


Residentially Based Services

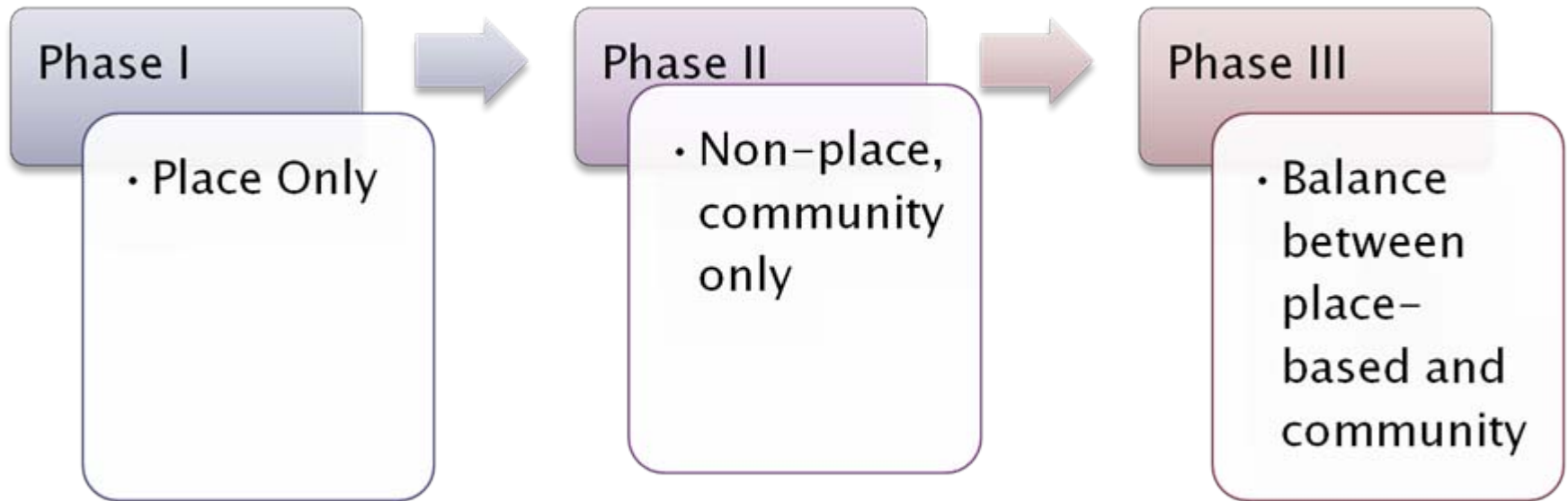
Implications for Providers

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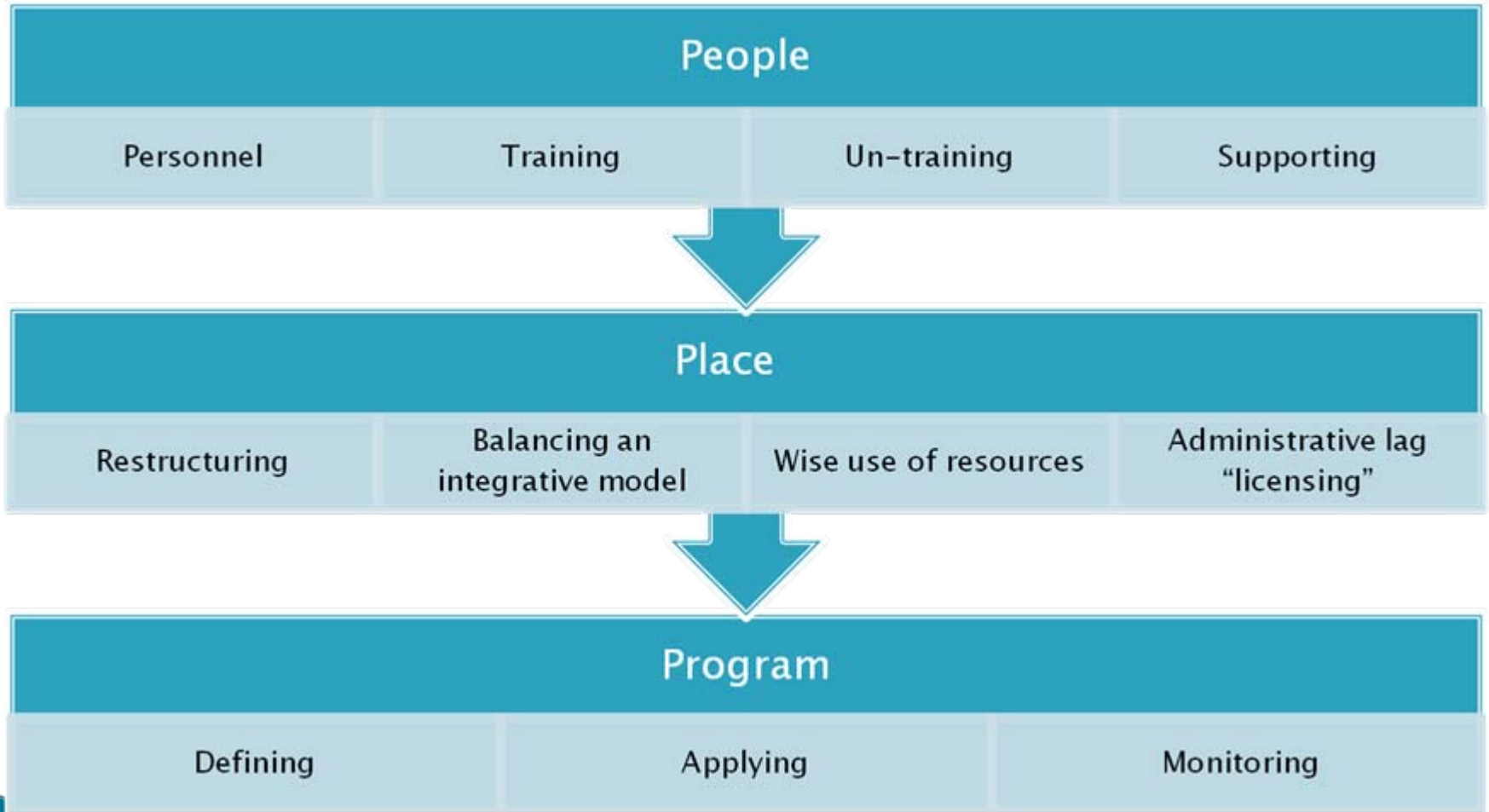
Changing the Metaphor of Help

- ▶ From something you get to something you do
 - Service as an action verb
 - ▶ Holistic & integrative approaches
 - Across a variety of organizational, life areas, disciplines
 - ▶ Involvement/voice as an organizing feature
 - Not so much what you get but how much say you have over what you get
 - ▶ Linking organizing with intervening
 - People to plan for delivery along with interveners
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Changing Metaphors



