



## About Us



St. Mary's Home for Children











**Residential Services** 

# Our youth residential programs



ASC

## Assessment Stabilization Center

- Shelter program
- Assess and stabilize youth requiring out-of-home placement
- Girls 12-17
- 1 House, Max Capacity 8



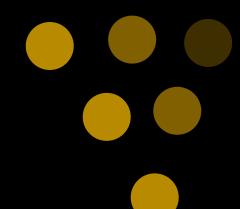
## Acute Residential Treatment Services

- Psychiatric hospital step-down or diversion program
- Intensive short-term stabilization and brief treatment
- Boys and girls 6-17
- 1 House, Max Capacity 8



## Psychiatric Residential Treatment Facility

- Non-hospital setting for intensive inpatient services
- Boys 6-12
- Girls 6-19
- 3 Houses, Max Capacity 21



## The Research Project

## Why we started the project

#### **KNOWN FACTS:**

- 1. Most residential youth are discharged due to symptom reduction and achievement of treatment plan goals
- 2. A seemingly high number of discharged youth return to our care within one year

What happens to our residential clients after discharge?

Why do so many clients return to residential care within 12 months?

Which clients are most likely to return to care?

What program changes can we make to improve post-discharge outcomes?

## Using research data to improve outcomes

## 3. Analysis

#### Step 6

Implement changes based on findings

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#### Step 5

Determine means of dissemination for target audience

#### Step 1

Identify policy issues and articulate research questions

Implementing
Outcome Data
into Practice

#### Step 2

Confirm relevance of questions with stakeholders

#### Step 3

Conduct research and produce key findings for each question

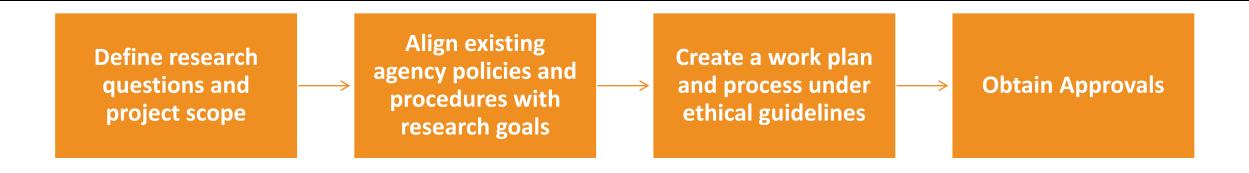
#### Step 4

Engage stakeholders and make meaning of findings/answer

## 2. Implementation

1. Planning

## Phase 1: Planning

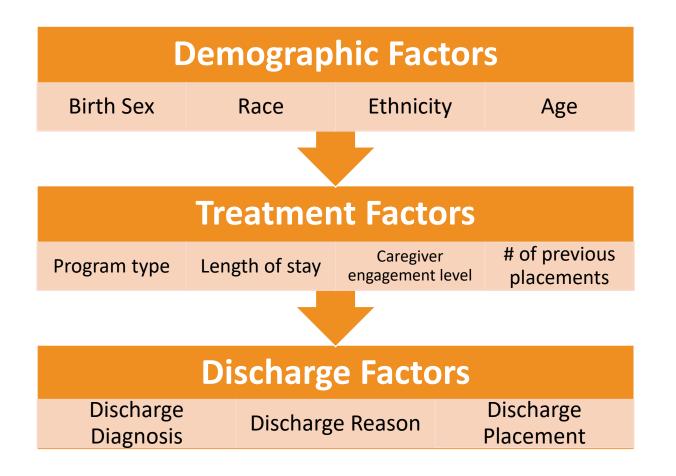


#### **RESEARCH QUESTIONS**

- (Q1) How are former residential youth faring at 6, 9, and 12 months post-discharge?
- Can outcome differences be explained by demographic factors, client history, or treatment progress?
- **(Q3)** Do outcomes change over time?
- Q4) Which of our current clients are most at risk for re-admission?

## What factors contribute to post-discharge outcomes?

# Independent Variables



## Which outcomes should we focus on?



#### **Risk Factors**

I'm going to ask you some sensitive questions, because it is important for us to get an idea of what's happening in the life of \_\_\_\_\_. If you're uncomfortable answering any of these questions please let me know.

