Welcome to the Center for Autism and Developmental Disabilities (CADD) at the Emma Pendleton Bradley Hospital, a Lifespan partner and a major teaching hospital of The Warren Alpert Medical School of Brown University.

We know that having a child admitted to the hospital can be extremely stressful, especially if the child has special needs. We hope this handbook will answer some of your questions and help lessen your worries about your child’s hospitalization by explaining who we are, how we work, and what to expect from us after your child has been admitted to our program.

As you will learn from reading this handbook, the CADD is a unique hospital program that serves only those children and adolescents who present with both behavioral/emotional problems and a developmental disability. The CADD Inpatient Program offers unique and highly specialized clinical services for children and adolescents between the ages of 4 and 21, who present with serious behavioral/psychiatric disorders in addition to a developmental disability (such as autism, intellectual disability, or other neurodevelopmental handicaps). Many of these children and adolescents also present with co-existing medical complications. The CADD Inpatient Program has a national reputation for outstanding clinical care and has treated children and adolescents from 20 states across the country.

Successful treatment requires the involvement of many different types of professionals. Patients within the CADD are cared for by a large, well-qualified, and highly experienced clinical team that understands children with special needs and appreciates the critical importance of parents’ involvement in their child’s treatment. Our multidisciplinary team consists of: child psychiatrists, clinical child psychologist, pediatrician, social workers, nurses and behavioral health specialists (24/7), speech and language pathologist, occupational therapist, behavioral programming specialists, registered clinical dietitian, special education tutor, and utilization management coordinator.

Families also have the opportunity to participate in the CADD’s multicenter autism research projects (ADDIRC and RI-CART). The CADD is affiliated with The Warren Alpert Medical School of Brown University, training medical students, psychiatry residents, child psychiatry fellows, triple-board residents, clinical psychology residents, and clinical psychology postdoctoral fellows in state-of-the-art treatment of children and adolescents with developmental disabilities.

The CADD at Bradley Hospital is dedicated to: (1) providing your child a safe place to live while away from home; (2) development of an effective treatment plan leading to stabilization of the presenting problems that led to hospitalization; and (3) movement forward to post-discharge care.

You are our partner in your child’s treatment and we look forward to working with you. Please do not hesitate to call us with your questions or concerns.

Sincerely,
The CADD Clinical Treatment Team
Our Program

Over the last decade, there has been increased awareness of the mental health needs of children and adolescents diagnosed with psychiatric, behavioral, and developmental disabilities. Mental health problems in children and adolescents emerge through a complex interplay of biological, psychological, and social factors. For this reason, approaches to treatment must be integrative and sensitive to the developmental context and needs of the children and their caregivers.

The CADD Inpatient Program is committed to serving children and adolescents who are specifically diagnosed with a developmental disability (such as intellectual disability, autism spectrum disorder, and/or other form of neurodevelopmental disorder) and a co-existing psychiatric disorder and/or behavioral challenges. This includes, but is not limited to:

- Self-injurious behavior
- Aggressive/destructive behavior
- Maladaptive behavior
- Anxiety disorders
- Mood disorders
- Psychotic disorders

Typically, those admitted to the CADD Inpatient Unit are children and adolescents whose symptom severity puts themselves and others at significant safety risk. The goal of hospitalization is to stabilize these children and adolescents and support their transition to post-discharge care.

Our program is broadly based on Positive Behavior Support (PBS). The goals of PBS are to enable individuals with disabilities to:

- Enjoy life
- Be as independent as possible (and in ways they want to live)
- Have a normal life (and to live, work, and play with people who do not have disabilities)
- Overcome problem behaviors that get in the way of their quality of life

PBS emphasizes prevention and teaching to improve the manner in which an individual's needs are being met. The ultimate goal of PBS is to help individuals with a history of problematic behaviors improve their quality of life. PBS is guided by specific principles:

- Problem behaviors are related to the context in which they take place and are triggered and maintained by something in an individual's environment. They are not caused by the disability.
- Problem behaviors serve a function and allow individuals to meet their needs when they lack the skills to meet their needs using more adaptive ways.
- Effective interventions are based on a deep understanding of the individual and the context and function of the problem behavior.
- PBS must be grounded in values that respect the dignity, preferences, and goals of each individual.