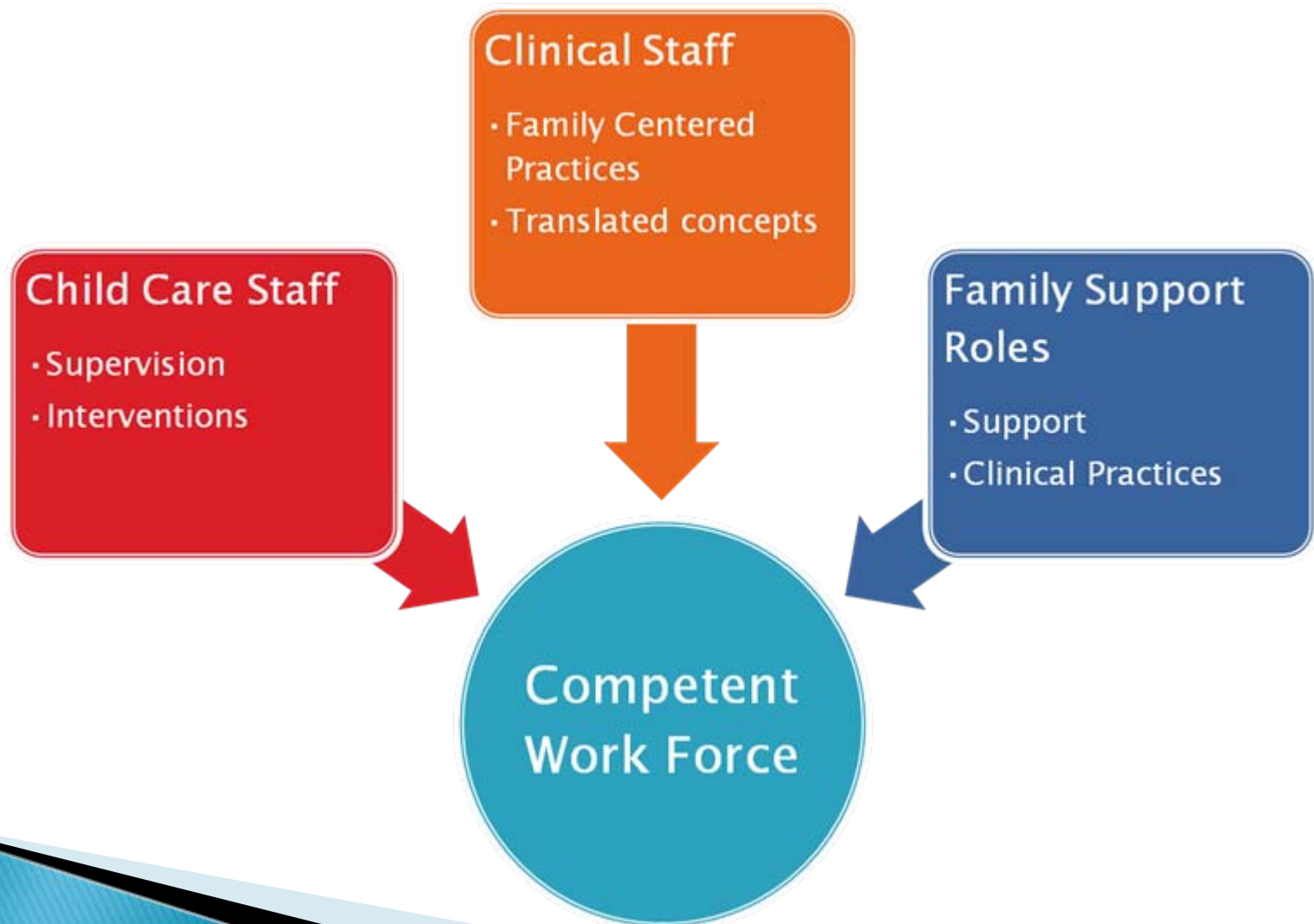
Focus Areas in RBS Project



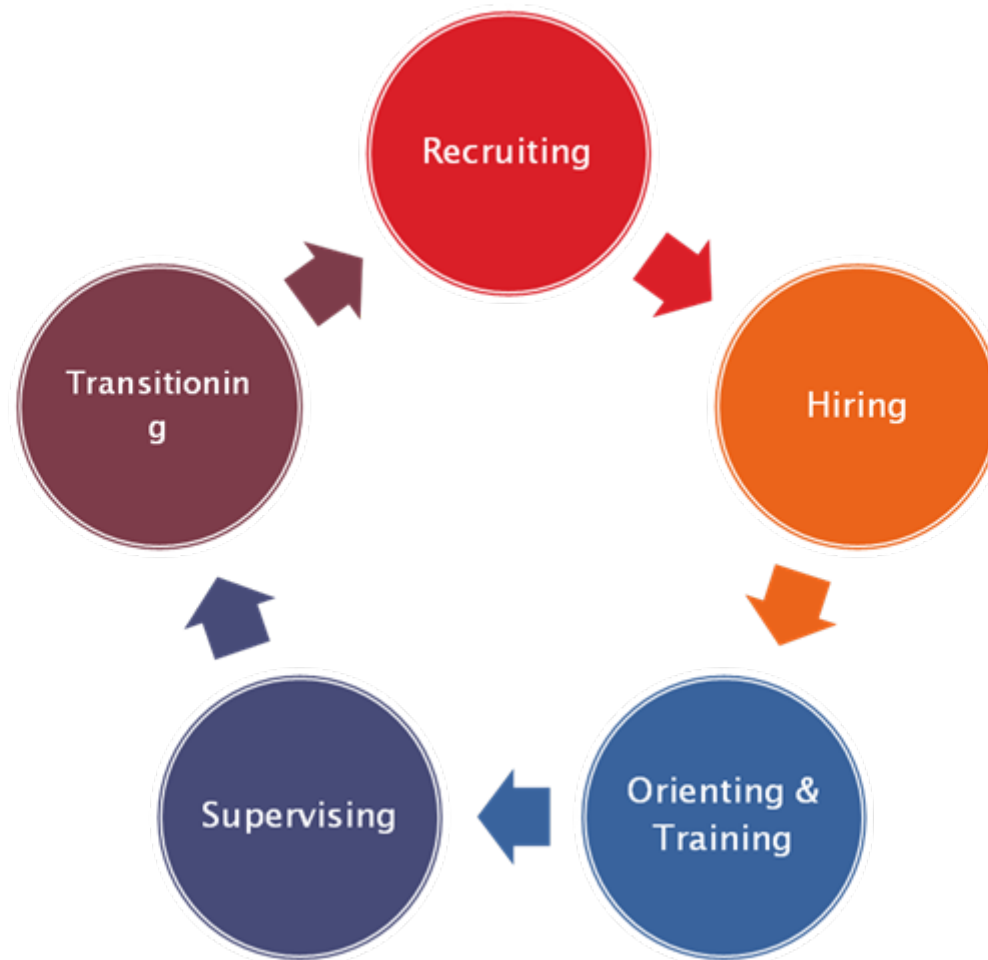
People Considerations

Preparing the Workforce Individually and
Organizationally

Three Focus Areas for Residential Providers



Work Force Development Cycle



Recruitment Considerations

▶ Clinicians

- Recruiting for integrated therapeutic approach with therapy technique
- Recruiting those who can integrate “equally” with other roles
- Defining your specific model beyond the “credential” only

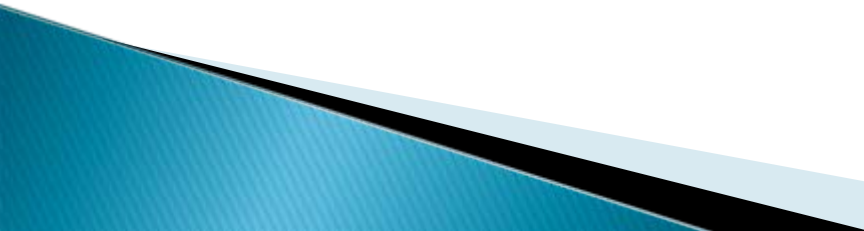
▶ Child Care Staff

- Recruiting for foundational level career development
- Capturing a family centered & community based orientation in recruitment materials
- Do you recruit those with experience elsewhere as your model changes?
- Developing the next level career path

