

Model to Permanency



**Senate Committee on
Health & Human Services Testimony**

High Acuity Charge • April 20, 2016



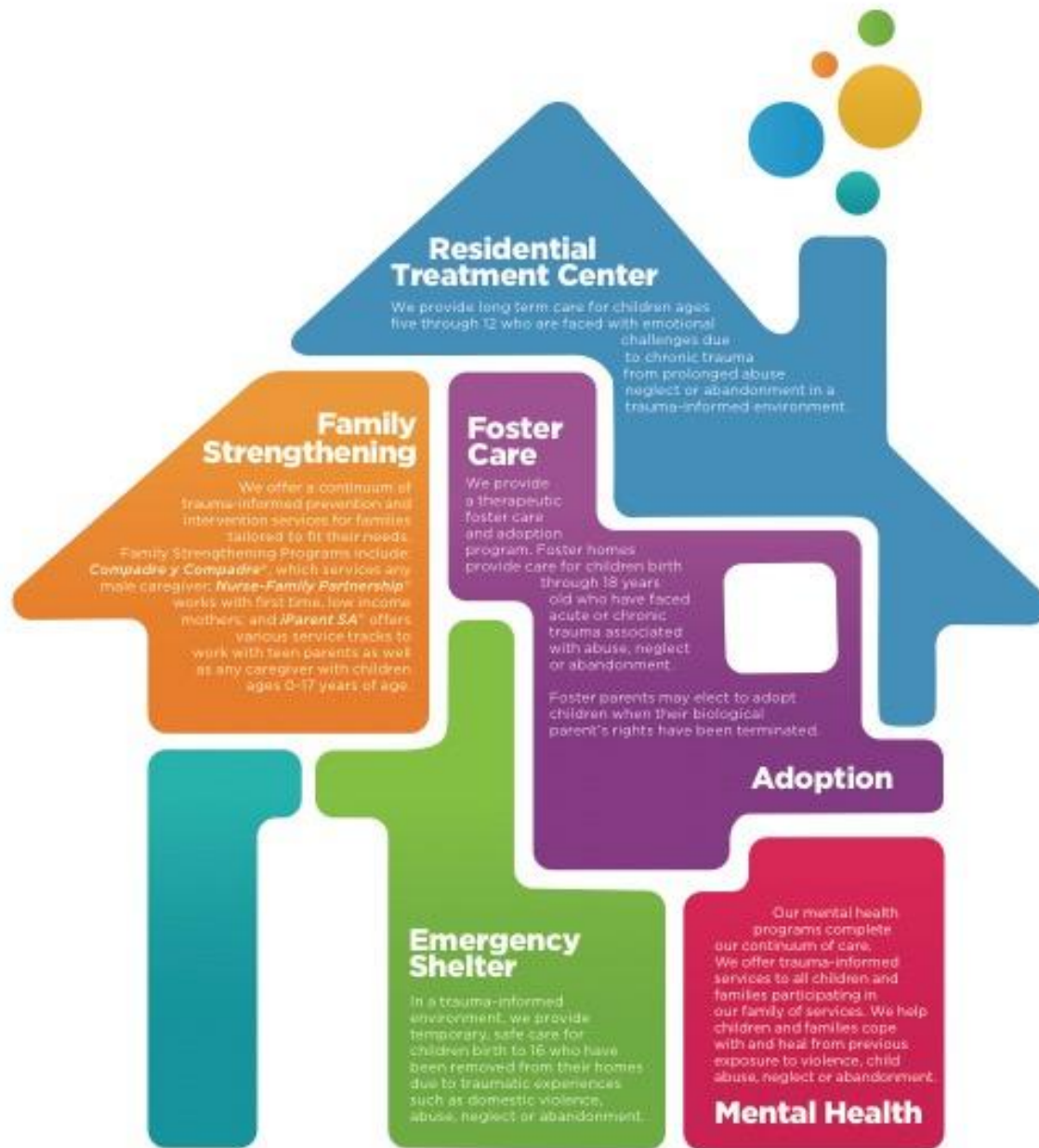
the
children's
shelter
a family
of services

Restoring Innocence. Strengthening Families.

