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Bethel Social Service and clarification, between facility and DFYS, of the program purpose (emergency or longer term care) and appropriate programming.

North Slope Borough Receiving Home program be continued at the present level. In conjunction with DFYS, consideration should be given to program modification. Initial change to be considered might be to shift the program to six shelter and six longer term beds. This change to be followed by the development of foster family care for the youngest children and restriction of the Receiving Home to older children and youth.

North Star Home program to be continued at the present level.

Nome Receiving Home program be continued at the present level contingent on strengthening the program content. Significant enrichment and skill enhancement is indicated before the program is modified to serve both a shelter population and residents for longer term care.

Presbyterian Hospitality House program be continued at the present level, contingent on clarification and strengthening of the program to serve a defined population mutually agreed upon between facility and DFYS.

Ketchikan Children's Homes program be continued at the present level, contingent on strengthening the program's content, with demonstrated attention to organizational and morale deficits. Careful monitoring should accompany continued funding.

Miller House (previously Juneau Receiving Home) program be continued at the present level.

Sitka Receiving Home program be continued at the present level contingent on stabilization, both administratively and programmatically.

B. Systems Recommendations

The reader is reminded that residential services are one segment within a continuum of services. "Missing pieces" or gaps along the continuum have a negative effect on the other pieces. A range of services needs to be developed and supported in each community

and geographic area with easily activated linkages within the social service system and with other systems. Recommendations in this area are beyond the scope of the study but it is critical that child residential care be viewed as a part of the continuum of services for children and their families.

The following recommendations and suggestions are respectfully offered to the Division to guide their decisions concerning priorities and resource allocation with regard to the residential child care program.

Stablization is needed in a number of facilities. Upgrading of staff competencies is indicated in essentially every program. The tools and materials needed by facilities as they work to refine their programs are in short supply. Funding levels, in a number of instances, are too low to support the quality and variety of treatment interventions needed by the children and their families.

Certain difficulties that are experienced by facilities flow from the Division. Incomplete and/or delayed referral materials, inability to move children appropriately from one level of care to another, out-of-date licenses and an annual funding cycle which works against planning and incremental improvements are among the problems which originate with the Division. Division resources, at central office, regional and local locations are insufficient to provide technical assistance and program monitoring at the level necessary to ensure appropriate and high quality care for children and their families. If other resources

cannot be found, either through reallocation or special appropriation, the Division is urged to consider reducing the bed space somewhat in order to reserve funds from the grant monies for technical assistance, training and monitoring. The improvement in quality which could reasonably be expected from such efforts would offset the bed reduction and establish a solid foundation for program sophistication and growth as additional monies become available.

It is recommended that the Division:

- Undertake basic work to rationalize rates. This effort should focus on determining the elements of care, i.e., staff numbers and qualifications, food, utilities, special services etc., and determining reasonable costs, by element. Standard or "model" budgets for the various levels of care can be established and adjustments for the cost of living in different geographic areas applied.
- Develop and implement a technical assistance plan to aid agencies to upgrade their programs:
 - Provide training or enable it to be provided through contracts, consultant trainers, tuition reimbursement and similar practices. A wide variety of topical areas should be covered including: recognizing potentially explosive behavior and defusing such situations; adolescent sexuality; communication skills and self-awareness for immature staff; development of support groups; goal-oriented caseplanning and recordkeeping; grant writing; board development; and recruitment and employment practices.
 - On-site assistance in programmatic, administrative and governance areas for facilities where the greatest deficits have been identified.
 - Regular (at a minimum quarterly, but preferably monthly) meetings, by regions, of the administrators of the various facilities and regional staff to support networking, development of interagency protocols and as forums for learning.
- Develop technical assistance/self-help packages for all

agencies. These are especially needed for small agencies and for those in isolated locations.

- Small scale fund-raising ideas and aids to enable facilities to supplement funds.
 - Model "board manual" containing the "necessities" which would enable facilities to "plug in" their own specifics. These should include such elements as prototype by-laws, training materials, and model descriptions of board roles and responsibilities.
 - Guidelines on the "how" and "what" of interagency teamwork and case staffing techniques.
 - Material regarding caseplan development and implementation, including aids regarding how to "build" an effective caseplan from available resources.
 - Help directed toward focusing the program when emergency placements and longer term residents as well as children with widely varied behaviors and dynamics are in the same small program.
 - Ideas, resources and aids for the development of age appropriate crafts (perhaps using found materials), "home grown" recreation and activities.
 - Assistance (perhaps in conjunction with the state association of child caring agencies) with training, how to access training materials and resources, proposal preparation for foundation and other funding sources.
 - Aids in securing and using such supplemental programs as surplus foods, school lunch programs, transportation equipment.
 - Nutritional planning aids and age appropriate sample menus.
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- Develop and implement a multi-year granting process requiring an annual budget review and revision, if indicated; on-site review, and careful monitoring. Shorter-term or provisional grants should be limited to new or marginal facilities. Improvement incentives should be built into the system.
 - Develop a mechanism to involve the private sector in planning for services. This can be accomplished, without compromising the R.F.P. process, through the use of a task force; a designated subgroup of the association of private child caring agencies or through some other vehicle.

- Combine some preventive service and residential service contracts to support a continuum of services.
- Develop a directory of facilities with details of program components, problems (and the severity level) accepted or not accepted. The directory should include program modalities, staffing models and other information to enable referring workers, placement committee members and others who have never seen the facility gain a "feel" for the place and program. This might include pictures, as well as a bit of information regarding the community environment. A version of this directory should be developed for children and youth who are considering (and being considered for) a given facility. The dearth of even the most basic understanding of the uniqueness of each facility on the part of both referring staff and youth is a serious information gap.
- Develop, and support financially, a case assessment/diagnostic resource to serve the facilities in the South Central region.
- Increase efforts to develop the foster family care system throughout the state in order to take the pressure off the residential facility system and to provide appropriate "least restrictive" placements.
- Conduct, periodically, a formal review of all facilities, through a similar process as produced this report, using the current data as a baseline, refining the process to benefit from what was learned in this initial study. Some of the elements from this study could supplement the Division's "Standard by Standard" review format.
- Conduct a study which would examine the flow of cases and the decision-making process from intake through case-closing with special attention to children in placement. The wide variation in process and understanding throughout the state contributes to the number of moves and "f ilures" that children experience.
- Develop a training module for DFYS personnel to address issues in the development of caseplans and selecting a residential placement and services package for individual children. Differential diagnosis should drive the decisions rather than "what bed is available".
- Articulate and widely disseminate the Divisions' goals

regarding residential care, i.e., decentralization, increasing variations in treatment models, and improving quality, etc.

- Develop informational material on services for children and their families for participants in the service delivery system, including police, school personnel, physical and mental health professionals, the judiciary and for DFYS personnel. Such materials should be clear and concise. They should address DFYS roles, responsibilities and operational procedures; and interagency relationships.
- Establish a timetable (and resources) to ensure appropriately trained and experienced administrators in each facility. Such persons are especially needed in the smaller agencies in the more isolated communities, where there is essentially no way to supplement administrator deficits.
- Provide some "up-front" monies to support program development, technical assistance and other aids focused on upgrading and implementing the Division's regionalization objectives. Special appropriations, similar to construction grants, should be sought, if necessary to accomplish this.

