

Best Practices for Residential Interventions for Youth and their Families

A Resource Guide for Judges and Legal Partners with Involvement in the Children's **Dependency Court System**

Executive Summary

February 2017



Acknowledgements

This resource guide was funded by the Annie E. Casey Foundation. We thank them for their support but acknowledge that the findings and conclusions presented in this report are those of the authors alone, and do not necessarily reflect the opinions of the Foundation. The Association of Children's Residential Centers (ACRC) and the National Building Bridges Initiative (BBI) provided extensive expertise specific to residential best practices. BBI Family and Youth Advocates, members of the BBI National Advisory Committee and the BBI Cultural and Linguistic Competency Workgroup, are recognized for their review and input into the guide's content along with the ACRC and BBI Steering Committee Members, who provided technical assistance and input. The National Center for State Courts (NCSC) and the National Council of Juvenile and Family Court Judges (NCJFCJ) also provided support in the review and dissemination of the content of this guide.

I. Introduction

Overview of Residential Interventions

Children in congregate care comprised 14% of the foster care population in 2013 (402,387), and approximately 55,916 were placed in a group home or institution (U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau, 2015 p. ii)¹*. Reducing the reliance on residential programs has been on the national agenda and there have been significant legislative changes in the past few years focusing upon the reduction of congregate care as a placement choice. For purposes of this guide these types of facilities will be referred to as *residential programs* or *residential interventions*.

Knowing When to Use Residential as an Intervention

Most often services and supports for youth and their families are best delivered in their home and community. However under certain circumstances, when behaviors have not successfully or safely been addressed in the community, a residential intervention may be appropriate. If that is the case, it is essential that the residential intervention include consistent support for the family (birth, kin or foster) in their own home and community. This must be a responsibility of the residential program, hopefully with the assistance of their community partners. Residential interventions should be designed to ameliorate the issues-challenges-problems that are preventing the youth and family from safely living together in their community. And, these interventions should be designed to achieve positive outcomes in the shortest time possible, and be individualized to what each family needs to return the youth home safely.

Critical Steps That Judges and Legal Partners Need to Take

Ask Questions

It is essential that the courts provide ongoing oversight and review with respect to decisions to use, or continue to use, a residential intervention. It is also imperative for the courts to determine if a range of less restrictive, community-based alternatives has been evaluated prior to a decision to use a residential intervention.

Conduct on-going Reviews

On-going reviews of residential interventions are essential to determine whether the issues that originally led to a recommendation for a residential intervention (a youth's emotional and/or behavioral challenges, challenges with the family or other support network etc.) have been sufficiently responded to, thereby mitigating the need for continued residential intervention.

II. Critical Components of Safe, Quality and Effective Residential Programs

Research has shown that children grow up best in nurturing, stable families. When youth end up requiring residential interventions, it is imperative that professionals and advocates identify what support is needed to maintain the youth in a safe, permanent home as quickly as possible. In most cases, children can be reunited with their families, but in some cases children find homes with relatives or adoptive families. When helping youth and their families achieve permanency, professionals must balance an array of issues, including the needs of the youth and their family, as well as legal requirements (ACRC-Thirteenth in Series, 2015 p.2)*.

When using a residential intervention a number of important critical components should be considered to determine if the program is safe and provides a quality and effective residential intervention. The chart below briefly identifies a number of these critical components, with a synopsis of several key actions residential programs should be taking around these areas and a list of important key questions the courts should be asking in relation to each area. More detailed information and where to go for additional resources is provided in the full version of the guide.²

^{1 *} References are available in the full version of the "Best Practices for Residential Interventions..." guide

² A complete listing of all acknowledgements, key action items, key questions, and where to go for additional information is available in the full version of the guide

Critical Components of Safe, Quality and Effective Residential Programs

Key Action Items by Residential Programs

Key Questions for the Courts to Ask

Focus on Permanency

Research has shown that children grow up best in nurturing, stable families; it is a key responsibility of residential programs to work towards permanency for every child

- Conduct in-depth youth and family assessments...
- Have a strong and passionate commitment to every youth having a permanent family...
- Find family members when there is no identified family...
- Adopt a sense of urgency in creating permanency...
- Use the residential intervention for as short a time as possible...
- Assure there are several positive adult connections...