- ❖ Established 1901
- ❖ Accredited by Council on Accreditation — 16 years
- ❖ Certified as Trauma Informed agency
- ❖ Only agency in Texas to participate in national Residential Transformation Project — *Alliance for Strong Families & Communities*

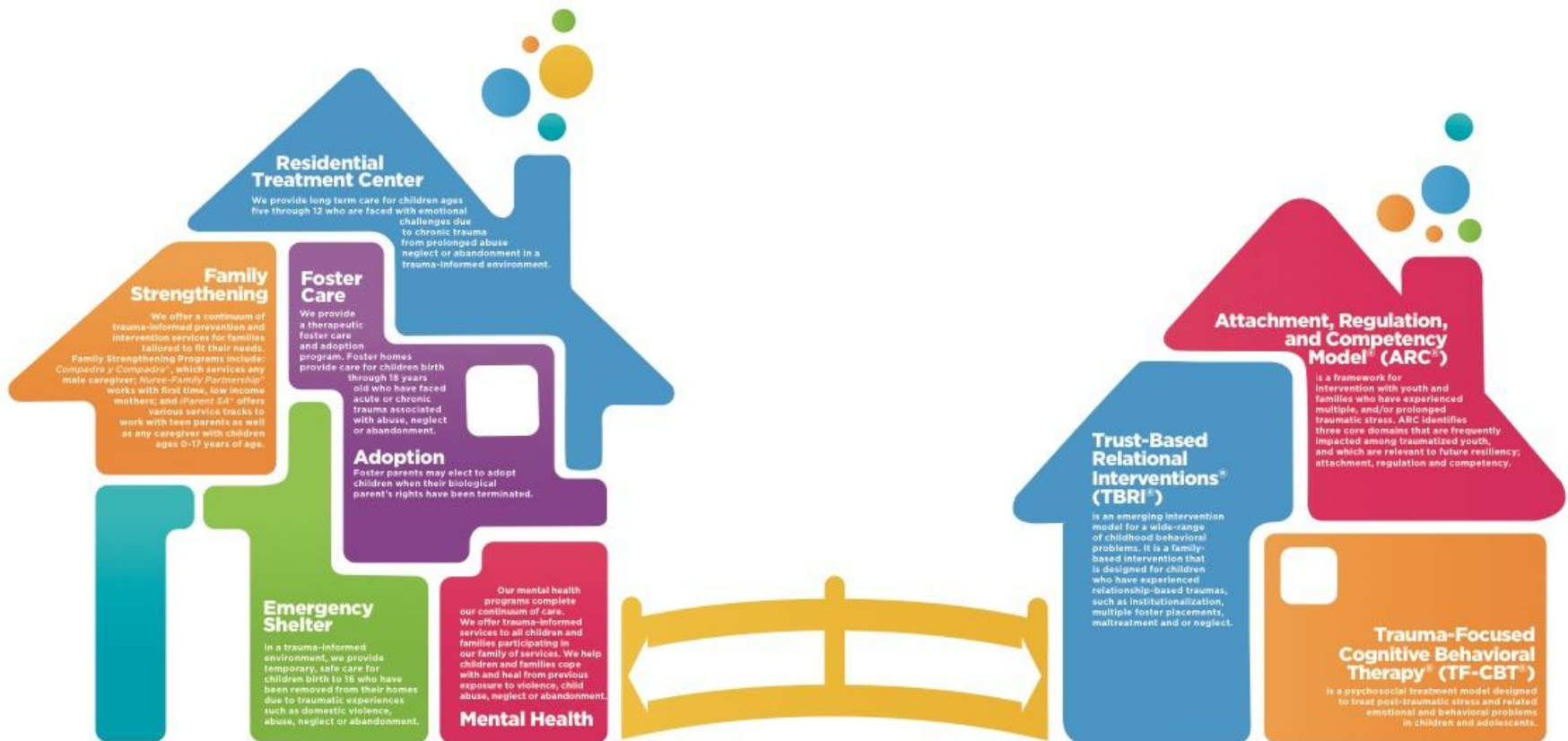
Served nearly 5000 children and families in 2015

- ✓ RESIDENTIAL PROGRAMS
- ✓ FAMILY STRENGTHENING PROGRAMS
- ✓ MENTAL HEALTH CLINIC





Continuum of care.



Children in Conservatorship in Region 8

Who are they and what happens to them?

