# SELF-STUDY COURSE

## Residential Programs for Struggling Adolescents

September 2015

## 2.0 Training Hours

**NOTE:** The information in this self-study applies to parents/caregivers who have full custody over the children in their home. If you are a foster parent who believes a child in your home would benefit from a residential program, you should contact your child's social worker or Guardian ad Litem to begin a discussion.

This self-study was written by Ruth Post, M.S.W. with the Alaska Center for Resource Families in Northern Region and is derived from the following sources:

<u>Maximizing the Outcome of Residential Treatment</u> by S. Biddulph (2015). Available from: *http://www.natsap.org/for-parents/articles-for-parents/maximizing-the-outcome/* 

<u>A Resource for Families Considering Residential Treatment Programs for Teir Children</u> by the National Alliance on Mental Illness (NAMI, 2008). Available from: *https://www2.nami.org/* 

Your Life- Your Future. Inside Info On The Residential Program From Youth Who Have Been There From the Building Bridges Initiative http://www.buildingbridges4youth.org/products/tip-sheets

<u>Supporting Siblings When A Brother/Sister is Receiving Residential Intervention</u> Building Bridges Initiative <u>http://www.buildingbridges4youth.org/products/tip-sheets</u>

The questionnaire at the back of this course is a way for the Alaska Center for Resource Families to assess that you have read and understood the information provided. In order to obtain training hour credit for this course, please complete the questionnaire and return it to the address below. You may keep this self-study for further reference.



Alaska Center for Resource Families 815 Second Ave Suite 202 Fairbanks, AK 99701

1-800-478-7307 479-7307 (Fairbanks/North Pole) <u>www.acrf.org</u>



## Residential Programs for Struggling Adolescents

#### Introduction

Resource families care for children who, due to acute and chronic trauma histories, may experience ongoing behavioral and mental health issues as well as developmental delays and challenges. There are times when the severity of a youth's special needs may be best served by temporary placement in a residential program that offers intensive, targeted intervention strategies. The onset of puberty and adolescence may trigger dangerous behaviors such as running away, self-harm, drug use, or other destructive, negative behaviors that escalate beyond parents' ability to manage them safely in the home. Residential treatment programs provide an option for families after less restrictive alternatives (such as intensive therapy, respite, outpatient treatment programs and other local resources) have been exhausted without success.

The decision to place a child in a residential treatment program should be made carefully to ensure the program meets the needs of your child and family. This self-study provides general information about the different types of residential programs and guidance on what to consider when approaching residential treatment as an option for your child. It is important that parents do their homework and research residential and therapeutic programs because not all programs are equal. You as a parent need to keep your individual youth's needs and situation in mind.

**NOTE:** The information in this self-study applies to parents/caregivers who have full custody over the children in their home. If you are a foster parent who believes a child in your home would benefit from a residential program, you should contact your child's social worker or Guardian ad Litem to begin a discussion.

#### **Types of Residential Programs**

Residential programs range from wilderness programs to intensive metal health centers. It is important to note that residential programs in the United States are largely unregulated, particularly those receiving private funding, and there is no broad requirement or standard for licensing. Caregivers should carefully assess any program under consideration to ensure quality of care and ensure youth and family rights are protected. Residential programs vary in their focus on specific behavioral and mental health issues, but programs commonly employ behavior modification models that build on a core of highly structured activities and daily routines, and peer interaction. The following provides a general description of major residential program categories: *Mental Health Diagnostic Center:* Facility that provides short term (less than 90 days) psychiatric care and diagnostic services intended to stabilize a patient in crisis and provide assessment for intervention and treatment planning. Diagnostic centers typically have staff trained in emergency mental health care. The centers have capacity for medical and psychiatric diagnostics and medication management.

**Residential Treatment Center (RTC):** Facility with the highest level of restriction both for resident's movement and family access. RTCs are usually licensed and regulated by the state, and most have certified academic programming onsite. RTCs provide a highly structured environment with standardized activities and daily routines, limited community interaction and controlled visitation. Common therapeutic strategies include group and individual counseling, behavioral reward systems, and medication management. RTCs use therapeutic programming to address resident's individual treatment objectives toward a goal of family reunification. There are many types of RTCs and facilities may specialize in particular special needs such as autism disorders or substance abuse, or have broad-based programming for youth with more generalized behavioral issues. Some RTCs are located in rural areas on ranches or farm properties and may incorporate work and animal experience as part of the therapeutic model. Programs are individualized and residency can be months to years.

