

# Performance & Quality Improvement Newsletter

LaSalle School  
Albany, NY

December 2016

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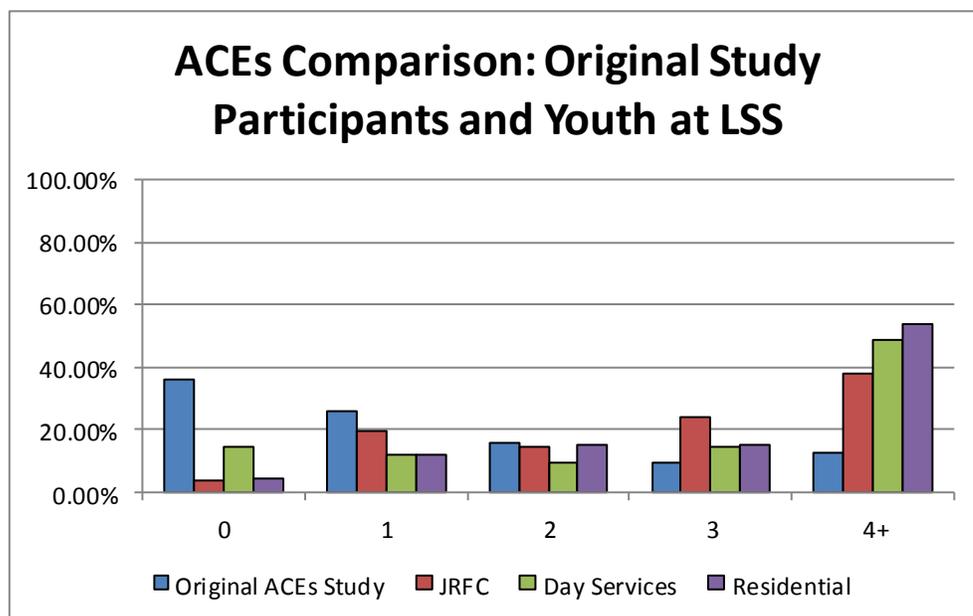
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## Upcoming Topics:

- Day Services Outcomes
- Employee Surveys
- Case Record Review
- Strategic Plan Update

## Adverse Childhood Experience Histories for Youth at LaSalle

Research on Adverse Childhood Experiences (ACEs) and how to respond to toxic stress is at the forefront of Human Services. The original ACEs study gathered data on adults who had Kaiser Permanente insurance. Respondents were asked about traumatic experiences that happened during childhood, medical risk factors, and current health concerns. These traumatic experiences include household substance abuse, parental separation/divorce, parental mental health problems, household members' incarceration, domestic violence, and physical, sexual, and emotional abuse occurring before the age of 18. ACEs are very common and strong predictors of adult health risks and disease such as alcoholism and drug use, depression and chronic disease. Of more immediate importance to a youth population, ACEs can impact a child's readiness for, and performance in school, greater behavioral difficulties in the school setting, and a greater chance of dropping out. In an effort to better respond to youth in treatment at LaSalle School, we have begun to examine the ACE levels of youth in our care. The graph below compares results from the original Kaiser Permanente study and three groups of LaSalle students.



As the graph demonstrates, youth who receive care at LaSalle have much higher ACE scores than the original study population, which means they are at higher risk for a host of negative medical and behavioral health problems. The difference is particularly evident when respondents with scores of 4 or higher are compared. In the JRFC, there are three times as many respondents with an ACE of four or more and the percentage is nearly four and a half times greater for youth in residential care.

Fortunately, ACEs are only a risk factor for future negative outcomes meaning their effects can be mitigated and resiliency can be built. Methods to build resiliency include: safe nurturing relationships, consistent opportunities for meaningful new learning, healthy nutrition, exercise, and healthy lifestyle choices.

*Performance and Quality Improvement (PQI) activities assist with achieving program and service area outcomes, and contribute to efforts to improve organizational climate and culture and staff and client satisfaction. PQI encourages the use of data and staff and stakeholder involvement to identify, establish and implement improvement practices that contribute to desired outcomes. This occasional newsletter will be one avenue to encourage staff involvement in PQI.*

## LaSalle's Alphabet Soup

### A guide to the acronyms used on campus

**ATD:** Alternative to Detention: A community based program, like the JRFC, that serves as an alternative to more restrictive and usually much higher cost, detention.