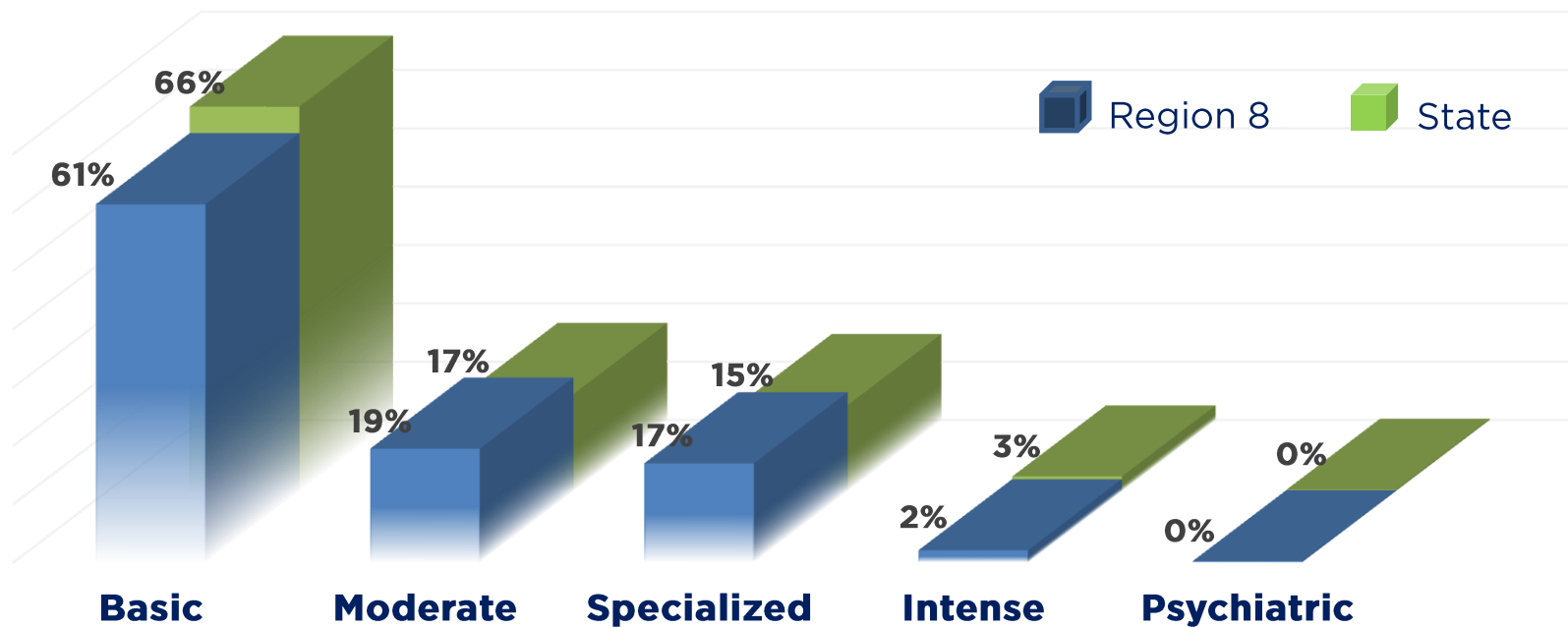
JANE BURSTAIN

*Director of CPS
Systems Improvement*

September 10, 2015

Children in Foster Care Have slightly higher needs

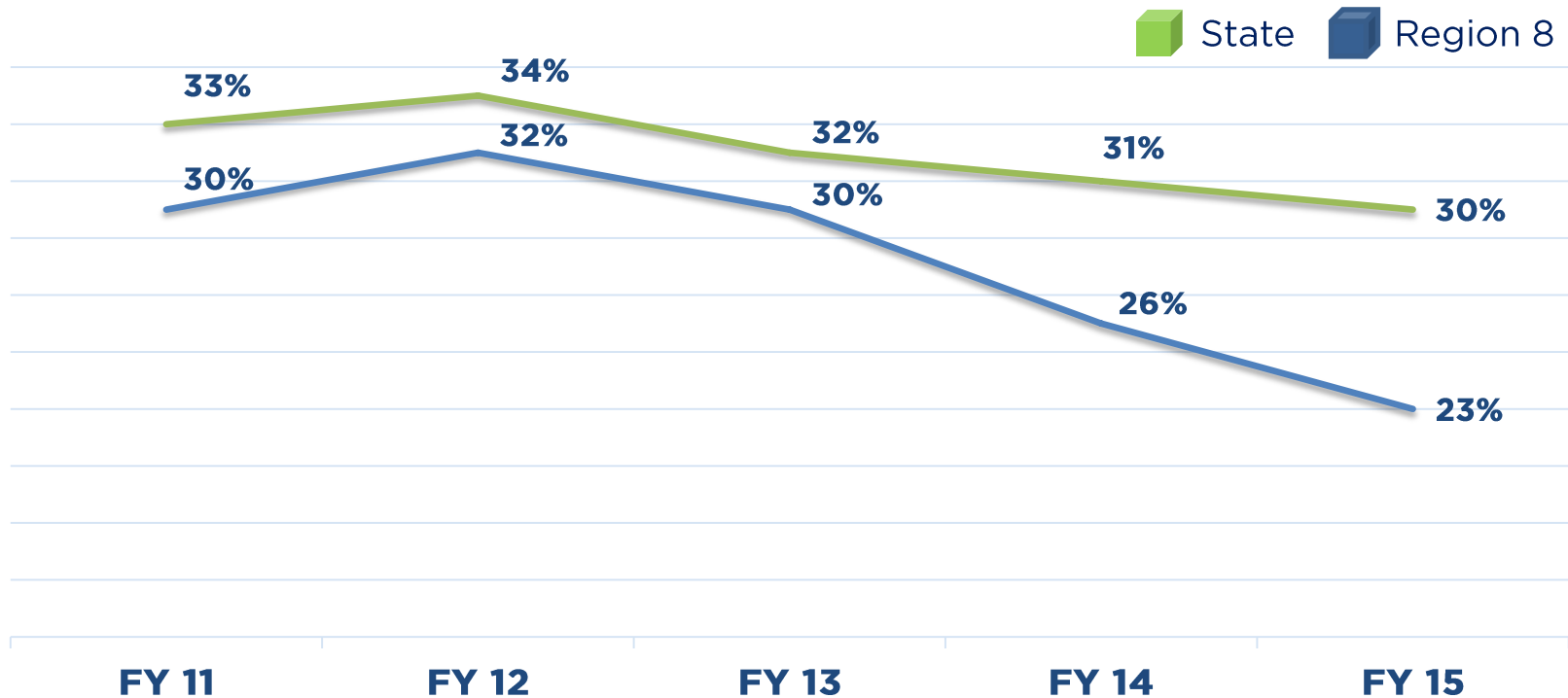
Levels of care for children 0-17 in Foster Care



Data source: DFPS data warehouse report SA_01, excludes children with a blank or end-dated LOC

Children are less likely to reunify

Exits to Reunification through July



Data source: DFPS data warehouse report PMAT_01

Residential Treatment Center Statistics

RESIDENTIAL TREATMENT CENTER

- *36 Bed Facility* for children ages 5 to 12
- Average stay is *295 days*
- *Served 60 children* in Fiscal Year 15

Discharged 26 — All discharged to less restrictive environment

- 6 discharged to *bio parent*
- 4 discharged to *kin*
- 2 discharged to *adoptive family*
- 14 discharged to *therapeutic foster homes*

Residential Treatment Center Model to Permanency

Phase 1

- Child arrives at RTC
- Psycho education about trauma
- Family engagement meeting- Parents, CPS, CASA, Attorneys, and other providers
- TBRI® & SAMA training for parent
- Discuss structure and routine in current and new setting
- Start obtaining psychiatric and medical providers
- Discuss life changes & Goals
- Court information- bio families
- Begin - campus visits
- Introduce Family Strengthening Support

Phase 2

- Engage in family therapy
- Complete CANS caregiver assessment on parent
- Parenting traumatized children training
- Visits on campus
- Discuss life changes
- Discuss triggers of child's behaviors and of parents
- Involvement in our services
- Discuss/create safety plans
- Increase collaboration with other providers
- Transition plan
- Family engagement meeting
- Child care for therapy sessions
- Discuss off -campus visits
- Continue Family Strengthening Support

Phase 3

- Define respite and child care
- Attend psychiatric, medical, and ARDs at RTCI and current school
- Family engagement meetings to discuss discharge
- Discuss life changes
- Identified and make appointments for psychiatric, medical, dental, school.
- Transition plan
- Overnight visits
- Determination of exit to permanency

Recommendations Model to Permanency

- ✓ **Tailored Service Plan for child and family**
- ✓ **Trauma informed environment & treatment**
- ✓ **Evidence based practices**
- ✓ **Family Engagement**
- ✓ **Wrap-Around Services**
- ✓ **After-care services**
- ✓ **Rework RTC Contracts & Funding**



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