13. In the last six months, has the [youth name]:	Yes	No	Don't Know
a. Been pregnant or fathered a child?			
b. Been arrested? (if no, skip to "d")			
c. Been arrested for a felony?			
d. Used alcohol or other drugs?			
e. Exhibited behavior problems that are dangerous?			
f. Been the victim of child maltreatment (abuse or neglect)?			
g. Been the victim of commercial sexual exploitation?			

#### Treatment

Now I'm going to ask about treatment that \_\_\_\_\_ may have received during the last six months.

14. In the last six months, has the [youth name]:	Yes	No	Don't Know
a. Received treatment for drug or alcohol related problems?			
b. Received outpatient treatment for mental health problems?			
c. Been hospitalized for psychiatric reasons?			
d. Spent time in a residential treatment facility?			

## Which outcomes should we focus on?

## Dependent **Variables**



PURPOSE ...

Is the client living in a safe, stable living environment?



Does the client have relationships and social networks that provide support, friendship, and love?

**RESIDENTIAL CLIENT OUTCOMES** 

HEALTH

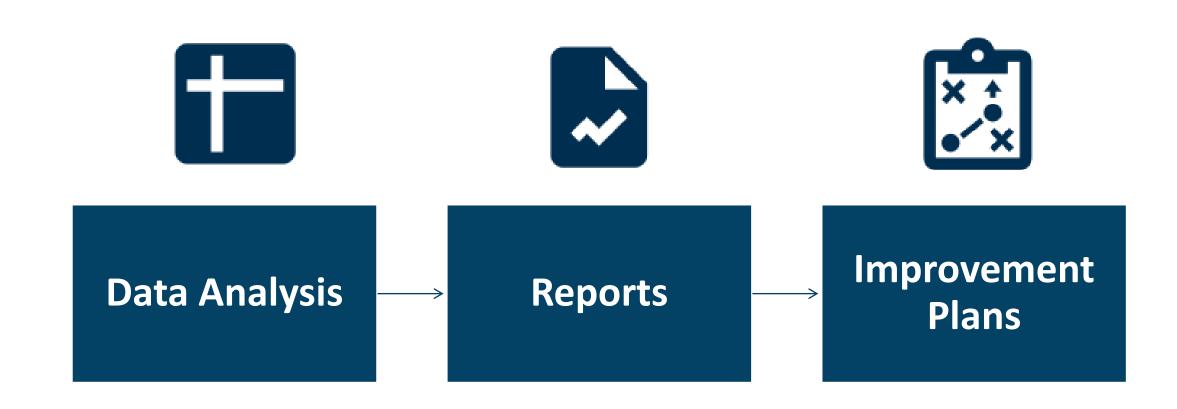
Does client engage in meaningful daily activities (job, school, and volunteerism) that promote independence, income, and resources to participate in society?

Has client sustained basic physical and behavioral health with the ability to overcome and manage health challenges?

## Phase 2: Implementation



## Phase 3: Analysis



# Analysis of data 2019-2022



## Who is participating in the study?

Female former clients – 56%

Male former clients - 57%

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White former clients – 62%

Black/African American former clients – 62%

Other race former clients – 53%

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Hispanic/Latino former clients – 54%

Not Hispanic/Latino former clients – 60%

Placement at discharge	Participants	Not participating
Home	43	15
Group home	16	7
Foster home	3	5
Kinship home	6	5
Psych hospital	7	8
Out-of-state care	4	4
SILP	1	6
RTX	2	8
Elopement	0	4
Not known	0	2
TOTAL	82	64



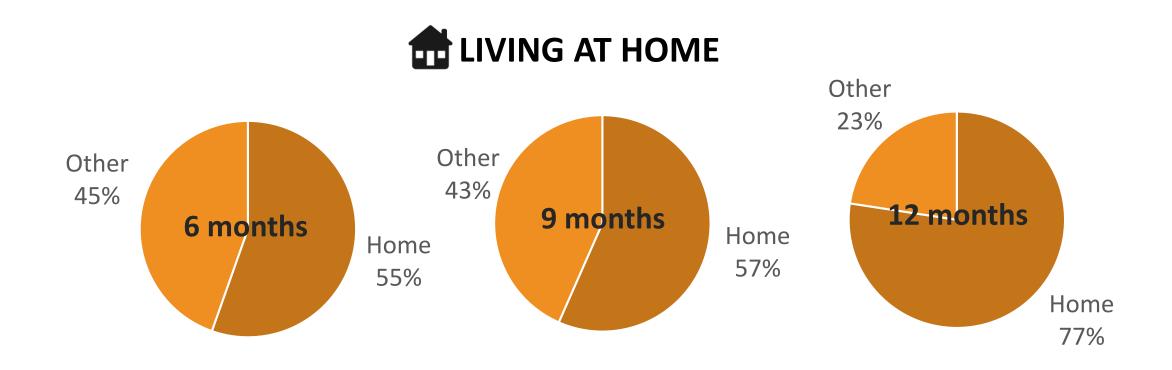
## Where are the youth living?