*Group Home:* Group homes are similar to RTCs with a step down in restrictiveness. Group homes often integrate residents into the local school system and allow more opportunity for residents to have jobs and structured activities in the community. Staff members may live in the group home as "teaching parents" providing mentoring and role modeling while helping residents learn and practice appropriate behaviors. Group home programs usually employ individual, group, and family counseling. Acts of violence and chronic running away are often disqualifying factors when applying for group home services.

*Therapeutic Boarding School:* These schools offer supportive educational services within a therapeutic setting for troubled youth with a range of behavioral problems that are holding them back academically. The focus is primarily on academic achievement, with less effort toward specific interventions to address underlying emotional or behavioral problems.

*Wilderness Programs:* These programs use exposure to nature through camping, hiking and outdoor experiences to foster self-confidence, teach cooperation, build positive peer relationships, and to work through internal conflicts and emotional obstacles. There are typically no specific interventions to address underlying emotional or behavioral problems. Wilderness programs typically have scheduled program start dates and run 30-60 days.

**Boot Camp/Military Schools:** These programs use authoritarian methods that employ discipline, military exercises, and rigorous physical training to foster self-control, self-esteem and respect for authority aimed toward improved behavior at home. Military schools also focus on academic completion. There are typically no specific interventions to address underlying emotional or behavioral problems.



## Residential Programs for Struggling Adolescents

Your Child in Residential Treatment

Considering a residential program means you as a parent need to ask questions and determine what will be best for your youth. All parents want the residential program they choose for their youth to be effective and safe. In addition to the information in this section, we have included two lists in the appendices that will help you in your evaluation of programs. Appendix A: *Rights Of Youth And Families To Prevent Abuse And Neglect* and Appendix B: *Licensing And Accreditation Checklist* were both put together by the National Alliance on Mental Illness.

#### **Enrolling in a Residential Program**

*Identify appropriate services:* The first step in accessing a program is to identify what therapeutic interventions might best suite your child's challenges. Many programs require mental or behavioral health pre-assessments. Other considerations include: payment options, ability to visit with the child in person, expected length of stay, location, youth's behavioral needs, child's physical and/or emotional capacity to participate in the program model, and academic support.

*Contact and Apply to Program:* While a few programs require professional referrals, most will work directly with parents to answer questions and begin the application and enrollment process. Finding residential programs can be overwhelming. Please see the Additional Resource section for contacts for a start in locating programs.

*In Alaska or Out of State – Things to Consider:* You may find a program in Alaska that meets your youth's need or you may be looking at a program that is in another state. How do you decide which one is best for your situation? **GRAPH #1** below gives some information about the "pros" and "cons" about using a program in Alaska (In State) versus using a program Out-of State.

#### GRAPH #1: In-State Vs. Out-Of-State Programs

		<ul> <li>Child is closer to home, lessens shock of transition</li> </ul>
		<ul> <li>Family contact is easier, personal visits often possible</li> </ul>
	0	<ul> <li>Integrate family contact into therapeutic plan</li> </ul>
e	PRO	<ul> <li>Local after-care resources</li> </ul>
In State		<ul> <li>Continuity in educational curriculum or school enrollment</li> </ul>
In		<ul> <li>Medicaid available</li> </ul>
	CON	<ul> <li>Limited number of program options</li> </ul>
		<ul> <li>Fewer available beds, wait list likely</li> </ul>
		<ul> <li>Medicaid may be limited</li> </ul>
		<ul> <li>A 'clean break' can encourage youth's engagement</li> </ul>
Out of State	PRO	<ul> <li>Broader range of programs targeting specific special needs</li> </ul>
		<ul> <li>Distance from local influences keeping the child stuck in poor behavior</li> </ul>
	•	<ul> <li>Disruption in educational curriculum</li> </ul>
0	CON	<ul> <li>Far to travel, which limits family involvement</li> </ul>
	C	<ul> <li>May be harder to transition home</li> </ul>

