



Therapeutic After-school Program (TAP)

PROGRAM DESCRIPTION

NAME AND ADDRESS

The William George Agency for Children’s Services, Inc.
380 Freeville Road
Freeville, NY 13068

SERVICE LOCATION

380 Freeville Road
Freeville, NY 13068

PERSONS SERVED

- Males/Females
- Between the ages of 12 and 21
- Have a full scale IQ above 70
- Present with behavioral and or mental health needs, as well as, emotional dysregulation
- Must be in sufficient contact with reality (not actively psychotic nor actively suicidal)
- Can benefit from community based, preventive services

CONTRACTED CAPACITY

6 Females and 8 Males (Tompkins County)

RATIONALE AND OBJECTIVE

The William George Agency for Children’s Services Therapeutic After-school Program is committed to providing client-specific, outpatient therapeutic services to emotionally disturbed boys and girls residing within Tompkins County. Primary goals include the prevention of residential placement as well as family preservation and reunification. All services are provided with the goal of establishing our clients as productive contributing members of our local community. We are also committed to providing intensive family services in order to generalize the skills learned in the after school program to the home and community settings.

PROGRAM GOALS

- To provide our clients with the structure, support, and treatment needed to address dysfunctional patterns of behavior while remaining in the community.
- To actively teach the social skills necessary for successful functioning in the home, school, and community environments.
- To help youngsters learn to accept responsibility for their actions, feel empathy for others, and acquire effective self-control and self-management skills.
- To help maintain the youngster within the local community and prevent residential placement.

- To provide ongoing risk assessment and develop/implement an individual treatment plan for each youngster that is appropriate to their particular service needs.
- To effectively address and resolve any underlying emotional or psychiatric disturbance which is either causing subjective distress or contributing to behavioral problems.
- The identification and remediation of family issues, dynamics, or dysfunctions that are causing, contributing to, or supporting the youngster's behavioral and/or emotional problems; support of family preservation or reunification where possible.
- To provide a treatment environment that is conducive to each youngster's healthy growth and development.
- To provide youngsters with an appropriate and supportive educational experience.

TREATMENT SERVICES

Each client has access to a variety of services. A comprehensive individual Treatment Plan is developed within the first forty-five days of services for each client and his/her family based on their needs, motivation and situation. The Treatment Plan is reviewed on a regular basis thereafter. The program's service goals, education and re-socialization processes are all aimed to maintain the youth within the home of the parent and in the community.

Clinical

Family, individual, and group counseling are considered integral to the treatment plan. Each resident in the program is the responsibility of the clinician who provides individual and family counseling. Clients are seen in counseling individually on a weekly basis. Family counseling is arranged by the clinician and occurs, at a minimum, twice monthly. Group therapy sessions occur, at a minimum, twice weekly and are designed to meet the diverse clinical needs of our clients.

Psychiatric and Psychological

Evaluations are conducted as needed. Arrangements for evaluations are made with the consulting psychiatric nurse practitioner and psychologist through the Director. Our consulting psychiatric nurse practitioner is fully involved in the treatment planning process and are responsible for prescribing and overseeing the provision of psychotropic medicine.

Substance Use

Youth that participate in TAP have the opportunity to receive substance use treatment through the OASAS Program. OASAS is licensed by NY State Office of Addiction Services and Supports to provide assessments, individual, group and family services, referral services, and weekly drug screening.

Specialized Treatment Services

Comprehensive assessment/ individualized treatment planning, sex-offender specific assessment/treatment, ongoing assessment, OASAS assessment/ treatment, HIV/AIDS education services, family services, case management, appropriate discharge and aftercare planning, experiential therapy

Family Support Services

Systems-based family counseling, home-based meetings, weekly family contacts, monthly family support groups

After-School Educational Services

Teaching assistant to client ratio 1:2 for homework and remedial school work. Direct communication link and clinical support of the day school program

Medication Management

Youth that participate in the Therapeutic After-school Program have the opportunity to receive psychotropic medication services through the WGA's on campus psychiatric nurse practitioner. This service includes medication evaluation and prescriptions every two to three months or more as needed.

Respite Program

The primary purpose of respite is to provide a short-term placement option for children and families in crisis as a way to maintain family preservation. The goal is to work with the family/foster family to discover what happened, why it happened, and develop a plan that resolves the issue so the child can return home as soon as possible.

Campus Wide Services

Therapeutic recreation programs, equine therapy, adventure based counseling indoor ropes challenge course, Ewald dining hall and athletic facilities.

Weekend On-Call Crisis Support

The Director and Social Worker rotate on-call weekend support for all family members participating in TAP to support families during less structured periods.

RECREATIONAL SERVICES

Social, recreational, and cultural activities are an ongoing concern with our clients. A multi-faceted recreational program is available to all residents in this program, with daily structured and unstructured activities, the former including Adventure Based Counseling in the agency's indoor ropes course facility, and riding in the equine center. Clients and families are also encouraged and directed to seek and participate in such activities on their own, to make full use of programs and facilities in the community.