SECTION IV: PROGRAM PROFILES

This section presents profiles of the individual facilities. in alphabetical order by Region. Each profile is organized by subsection: Governance; Administration; Service Quality; Relationships; Conclusions; and Recommendations. Data are selectively presented to describe and assess each agency.

A. SOUTH CENTRAL REGION

ALASKA BAPTIST FAMILY SERVICES

Alaska Baptist, located in Anchorage, is a non-profit child caring agency operating under the Alaska Baptist Convention. The program includes residential child care for males and females. Two child spaces are reserved for shelter use, principally used as an entry to the longer term care program. Ten longer term beds and two shelter beds are under contract to DFYS during the 1985-86 funding year.

Most of the residents come from South Central Region, some are from other regions.

Governance

Although the board of trustees is a governing body, the Alaska Baptist Convention reserves certain powers including nomination of members who serve at the pleasure of the Convention. There is provision for nine members, all of whom are required to be active members of a Baptist church cooperating with the Convention. There is currently a full complement of members. The board has no native members. New by-laws become effective August 1986. They are written in a very legalistic style. The by-laws do not provide for certain features deemed to be desirable aspects of board organization, nor do they provide for standing committees, program responsibility or responsibilities of the officers. Although the new by-laws state that "trustees are elected on a three year rotating term", this provision appears to be operationalized as a completely new membership every three years.

Staggered terms in which a portion of the membership changes each year and rotating terms by which an individual serves no more than a specified number (usually two or three) of consecutive terms without a hiatus are structural characteristics which permit both continuity and "new blood". The by-laws provide only for an executive committee, thus effectively requiring that the board operate as a "committee of the whole" to conduct agency business. That feature, when combined with the requirement for a minimum of two meetings yearly, is not adequate for the governance of a social service agency. Attendance at meetings is very good.

The board is primarily involved in financial and legal matters. Little attention has been directed toward planning. Board members have little knowledge or involvement in program issues or budget matters with regard to the services of the agency.

The board members have had no training. They recognize their lack of knowledge regarding program issues and expressed interest in information regarding the agency's services and operation.

The board evaluates the administrator annually, with each member preparing a written statement. These statements are then discussed at a board meeting.

Administration

The executive director has been with the agency for five years. He has a Master's Degree in Social Work and takes a leadership role in childrens' issues. Currently he chairs the statewide association of child caring agencies.

Personnel policies are within an acceptable range and cover essentially all desired topical areas. Review of a sample of personnel files revealed that evaluations are current and that training received is documented. In general, however, the quantity of training is limited.

The physical facility and equipment are appropriate for its present program, particularly for the younger age groups. Space is somewhat cramped. If assured of continued program funding, the agency would expand its facility. The facility has a valid license and other inspection reports are in order.

Service Quality

Residential Program

The residential care program offers a caring but clinically benign environment for children which is well understood by community leaders and by the referring agencies. In general, most of these children could be appropriately served in foster family care if it were available. In the meantime, this is a needed service until such time as adequate adoption and foster family care resources have been developed throughout the state. This is not a treatment facility nor does it aspire to be. The service is enriched by efforts toward a treatment orientation and attempts to individualize the residents, however the therapeutic communication with the residents could be improved substantially.

The review of the case records reveals good content and format quality. More emphasis should be placed on working with parents

toward family reunification or with the youth with regards to emancipation.

The reviewers found that the children in this program were among the few in all programs that did not know why they were there or what they had to do to leave the program.

Emergency Shelter Program

This program is currently composed of two bed spaces. It is not really a "program" of emergency shelter but rather operates as an entry or "testing" period for children under consideration for the Residential Care program. While this use may be beneficial to the agency, it is not, overall, an effective use of scarce emergency shelter beds for the Region. Furthermore, increasing the number of shelter beds, with the associated necessity to integrate the shelter residents into the regular program would interfere with the continuity of care for the children in longer term care (unless the increase is sufficient to permit a separate program).

Relationships

Community Leaders

In general, the relationship with community leaders is reported to be good. There was some criticism regarding feedback on children in care and regarding the appropriateness with which critical incidents involving residents are handled. The heavy emphasis on evangelism is viewed as a negative and as inappropriate for children with a heritage other than fundamental christianity, especially native youngsters.

Referring Agencies

In general, the relationship with referring agencies is satisfactory, although concern regarding feedback was expressed by several of the persons interviewed. Timely information regarding vacancies and acceptance were viewed as satisfactory. The strengths and limitations of the program are well known to the referring agencies, thus unrealistic expectations are not placed on the program.

Among Staff and Between Staff and Residents

The relationship among staff at line and supervisor levels is supportive. The relationship between staff and administration was not clearly discernable by the reviewers. Really good lines of communication are not readily apparent.

The relationship between staff and residents appears mixed, with some very caring and supportive, while others function principally as disciplinarians.

The residents appreciate the food, the freedom and the personal respect they are accorded, but express the feeling that there is insufficient respect for their personal property. Some residents reported that their belongings are taken from them and stored in a central location.

CONCLUSION

Strengths

- Very caring staff.
- Physical facility.

- Psychiatric and social work back-up.
- Case recordkeeping.
- School liaison.
- Sound personnel policies.

Weaknesses

- Lack of sophisticated treatment techniques on the part of child care personnel.
- Insufficient program and recreation resources.
- Very weak knowledge and involvement of board in program issues.
- Questionable policy regarding the handling of children's personal belongings.
- Questionable use of behavior control practices and inability to use acceptable crisis intervention.

Recommendations

In summary, the agency provides a caring and nurturing environment for the children in care. The program has not been designed as a treatment program, however some improvement could be expected from implementing certain changes. The following recommendations and suggestions are provided for consideration by Alaska Baptist Family Services.

- Provide orientation for child care workers regarding the appropriate role and function of child care workers. Currently they tend to see themselves as parents or parents' surrogates.
- Define and implement appropriate policies regarding the handling of children's belongings. Children in residential care often have very little ties to their past and their personal property takes on a great deal of importance to them and should not be taken away. Each resident should be provided with an accessible, safe, individual place which is respected by staff and other residents. Having property "stored by the agency for safekeeping" is not adequate.

- Develop and implement a plan that will respect and support the cultural and religious heritage of the residents.
- Implement an aggressive plan to recruit and employ personnel who reflect the cultural background of the children in care.
- Improve the record of reporting treatment plans at required intervals to referring agencies.
- Board address identified problems regarding orientation to child welfare issues. The board develop a plan to involve themselves in gaining a knowledge of program and service issues so that they can play an effective governing role in the development of policies for these aspects of the agency.
- Give consideration to revising the by-laws to provide for staggered and rotating terms for members, a standing committee structure (at a minimum finance, personnel and program committees) and more frequent meetings. These changes, if effectively implemented, would go a long way in providing sounder governance.
- As a longer range suggestion, Alaska Baptist should, in concert with DFYS, consider converting to a foster family care agency instead of a facility-based residential program. The agency's skill and knowledge regarding a caring and nurturing environment would lend itself to a well-designed foster family care program to supplement the Division's meager resources in this program area. The agency could probably utilize it's church constituency to recruit homes.