Within our program, we use some of the tools of PBS to foster skill development and decrease the impact of problem behaviors for both the child and family.
Program Personnel

CADD Administration

Unit Chief Justyna Piasecka, MD
Clinical Psychologist Amy Barrett, PhD
Clinical Nurse Manager Alissa Forleo, BSN, RN
Assistant Clinical Nurse Manager Lindsay Cole, BSN, RN
Clinical Social Work Supervisor Kehinde Vaz, LICSW

CADD Administration

Nursing Alissa Forleo, BSN, RN
Lindsay Cole, BSN, RN
Full Nursing Staff 24/7
Full Behavioral Health Specialist Staff 24/7

Child Psychiatrists Justyna Piasecka, MD
Pilar Trelles Thorne, MD

Clinical Child Psychologist: Amy Barrett, PhD

Social Workers: Cassidi Plouffe, LCSW
Kristen Fox-Kosowski, LICSW
Kehinde Vaz, LICSW

Behavioral Programming Specialists: Tara Zeigler-Ereio, BCBA

Occupational Therapist: Lisa Cutrone, MS, OTR/L

Speech & Language Pathologist: Chelsea Morell, MS, CCC-SLP

Registered Clinical Dietitian: Lauren Gould, RD, LDN

Utilization Management: Jennifer Polselli (Coordinator)
Your Child’s Treatment Team

The evaluation and treatment of your son or daughter is the responsibility of a group of professional staff representing a variety of professional disciplines. This group is known as the treatment team. Your child is assigned to a specific treatment team who work together on a daily basis to provide for his or her care. Three important members of your child’s treatment team include:

Attending Psychiatrist: ___________________________ Phone: ______________________
Social Worker: ___________________________ Phone: ______________________
Clinical Nurse Manager: ___________________________ Phone: ______________________

Your clinical social worker will be your primary contact person. There also is a registered nurse on the unit 24 hours a day. If questions/concerns arise regarding your child’s treatment, the social worker or registered nurse can direct you to the team member who can best respond. If at any time you have questions, you may call the CADD Inpatient Nurses Station at 401-432-1117. There is a registered nurse present on the unit at all times who will be happy to speak with you.

Admission Meeting

Your child’s admission to Bradley Hospital begins with a general admission meeting through the hospital’s Access Center. Following this initial meeting, admission to the CADD Inpatient Unit begins with a CADD RN, who conducts an evaluation/admission interview. This interview provides an opportunity for you to exchange important information with members of your child’s treatment team. This will include your child’s medical and developmental history, family history, and the events that led to admission. Also, introduction to our unit-based research program occurs at this time. Following this interview, family members are given a tour of the Inpatient Unit.

Room Assignments: When children have roommates, we make every effort to consider developmental, temperamental, and behavioral compatibility. During your child's hospitalization their room assignment may be modified accordingly.

Within 24 hours of admission, all children admitted to Bradley Hospital receive a routine physical examination as part of their medical and developmental assessment. This includes laboratory tests, which may require blood and urine samples.

An initial family meeting with your social worker will occur soon after admission (typically the following day).
**Parental Involvement**

Families are a crucial partner in a child’s care and treatment at Bradley Hospital. Who, after all, knows your child better than you do? Your knowledge, understanding, and input are invaluable to the treatment team. The CADD considers parents to be an integral part of their child’s treatment team.

During your child’s hospitalization, active participation by parents is encouraged in various ways, including visitation and family therapy/education. Also available to parents are “teaching” visits where a milieu staff is present to model, support, and monitor a particular behavioral approach that has been found helpful with your child. To be most effective, an individualized plan will be agreed upon by the treatment team and outline your involvement in your child’s treatment.

**Treatment Review Meetings**

The multidisciplinary 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. Your ideas, suggestions, and questions are brought to your child’s treatment review meeting by your social worker.

**Types of Treatment**

A wide variety of treatment approaches are used within the CADD Inpatient Unit, depending on the individual needs of each child and family. Types of treatment available include the following:

**Milieu Therapy**—a safe, organized, and structured therapeutic environment that is provided for your child throughout each day. This includes attending to your child’s adaptive daily living skills as well as addressing continued developmental progression, with an emphasis on personal and social responsibilities through the use of rewards and natural consequences.

**Pharmacotherapy**—appropriate medications are used to enhance the effectiveness of other treatment approaches. Parental consent is obtained prior to any use or discontinuation of medication.

**Family Therapy**—issues such as improved communication and more effective family functioning can be addressed.

**Group Therapies**—social skills training, relationship safety training, interventions to improve emotional regulation and to promote development of adaptive problem solving and coping strategies, peer relationships, leisure and daily living skills, as well as communication issues and sensory integration, can be addressed within the social setting of a peer group. The group is run by the Clinical Psychologist, Social Worker, Occupational Therapist, Speech/Language Pathologist, Nurse, or Behavioral Health Specialist.
Individualized Behavior Plan—after analysis of the antecedents, context, and function for a child’s specific problematic behavior(s), an individualized behavior plan may be developed for the child. This individualized behavior plan will be implemented within the context of the milieu on a daily basis. (Please see Development of Behavioral Skills, below.)

Evidence-Based Interventions—Data collection of problematic behaviors will be tracked and recorded daily to assess impact of various treatment modalities on presenting concerns. (Please see Development of Behavioral Skills, below.)