STAFFING

The program runs on Monday through Friday, year round, with the boys attending on Monday and Wednesday and the girls on Tuesday and Thursday. During regular school days, the program takes place immediately after the school day ends and runs until 7:30 pm. When school is on break, program hours are extended and begin earlier in the day and occur one time per week.

Youth Care Aides work in teams of two during the hours of 2:30 p.m. to 9:30 p.m. Clinical services are provided by the Director of the Therapeutic After-school Program and the programs' Social Worker. The teams are clinically supported by the Director of the Therapeutic After-school Program with consultations from the Agency's consulting psychiatric nurse practitioner, psychologist and medical staff.

STRUCTURE

This program itself encompasses Smith Cottage on the campus of The William George Agency. The cottage is used as the primary clinical setting for the delivery of services and provides space for groups, individual sessions and meetings. The cottage has its own community room where recreational activities such as computer/video based games, foosball and movies are watched or played during designated times.

STAFF DEVELOPMENT

Therapeutic Crisis Intervention (TCI)

- All of our staff receives initial TCI training upon hire.
- TCI refresher training every six months in agency wide trainings.

SELF-EVALUATION PROCEDURES

On an annual basis TAP conducts a study that uses eight measurable, performance based metrics to demonstrate the overall efficacy of services.

Metric 1: At least 75% of youth will not go into residential placement.

Metric 2: At least 75% of youth will not engage in delinquent or criminal behavior while they are receiving services.

Metric 3: At least 75% of youth will function satisfactorily in the family home or foster home as measured by a living arrangement that is non-disrupted.

Metric 4: 75% of the youth who receive substance abuse services will have negative or clean screens 75% of the time after 90 days of entering TAP

Metric 5: a. At least 75% of youth will substantially improve school attendance.
b. At least 75% of youth will substantially improve academic performance.
c. At least 75% of youth will substantially improve their behavioral and social functioning in the classroom, as measured by the number of days a student received in school suspension and/or out of school suspension.

Metric 6: At least 75% of youth will advance to the next grade level.

Metric 7: At least 75% of youth will develop substantial improvement in behavior and social functioning.

Metric 8: At least 75 % of families will demonstrate substantial improvement in family functioning including communication skills and parenting skills.

INTAKE PROCEDURES

An initial telephone call is made by the referring agency to determine if a vacancy exists, to evaluate the appropriateness of the referral, and to expedite the screening and admission procedure. In order for a referral to be considered, complete written material must be received by the Director of the Therapeutic After-school Program (see "Required Information for Referrals"). A three-part intake is arranged with the child, parents and referring agency worker.

The Director of the Therapeutic After-school Program will communicate the decision regarding admission in writing within two working days following the intake interview. A child will not, under any circumstances, be admitted without all documents, consents and releases appropriately executed, or without essential case information having been supplied.

If the child is not accepted, the reasons will be discussed. Reconsideration for therapeutic reasons will be made in a timely way, as requested.

Required Information for Referrals

Social summary which includes:

- Biographical data – birth date and place, parents’ names, religion, etc.
- Specific reasons for referral
- Developmental history
- Description of parents – personalities, marital history, relationships with child, etc.
- Siblings – relationship to child referred, where living, emotional adjustment
- Previous placements of child and adjustments and achievements
- Child’s relationships with peers
- Legal status, custody, etc.
- Future plans for child as currently projected

Psychiatric evaluation, if applicable, conducted within the last year; should include a formal diagnosis and address issues of mental status, medication, dynamic formulation, prognosis and recommendations for treatment, as well as any history of psychiatric hospitalization.

Psychological evaluation, completed within the last year, should include the interpretation of projective testing and intra-test scatter of intelligence instruments.

Educational evaluation, including a current I.E.P. and specific recommendations.

Substance use evaluations, including history of substance use, diagnoses, history of receiving services and recommendations for treatment.

Medical history, including childhood illnesses, records of inoculations, immunizations, and hospitalizations, and reference to special concerns such as allergies.

Reports from other agencies and schools that have had contact with the child.

SUMMARY

The program will provide diagnostic and treatment services on an outpatient basis to emotionally disturbed adolescents living within Tompkins County. The purpose of this program is to provide the most effective and highest quality treatment to troubled youth to help them develop the social skills, attitudes, and self-direction necessary to grow into productive members of the community. The development of constructive relationships with both peers and adults is seen as the key to modifying the dysfunctional behaviors of our children.

Clinical services utilize an eclectic approach to treatment and include individual, group, and family therapy services, including specialized programs such as a Dedicated Sex Offender Treatment Program and OASAS licensed alcohol and substance use treatment. The sex offender program employs an integrated relapse-prevention treatment model, which promotes victim empathy, treatment of any past trauma, and the understanding of healthy sexuality. Therapeutic interventions include psycho-education as well as art,

music, and play therapies. Adventure based counseling, equine therapy, and therapeutic recreation is also incorporated into the treatment program.