ALASKA CHILDREN'S SERVICE

Alaska Children's Services (ACS) is a multi-service private child care agency located in Anchorage, ACS currently provides residential child care in the campus-based Jesse Lee program, the Adventure-Based program, and in two Intensive Care Units (ICU). There are day treatment components associated with the Jesse Lee program and the ICU's. Programs are operated in three separate locations ((1)Jesse Lee, (2)Adventure-based and (3)the ICU's which are in separate buildings located at one site.) The current DFYS funding supports 30 beds at Jesse Lee (plus day treatment for 10 youth), 12 Adventure-based beds and six beds in each ICU (plus four day treatment spaces).

Although ACS continues to serve children from throughout Alaska, more and more residents are coming from South Central Region (SCR) as additional residential services are developed to enable some children to be served in their own region. Restricted state financial resources for residential child care, program shifts to outlying regions and within the SCR have resulted in substantial fiscal cutbacks in state funding to ACS with concomitant program reductions and demand for organizational and staffing changes.

Governance

The board is a governing body of 24 persons, presently with four vacancies. One half of the members are required to represent the four sponsoring church groups. The board operates in committees. The by-laws are very well written and provide for essentially all

of the elements needed to establish a sound governing structure.

Review of the minutes indicate that activities are within the acceptable range. Average attendance for the past two years has been approximately half of the membership with improved attendance in recent months. Minutes indicate that members are becoming more active in appropriate matters. For example, more attention has been accorded planning than previously, with efforts to shift from "crisis" response to a more structured planning effort. The board has not developed a vision of the agency's purpose and role in the service delivery system.

The board does evaluate the executive director, under the oversight of the Vice-President of Administration, using a process which polls all board members.

Board members have had some training. A number of the board members interviewed indicated that two board retreats were a useful experience. Additional training concerning policy development and treatment issues are desired by the members interviewed.

The physical facilities and equipment are appropriate for the purposes for which they are being used. The facilities were clean and in good repair and have valid licenses. Other inspection reports are in order. The individuality allowed and encouraged in the ICU's is commended as is the bright and colorful day treatment building.

Administration

This multi-service, multi-site agency has a complex organizational structure. The organizational chart diagrams appropriate administrative and clinical functions. These functions are assigned to three directors: Administration; Development and Public Affairs; and Program and Clinical Services (both residential and non-residential programs fall under the latter director). This is basically a sound structure. At the present time, the Executive Director, who has been in his position with ACS for less than two years, has taken administrative leadership; in working with the board to revise the by-laws and in exhibiting a willingness to work cooperatively with the state. However, he brought no significant professional training in residential treatment of children to his incumbency. The position of Director of Clinical Services is currently vacant. In an agency that has undergone as much significant change as ACS has in the last couple of years, it is critical that the clinical, therapeutic program be handled by a person with demonstrated skill and experience.

Personnel policies and files are acceptable. Although personnel files do record any training the individual has participated in, the reviewers noted that it has been three years since there has been any systematic in-service training program. A high proportion of all staff interviewed, at all levels, identified training as a high priority.

Service Quality

Jesse Lee

The Jesse Lee program contains two components: a Residential Program and Day Treatment. The regular residential Program's treatment orientation was assessed to be adequate. The program appears to have the components and resources necessary to function as a true treatment program but has not yet reached that level of sophistication. There is evidence that the program lacks flexibility in the behaviors that it accepts, despite a significant number of experienced and well trained staff members. The rigidity is viewed as a negative aspect of the program by community leaders and referring agencies. Serious concerns were expressed regarding the services for sex offenders. This program should be an identifiable component with discrete treatment elements. These residents should be isolated if and until there can be assurance that they will not endanger themselves or others.

The day treatment component of the Jesse Lee program has been significantly underutilized during the past months. Partially this appears to be, attributed to the lack of an adequate and comparable understanding between the referring agencies and ACS regarding program focus. The issue seems to hinge on the question of whether the program is intended to prevent the placement of children in group care settings by providing structured daytime activities and clinical interventions, or as an aftercare program for aiding the transition of children from the residential program to less restrictive settings. It is the opinion of the reviewers that the program can be designed and used effectively.

for both purposes.

Adventure-Based

The function and purpose of this program is also misunderstood. The way the program is described by the agency and presented to the community appears to be different than the way that it actually functions. It has been perceived and presented as a program based on the "outward bound" model. In reality it appears to operate as a "preparation for independent-living" program that utilizes outdoor activities, recreation, sports and wilderness activities as its foundation. It appears that staff expect that the use of activities in which a young person learns to trust and to be more self reliant is, in and of itself, "treatment". Community leaders and referring agencies reflect the lack of clarity about the program. It is the reviewers' opinion that this program has the potential to be more clearly defined, strengthened clinically and to be far more effective than it is currently. It is a good "preparation for independent living" program, but less than adequate as a full range adventure based treatment model program.

Intensive Care Program

Unit I

The quality of this program is good; it responds to identified needs, and is well received by the community and referring agencies. The agency should be alert to the length of time that residents are staying in the program however. It appears to be shifting slowly from a short-term program to mid-length and should be carefully monitored. The reviewers are aware of the

difficulties which impact length of stay, including shortage of those aftercare services and placement resources that are less restrictive than the ICU, which are essentially outside the direct purview of ACS. Programs of this intensity quickly become counter-productive for young persons and their gains deteriorate once they have received the maximum benefit from the program.

Unit II

This Unit has recently moved to a separate facility near Unit I. Many community leaders and referring agency representatives do not distinguish the two ICU's as separate programs although they have, in fact, separate leadership and function as discrete units. Unit II is viewed by the reviewers to function at a lower level than Unit I with regard to organizational control and administration. ACS recently decided to place both units under a common coordinator. This is a sound plan, provided the coordinator is allocated time to do it.

These programs are intended to provide a high level of clinical treatment, close supervision and structure for residents. In many ways, these units represent a bridge on the continuum of "open" settings through hospital or secure facilities. Because of its intensity and structure, it is both restrictive and costly; thus special care must be taken that it is used only for children requiring the degree of structure and confinement provided. Residents must be moved to less restrictive settings as soon as appropriate. The small day treatment component associated with the ICU's is a desirable adjunct to the program, permitting return to the community or community placement while the youth

benefits from the daytime aspects of the ICU program.

The case records reviewed were deemed to reflect mostly average quality service with some examples of high quality service. Problem areas include: lack of fully signed placement agreements; family strengths /weaknesses; family involvement and goals; some dictation that was not reasonably current and some lack of chronological dictation; and lack of suitable file folders (Adventure- Based).

Relationships

Community Leaders

The working relationship between ACS and most community leaders interviewed presents a "mixed" picture with some indicating an acceptable level while others are far less satisfied. The difficulties identified included: lack of clear definition regarding the separate ACS programs; ACS preference for being a "self-contained" program with a concomitant reticence to fully utilize community resources; and a tendency by ACS to present an agency philosophy and perception not reflective of the actual service environment. Thus ACS is perceived by some to be a difficult organization to work with cooperatively. With the many changes recently required of ACS, the agency is understandably defensive. This defensiveness may be viewed as competitive aggressiveness by the professional community of agencies. Others interviewed reflect respect for the history and professionalism of ACS. Specific difficulties mentioned generally referred to the relationship at the organizational level while relationships with "line

staff on case-specific matters remained less strained.