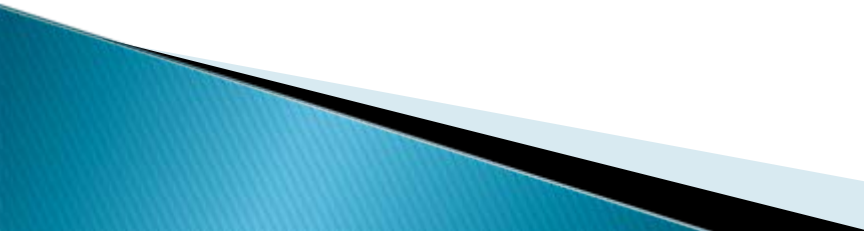
▶ Family to Family roles

- Recruiting with an open door for all families
- Integrating records of recipients of service while recruiting for this role
- Capturing the personal feeling with the job & skill expectations

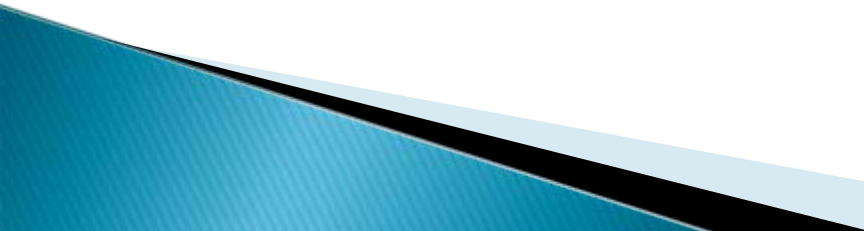
Hiring Considerations

- ▶ Building capacity to hire within the agency
 - A major challenge may sometimes be the facility licensing rules and the past history of parents/family members
 - Who you want to hire because of their past history
 - ▶ Involving families including youth in hiring models
 - Parents screening potential employees
 - Creating youth voice & input during the hiring process
 - ▶ Integrating practice model, values & big ideas into hiring questions
 - ▶ Seeing Human Resource functions as a means towards communicating your vision
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Orientation & Training Considerations

- ▶ Communicating agency standards & expectations as part of training
 - Standard practice, usual practice & your agency practice
 - ▶ Moving from a values based model to a skills based model
 - ▶ Creating the right foundation for a skill set for all roles
 - Balancing generalist knowledge with unique specialist roles
 - ▶ Moving from a training/compliance focus to creating a learning environment
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Managing & Supervision Considerations

- ▶ Does the supervisor know the behavior they are looking for?
 - ▶ Can the supervisor teach it?
 - ▶ Can you impact the behavior of supervisors?
 - ▶ If you impact the behavior of supervisors, can they impact the behavior of employees?
 - ▶ Will that employee practice in a way that fits with your stated values?
 - ▶ If the employee practices in this way, will it result in improved outcomes for the right price while thrilling and delighting your customers?
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Transition Considerations

- ▶ Moving on, Moving Out
 - Does advancement follow expertise?
 - Does advancement occur best when people move on?
- ▶ Multiple career ladders
 - Moving up in terms of management/supervision
 - Moving up in terms of expert practice

Final Considerations

- ▶ Differentiate between supervision & training
 - ▶ Create industry wide standards of competence
 - ▶ Invite end users/customers to comment on skill/competency
 - ▶ Create multiple methods of advancement
 - Expert practitioner, management, supervision
 - ▶ Incentivize continual learning
 - ▶ Make long haul investments
 - ▶ Create right size contingencies for the work force
 - ▶ Publicize the role within the larger community to gain acceptance for the field
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Implementation Challenges at the Response Level

- Importance of Changing Staff Roles
 - Clinical Supervisors to Family Support Supervisors
 - Fill-in Shift Workers to In-home Crisis Respite Providers
 - Residential Shift Workers to Family Support Workers or Community Inclusion Specialists
 - Development Directors to Family Resource Expeditors
 - Cooks, Facility Specialists to Family Trainers on maintenance issues

Place Considerations

Restructuring Your Capital



Implementation Challenges

What about the beds?

