



PARENT/GUARDIAN PLACEMENT AGREEMENT

I, _____, as parent/legal guardian of _____ agree to have her **apply** to Doors to Freedom's program. If accepted, I will encourage full participate in the program as a resident of Doors to Freedom.

Should she be accepted into the program, I also agree to the following conditions regarding her placement at Doors to Freedom's residential home:

(Please initial each, indicating your agreement.)

PROGRAM PARTICIPATION *(insert first name of child where applicable)*

1. _____ To allow Doors to Freedom staff to provide a program for _____ * as this program finds necessary and in her best interest. *(the personal pronoun her will replace her name from this point foward)
 - a. To support and encourage her in all of Doors to Freedom's Program Phases:
 - i. Phase I "Assess" (6-8 weeks)
 - ii. Phase II "Change" (12-24+ months)
 - iii. Phase III "Transition" (3-6 months)
 - b. This includes the use of discipline/behavior management techniques as defined in the Residential Manual.
 - c. This includes participation in parts of the program deemed appropriate by Doors to Freedom, including, but not limited to: counseling, therapy, education, life skills, outings, personal health care instruction, case management, recreation, etc.
2. _____ To permit Doors to Freedom to teach on topics including human sexuality and sexually transmitted diseases.

COOPERATION AND COLLABORATION

3. _____ To cooperate with Doors to Freedom in all matters concerning her welfare of, approved or unapproved visitation, correspondence, telephone calls, program schedules and scheduled appointments.
4. _____ To participate and support Doors to Freedom in her Individualized Growth Plan team meetings.
5. _____ To furnish necessary and appropriate clothing and/or clothing allowance during her stay at Doors to Freedom. *(Doors to Freedom may be able to assist with clothing based on donated inventory at time of application and/or residency)*
6. _____ To be financially responsible for any financial charges incurred for any court costs incurred.
7. _____ To allow Doors to Freedom staff to keep her funds locked in safe and logged as funds are being used. Where funds are given to her, funds will be logged on the Resident Account Log [IN27] in her file and kept in safe. A parent/guardian may add money to a resident's individual account, but her account **may not** exceed \$50 total in her account at any time. Receipts will be kept with Residents Account Log[IN27] for all purchases made by her. NO MONEY is allowed to be kept on her person or in her room.



8. _____ To encourage her to stay in the program and cooperate with Doors to Freedom staff.
9. _____ To cooperate with Doors to Freedom in case of run away, and not interfere with attempted recovery of her.
 - a. To encourage her to talk to Doors to Freedom about issues that arise, so other placement options can be sought if the Doors to Freedom residence is not the right fit.
 - b. To not hold Doors to Freedom responsible for any injury occurring to, or any action taken by, when she has chosen to run away. This includes, but is not limited to, returning to pimp/trafficker, drug/alcohol use, sexual activity resulting in pregnancy or diseases, or damage to property.
 - c. *Doors to Freedom is not a lock-down program.* However, there are specific guidelines set up in regards to where she can physically be. Leaving an assigned area on campus may constitute a run away. If the resident leaves the property or established boundaries in an attempt to run away, Doors to Freedom will not be held responsible. Also, Doors to Freedom cannot guarantee availability of a bed once a resident runs away. If the resident is found and desires to return to the program, she will return to Phase I of the program **if** accepted back by Doors to Freedom. Doors to Freedom reserves the right to deny permission for her to return to the residence. Doors to Freedom will not interfere with the natural consequences of any law that may have been broken or any probation guidelines that may have been violated.
10. _____ To assist with transportation of the resident to a different living situation upon program termination (for any reason) within 24 to 48 hours.

RELEASE

11. _____ To release Doors to Freedom and Doors to Freedom staff/volunteers from liability of any injury or problem that occurs while in the care of Doors to Freedom.
12. _____ To not hold Doors to Freedom responsible for any personal items left behind, lost, or stolen.
13. _____ To indemnify and hold the program harmless from any claim or action that may be asserted against the program regarding her clothing or personal property during her stay at Doors to Freedom.
14. _____ To allow the resident to leave the grounds of the program **ONLY** when attended by staff or program approved volunteers for staff approved off-campus activities, including but not limited to healthcare appointments, therapy, exercise facilities, church services, school outings/field trips, recreation, visitation, and/or shopping.
15. _____ To allow Doors to Freedom the authority to delegate transportation or accompaniment by an approved Doors to Freedom volunteer or staff member.
16. _____ To allow a member of her therapeutic team (including DSS/DJJ Case Worker, Victim Advocate, etc.) to transport the resident to appointments when necessary.



17. _____ To allow Doors to Freedom to sign on behalf of the parent/guardian as needed for recreational activities.