- Were initial youth and family assessments conducted and if so did they indicate there were no alternative community services that could safely and effectively meet the youth's needs other than a residential intervention?
- Was a discharge plan established at intake that identified the anticipated duration of the intervention and the family to whom the youth will return?
- Does the discharge plan demonstrate a sense of urgency in returning the youth to home with a timeline of ideally less than three months?
- If there is no identified family, who will be responsible for immediately initiating a family finding search and engagement process, and what urgent steps will be taken to find and engage the family?
- Have a number of positive adult connections been made for the youth early in the residential intervention and is the youth allowed to spend meaningful time with these connections throughout the duration of the intervention?
- Has the youth voiced these adult connections to be a positive one for him/her?

Engage, Support and Partner with Families

Residential program staff must put a priority focus on successfully engaging, supporting and partnering with every family

- Put a priority and urgent focus on ensuring that youth stay connected with family from the first day of admission – and throughout every day of the residential intervention...
- Engage the family as partners...
- Create a Child and Family Team (CFT)...
- Ensure that a comprehensive treatment plan is developed...
- Give parents the primary decision-making power...
- Ask families about their goals...
- Treat parents/family members as equal partners...
- Provide treatment and support in the family's home and community...
- Keep families informed...
- Ask the families about important cultural factors...
- Train and support all staff in engaging families...
- Use reflective supervision and coaching...
- Assure youth are able to spend time at home...
- Use family partners...
- Maintain a culturally diverse workforce...
- Review agency policies, procedures, and culture...
- Ensure that grievance procedures are simple and well advertised...

- Is at least one identified family member currently engaged in the youth's care, actively participating in treatment planning with decision making power, and spending time with the youth in their home?
- If no family member is engaged, what steps will be used to engage the family and support the youth to spend time with their family at least weekly in their home/community?
- Has a Child and Family Team or Family Team Conferencing been created to help guide the course of treatment during the residential intervention and was a comprehensive plan developed within the first 7 days?
- Is family treatment and support occurring in the family's home, how often does it occur, what approach is being used?
- Are families being informed and actively engaged with everything that happens around the youth's care to enable them to make informed decisions?
- Is the progress of the youth and family regularly reviewed, and is the plan changed if progress is not occurring?
- Have family partners been made available to engage, guide, support and help empower the family and youth?
- Have relevant cultural and cross-cultural issues been identified and addressed with the family?

Engage, Support and Empower Youth

Young people have the right to be empowered, educated, and supported in having a strong decision making role in addressing their needs and planning their lives

- Support strong youth voice ...
- Provide youth with opportunities to connect and interact...
- Assure opportunities to participate in the operation of the residential program...
- Use youth advocates...
- Promote youth empowerment...
- Include families not only with the treatment plan, but with activities...
- Support youth in exploring their cultural identities and enhancing positive cross-cultural interaction...
- Value youth contributions...

- Do youth (during the residential intervention) have an active role in establishing their treatment goals, educational plans, and continuing to engage in activities that match their individual strengths and talents in their home communities?
- During the residential intervention do youth have opportunities to give meaningful input into program practices, and build their sense of empowerment and decision making skills?
- Are youth allowed to attend public school when appropriate, as well as spend time in the community (preferably the youth's home community) developing pro social peers through positive activities and events?
- Are youth encouraged to explore their cultural identities towards a positive sense of self and pro-social approaches to cross-cultural tensions?
- Are youth advocates made available to engage, guide, support, and help empower the youth in the program?