## **LIVING SITUATION**

Living situation	6 Months	9 months	12 months
Parent or Guardian	34	27	22
home			
Relative/friend home	7	2	2
Foster home	2	1	1
Group home	6	7	3
Residential treatment	12	13	6
Psychiatric hospital	10	3	3
Semi-independent living	2	0	1
TOTAL	76	53	38



## Where are the youth living?





## How are youth faring in the community and with their health?

## **SCHOOL ATTENDANCE**

Attends school	6	9	<i>12</i>
regularly	months	months	months
Yes	55	37	29
No	18	13	7
Yes, but not	3	3	2
regularly			



## MENTAL HEALTH COUNSELING

Mental health	6	9	<i>12</i>
counseling	months	months	months
Yes	50	35	26
No	26	18	12



# Can outcome differences be explained by certain factors for PRTF clients?

#### **SUCCESSFUL**

- Clients remained in their discharge placement or moved to a lower level of care
- Clients were attending school regularly, or working
- Clients had strong social connections: friends, family, church, sports, etc.

11 of 19 PRTF clients (57%) met this criteria at 6 months post discharge.

#### **STRUGGLING**

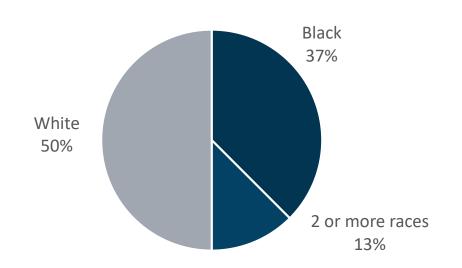
- Clients moved to a higher level of care than their discharge placement
- Clients continued to exhibit dangerous or problematic behaviors
- Clients were socially isolated

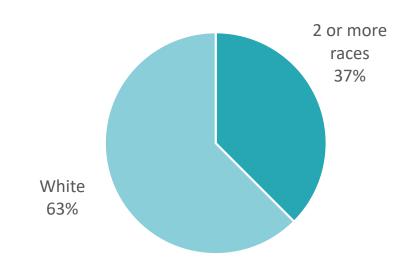
8 of 19 PRTF clients (42%) met this criteria at 6 months post discharge.

## Demographic Factor: Race

## **SUCCESSFUL**

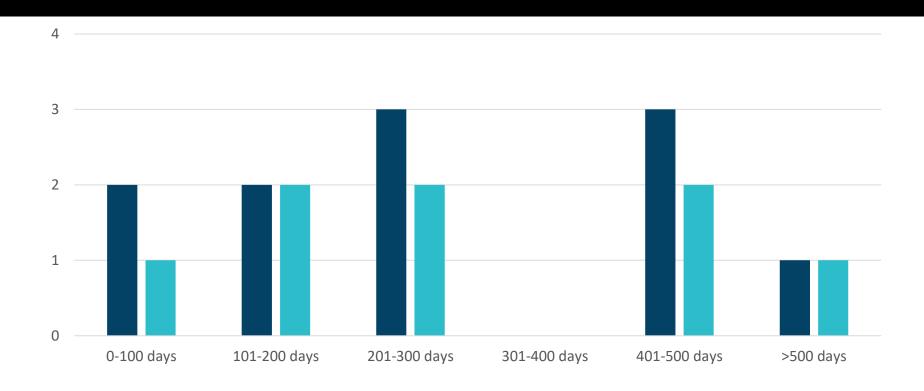
#### **STRUGGLING**





No Black clients among struggling group. 4 of 9 white clients were successful. Four clients with 2 or more races were successful, and 3 were unsuccessful.