Development of Behavioral Skills

Our philosophy is to allow each child admitted to the CADD to manage his/her own behavior to the fullest extent of his/her capabilities. Frequently, however, a child needs help in exercising self-control and learning to meet his/her personal and social responsibilities. Our clinical team members and direct care staff play an important role in teaching your child these skills. Their goal is to provide a safe and therapeutic environment for all children admitted to CADD and to assist each child in developing strategies for effective communication, coping with and expressing their emotions, and improving daily living skills.

As it becomes necessary to provide your child with additional help, an individualized behavior plan, based in positive reinforcement strategies, may be implemented for your child that is tailored to your child’s specific behavioral needs and cognitive level. Such programs are developed by the CADD behavioral programming specialists and clinical psychologist after thoughtful analysis of the antecedents, context, and function for the specific problem behaviors. All behavior programs are empirically monitored on a daily basis and formally reviewed at treatment review meetings by the clinical team in order to assess for effectiveness in meeting the needs of the child.

Safety Management

At Bradley Hospital, we recognize, respect, and support a child’s right to be free from the use of restraint, except in rare situations when violent or self-destructive behavior jeopardizes the immediate physical safety of the child, a staff member, or others. Safety management may include the use of physical management (physical or mechanical restraint), seclusion, or medication, as needed.

Whenever possible, we will seek alternatives to the use of restraint with the hope of someday eliminating it entirely. We acknowledge that the use of restraint poses a risk to the physical and psychological well-being of the child and participating staff, and that most therapy is curtailed when restraint is initiated.

With that in mind, all nonphysical interventions will be exhausted before any child is subjected to restraint of any kind. When a physical response is the only viable alternative, we will always use the least restrictive, time-limited intervention that is effective in restoring safety. The use of restraint requires a physician’s order and is supervised by a unit RN. In addition, the unit RN will contact you in such an event and update you on your child’s status. All staff involved in
the implementation of safety management practices have been fully trained and certified in the safety management practices employed by the CADD. In this regard, parents should rest assured that Bradley Hospital adheres to strict federal, state, and hospital guidelines regarding the use of these types of safety management practices.

**Special Education Tutoring**

The CADD offers state-approved special education tutoring for students with a wide range of developmental and learning disabilities, based on approved hours from your child’s school department. Special education activities are provided by a certified special education teacher, who tutors each child in a therapeutic learning environment structured to meet the student’s unique educational and behavioral needs.

**Occupational Therapy and Speech and Language Consultative Services**

A variety of consultative services are provided by the CADD occupational therapist and speech and language pathologist.

Occupational therapy (OT) consultative services are provided to assist the CADD inpatient team in developing a plan for the child to maintain safety and stability in the inpatient setting when deemed appropriate. The main objectives of an OT consult are to assess a child’s sensory processing skills in relation to his/her ability to self-regulate, to create an individualized plan, and to educate milieu staff and caregivers for carryover of sensory strategies for regulation.

Speech and language consultative services are provided when deemed appropriate to assist the CADD inpatient team in developing a plan to support the child’s functional expressive communication and receptive understanding of language and behavioral directives during times of crisis. The primary objectives of a speech and language consult are to assess the impact of communication skills on admitting behaviors, determine communicative intent, and create communicative strategies to support the child’s expressive and receptive language, as needed.

In addition, OT and speech and language consultative services are provided to support other areas of need, as deemed appropriate. Examples include activities of daily living, movement and mobility, augmentative and alternative communication/assistive technology, and feeding/swallowing. Such services may be conducted within the social setting of the milieu and/or peer group setting.

**Individual Psychotherapy/Support**

Individual psychotherapy/support may be provided to a patient by our board-certified clinical child psychologist when deemed appropriate. Difficult personal issues and behaviors may be examined and addressed in a safe, confidential, one-to-one setting.
**Visitation, Phone Calls, and Mail**

When your child is admitted to the CADD Inpatient Unit, you will be asked to provide a list of people who are approved to visit and/or have telephone contact with your child. It is strongly encouraged that all Unit and on-grounds visits be scheduled in advance through your social worker or by calling CADD Nursing at 401-432-1117.

We encourage you to visit with your child, and consider family involvement an important part of treatment.

At this time, details regarding current hospital visitation guidelines and procedures can be found in our *Bradley Hospital COVID-19 Visitation Policy*.

**Please remember:** Parents may call at any time to speak with a nurse about their child.

Your child also may send and receive mail while in the hospital. The mailing address of the hospital is:

Center for Autism and Developmental Disabilities (CADD)
Emma Pendleton Bradley Hospital
1011 Veterans Memorial Parkway
East Providence, Rhode Island 02915

Postage will be paid by Bradley Hospital for outgoing mail sent by your child.

For the safety of all patients and staff, any visitor who is suspected of having consumed alcohol, or who is behaving in an erratic or threatening manner, will be asked to leave the premises immediately.