*Interview the Program Representative:* As a parent, you need to research and do your homework to determine whether this program will address the needs or your youth. You want to find out if your youth will be safe and what kind of therapeutic program he or she enrolled in. The following list of *Questions to Ask* (Adapted from NAMI 2008) can help you get started:

- How are individual therapeutic plans established, monitored and modified?
- How does the program define and measure outcomes and success?
- What is the average length of stay for youth in the program?
- Which staff members will be working with your child and what is the experience that qualifies them?
- What are the program's disciplinary policies and procedures?
- How will the program respond to specific behaviors exhibited by your child?
- How much written and verbal contact do they allow between caregivers and their child?
- Do caregivers have open access to the facility?
- What academic curriculum does the program use and how are academics implemented?
- Does the program offer classroom learning or independent study? What is the ratio of students to teachers?

- Are academics ongoing or only offered when the young person reaches a certain point in the recovery process?
- Have there been any reports of unsanitary or unsafe living conditions, inadequate staff supervision, medical neglect, physical or sexual abuse of youth, or any violations of youth or family rights?
- What relationship exists between the residential program and agencies or individuals that have referred the family to the program?
- How does the program prepare youth to return to his home and community?
- Does the program provide necessary referrals or connections for after release from the program?

You should also include any questions about your particular youth's needs. For example, if your son is experiencing Fetal Alcohol Spectrum Disorder (FASD) and that is complicating his behavior, you will need to find out what experience and skill the residential staff with this disorder. "One size fits all" treatment may not work for your child if he has a cognitive or intellectual disability or has experienced complex trauma.

*Financial Considerations:* Residential programs can be very expensive, as much as \$20,000 or more monthly for some RTCs. It is critical to understand, in advance and in detail, the costs and payment options for the program. Many programs are not covered by insurance or Medicaid and some offer sliding scale payment. In Alaska, children in out-of-home treatment or care usually qualify for Denali Kid Care after 30 days even if parents have private insurance. Contact the individual program for current financial information and thoroughly understand.

**NOTE:** The State of Alaska has established guidelines under the "Bring the Kids Home" policy, which places some restrictions on accessing Medicaid funded placements in out-of-state treatment facilities. More information is available through the Alaska Department of Health and Social Services (http://dhss.alaska.gov/Commissioner/Pages/btkh/default.aspx).

**Preparing Your Youth for Residential Care:** Your youth may be resistant, combative, welcoming or fearful of the idea of going into a residential care program. If you are working with a therapist, seek guidance of how to best prepare your youth. Parents needs to make the best decisions for their youth and youth may not always agree. However, if youth can be engaged on some level, obviously the process will go smoother for everyone. **Appendix C** includes an article called "Your Life—Your Future: Inside Info on the Residential Program from Youth Who Have Been There" which was specifically written for youth entering residential care. It offers a list of questions to help youth understand what to expect and help him become an active player in his own recovery.

*Transporting Your Child:* Bringing your child to the program may be difficult if it is out-ofstate or he is being compelled to attend. Some programs have escort options, but these may require out-of-pocket payment or use of hospital emergency mental health services. Contact the

## While Your Child is in Treatment (adapted from Biddulph, 2015)

Enrolling a child in a residential treatment program often evokes strong emotions in parents that range from relief and hope to guilt and sorrow. While these are normal feelings, how you act upon these emotions can significantly influence how much benefit you and your child get from treatment. There are several ways caregiver's can support the child's progress through treatment:

