age, gender, etc. for the client and suspected perpetrator(s)
 - Address and contact info for the reporter, the accused, the victim(s)
 - Information on the incident (what occurred? How did it occur? Where did it occur? What, if anything did the client and/or the accused say about it?)
 - For DCFS, they may also ask for information on siblings and others in the home.
 - You (and/or your supervisor) will also likely be asked for phone numbers where you can be reached. Your information will be kept confidential by Clearbrook, OIG, and DCFS.
 - While the alleged perpetrator will not be told who made the report, s/he may be able to deduce or guess this information.

How would I know if a Client is being Abused or Neglected?

- There are several ways you might become aware of possible abuse or neglect of a client.
 - You may witness it yourself.
 - Your client may tell you about (report) it to you.

- You may hear about it from another staff member, family member, volunteer, or caregiver.
- You may simply suspect it due to something you see, hear, or observe.
- In any of these situations, you should report to your supervisor (or another supervisor) immediately. You can report to anyone in a supervisor role (Director, Coordinator, VP, Volunteer Services Coordinator etc.) if you are unable to immediately reach your own supervisor.
- Additionally, you can and should contact the police/paramedics (911) if a situation warrants it and a client's health, life, or safety are in immediate danger.

What are some possible indicators of abuse or neglect?

- The following MAY indicate that a client is being abused or neglected. They may also indicate a health or psychiatric concern that warrants getting medical attention:
 - Physical marks on the client's body (e.g. cuts, bruises, burns, bites)
 - Physical marks on areas of the body that are difficult to injure (e.g. bruises, burns, cuts on the back)
 - Physical marks that are unusual for the specific client
 - Physical marks that no one can explain
 - Blood, semen or other physical markings on the client's clothing, bedding, towels, or in other areas of the environment
 - Torn or missing clothing
 - Bruises in genital area
 - Genital discomfort
 - Unusual or prolonged crying, screaming, or other form of noise made by the client
 - Unusual or prolonged crying, screaming, or other form of noise made by the client only with a particular staff member, family member or caregiver
 - Unexplained, unusual knowledge or new words of a sexual nature that the client had not previously known
 - An interest in a new sex-related topic that cannot be explained
 - Negative changes in behavior patterns (e.g. increased aggression, sudden withdrawal from others and activities, return to engaging in old behavior challenges, changes in sleeping habits, changes in eating habits)
 - Unusual or more extreme displays of fear (e.g. fear of being alone, fear of being with specific persons, fear of being touched, fear of going to a particular place, fear of specific objects)
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- Sudden changes in mood (e.g. increased irritability, sadness, anger, apathy, fear)
- Negative changes in behavior patterns, unusual or more extreme displays of fear, sudden changes in mood only when specific persons are present or only after being with specific persons

Recognition and early reporting are a form of prevention; we can help to prevent further and more serious incidents of abuse and neglect if we report early and quickly.

What happens if there is an abuse/neglect investigation?

- For all cases, Clearbrook requires a written statement from you. Your supervisor will give you guidance on how to complete this statement.
- If you are the person who reports the suspected abuse/neglect, you will likely be interviewed.
- If you are a potential witness in an investigation or the reporter in an investigation, you are obligated to speak with Investigators and must tell them the truth. Remember that we are all working to protect the clients.