**CHHUNY:** Children's Health Home of Upstate New York: Permits voluntary foster care agencies and other child serving organizations to better manage and support the overall well being for all youth on Medicaid with 2 or more qualifying chronic behavioral or medical conditions; during and beyond foster care. LSS is a member.

**CONNECTIONS:** The statewide automated child welfare management system, allowing for a single, electronic case record that is maintained by the various workers who have a role in the service plan identified in the FASP.

**ICMP:** Individual Crisis Management Plan: Child specific plan that identifies known triggers and describes suggested

interventions for use when a child is in crisis, as well as interventions that should be avoided as they have proved to not work or present a serious medical risk. Every child at LaSalle has an ICMP on arrival, and it revised as necessary through the child's placement.

**IEP:** Individualized Educational Plan: An SED required document that sets forth the specific educational plan for every child identified as educationally disabled with goals that need to be tracked over time. These are monitored using IEP Direct.

**TCI:** Therapeutic Crisis Intervention: The OCFS approved model of behavior management and intervention when children are in crisis, including the approved techniques for the manual restraint of children. TCI has been developed by Cornell University.



## PBIS Updates

The PBIS Committee has been working hard to incorporate the 12 Virtues of a Good Lasallian into the PBIS structure. Each month has a different virtue and the lessons for the month focus on different aspects of these virtues.

September - Gentleness	January - Gravity	May - Zeal
October - Prudence	February - Vigilance	June - Patience
November - Humility	March - Piety	July - Wisdom
December - Generosity	April - Silence	August - Reserve

If you need Fast Cash, it's available from: Ed Carroll, Deb Fisher, Jim Meyer, and Mark Silverbush.



## AWOL Monitoring and Analysis

A recent analysis of AWOL data focused on AWOLs from the months of April 2016 to September 2016, in hopes of identifying trends in AWOL activity that could assist in helping the agency to decrease the instances of AWOLs. In this six month period, it was identified that of the 109 youth that were served, 41 youth AWOLed a total of 277 times, ranging in time from 5 minutes to 80 days. A small sample of these AWOL reports were classified by theme to explore why individuals were AWOLing. The top three precipitating events were transitions, refusing to do what was asked, and being told they could not do something they wanted to do.

In an effort to better understand if these precipitating events are unique to LaSalle, we examined reports from the Vera Institute of Justice. The reasons identified in their reports are similar to the ones found here at LaSalle, but they also found some underlying reasons as well. They identified frustration, which included boredom, as the main reason that youth run from care. This was also shown in some of the AWOL reports from LaSalle. They additional reasons for running includes the behavior of the youth themselves, such as refusing to comply with requests and reacting negatively towards being told no. Also youth would run in order to be able to see friends and family if they did not have contact with them while in placement.

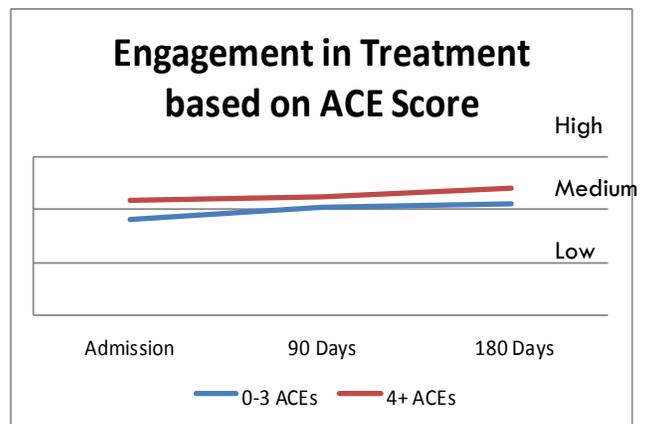
The Vera Institute of Justice gives some recommendations on how to reduce the risk of AWOL's. These are things like steering the youth away from situations that are prone to causing AWOL's such as down time in which boredom can occur, and also to trying mediate the behaviors that cause AWOL's by encouraging better conflict resolution and encourage close relationships with staff as many youth in the report felt guilty for leaving if they had a good relationship with their staff.