- 1. Accept the Need for Care: Your child may be resistive to treatment, but you need to be focused, resolute, and positive. Support the program and the professional staff working with your child. Create an expectation of success.
- 2. *Take Responsibility:* Successful parents do not blame themselves, their child, or circumstance, nor do they try to project blame onto program staff. Rather, they take responsibility to help solve problems and expect the same from the child and staff.
- 3. *Know the Plan:* Fully understand the therapeutic plan for your child including the metrics for success. Ensure the plan is being followed by staff and bring concerns forward if you feel changes might be beneficial.
- 4. *Be a Team Player*: Fully participate in any family therapy and visitation. Provide the direct care staff with information and insight to your child and provide positive support and unconditional love to your child. Work with the staff to identify and resolve problems, rather than trying to direct and control the process.
- 5. *Advocate for Your Child*: While you are part of a team, you are still your child's primary advocate and you must ensure their physical and emotional safety and therapeutic progress while in the program. Be empowered to question staff about anything involving your child or their care. When in doubt, enlist assistance to assess whether the program remains a positive situation for your child.
- 6. Foster Positive Relationships: Relationships are one of the most important factors to emotional healing. You can help your child succeed by promoting four positive relationships:
  - *Child with Staff:* Encourage your child in positive relationships with staff. Ask about staff they like and minimize listening to complaints about those they do not.
  - *You with Staff*: Model positive interactions, trust and respect for staff. Be proactive in communicating with the program staff on all matters.
  - *Child with Self:* Foster self-esteem, notice small steps made, and do not shy from talking about the problems your child is working on.
  - *Child with You/Family:* Life is more than treatment. Maintain regular contact and visits as allowed and remember important dates and holidays. Let your child know you love and value them and look forward to their return to the family. Talk about more than treatment and problems and keep your child involved in the family.



## Residential Programs for Struggling Adolescents

### Returning to the Family

Most youth transitioning home benefit from some continuation of services such as family, group or individual counseling, medication management and/or participation in supportive social programming. Planning for continuation of services is important for both the youth and the family while they adjust to a new way of being a family together. Specific ideas for smoothing the transition include:

*Have a Plan:* Children exiting residential programs typically have detailed discharge plans established with input from the treatment team, youth and caregivers. These plans may include a step down to a less restrictive, local facility prior to family reunification and/or continuation of specific services or medications. If a formal plan is not developed, caregivers should still develop a plan to follow that will support the youth as they adjust back into their home and community. A plan may include supervision strategies, expectations for behaviors in the home and school, and specific resources that can be implemented, if needed.

**Prepare for Reunification:** The returning child and family all need time to mentally prepare for being together again. Other children in the home may feel angry, fearful or jealous at having a sibling return, and parents may be stressed or worried about the future. It is important to address feelings and concerns before the child returns and, when appropriate, they can be addressed in the discharge plan. (Refer to Appendix D: Supporting Siblings When a Brother/Sister is Receiving Residential Intervention)

*Trial Runs:* When possible, starting the transition with a period of overnight and extended visits home provides an opportunity to "practice" new skills for the child and as a family. Parents and child can examine what is working and any issues that should be addressed before discharge. Parents can also practice parenting their recovering child and may identify skills or strategies they want to develop before full reunification.

*Establish Routines and Structure:* Youth returning from treatment have often become used to a highly structured environment and find it challenging to step back into the flexibility and freedom of family life. Establishing routines and boundaries can be critical to helping them maintain self-control and avoid reverting to old behaviors. Creating structure may also affect others in the family, so it is important to address needs of all family members when implementing new strategies.

*Write a Contract:* A written contact can take much of the emotion out of implementing new expectations and structure in the home. A contract is best written prior to discharge and should include input from the returning child. Contracts should detail responsibilities and expectations, consequences and rewards, and should be simple enough to be implemented quickly and consistently.

*Encourage Productive Communication:* Maintaining progress made while in residential treatment is best supported by open and honest communication among all family members. A child may not express themselves for fear of being returned to treatment and a sibling may act out in uncharacteristic ways. One parent may feel more stress than the other or respond more sensitively to brief set-backs with the child. Non-threatening communication can be promoted through regular family meetings or mealtimes, two-way journaling, idea boxes and bedtime "check-ins." Family counseling can help support and strengthen family relationships that have been stressed.

**Be Flexible and Positive:** Your child and family have developed new ways of operating while separated and it may take time to realign the family to work smoothly. The family dynamic may have changed in unexpected ways that will require different parenting strategies. A child may be much older returning home and may have a dramatically different emotional skill set. It is critical that caregivers allow for positive change, which may mean rethinking long established family rules or habits that may no longer apply. Having a positive attitude and adjusting parenting strategies to reflect your child's progress can be reaffirming for both the child and family.