Provide Culturally and Linguistically Competent Services

A strong focus on culturally and linguistically competence is critical to ensure that youth and families receive services and supports that match their individual needs

- Ensure the presence of a diverse, prepared and culturally and linguistically competent workforce...
- Create living environments that reflect diversity...
- Respond to the spirituality and various religious traditions ...
- Review policies and procedures annually...
- Challenge and support staff to address their conscious and unconscious bias, stereotypes, and prejudices...
- Keep youth and families emotionally and physically safe...
- Engage and educate the leadership and boards of directors...

- How are any issues of bias, prejudice or stereotypes addressed to ensure they do not inhibit the necessary therapeutic work with youth and families?
- Is the residential program able to meet the linguistic needs of all of the youth and families either directly or through interpreter services that the youth and family find helpful?
- Does the residential program's workforce reflect the diversity of youth being referred for treatment at all levels of the organization?
- Do youth have the opportunity to engage in religious practices representative of their faith or beliefs in their home communities without having to meet programmatic requirements (other than possibly a rare situation of safety) to attend?
- Do all residential program staff, board members and executive leadership receive training, supervision, and mentoring specifically to improve their cultural and linguistic competence?

Provide Trauma-Informed Care

It is critical that programs understand trauma prevalence for children and families, and create trauma sensitive approaches and environments

- Conduct trauma assessments for both youth and families...
- Assure medical care for all youth is provided...
- Train all staff to achieve common understanding of trauma, the neuroscience behind trauma...
- Adopt a culture and language of collaboration and empowerment...
- Create trauma-informed environments...
- Diligently pursue the use of established best practices...

- How has the residential program adopted a trauma informed approach to care?
- Have trauma assessments been conducted with the youth and family, and shared with the residential program staff working directly with the youth and family?
- Is the staff trained in trauma-informed care and do they have written plans available to them on how to engage and interact with each individual youth and family?
- Has the residential program addressed the emotional and medical needs of youth in their home communities, maintaining family-identified mental health and medical professionals and supports?

Link Residential Programming with the Home Communities of the Youth and Families

It is essential that residential programs build strong linkages with all of the local systems of care where the children and families they serve reside

- Use a range of practices to support reunification...
- Ensure youth spend meaningful time at home and/or in their home community at least once weekly (preferably more than once)...
- Ensure a youth is placed no more than one to one and a half hours from their home ...
- Maintain daily contact...
- Work with family's local communities...

- How far from the youth's home and community is the residential program located (the ideal is less than one to one and a half hours away, preferably even closer) and why was it selected?
- Are there opportunities for youth to have daily contact with their family, and time at home at least once per week, preferably more often?
- If daily contact and weekly time at home is not occurring, what is being done to ensure this will happen in the near future (i.e. within the next two weeks)?
- For families with financial challenges, has support been provided so that their child can spend time at home on a weekly basis at a minimum?

Prevent Seclusion and Restraint (S/R)

Residential programs should establish policies and ensure practices that prevent the use of seclusion and restraints and other coercive interventions

- Articulate leadership's vision, values and program expectations on S/R...
- Collect data on S/R...
- Create environments grounded with knowledge of trauma...
- Recognize signs of distress in youth to help reduce the use of S/R...
- Use debriefing techniques after every S/R...
- Use a crisis management training program...

- Has the youth ever been subjected to any physical, mechanical or chemical restraints?
- How frequently do S/R occur in the residential program and what culturally informed steps have the program staff taken to prevent and reduce seclusion and restraint?
- Is the staff trained in recognizing signs of distress in youth, employing trauma techniques and the prevention and safe use of S/R?
- Are all S/R incidents comprehensively debriefed and alternatives explored between the staff involved and their supervisor?
- Is data on S/R collected, analyzed and reviewed by residential program leadership, and are these findings used to improve practice and outcomes?