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**Typical Weekday Programs Schedule**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 – 8:30 a.m.</td>
<td>Wake up; self-care; morning responsibilities; breakfast; morning meeting</td>
</tr>
<tr>
<td>8:30 – 9:30 a.m.</td>
<td>Morning rounds with clinical team</td>
</tr>
<tr>
<td>9:30 a.m. – 2:30 p.m.</td>
<td>Group therapies (e.g., social skills, relationship safety, occupational therapy, speech therapy); snack; special education tutoring; lunch</td>
</tr>
<tr>
<td>2:30 – 3:30 p.m.</td>
<td>Shift change; snack; leisure time</td>
</tr>
<tr>
<td>3:30 – 4:30 p.m.</td>
<td>Outdoor activities; Art activities; Home economics; Gym activities; Gross motor activities; Family therapy</td>
</tr>
<tr>
<td>4:30 – 6 p.m.</td>
<td>Dinner; self-care; leisure time</td>
</tr>
<tr>
<td>6 – 8 p.m.</td>
<td>Evening activities (similar to afternoon activities—opportunities for social skill development); family visits</td>
</tr>
<tr>
<td>8 – 10 p.m.</td>
<td>Self-care; snack; bedtime (dependent upon patient’s age)</td>
</tr>
</tbody>
</table>
**Clothing and Laundry**

Please note—we do not allow clothing with any drawstrings. Drawstrings will be removed from any clothing that has one attached. Please remove all drawstrings prior to bringing clothing on the unit. Please ensure clothing fits properly because we do not allow belts on the unit.

Clothing Needed During Hospitalization:
- Underwear
- Socks
- Sneakers
- Sleepwear or pajamas (no drawstrings)
- Jacket or sweatshirt (no drawstrings)
- Casual clothing: jeans, shorts, shirts, sweats
- Hats, gloves, boots (in season)

All clothes should have your child’s name written on an inside collar/waistband. Clothes are regularly sent to a laundry service. Families have the option of taking laundry home to wash. Due to space constraints, we ask that you not bring excessive amounts of clothing. We suggest only one week’s worth of clothing.

Despite our best efforts, articles of clothing are occasionally misplaced or lost. *We strongly discourage bringing expensive clothing because it might inadvertently be lost, damaged, or broken.*

**Personal Items**

To maintain a safe environment, all personal items being brought to the CADD Inpatient Unit must be first checked by an RN or milieu staff.

Please label all your child’s personal belongings. *We strongly discourage bringing expensive personal items because they might be inadvertently lost, damaged, or broken.*

Items permitted in bedrooms: (all items are kept locked in closet in each bedroom):
- Personal bed linens (however, fresh linens are provided)
- Blankets, comforter (however, comforters are provided for all beds)
- Posters that can be taped to bulletin board only
- Pictures (without glass frames)
- Books, magazines
- Toys, stuffed animals (please limit to one or two items only)
- Book or scrapbook about your child
- Communication devices

The Unit will provide all personal hygiene products.
You may bring food to be consumed during your visit. Due to food handling guidelines, food cannot be stored on the CADD Inpatient Unit. All food brought on a visit must go home with the visitor. No cutlery or utensils are allowed to be brought on the CADD Inpatient Unit. We provide disposable utensils. Please do not bring anything that contains glass.

**Items NOT permitted on the unit:**

- Any item containing alcohol
- Knives or any item that may be used as a weapon (such as a baseball bat)
- Cigarettes, lighters, or matches
- Alcohol, drugs, or substance-use paraphernalia
- Pins, needles, thumbtacks
- Plastic bags (including grocery bags)
- Pornographic, violent, drug-oriented, or other inflammatory, offensive magazines, posters, or literature
- Clothing with reference to sex, violence, or drugs
- CDs of a violent or sexually explicit nature
- Glass or ceramic items, including picture frames, bottles, etc.
- Perfume/cologne
- Hooks on the walls
- Any products containing nuts
- Balloons
- DVDs, iPods, iPads, hand-held video games, headphones with cords, craft and hobby kits
- Planned activities for leisure time and arts and crafts will be provided on the unit.

Patients admitted to our programs have rights and responsibilities that are outlined in the Bradley Hospital Patient and Family Information Handbook and include the Lifespan Patient Rights and Responsibilities, the Lifespan Notice of Non-Discrimination, Children's Bill of Rights (R.I.G.L. 42-72-15), and Rhode Island Mental Health Law (40.1-5-5). In accordance with Bradley Hospital's policy on Transgender and Gender-Diverse Patient Care, we honor patient gender identification with regard to treatment, use of pronouns, bed assignment, privacy and access to personal items.

Thank you for understanding our emphasis on safety and for abiding by the guidelines reviewed in this handbook.

We look forward to working with you as part of your child's treatment team.

**The CADD Clinical Treatment Team**