Referring Agencies

Relationships are viewed as poor by both sides but are slowly improving. There is evidence of interest in the development of opportunities to redefine and establish the relationship with the public sector. The relationship between ACS and the referring agencies is colored. The relationship is hampered at the administrative level, by such agency-specific matters as funding levels, service expectations and interpersonal attitudes, and at a system level by single year contracts, DYFS regionalization and provider diversification objectives. At the case-specific level, the relationship is negatively affected by frustration regarding the specific types of youth ACS accepts/rejects, and perception that service quality does not match ACS rhetoric.

Among Staff and Between Staff and Residents

These relationships are within acceptable ranges. Some staff expressed concern regarding some hiring practices, lack of salary increases and sufficient communication from administration. Interaction between staff and residents at Jesse Lee appeared to lack warmth, otherwise the relationships seemed good from the comments of residents and the observations of the reviewers.

CONCLUSIONS

Strengths

- Quality services provided by personnel possessing skill and experience and having a genuine concern for children and youth.
- ICU-I is an especially high quality program.

- Multi-discipline approach to service delivery.
- Good physical facilities.
- Good physical tangible goal setting for children and youth.
- Staff/child ratios are very good.
- Staff turnover is low.
- Board involvement in planning.

Weaknesses

- Poor evidence of involvement with families either in planning or in treatment.
- Day treatment program is not fully responsive to community needs.
- Insufficient staff training.
- Lack of preventive and aftercare services.
- Lack of specificity in behaviors the agency is prepared to treat and clarity regarding the client outcomes it expects to achieve.
- Insufficient native representation on the staff. The agency is however, commended for having a staff position which focusses on cultural awareness and making available culturally significant opportunities for children in care.

Recommendations

In summary, the reviewers conclude that the quality of all the ACS programs is within the acceptable range, although some refinements are indicated. The function of the senior position responsible for clinical and program matters, which is currently vacant, leaves a critical gap which must be closed. It is the reviewers' opinion that the full range of treatment possible in all of ACS programs is not being offered but that ACS is on the brink of being able to do so. It is suggested that some unity among programs be developed through common intake and a focus on

a family orientation and a more cohesive continuum of services.

The board and staff are commended for their indicated willingness to focus on the areas of program change and relationships that are impeding ACS from reaching its maximum potential as a service provider. This is a large agency with an illustrious history and it is critical to the future of child care services for Alaska children and their families. ACS should play a cooperative and forward-looking role in providing services in Anchorage and throughout Alaska. ACS and the Division of Youth and Family Services must work together to bring this about.

The following recommendations and suggestions are provided for ACS consideration.

- Board continue to emphasize, in their activities and in their support of the Executive's activities, the need to work cooperatively with the Division of Family and Youth Services.
- Board continue to be involved in and to gain additional knowledge of the service delivery system and the programs and issues that confront ACS.
- Board develop a strategic plan for a minimum of three years, which delineates ACS's role in the delivery of services to children and their families in the Anchorage area and elsewhere within Alaska, should the agency choose to expand. Almost as important is the development of a strategic vision to drive the agency.
- A single intake system be explored and negotiated with DFYS which would view ACS as a continuum of services rather than as a group of discrete programs. The reviewers recognize that the discreteness of programs has been exacerbated by the Division's current granting process, but it is a particularly ineffective way to utilize the resources of a multi-service organization such as ACS.
- Incorporate family treatment concepts, working with families to return children to their families. Presently family treatment is discussed, but it is not well integrated into ACS programs. The way the individual programs operate suggests

that the agency views itself as better parents for the children than their own parents.

- Focus attention on identifying client outcomes and time-frames that are expected to be accomplished. The reviewers recognize that this is not an easy task but it must be done. Considerable attention needs to be focused on establishing this kind of information about each program within the larger agency. ACS is capable of this level of specificity and sophistication.
- Identify, with more clarity and specificity, what behaviors are acceptable in each program, and conversely what behaviors are unacceptable. To do so will reduce the intake/rejection problems. It should not be necessary to start each new intake as though there were no baseline specifications. Work in this area can be expected to benefit the relationship between ACS and the referring agencies as well.
- Attention be directed to bringing Adventure-Base case records up to standard by improving both format and content.
- The Intensive Care programs be viewed as a single program under one coordinator. This will enable the two programs to function in a more coordinated fashion and will facilitate the assignment of a resident to whichever unit is most capable of meeting the youth's needs at a particular point in time.

ALASKA YOUTH ADVOCATES

Alaska Youth Advocates (AYA), located in Anchorage, is the multi-service arm of the Alaska Youth and Parent Foundation, providing both direct services to youth and families as well as a broad program directed to community education and system reform. AYA operates a ten bed emergency shelter, five of which are funded under DFYS contract relevant to this review (the remainder funded through Runaway monies). The shelter facility is located in a building which also houses AYA offices and other activities.

The program serves the South Central Region, principally Youth Service referrals from the Anchorage area.

Governance

The agency is governed by the Board of Directors of the Alaska Youth and Parent Foundation. There is provision for seven to 13 members; currently the membership is four short of the full complement. The by-laws are generally well written, covering many of the essential aspects of good governance. The by-laws provide for a single three-year term with no apparent provision for subsequent terms, either immediately or after a hiatus. There is an unusual provision which permits a retiring board member to be elected as a non-voting ex-officio member for life. Although this provision provides an opportunity for continued involvement of persons who have served a term as a board member, it does not benefit the actual governing process since such persons are without vote.

The by-laws provide for the nominating committee to be appointed by the President. The election of this committee, or at least the election of the chairperson, provides for greater assurance of an open process of selecting board members. The by-laws provide for no standing committees except the Executive and nominating committees. Without appropriate standing committees, a board is forced to function as a committee of the whole, increasing the potential for slighting certain aspects of the governance due to time constraints of the members. At least three standing committees: Finance, Personnel and Program are critical for responsible oversight of human service organizations. For mutli-service organizations such as AYA, sub-committees of the Program committee might also be established to focus on particular components of the service program such as emergency shelter. The "people power" of committees and sub-committees can be extended beyond the voting members of the board by assigning ex-officio board members and other interested persons. Many agencies have found that utilizing "interested others" as non-voting committee members is an excellent means for developing a pool of experienced persons from which new board members can be selected.

Attention has been focused on securing representative membership on the board. Presently there is one native and two Black members. As an advocacy agency, AYA exhibits a high level of sensitivity to community need, cultural issues and concern for rights and adequate representation.

The board has been primarily involved in fund raising, and planning. They have developed both a one and a five year plan. They played an active role in the development of the agency's response to the RFP from DFYS on which their current program is based. They see responsibility for securing funding which fits the agency's goals and objectives as a primary board function.

The board evaluates the executive director annually. The process used through 1985 required each board member to prepare a written evaluation. These were discussed and the board reached a consensus which the board president discussed with the executive. Subsequently, the full board and the executive discussed the issues. A mechanism for formal rebuttal is included in the process. Beginning in 1986, an executive evaluation committee will be used for the initial stage of the process.

The board members have had considerable training in addition to past experiences on other boards. They have had a consultant from Minnesota in twice to assist them in goal-setting. Most members have also attended the board training sessions provided by the United Way which addressed goal-setting, board function and interaction. At the present time, those members interviewed do not see the need for any additional training.

Administration

The executive director has been with the agency for approximately two and a half years. She is an attorney-at-law. The agency programs are organized under a Program Director who has professional training in psychology and education as well as experience

in residential programming for adolescents. In addition to the shelter program, the units include, Legal Information, Crisis Counseling and Family Mediation: Life Skills; and the Abused Teens Group. Each unit is under a coordinator. Both shelter staff and residents benefit from the other AYA programs.