▶ Service Conversion: From Where to What

- Residential Treatment Centers
 - Crisis Stabilization Units
 - Case Planning & Assessment Centers designed to assist with Child Welfare Planning
 - Family Centered Support Centers designed to provide training & support for families in building effective skills for supporting their children
 - Education, research & resource centers to assist with reengaging community supports for families
 - Re-entry models for families long separated
 - Transitional living labs for young people “in between”
- Day Treatment/Partial Hospitalization Programs
 - Inclusion Specialists designed to support children in home schools
 - Technical Assistance & Training to schools about family centered practice
 - Crisis Stabilization Day programs of no more than two weeks in order to return students to regular classrooms
 - Follow along services for students & families post crisis
 - Training sites for personnel on building effective skills: Model Service Site

Program Considerations

Restructuring Your Capital



Unique issues with RBS

- ▶ Pace
 - How quickly do you need to act? If you can stabilize in community until the bed becomes open why can't you simply stabilize?
- ▶ Direction
 - What is the purpose of the intervention? 24 hour stabilization or cure?
- ▶ Intensity
 - Does the amount of what you're doing fit with the need? In other words do you need 24 hours of it, 18 hours, 12 hours, 6 hours?
- ▶ Depth
 - "Good enough" outcomes and residential as a chapter rather than the book
- ▶ Duration
 - How to assure the right timed response? Building capacity to turn it on or off based on "right now" need?
- ▶ Ecology
 - Does this facility, campus, setting create a sense of the therapeutic community?

Other considerations

▶ Price

- Youth & Family
 - Youth loses connections
 - Parent loses confidence
 - Does the therapeutic benefit outweigh the human prices?
- Community price
 - Removing youth from community results price paid by community

▶ Generalization & Transfer of experience

- Creating capacity for families to “own” their child’s situation
- Creating capacity for communities to create welcoming places

Implementation Challenges

▶ Clinical Backlash

- Increasing use of clinical interventions as a means of resisting change process
- The “we’re already doing it” syndrome
- Market forces identifying children and families to fill existing slots
- Creation of additional “slots”
- Using categorical interventions as a means of increasing community capacity

Implementation Challenges

- Administrative & Fiscal Lag
 - Build capacity at line staff level to understand expenditures
 - Develop contracts which support flexibility at direct service level
 - Identify opportunities for flexibility in existing contracts
 - Identify disincentives for family friendly practice
 - Develop revenue enhancement schemes which support perpetual novelty at practice level

Your Own Vision

- ▶ Is it flexible enough?
 - To stop funding what you've been doing
- ▶ Is it comprehensive enough?
 - Have you considered the need for change at all levels?
- ▶ What is your financing model?
 - Cost/Price
- ▶ What's your Provider Development model?
 - Who are you dealing with?
 - Trust based, authority based, coercion based?

Your Own Theory of Change

- ▶ Have you created enough opportunity for conversation between funder & provider?
- ▶ Have you created enough opportunity for personnel to get it?
- ▶ Have you started with trust & understanding building so you know you are talking about same things?
- ▶ Are you prepared to change your own practice patterns?
- ▶ Are you aware of your management culture? Of others?

Framing Questions for Direct Interventions

▶ Guarantees

- What kind of guarantees do you need?
- What can you give?

▶ Responsibilities

- What type of responsibility can you share?
- What type of risk?

▶ Information

- Do you need?
- Don't you need?

What Do You Need to Do to Prepare?

▶ People

- Create a concept for child care workers
 - An evidence based or at least value based model for workers
- Develop models around strengthening supervision
- Tying practice to purpose

▶ Place

- Define right size organizational environments including facility
- Define and redesign your host environment to associate with greater fit, more potency, etc.

▶ Program

- Define key measures of excellence
 - Focus on what you're doing versus what you're not doing
- Create core practice patterns
 - Minimalist models
- Open your program loops for feedback and change