## Treatment Factor: Length of Stay



**SUCCESSFUL** 

Average length of stay = 275 days

**STRUGGLING** 

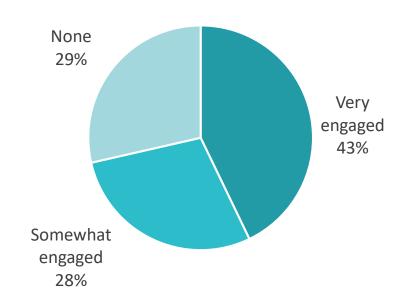
Average length of stay = 328 days

## Treatment Factor: Caregiver Engagement

#### **SUCCESSFUL**

# Somewhat engaged 36% Very engaged 64%

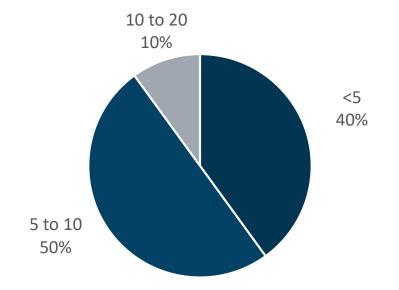
#### **STRUGGLING**



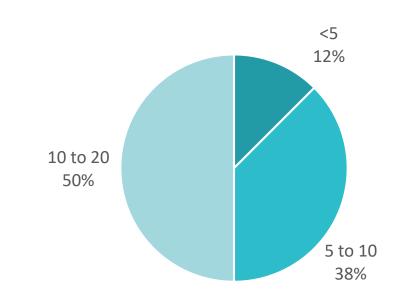
The big difference between the 2 groups, in terms of caregiver engagement, is the higher percentage of "no engagement" in the struggling clients.

## Treatment Factor: Previous placements

#### **SUCCESSFUL**



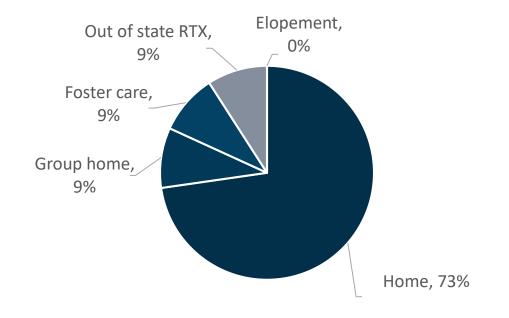
#### **STRUGGLING**



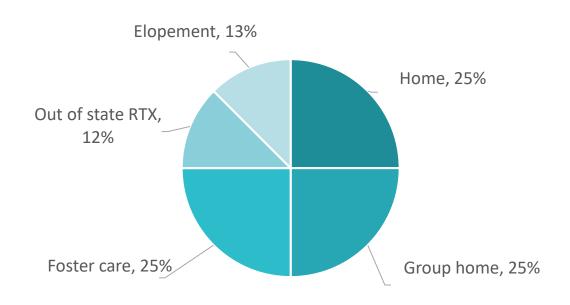
40% of the successful clients came to SMHFC with fewer than 5 previous placements. By comparison, 88% of the struggling clients had more 5 previous placements.

## Discharge Factor: Placement at Discharge

## **SUCCESSFUL**

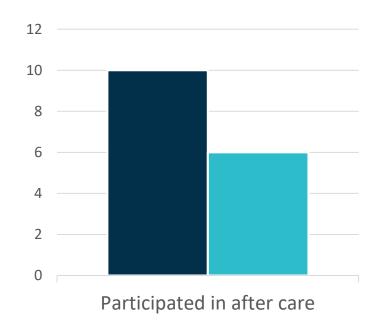


#### **STRUGGLING**



73% of successful clients, and 25% of struggling clients, were discharged home with family.