Personnel policies and files are acceptable. The files record training received by each individual. Most of the personnel evaluations were current in the files reviewed except for several senior persons. Volunteers enrich the program and extend the services beyond that which would otherwise be possible. The staff is more racially and culturally balanced than many of the agencies reviewed.

Staff have received some focussed training. New child care staff are assigned an experienced "buddy". No specific topics of desired training were identified.

The physical facility is appropriate for the purposes for which it is used. The shelter occupies the second (sleeping rooms) and third floors (activity space and some offices), while the first floor is used for administrative offices. The equipment resource materials are quite good although there is limited large muscle equipment. The resident use community recreation facilities. The facility has a valid license and other inspection reports are in order.

Service Quality

The quality of the shelter service appears to be excellent. There

is a significant treatment orientation despite the fact that emergency shelter is not viewed a "treatment service" under the DFYS granting process. Both community leaders and referring agencies view AYA as providing a good service with careful supervision of the residents. AYA supports a "quality time" concept which seeks to use whatever time a youth is in residence to benefit the resident's growth, skills, and coping mechanisms. The agency has more capacity to involve the family members, through the Family Mediation unit, than most other programs reviewed, including many of the longer term facilities. The shelter program appears to benefit from the stability and support accorded it by being co-located with administration and other service programs.

The case records do not reflect the quality of service that other information and observation suggests; thus they were judged only as average. The records do reflect a great deal of work with youth in the early days after admission, reflecting an appreciation of the short stay that many shelter residents will experience. Many records do not record information about family goals or any work with families. None of the records reviewed contained fully executed placement agreements.

Relationships

Community Leaders

AYA generally enjoys a positive relationship with community leaders. The AYA shelter program is well received and understood by the community leaders. Administration is viewed as responsible and responsive. Most of the community leaders interviewed respect

AYA for its efforts to provide more than a bed and three meals for youth requiring emergency placement. AYA maintains an active relationship, both formal as well as informal, with a number of community organizations. AYA is represented on several local and statewide committees and task forces.

Referring Agencies

In general, the relationship is good between the referring agencies and AYA. Frequent informal discussions have served to maintain functional channels of communication. An informal agreement has been reached between DFYS and AYA to use the AYA shelter principally for Youth Services referrals (and to use Booth Shelter for Family Services referrals), thus the closest day-to-day working relationship is with Youth Services. This informal "restriction" is viewed as problematic by Family Services. Some Youth Services personnel see the AYA "advocacy stance" as divisive when it "pits the youth against the system". Other respondents suggested that there remains a residue of old adversarial attitudes toward AYA which were prevalent prior to the agency's entry into the direct service field. These continue to color relationships.

Among the Staff and Between Staff and Residents

Relationships among staff appear to be good; they feel generally supported in their various roles. There seems to be a comfortable working environment. Personnel in units other than the direct shelter staff view themselves as part of the internal network for the shelter program.

Observed interaction between staff and residents was acceptable. The staff are generally mature and represent good role models for the residents. Residents reported that staff are caring and fair, and that staff try to help them. Residents know why they are there and what they have to do to leave the shelter, although they expressed the uncertainty that is generally endemic in shelter residents, i.e., that of not knowing when things are going to happen.

CONCLUSION

Strengths

- Dedicated, mature staff.
- Treatment focus within a shelter setting.
- Weekly staffings directed toward planning for individual residents.

Weaknesses

- Case files do not adequately reflect family work.
- Case file format makes it difficult to determine admission and discharge status.
- Program manual lacks shelter-specific materials to guide staff.
- Upper level personnel evaluations behind schedule.
- Board does not have a standing committee structure.

Recommendations

In summary, the reviewers conclude that the AYA shelter program is of good quality, responsibly administered and governed. This organization appears to have the foundation and capacity to

expand as community needs dictate and resources become available.

The following recommendations and suggestions are presented for AYA consideration:

- Add shelter-specific sections to the manual. Both policy and procedural materials as well as statements of philosophy and standards for practice are suitable for this purpose.
- Direct attention toward refining the by-laws to provide for appropriate standing committees.
- Refine case recordkeeping to reflect work actually done with youth and their families. Recordkeeping refinements should ensure that basic information is recorded and readily accessible.
- Restructure the incident report form to provide a separate section to record action/disposition.

KENAI PENINSULA COMMUNITY CARE CENTER

The Kenai Peninsula Community Care Center is a ten bed, coed residential facility composed of one five-bed home, used as an emergency shelter, and another five-bed home used for longer term care. An additional five beds, at a separate location, have been proposed for the funding year beginning July 1, 1986. The facility serves the South Central Region. Referrals are from Youth Services and Family Services.

Governance

The board's by-laws indicate that its functions include both governing and advisory responsibilities. The by-laws include descriptions of the board officers' functions, and provide for three-year terms. Members may serve as many terms as they wish, although board members seemed unaware that specific term lengths exist. The board is composed of nine board members. There is currently no native representation on the board: eight members are Caucasian, and one Black.

The by-laws provide for two standing committees: Personnel and Program Evaluation, but the minutes indicate there are also Finance, Program, and Personnel Committees functioning. The board appears to be very active in some areas. They were instrumental in designing and supervising the construction of the new homes, are now seeking to landscape the site, and are also conducting a raffle as a fund raising event.

The board minutes indicated activities related to personnel

issues. For example, the board recruited, interviewed and subsequently hired the director. They also perform annual evaluations, recommend salary level and raises for the Director.

The by-laws state that the board is responsible for evaluating the program annually, but no evidence could be found to document that this actually occurred. In addition, the minutes reflect little discussion or documentation of policy decisions. For example, the program has undergone major changes in the past year, both in terms of philosophy and in programming, yet there was little discussion in the board minutes about the reasons behind these changes, choices made, or other options considered.

Although two years of minutes were reviewed, attendance was not uniformly recorded, so it cannot be determined how active board members have been.

Most board members have not had specific training, but they reported gaining experience by sitting on other boards. No interest in further training at this time was expressed.

Administration

The current program is based on the family teaching model, staffed by two couples, who report to the director, and two part-time aides. The organizational chart for this program shows a psychologist on staff; however no personnel file was available for this position. The current staffing pattern and organization do not reflect what is described in the proposal - a behavior modification program with an awake night staff.

The executive director was hired in January 1985. She has several years of experience in community work and in grant writing, and has exhibited a high level of skill in networking, however she has no training in child care or experience in children's residential care.

The organizational plan designates the Director to serve strictly in an administrative capacity, providing no direct services of any kind. Such a division of responsibility deprives the house parents and other child care staff of clinical and programmatic oversight in their day-to-day functioning. The organizational structure does not provide for a person who can direct program development, case planning and other elements which require experience in supervision and direction with regard to providing services to children and youth in placements; a situation with potential gaps for the program.

One set of house parents, hired approximately six months ago, is certified in the teaching parent model, and have three years prior experience in residential child care. For the second couple, one has 18 months' experience with direct care in a boys' home, and two years' experience in child care with educatable mentally handicapped. The second person has a BS in special education, although no related experience other than some volunteer work. One of the assistant family teachers has a BSW, and the other some college. With the exception of a newly-hired assistant family teacher, all staff members are fairly young, and none have experience in parenting teenagers.