HEALTHCARE CONSENTS

18. _____ To authorize Doors to Freedom to take whatever actions are deemed necessary or advisable in the best interest of her health and welfare, in case of an emergency where time and circumstances make it impractical to secure the prior approval of the parent/legal guardian. *(The program agrees to contact the parent/legal guardian at the earliest possible time.)*
- a. The authority shall include, but is not limited to, movement from one program to another, hospitalizations, surgery, and securing healthcare, and relocation to another program in the event that evacuation is deemed necessary in an emergency situation.
19. _____ To be financially responsible, as the parent/guardian, for all charges for healthcare services, and not expect Doors to Freedom to pay for her healthcare services and needs.
20. _____ To allow Doors to Freedom to coordinate basic health care of the resident, including assessment, 24 Hour Body Check [HC02], the dispensing of medication, providing First Aid, administering CPR, if needed or other basic healthcare response as needed. Please NOTE: **Doors to Freedom is not a healthcare facility.** *All prescribed medication will be kept locked by Doors to Freedom. All prescriptions will be administered by Doors to Freedom as recommended by the prescribing healthcare professional and logged appropriately. Over-the-counter medication will be administered by Doors to Freedom as needed and as recommended by the medication's instructions. Over-the-counter medications will also be locked and logged.)*
21. _____ To allow a Doors to Freedom staff to go into a healthcare room with resident and receive doctor's orders and instructions needed for care. This is so we may help care and advocate for the resident.
22. _____ To allow healthcare professionals to provide radiological and other tests, healthcare diagnosis or treatment, dental diagnosis, vision diagnosis or treatment, emergency care, hospitalization, or mental health care (diagnosis, assessment, and/or treatments). (This care will be provided upon recommendation of licensed healthcare professionals within licensed facilities.)
- a. To authorize any healthcare professional to discuss past, present, or future physical or healthcare condition with Doors to Freedom.
 - b. To make available to Doors to Freedom any healthcare information, opinions, or records from healthcare professionals that Doors to Freedom may need to care for this resident.
 - c. To be financially responsible for healthcare care, unless otherwise specified at the time of admission.
23. _____ To allow Doors to Freedom and community partners to exchange information regarding care recommendations, on a "need to know" basis. *(Keep in mind that confidentiality is maintained unless there is an indication of potential harm to self or others. At that time, the appropriate authorities will be contacted.)*
- a. **NOTICE OF PRIVACY PRACTICES: Effective on the date written below.**
 - i. *This document details resident rights involving release of information: routine uses and disclosures of protected health information as well as an individual's rights and the provider*



or hospital's duties with respect to protected health information. (Protected Health Information (PHI): includes any part of a resident's healthcare record or payment history.)

- ii. **Information about treatment issues** (e.g., the coordination or management of PHI with a third party) - With written consent, Doors to Freedom and specified third parties will exchange the resident's PHI, as needed to coordinate care.
- iii. **Submission of PHI for Payment** - Because we are not a medical facility, Doors to Freedom is not involved in payment of healthcare bills. Any submission of PHI for payment needs must be coordinated with the healthcare provider.
- iv. **Exceptions to Confidentiality** - Confidentiality may not be maintained when there is written consent, risk of harm to you or another, disclosure of child/elder abuse, or court orders which require the release of PHI.
- v. **How Sensitive Health Information is handled** - All healthcare and therapeutic records are kept in double locked areas, accessible only to staff on a need-to-know basis.
- vi. **Right of Access to healthcare records** - Resident's have the right to access your healthcare records with prior approval from Doors to Freedom.
- vii. Privacy Contact: Sharon Rikard, Executive Director of Doors to Freedom
Sharon@doorstofreedom.com

VISITATION/COMMUNICATION

- 24. _____ To visit with the resident (off site) as approved by parent/guardian and Doors to Freedom staff and to abide by all policies of visitation and communication during off-site visit. ONLY approved visitors may visit and NO social media of any kind should be accessible during the visit.
 - a. *We ask that you respect our program's goals, policies, and schedule in your communication, so as not to interrupt her growth.*
- 25. _____ To allow Doors to Freedom to monitor incoming and outgoing mail, telephone calls, and visitors according to the Resident Manual (see page 22, 23 and 24 of the Resident Manual).
- 26. _____ To allow Doors to Freedom to search all materials brought into the home (including mail) and remove any unapproved items. This is out of concern for safety of all residents and staff.

SAFETY AND SECURITY

- 27. _____ To work with Doors to Freedom in maintaining safety and security.
 - a. To **not** share any information learned about Doors to Freedom regarding its location, staff, program, or participants. (If someone is requesting information about Doors to Freedom for a good reason, please direct them to contact us by phone or through our web-site.)
 - b. To **not** allow 3 way calls, give out the mailing address, or bring anyone to the residence.
 - c. To let us know immediately and encourage her to talk to a staff member, should the resident indicate that she is considering leaving without notice or harming herself or others. *(With all this in mind, there are certain things that we cannot control. If a resident leaves without approval, puts herself or another person in danger, or has a major healthcare issue, rest assured that we will*



contact the proper authorities to take care of her. We will also make every effort to contact you as soon as possible.)

28. _____ Physical intervention and therapeutic holds, learned through the certified CPI instructor, will be used to limit a residents movement in the event that a resident is harmful to herself or others.
29. _____ To hold in confidence all matters concerning Doors to Freedom, residents, volunteers/staff, and the location of the residents.
- a. To **not** take photos of any person or of the residence.
 - b. To **not** share information about residents (including your own) on social media.
 - c. To **not** speak to the media regarding Doors to Freedom, or regarding your resident's involvement with Doors to Freedom, trafficking, or any court cases. Direct any questions from the public or press to Doors to Freedom's Director.
30. _____ To allow photos/videos to be taken of my child for the following circumstances:
- a. Photo taken for intake purposes, and stored in her file.
 - b. Photos/videos taken to document any incident that arises.
 - c. Doors to Freedom has security cameras in general areas for the safety of all residents.
 - d. *Doors to Freedom will never use any photograph or video of my child without my written authorization or a court subpoena.*
31. _____ I understand that this is a voluntary program, and Doors to Freedom reserves the right to admit, deny admittance, or release any resident for any reason that we deem appropriate. The parent(s)/guardian(s) also have the right to remove their daughter/resident for whatever reason they choose, unless official court orders or limitations of some type prohibit it.

You will receive regular updates from staff regarding her progress in the program. Should you have questions or concerns at any time, you may feel free to contact us during regular office hours. If we are unavailable, leave a message and we will respond to you as soon as we are able.

Check the option that indicates your level of agreement:

- I have read this form, I have reviewed any questions I have with a Doors to Freedom representative, I fully understand it, and I agree to be legally bound by it.*
- I do not agree to this form.*

Parent/Legal Guardian Signature

Date

Phone: _____

Email: _____