## SOAR Corner-The Relationship between ACEs and Engagement in Treatment

Since the cover story for this PQI Newsletter focused on Adverse Childhood Experience Histories for youth involved in services at LaSalle, we thought the SOAR corner would continue with that theme and examine the relationship between ACEs and engagement in treatment. Engagement is considered a key short term outcome in treatment, and represents the youth's readiness to change, bond with staff, and collaboration on treatment goals. The information reported here is based on 69 youth, 31 had ACE scores between zero and three, and 38 had ACE scores of four or more.

While one might expect that youth who had experienced high ACEs might be less likely to engage in treatment, the data indicate that youth with 4 or more ACEs had significantly better engagement scores.

We also thought it might be informative to examine if scores on individual ACE questions resulted in different levels of engagement. There were no differences in engagement based on emotional neglect, physical neglect, loss of biological parents, and household mental health history. There were significant differences for level at engagement at admission for youth with a history of domestic violence in the home, household substance abuse, and a family member in prison, but those differences went away at 90 and 180 days. In all three cases, the level of engagement was lower for youth who had not experiences those kind of stress. There were significant differences in engagement for youth that had experienced verbal abuse, physical abuse, and sexual abuse. For each of these ACEs, youth who experienced that kind of stress had higher levels of engagement at admission, 90 days, and 180 days.



No Significant Difference	Only Different at Admission	Significantly Different
Emotional Neglect	Domestic Violence	Verbal Abuse
Physical Neglect	Household Substance Abuse	Physical Abuse
Loss of Bio Parent	Parent in Prison	Sexual Abuse
Family Mental Health Issues		

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## ACEs and Brain Science Advancement Team

The ACEs and Brain Sciences Advancement Team was formed at LaSalle in order to respond in an organized and strategic way to the many requests for training, workshops, participation in advisory committees, materials development and more that the agency and its staff are receiving. The ABSAT also assists LaSalle to fulfill commitments made as part of the Change in Mind and MARC grants. There is a dedicated email, [LSSABSAT@lasalle-school.org](mailto:LSSABSAT@lasalle-school.org) where inquiries and training/presentation requests can be sent.

Since March 2016, we have completed 21 Trainings/Presentations at 14 different agencies/events, including human service agencies, school districts, and county representatives. We received evaluations from 10 of these events, representing 7 different events/agencies, totaling 284 completed evaluations. The vast majority of these evaluations are very positive and indicate that most of the audience would recommend our training to others.

Our anecdotal evidence suggests that our approximate total audience reaches close to 1,600 individuals, and we are working at improving our ability to obtain evaluation results at more of these events.

## Incident and Behavior Management Systems

The programs of LaSalle School have policies and procedures that promote our mission, guiding expectations, service philosophies and goals. These efforts are closely reviewed by our State Oversight Agencies. Over the course of the year, the Justice Center Inspector General Bureau also completed audits of both our OCFS and SED side of programs, which is separate from our regular program reviews by our SOAs. JC IGB audits include review of previous "corrective action plans" often submitted related to our behavior management, crisis response, ICMPs and other activities involving our various Incident Management Systems. For instance, the Safety Hold Review Committee and Incident Review Committee meets regularly to review high risk cases and trends related to safety holds, AWOLS, Reportable Cases of suspected/alleged abuse and neglect and reportable significant incidents, all of which are typically included in program audits. Safety Hold data includes trend data and recommendations, and illustrates a general decrease in recent years as well as other recent findings.

- The annual totals represent of 12 – 28 different youth
- In one recent year, five youth accounted for 52% of the total
- 91% of RTC safety holds occurred outside of school hours
- During one year, McCloskey residents accounted for 82% of the total safety holds conducted
- The majority of safety holds stem from peer-to-peer conflicts that require staff intervention, and from staff intervention with youth who are in various stages of upset, typically not related to the staff intervention (similar to events that precipitate AWOLS).

Safety Hold Data			
	Residential Youth	Day Students	Total
2015 -16	60	2	62
Previous six year average	78	4	82

The Incident Review Committee noted that there was a slight increase in the request for emergency services (police, EMS, Mobile Crisis), which we continue to monitor. There were also a few cases of unusually high risk that required considerable staff energy in terms of responses both at the time of the incident and afterward, in terms of debriefing and follow-up. In addition to reportable cases, there were two situations that included weapon possession, two cases of stolen vehicles, and several cases from our counseling center related to multiple hospitalizations (psychiatric or medical), police intervention, domestic violence and child protective.