## Discharge Factor: Participation in Aftercare



#### **SUCCESSFUL**

Average length of aftercare = 160 days

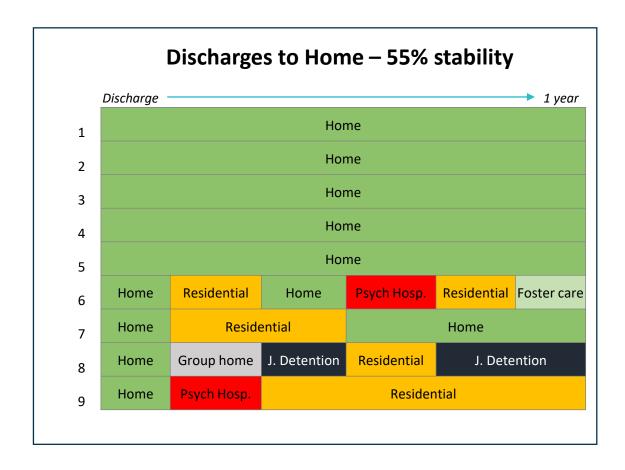
#### **STRUGGLING**

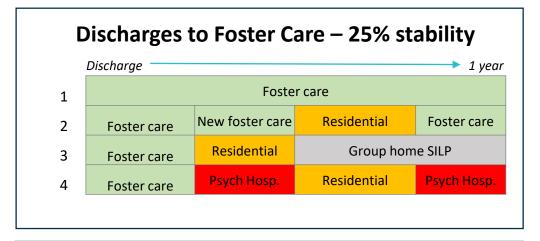
Average length of aftercare = 147 days



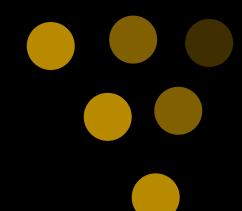
## Do outcomes change over time for PRTF Clients?

#### PLACEMENT STABILITY WITHIN 1 YEAR POST-DISCHARGE









## Program quality improvement

## Building Bridges Initiative (BBI)



## BBI SERVICES DURING RESIDENTIAL TREATMENT

Parent Partner works together with youth's family to identify issues and help develop a plan.

**Youth Mentor** supports and guides clients in self advocacy. Runs youth council.

**Family Liaison** Helps youth maintain existing and/or start new community activities.

**Family Therapist** works with families who want to develop skills together.

## Data gaps for BBI activities

Family driven and youth guided care	Metrics
Contact with family prior to admission	Available
Family participation in Calming Soothing Plan	Not available
# client telephone calls with family and natural supports	Limited and unreliable
# client visits with family and natural supports	Limited and unreliable
# treatment plans signed by family/natural supports	Available
# clinical contacts with family	Available
# BBI contacts with family	Limited
# identified natural supports	Not available
Identification of family challenges in client record and action plan to mitigate challenges	Not available
Record of transportation and financial support provided to family	Not available

Accessibility and Community involvement	Metrics
# youth receiving vocational services in the community	Not available
# youth participating in recreation, extracurricular, or enrichment facilities in the community	Not available
# life skills sessions provided by milieu or BBI staff	Limited and unreliable
# youth receiving services from a previous community provider	Not known
#BBI activities which take place on campus or in the community	Limited and unreliable

Transition Planning and services	Metrics
BN contact note w/in 48 hours of discharge	Available
Signed Aftercare plan with list of aftercare services	Available
# youth receiving aftercare for at least 3 months	Available
# youth receiving care coordination visit within 7 days of discharge	Available
# youth whose discharge summary includes a crisis plan	Available

## BBI Improvement Plan for Metrics



Develop metrics for BBI program



**Training for BBI Staff** 

# Why are youth struggling after residential discharge?

#### **STRUGGLING**





## BBI Improvement Plan for Treatment



**Youth Mentors** 



**Youth Transition Training** 



Programming for Teens

## PRTF Client Examples: Background



#### Youth 1

born 2004

Female
White Hispanic/Latino
LGBTQ+
PRTF LOS = 793 days

**Received Aftercare** 

#### **RISK FACTORS**

Childhood abuse

Trauma

Neglect

Childhood abuse

Social isolation

Poverty

Bereavement

Severe/long-term stress

✓ ✓



#### Youth 2

born 2003
Female
White Non-Hispanic/Latino
Not LGBTQ+
PRTF LOS = 1,947 days
Receiving Aftercare

## PRTF Client Examples: Outcomes



#### Youth 1

born 2004

Female
White Hispanic/Latino
LGBTQ+
PRTF LOS = 793 days
Received Aftercare

#### **PROTECTIVE FACTORS**

#### **HOME**

Semi-independent living

#### **COMMUNITY**

Supportive youth mentors

#### **PURPOSE**

Engagement and connections ✓ ✓ ✓ in community

Problem-solving skills ✓ ✓

#### <u>HEALTH</u>

Emotional self-regulation ✓ ✓

Coping skills



#### Youth 2

born 2003
Female
White Non-Hispanic/Latino
Not LGBTQ+
PRTF LOS = 1,947 days
Receiving Aftercare

## Connect with Us



Cassandra Sierra-Patev
Data Quality Specialist
csierra-patev@smhfc.org



Suellen Gordon LICSW
Program Analyst
srizzo@smhfc.org



Patty Olney-Murphy LICSW MPH
Residential Clinical Director
polney@smhfc.org

Learn more about St. Mary's @ www.smhfc.org or through our social media!