Since both the staff and program are very new, roles are presently not clearly defined. The model is new to most staff.

Staff training is documented in the personnel files, however a need for additional training was expressed. Staff from the Kodiak Mental Health Center have provided some initial training in implementing the Family Teaching Model, and there is an agreement that Kenai staff can attend Boys Town training, but nothing specific has been planned. Identified training gaps include sex abuse and suicide prevention.

Major program and physical plant changes have taken place in the past year to accommodate the new program based on the family teaching model. The facility is clean and in good repair and essentially appropriate for the program. These physical plant changes placed the staff living area in the back of the house, raising supervision problems of both the residents and the staff children. Each resident has his/her own room, which they are allowed to personalize as they wish. Space utilization could be improved and the agency is working on this.

Some additional equipment for older residents should be provided.

The facility does not have a valid license.

Service Quality

As the program modality is new and not functioning smoothly, the service quality is difficult to determine. The emphasis in the program is on the family role model. All services are purchased.

including counseling. There is a point system in place, but there is evidence that this modality is not effective with many of the residents. Although the current program has been in place for a very limited time, it appears that the services are better than they were two years ago.

Concerns regarding "house rules" and policies were identified. For example, the smoking policy, cited by most residents, appears to be arbitrarily enforced; reportedly, staff smoke wherever they choose, including in front of the residents, but the residents are not permitted to smoke. Residents expressed resentment towards the point system. Although some residents stated that they felt the discipline is not particularly fair, they were not able to cite any specific instances. The range of activities offered to residents appears limited with considerable emphasis on many outdoor activities including long hikes. A larger range of activities should be available for recreation and skill development.

Some concerns related to services were expressed, specifically regarding the inability to adequately supervise young children, due to facility constraints, and the close proximity of the young staff children with residents; the lack of training of some of the staff; and the lack of documentation/follow-through for case planning and service delivery.

Case records reviewed revealed some planned staffings with those involved with the case, such as social worker, counselor, psychologist, etc, however they did not contain specific case plans nor

did they provide for periodic review of these case plans. There was minimal evidence of work with families.

Relationships

Persons interviewed were very positive about the quality of the services provided, indicating significant improvement over the program provided in the past years. Persons interviewed were very supportive of the new director, and felt she was responsible for much of the program's success.

Community Leaders

Relationships with community agencies appear basically positive although somewhat uneven, with a need for an increase in the level of feedback and information that service providers receive. Agencies desire more communication with the center staff with regard to the treatment plans and progress of the residents.

Relationships with the school are good. School personnel have observed positive changes in the residents, including their personal appearance, attendance, and social skills. The center staff monitors the educational progress of the residents on a regular basis, and is readily available to school personnel. For example, center staff send notes to the school, detailing progress of the residents. Although school staff expressed the desire for more personal contacts, they appreciate the information they receive. There is some concern that the proposed addition of five beds would bring more special education students into the school, a situation which school personnel believe might

overly burden their system and ability to provide the required services.

Referring Agencies

Relationships with referring agencies have improved considerably over the past year. There are frequent telephone conferences, but facility staff rarely attend case staffings. Relationships with police are reported as good. Staff apparently always have time to talk and work with police.

Some of those interviewed expressed concern about the strong advocacy position taken by the staff, sometimes viewed as a position against the parent. If this is true, additional problems for the child may be created, especially if the child is going to be returned home.

Among Staff and Between Staff and Residents

The vast majority of the staff have been hired within the past year, and roles and relationships are still being developed. At this point, it is premature to evaluate the quality of staff relationships.

CONCLUSIONS

Strengths

- Active efforts to improve the program.
- Basically positive relationship with community, agency's openness to suggestions from community and others.
- Lead teaching family has training and experience.
- New and clean facilities, although some modifications should be considered.

- Community's perception of positive program changes, and its support for the new director.
- Board members' level of concern and interest.
- Recognition of residents' need for their own space.

Weaknesses

- Director's lack of experience in residential child care.
- Relatively new staff, lack of clarity in program goals, roles and responsibilities not fully defined.
- Organizational structure does not provide for a program leader to develop and coordinate in-service training.
- Organization of space which makes supervision of residents difficult.
- Inconsistent enforcement of the smoking policy.
- Some gaps in communication between referring agencies and staff.
- Gaps in case recordkeeping, lack of case plans and documentation of services.
- Lack of personnel, procedure, and policy manuals.

Recommendations

In summary, this program has undergone significant changes from that proposed to DFYS, and is currently working to stabilize itself. These changes are viewed as very positive forward steps. The program has a concerned board, and some experienced direct care personnel. Treatment leadership is needed to refine and stabilize the newly established teaching parent model. The following recommendations and suggestions are provided for the consideration by Kenai Peninsula Community Care Center.

- Clarify the role and responsibilities of the Director.
- Clearly specify the function/job description of the psychologist.

- Determine responsibility for caseplanning, organizing services, and coordinating purchases. Work closely with DFYS to develop appropriate forms and focus for improved case recordkeeping.
- Develop and implement a training program. The objectives should include increasing staff understanding of the dynamics of child and family functioning and the development of skills in constructive intervention. Local persons with skill and knowledge in these areas and the use of materials borrowed from the state library and DFYS training resources can support training. Self-training and sharing with other staff through the planned use of reading and taped materials followed by staff discussions is an excellent training format to supplement more formal opportunities.
- Develop procedure, program and policy manuals.
- Provide training to the board, focussed on roles and responsibilities to help them in the process of decision-making.
- Define and clarify the program's roles and responsibilities and develop a plan to strengthen communication with referring agencies.
- Carefully examine the facilities, and make modifications as necessary so that residents can be observed in all areas of the building.
- Provide space for counseling and private meetings.
- Improve level of supervision of residents.
- Provide additional equipment for older residents.

KODIAK BAPTIST MISSION

The Kodiak Baptist Mission is an independent non-profit organization providing residential care for children and youth. The Mission is affiliated with several state and national associations of Baptist programs. Consultation is available and ex-officio representation on the board is accorded to the National Ministries of the American Baptist Churches, USA. The licensed capacity is 30 (but not staffed for this many residents). The living quarters are divided into three homes on a campus; two for longer term placements and one for emergency placements, and orientation and assessment before assignment to a longer term unit. Thirteen beds are funded under the DFYS grant. The facility occasionally accepts private placements or accepts children temporarily who need care even though the state beds are full. Referrals for funded beds are received from Youth Services and Family Services. The facility serves youth from the South Central Region.

Governance

A board of 10-14 persons governs the agency. Presently there is a full complement. By-laws guide their activities and members serve staggered terms. Until recently, the by-laws provided for rotating terms with a specified hiatus between terms. This has been eliminated to permit a member to serve an unlimited number of terms. The rationale for this decision was to allow valued members to continue their role as governing board members. Finance, Personnel, Resource Development and Program Committees have been

established. The board meets a minimum of quarterly while the committees meet monthly. Review of the board minutes indicate that the principal activities of the board have focused on financial and personnel matters with less focus on programmatic issues. Orally, Board members communicated evidence they they possess knowledge and interest in the implementation of the teaching parent model. They have also supported agency independence from the Kodiak Mental Health Center with which a contractual training and consultation relationship has long existed. The board has recently completely updated the personnel policies. The changes were directed toward making the policies and job descriptions consistent with the teaching parent model now in place.