Work with Youth in Transition to Adulthood

Youth approaching the age of adulthood frequently do not have strong and comprehensive support systems in place to ensure smooth transitions to independence

- Support youth in determining whom they consider family...
- Teach youth the necessary skills to successfully live on their own in the community...
- · Ensure any juvenile records are sealed...
- Use Peer Mentors to teach and model skills...
- Connect transitioning age youth to community resources...
- Assure youth do not end up homeless...

- Has a strong connection been established to at least one, and preferably many, positive, supportive, caring and stable adults, whom the youth approves of and welcomes?
- Has the youth been taught the necessary skills (practicing in the community and not relying on program groups or workbooks) to live successfully on their own in the community?
- Does a youth transitioning to independence have a stable place to live?
- Have appropriate educational/vocational services, physical health providers, substance use treatment and mental health supports been established prior to discharge?
- Have any juvenile records the youth had from the juvenile justice system been sealed?

Engage in the Informed Use of Psychotropic Medications

Psychotropic medications are often overprescribed and/or inappropriately prescribed for youth

- Conduct an assessment and diagnosis to select medication interventions...
- Ensure the prescribing psychiatrist weighs the potential benefits and risks...
- Obtain informed consent...
- Ensure that youth and family voice and choice is robust...
- Conduct on-going reassessments...
- Ensure discharge planning and coordination with community providers...
- Evaluate whether opposing explanatory models exist...

- Is the youth currently on any psychotropic medications, and if so, which one(s) and what dosage, and who will be administering the medication and monitoring its effects?
- Is a medication management process in place that uses the lowest effective dose and least number of medications?
- Do youth and families have an active voice in agreeing to medications, including informed consent for new medication, or changes in medication, and do they receive extensive education about the effects of the medications?
- Does the residential program conduct on-going reassessments that occur at every meeting of the Child and Family team – minimum of monthly - which address each youth's frequent time with family and their opportunities to engage in meaningful community activities that match their interests/talents?
- Does the residential program have very low rates, or no, restraints, seclusions, police calls and acts of aggression that can increase youth dysregulation, and can contribute to higher doses of medication?
- Is the prescribing psychiatrist part of the residential program's treatment team or
 familiar with the program; is he/she involved in monitoring and assessing the effects of
 medications as well as providing medication information and education to all parties
 involved?
- Does the residential program use external psychiatric experts to review prescribing practices, especially for youth on multiple medications?

Create Organizational Cultures Supportive of Best Practices

Organizations must create cultures with values, norms and visions that result in a strong focus on the key residential best practices listed in this Overview

- Assess the organizational culture...
- Incorporate a core set of best practice values...
- Assure there is a safe, nurturing, and well cared for facility...
- Create language and communication...
- Create trauma informed environments...

- Is the residential program licensed by its state authority and do they hold national accreditation?
- Does the residential program provide regular and consistent training, coaching and supervision to its staff on best practices in residential interventions (e.g. permanency; engaging families; youth voice and choice)?
- Does the residential program employ trauma informed care and use a range of best practices that correlate with positive outcomes post-residential discharge (i.e. six months to a year) for youth and families versus just a focus on youth improving behaviors between admission and discharge?
- Does the residential program abide by the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care?

Focus on Outcomes

It is critical that residential programs collect and analyze outcome measures one to three years post-residential discharge to inform practice improvement

- Determine what outcome data is vital to collect...
- Ensure the functional domains of home; purpose, community and health are measured....
- Ensure that practice and process indicators are measured...
- Ensure experience of care is measured...
- Ensure organizational indicators are measured...
- Include analysis of disparities in outcomes and experience of care...
- Does the residential program measure long-term outcomes (for at least 24 months) and use the information collected to inform practice?
- Is experience of care measured on the satisfaction of youth, families, and community members regarding the services provided?
- Does the residential program collect and analyze additional data to identify and address disparities in outcomes and experience of care?
- Does the residential program share data with external constituents on its performance?