#### **Additional Resources**

- National Association of Therapeutic Schools and Programs: www.natsap.org
- National Alliance on Mental Illness: www.nami.org
- Alaska Residential Treatment Center Index: http://www.residentialtreatmentcenters.me/alaska
- State of Alaska Division of Behavioral Health Map of Residential Care Facilities in Alaska:<u>http://dhss.alaska.gov/dbh/Pages/Residentialcare/map.aspx</u>
- **INFORMATION PACKET: For Families Considering A Residential Program** Available through the Alaska Center for Resource Families

## RIGHTS OF YOUTH AND FAMILIES TO PREVENT ABUSE AND NEGLECT

#### From the National Alliance on Mental Illness, 2008

- ✓ Youth should have reasonable access to a telephone to make uncensored calls.
- ✓ Youth and caregivers should always be provided with hotlines to call at any time if they feel that their rights are being violated or they are being mistreated.
- ✓ Caregivers should always be notified if their child is sick or injured.
- ✓ Caregivers should always be notified within 24 hours about medication changes and missed dosages.
- ✓ Caregivers should always be notified within 48 hours of any on-site investigations or reports of child abuse and neglect, violation of health and safety standards, or violations of state licensing standards.
- ✓ Youth should never be subject to abusive disciplinary methods, such as seclusion, restraint, corporal punishment, fear tactics, humiliation, forced labor, medicinal sedation, or the withholding of food, water, clothing, shelter, or medical care.
- ✓ Caregivers should never be approached with funding incentives to relinquish custody of their child.

## **Appendix B:**

## LICENSING AND ACCREDITATION CHECKLIST

From the National Alliance for the Mentally Ill (2008)

- Program is accredited through an independent organization, such as the following:
  - Joint Commission on the Accreditation of the Healthcare Organizations (JCAHO)
  - Council on Accreditation (COA)
  - Commission on Accreditation of Rehabilitation Facilities (CARF)
- ✓ Accreditation covers all components of the program: the base program, the drug and alcohol component, the wilderness program, etc.
- Program is licensed through the State Department of Health and Human Services or its equivalent.
- License covers the educational, mental/behavioral health, and residential components of the program.
- Program has full-time licensed therapists and medical professionals on staff to serve youth with specific psychiatric diagnoses.
- ✓ All claims can be verified with the appropriate licensing or accreditation office.
- ✓ Program performs background checks on all of its staff members.
- ✓ Staff is certified in CPR and other emergency medical procedures.
- ✓ Academic teachers are licensed and certified with degrees from accredited colleges.

## Appendix C

## YOUR LIFE- YOUR FUTURE: INSIDE INFO ON THE RESIDENTIAL PROGRAM FROM YOUTH WHO HAVE BEEN THERE

From Building Bridges Initiative <u>http://www.buildingbridges4youth.org</u>

We will put in this article for this section. <u>http://www.buildingbridges4youth.org/sites/default/files/BBI%20Youth%20Tip%2</u> <u>OSheet%20short(1).pdf</u>

## **Excerpt from Tip Sheet "Supporting Siblings When A Brother/Sister is Receiving Residential Interventions"**

From Building Bridges Initiative <u>http://www.buildingbridges4youth.org</u>

## ALASKA CENTER FOR RESOURCE FAMILIES SELF-STUDY QUESTIONNAIRE FOR FOSTER PARENTS

## **SUBJECT: ADOLESCENCE**

## COURSE: <u>RESIDENTIAL PROGRAMS FOR STRUGGLING</u> <u>ADOLESCENTS</u>

## 2.0 TRAINING HOURS CREDIT

Please read the above self-study. Then complete the questionnaire found on the following pages. Try answering the questions first from what you remember from the reading. Then review the course if necessary. These questions pertain specifically to the course, which you have read.

After you have answered all the questions, please send your completed questionnaire to the **Alaska Center for Resource Families, 815 Second Avenue, Suite 202, Fairbanks, Alaska 99701.** We will score your answers and credit your training record credit with 2.0 training hours. A score of 70% correct or better will entitle you to receive training credit. You may keep the self-study course for future reference.

If you have questions or concerns about this self-study course, please call us on our toll-free line at **1-800-478-7307**. Fairbanks/North Pole call: 479-7307; Anchorage: 279-1799.

The following section is an evaluation of these self-study materials. Please fill it out upon completion of the questionnaire, and return this page to us with the rest of the course materials. Thank you for your time and comments. It helps us provide appropriate training to meet the needs of foster parents.