Board members have had some formal training. For example, in April 1986, a consultant came on-site to conduct a workshop for the board. New board members, especially those persons who are not familiar with the Mission, are provided with orientation. Plans for standardizing the training have been discussed, although no particular interest in specific types of training were identified.

Currently, there is one native member. The local native groups have been approached to assist in recruiting persons to increase the native representation.

The board has developed a five year plan which is reviewed and updated annually. Board oversight of the facility includes periodic visits to the individual "homes" (resident cottages) and through monitoring staff who work with board committees.

The board evaluates the director annually. This evaluation is conducted through the use of a questionnaire which is completed by each board member. These questionnaires are collated by the Executive Committee which then meets with the Executive Director to discuss the findings. Not all board members are satisfied with this process, feeling that it should be designed to be more of a growth process. Before the next evaluation is due the board expects to refine the process, with the assistance of a board member with experience in personal administration.

Administration

The Director was away on extended medical leave at the time of the review. The Program Director was interviewed regarding both administrative and program issues. The Director has been in her current position nearly two years, promoted from her position as a teaching parent which she held for one year. She has a bachelor's degree in social sciences and formal training in the teaching parent model of residential care. There is a Program Director to whom the teaching parents and house assistants report. The individual living units function as self-contained homes. All the teaching parents have had previous experience in this treatment model. During the past year, there was essentially a full turnover of staff, a change viewed by the agency as a significant move to upgrade the program.

A very structured training program has been developed for this model (which was developed at Boys Town, Nebraska) which involves pre-service orientation and observation, very close supervision

and ongoing consultation. Prior to the current administration, the Mission had a contractual arrangement with the Kodiak Mental Health Center which included staff training conducted by a MHC staff person who is a certified teaching parent instructor (who trains for this model in other program as well). Since the establishment of the position of Program Director, the contractual relationship with the Mental Health Center, both the training and direct case consultation, has ceased. An agreement for psychological and other services has been developed with the native association KANA. The Mission desires a greater degree of independence, than was felt to exist in the relationship with the Mental Health Center, to conduct their own training and to access community services, as it deems necessary. There is a strongly articulated desire to protect the integrity of the teaching parent model.

Review of personnel policies and files show acceptable practice. Performance evaluations are current and training documented in the files. It was noted that all staff are Caucasian.

The physical facility and equipment are appropriate for the program provided. The location on a lake shore, trees, flowers and open spaces provide a pleasant setting for the individual resident buildings. The license expired on April 24, 1986, and the sanitation clearance is quite old as well. The log of fire drills indicates that drills are primarily held in the late afternoon rather than at varied times of the day and night. There was incomplete evidence that problems with evacuation

identified during drills had been addressed.

Service Quality

The service quality is acceptable. A structured home-like environment, within a campus setting, is provided. It is an appropriate program for youth with sufficient impulse control to respond to the structured program. The program emphasizes behavior modification and reflects a minimum understanding of and response to the dynamics of child and family problems. The focus of the treatment model appears to be rigidly adhered to. As a result there may be fewer benefits than would accrue with more flexibility. There is evidence that the program lacks sensitivity and attention to the ethnic and cultural differences of the predominantly native resident population. The recently intensified relationship with KANA has potential benefit in this regard, however. The program appears to have the potential to effectively serve a wider range of child and family situations than presently appears to be the case.

The agency has not consistently handled reportable incidents in the best fashion. Appropriate procedures must be adhered to and staff made aware of their responsibilities.

Review of case records reflects service quality ranging from average to minimally acceptable. Records reflect child goals in most instances, and appropriate family history. Most did not contain fully executed placement agreements. There is little evidence of work with families or efforts to involve them in the treatment.

Relationships

Community Leaders

The Mission enjoys the respect of the community as a responsible, caring provider of residential child care. In general, the agency has traditionally been viewed as a cooperative and active participant in effective community coordination. New administrative direction and new, in-house capabilities within the Mission program have altered working relationships with community agencies and professionals. These changes are not entirely viewed as positive changes within the community of agencies but rather seen as a reduction in community teamwork and an intensifying of a stance of "isolationism".

Referring Agencies

The working relationship between the local DFYS office and the Mission is strained. There are marked differences in perceptions and philosophy of treatment. As indicated above, the deterioration of community working relationships has affected the referring agencies as well. Many of the residents at the Mission are placed through other DFYS offices, with a "courtesy" assignment to the local office. As a result, the local office may become involved principally at points of crisis, which probably further strains the relationship. The Mission is viewed as exhibiting an arrogance regarding the efficacy for its treatment model which reduces cooperation.

Feedback on treatment progress, from the administrative level.

ranges from acceptable to not acceptable while information regarding agency policy changes is generally deemed unacceptable. Prompt information regarding vacancies is also regarded as less than optimal.

Among Staff and Between Staff and Residents

The relationship among the teaching parents appears comfortable and supportive. As most staff are new, there is a feeling of working together to develop a cohesiveness. A desire for clearer policies and greater administrative flexibility was identified.

The relationship between residents and teaching parents was warm, relaxed and appropriate. The youth were clean, pleasant and very well mannered and proud of their homes. They know why they are there and what they need to do to leave. They report support from staff, easy access to their families and social workers, probation officers and lawyers. Those from outside Kodiak expressed a desire for more opportunities for contact with their families.

Conclusion

Strengths

- Pleasant location and good facility. Nice use has been made of basically quite old buildings.
- Clear treatment methodology.
- Good board structure.
- Involved and knowledgeable board.
- Caring nurturing environment in home-like setting.
- Well organized case records with good detail regarding

interaction between child and program.

Weaknesses

- Program rigidity.
- Isolation from the community of agencies.
- Heavy emphasis on behavior with limited understanding of the dynamics behind the behavior.
- Failure to conduct the agency's usual annual program evaluation during the past year.
- Insufficient communication of policy and policy changes to line staff, referring agencies and community leaders with a need to know.

Recommendations

In summary, the Mission is providing a good quality of service for a certain type of child who can accommodate themselves to the demands of the program. The agency had recently developed a reputation for rigidity and isolation which is perceived as a negative. A concerned board, good physical facilities, caring staff with adequate supervision, awareness of the value of training, and a community with unusually varied and high quality services and teamwork "set the stage" for a higher quality treatment program than appears to be currently provided by the Mission. The following recommendations and suggestions are provided for the Mission's consideration.

- Record more details of the work done by the board committees in the board minutes. Since much of the "board work" is done by the committees between relatively infrequent board meetings, it is important that information regarding their work be maintained.
- Examine the manner in which the treatment model is being implemented. The teaching parent model can be a very flexible modality which uses a variety of tools and techniques to

intervene and treat children. Skill in bringing about behavior changes through role modeling and prompt, clear feedback to residents should be supplemented with cognitive and clinical skill and techniques.

- Develop and implement a plan to establish and maintain good working relationships with the community of agencies. This should be based on open dialogue and professional respect for differences. No one agency can "be all things" to its clients. Multi-disciplinary approaches are most effective, especially in working with children and families dysfunctional enough to justify placement of the child in a group care facility.
- Develop and implement plans to strengthen cultural and heritage awareness. The activities should include native staff and board members, food, crafts, recreation and activities which support language and tradition.
- Conduct fire drills at varied hours, including when staff and residents are asleep and ensure that identified problems are addressed.
- Consider a return to a system of having a limited number of terms on the board. Ex-officio membership, non-voting involvement on committees, special assignments and similar means can be developed to retain the interest and involvement of valued members while ensuring that new ideas and persons are added to the board in a regular fashion.