#### Please complete the following questions.

1.	Did this self-study course meet with your expectations?YESNO				
2.	How would you ra	te the written presenta	ation of information o	n the topic?	
	Excellent	Good	Fair	Poor	
3.	Did this course add	l to your knowledge a	nd/or skills?Y	ESNO	
4	C + /C				

4. Comments/Concerns:

OFFICE USE ONLY:

Score

Percent Correct

#### **Residential Programs for Struggling Adolescents** PHONE NO.: NAME: Only one person per questionnaire. Feel free to make additional copies if needed. ADDRESS: Street or Post Office Citv/State Zip EMAIL: О YES! I would like to receive ACRF email. (Includes Training Tracks Newsletter, training reminders and community events or training of interest for resource families) Are you a foster parent? **O** YES **O** NO If YES, what is your Foster Home License #:\_\_\_\_\_ If NO, please check one: **O** Pending Foster Parent **O** OCS **O** Birth Parent **O** Adoptive Parent • C Residential Treatment Facility (License #: \_\_\_\_\_) O Agency:\_\_\_\_\_ **O** Other (*please specify*): \_\_\_\_\_

### **CHECK YOUR UNDERSTANDING**

Please answer the following questions. These questions address information specifically stated in the self-study course. Please try to answer them first from what you remember from the course before referring back to the self-study materials.

You should consider a residential program for your child as soon as there are emotional or behavioral 1. problems.

TRUE a. b. FALSE

- The onset of \_\_\_\_\_\_ and \_\_\_\_\_ may trigger dangerous behaviors such as running 2. away, self-harm or drug use. (FILL IN THE BLANKS.)
- All residential programs are licensed and regulated by their respective state governments. 3.
  - TRUE \_\_\_\_\_ a.
  - FALSE b.
- 4. What should parents consider when selecting a residential program for their child? (CHOOSE ALL THAT APPLY)
  - The child's behavioral needs \_\_\_\_\_ a.
  - \_\_\_\_\_b. Payment options
  - Location с.
  - All of the above d.

#### CHECK YOUR UNDERSTANDING PAGE. 2 - "RESIDENTIAL PROGRAMS FOR STRUGGLING ADOLESCENTS"

- 5. The State of Alaska has established guidelines under the "Bring the Kids Home" policy, which places some restrictions on accessing Medicaid funded placements in out-of-state treatment facilities.
  - \_\_\_\_\_a. TRUE
  - \_\_\_\_\_b. FALSE
- 6. In Alaska, children in out-of-home treatment may qualify for Denali Kid Care after 30 days even if parents have private insurance.
  - \_\_\_\_\_a. TRUE
  - \_\_\_\_\_b. FALSE
- 7. Match the type of residential program in **Column A** with its definition in **Column B**.

COLUMN A	COLUMN B		
Boot Camp/Military School	A. Provides short term psychiatric care and diagnostic services intended to stabilize a patient in crisis and provide assessment for intervention and treatment planning.		
Wilderness Program	B. Has the highest level of restriction both for resident's movement and family access.		
Residential Treatment Center	<b>C.</b> Uses authoritarian methods foster self- control, self-esteem and respect for authority		
Mental Health Diagnostic Center	D. Provides educational services for troubled youth with a range of behavioral problems that are holding them back academically.		
Group Home	E. Integrates residents into the local school system and may allow residents to have jobs and structured activities in the community.		
Therapeutic Boarding School	F. Uses exposure to nature and outdoor experiences to foster self-confidence and to work through internal conflicts and emotional obstacles.		

#### CHECK YOUR UNDERSTANDING PAGE. 3 - "RESIDENTIAL PROGRAMS FOR STRUGGLING ADOLESCENTS"

- 8. Which of the following are useful ways for parents to participate with their child's treatment? (CHOOSE ALL THAT APPLY)
  - \_\_\_\_\_a. Accept the need for care
  - \_\_\_\_\_b. Sneak your child treats
  - \_\_\_\_\_c. Know the treatment plan
  - \_\_\_\_\_d. Advocate for your child
  - \_\_\_\_\_e. Blame yourself
- 9. Trusting relationships are an important component for successful therapy. Parents can support their child by fostering 4 different relationships important to their child's care. (CIRCLE THE FOUR RELATIONSHIP PAIRS).

Child with Pet	Child with Self	Pet with Self	Child with Family
Child with Staff	Parent with Staff	Parent with Siblings	Family with Friends

- 10. Youth returning from treatment have often become used to a highly \_\_\_\_\_\_ environment and find it challenging to step back into the flexibility and freedom of a family. (FILL IN BLANKS)
- 11. It is important to include other family members when planning a child's transition back home.
  - \_\_\_\_\_a. TRUE
  - \_\_\_\_\_b. FALSE
- 12. Most youth coming home won't need any continuation of services such as counseling, medication management or participation of other supports. They will be cured.
  - \_\_\_\_\_a. TRUE
  - \_\_\_\_\_b. FALSE
- 13. Name three (3) ideas given in the self-study to smooth the transition of a youth from the residential program back into the family setting.

a.)	 	 
b.)	 	 
c.)		

#### FOR SCORING AND TRAINING CREDIT OF 2.0 HOURS, PLEASE RETURN THIS QUESTIONNAIRE TO:

Alaska Center for Resource Families 815 Second AVE, STE 202 Fairbanks, AK 99701

OR FAX TO: 907-479-9666

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OFFICE USE ONLY:

Score

Percent Correct

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  - \_\_\_\_\_a. TRUE
  - \_\_\_\_\_b. FALSE
- 7. Match the type of residential program in **Column A** with its definition in **Column B**.

COLUMN A	COLUMN B		
Boot Camp/Military School	A. Provides short term psychiatric care and diagnostic services intended to stabilize a patient in crisis and provide assessment for intervention and treatment planning.		
Wilderness Program	B. Has the highest level of restriction both for resident's movement and family access.		
Residential Treatment Center	<b>C.</b> Uses authoritarian methods foster self- control, self-esteem and respect for authority		
Mental Health Diagnostic Center	D. Provides educational services for troubled youth with a range of behavioral problems that are holding them back academically.		
Group Home	E. Integrates residents into the local school system and may allow residents to have jobs and structured activities in the community.		
Therapeutic Boarding School	F. Uses exposure to nature and outdoor experiences to foster self-confidence and to work through internal conflicts and emotional obstacles.		

#### CHECK YOUR UNDERSTANDING PAGE. 3 - "RESIDENTIAL PROGRAMS FOR STRUGGLING ADOLESCENTS"

- 8. Which of the following are useful ways for parents to participate with their child's treatment? (CHOOSE ALL THAT APPLY)
  - \_\_\_\_\_a. Accept the need for care
  - \_\_\_\_\_b. Sneak your child treats
  - \_\_\_\_\_c. Know the treatment plan
  - \_\_\_\_\_d. Advocate for your child
  - \_\_\_\_\_e. Blame yourself
- 9. Trusting relationships are an important component for successful therapy. Parents can support their child by fostering 4 different relationships important to their child's care. (CIRCLE THE FOUR RELATIONSHIP PAIRS).

Child with Pet	Child with Self	Pet with Self	Child with Family
Child with Staff	Parent with Staff	Parent with Siblings	Family with Friends

- 10. Youth returning from treatment have often become used to a highly \_\_\_\_\_\_ environment and find it challenging to step back into the flexibility and freedom of a family. (FILL IN BLANKS)
- 11. It is important to include other family members when planning a child's transition back home.
  - \_\_\_\_\_a. TRUE
  - \_\_\_\_\_b. FALSE
- 12. Most youth coming home won't need any continuation of services such as counseling, medication management or participation of other supports. They will be cured.
  - \_\_\_\_\_a. TRUE
  - \_\_\_\_\_b. FALSE
- 13. Name three (3) ideas given in the self-study to smooth the transition of a youth from the residential program back into the family setting.

a.)	 	 
b.)	 	 
c.)		

#### FOR SCORING AND TRAINING CREDIT OF 2.0 HOURS, PLEASE RETURN THIS QUESTIONNAIRE TO:

Alaska Center for Resource Families 815 Second AVE, STE 202 Fairbanks, AK 99701

OR FAX TO: 907-479-9666