SALVATION ARMY BOOTH MEMORIAL

Booth Memorial, located in Anchorage, is the child care component of the very large Alaska Salvation Army program. The Booth Memorial program includes residential care for females and a day treatment program in one location and a co-ed shelter at a separate location.

Although most residents come from the South Central region, the residential program for females is the only residential maternity home service in Alaska so it serves young women from other regions as well.

Governance

The board is an advisory body with provision for 15 to 21 members, currently operating with 15 persons. As an advisory group, they have no policy making authority (this authority is vested in the Salvation Army). There is provision for two members of the Central governing board to sit on the Booth board. As an advisory body, they make recommendations and feel that their suggestions are generally accepted. For example, they have recently been involved in reviewing the grant application and in the modification of the shelter program. The board is actively working to increase native representation among its membership.

Review of the by-laws and board minutes indicate that they are within an acceptable range. The board's concern with planning is focused on fiscal stability as well as ensuring that the physical facility adequately meets program needs. The board has had little

formal training but many have had experience on other boards. Some members have attended board training provided by United Way. Members are interested in training regarding fund-raising, the role of the state with the private sector, and organizational structure.

The evaluation of the executive director is informal as no formal process has been developed.

Administration

The Executive Director has been with the agency for a number of years and has long experience with the Salvation Army. He has a Master's Degree in Social Work. The agency is organized, by program, under the Director of Program who also functions as the Assistant Director. Because of the medical needs of the pregnant residents, the agency has a number of medically oriented staff members.

Personnel policies and personnel files are within the acceptable range. The files record the training each person has received. The shelter manager has a number of years experience with Booth but neither she nor most of the other shelter staff have any experience in shelter programming.

The physical facility where the residential and day treatment program operate are adequate and pleasant. The reviewers have some concern about the degree to which the doors are kept locked to keep the residents from flowing in and out different sections of the building. The purpose for the locked doors is understood.

but the impression left is that the building is more of a restrictive facility than it really is.

The shelter building is inadequate for the emergency program. Its size, internal design, equipment and location all have a negative impact on the shelter program.

Both physical locations are licensed and other inspection reports are in order.

Service Quality

Residential Program for Females

The residential program provides acceptable quality services and is well understood and received by the community and by the referring agencies. The program appears to have necessary components and resources. It is generally believed that the single-sex program has been less fraught with the difficulties experienced by co-ed programs in the community.

Review of the case records indicates that the quality of service is either average or high quality. None of the reviewed records contained fully executed placement agreements.

Day Treatment

The day treatment program meets a community need, appears to be functioning at an acceptable level and is well received by community leaders and referring agencies. Although it is recognized that the program is not serving the most difficult children, it is viewed as providing a quality service for those that are in care. The recent addition of a teacher for the children in day

treatment, as separate from the classroom for the residents, is seen, internally as well as externally, as an improvement. Care should be directed to maintaining youth only for such part of each day as their needs actually require.

The case records that have been open for a somewhat longer period of time reflect a better level of quality and more adequate information than those open for shorter periods (relative to reasonable expectation for given time periods). This suggests that there may be some difficulty in getting appropriate information into the case records. Review of the case records reveals that service quality is either average or high quality.

Shelter

The agency operates a 12 bed shelter for males and females at a location separate from the residential and day treatment programs. As indicated previously, the building is inadequate for such a program. It is a three-story building and is very small relative to the kind of activities that need to occur. The floor plan also contributes to problems in supervising residents. There is minimum equipment for resident activities and recreation. It is the reviewers' understanding that the agency anticipates moving to another location and this is encouraged. It is difficult to determine whether the problems that the shelter is experiencing are caused by the fact that the program is very new or are caused by the physical location. The reviewers suspect that the two have combined to create a number of difficulties for the program. Both of the above problems are compounded by the fact that the build-

ing is located in a geographic area that offers a bad environment for the young people in care.

The shelter program meets a community need and the purpose of the shelter and its availability are well understood by the community leaders and the referring agencies. There isn't a uniform understanding, however, that the Booth program is being used primarily for Family Service referrals while the Alaska Youth Advocates shelter is being used primarily for Youth Services referrals.

The policy of "no refusal" at Booth has been a difficult one for the agency to implement when faced with the inability of DFYS to find alternative placements and to make permanent plans for it's children in a timely fashion. This has resulted in children remaining far too long in shelter. At the time of the review visit, there were five children who had been in residence for more than 44 days and two were on their 93rd day. This extended length of time in shelter care makes for an intolerable situation in a shelter facility which is neither funded or staffed to provide an ongoing treatment program.

The reviewer's observations suggests that the program has not been able to integrate many clinical concepts or crisis intervention techniques into their program. They are utilizing the privilege of recreational opportunities as a behavioral management tool rather than using the time that the youngster is in care to teach the child new skills or coping mechanisms.

The case records are very unprofessional looking and they contain

bare minimum materials. None of the records reviewed had fully executed placement agreements. They contain essentially no evidence of family goals or involvement and reflect minimum materials from referring agencies. The quality reflected in the record compares with the minimum quality care perceived by the reviewers.

Relationships

Community Leaders

The working relationship between Booth and the community leaders appears to be acceptable. The agency is viewed as cooperative and caring. The major difficulties are experienced with the shelter program itself rather than in relationships. It was generally indicated that the difficulties are not all of the agency's doing.

Referring Agencies

The Youth Services staff have minimal experience with Booth and thus have little relationship with the agency. Family Services experience difficulty in working with the shelter staff on case-specific issues such as handling behavioral incidents and timely feedback. The relationship with Booth administration is viewed as adequate.

Among Staff and Between Staff and Residents

The reviewers observed some lack of interaction between the staff and the residents during school and noon breaks at the main facility when no specific activities were going on. The quality

of the interaction at the shelter was difficult to determine...although the tightness of the quarters requires a lot of "togetherness". The residents expressed the feeling that the staff were caring, fair, and interested in them. Some adolescent residents were very critical of their DFYS workers and wondered, aloud, why their Booth workers didn't help them with that problem.

CONCLUSIONS

Strengths

- Very caring staff.
- Flexibility and willingness to modify to meet changing needs.
- Supports provided by the Salvation Army parent organization.
- Professional and therapeutically-oriented programs in the main campus and day treatment components.
- Good physical facility for the residential and day treatment programs.
- Satisfactory integration of pregnant and non-pregnant residents in the female program.
- Organizational stability.

Weaknesses

- Minimum involvement of families in programs except for the day treatment component.
- Lack of follow-through and aftercare services.
- Financial constraints which have resulted in extremely low salary scales.
- Facility and equipment at shelter.
- Insufficient staff training and experience, especially in the shelter program but also generally true for child care staff in all programs.

- Implement "quality time" concepts in structuring the shelter activities program.

B. WESTERN REGION

BETHEL GROUP HOME

The Bethel Group Home is a community-based residential care facility for eight boys. Until several years ago, the facility was principally staffed by rotating Jesuit volunteers. Most recently, primary responsibility has been assigned to paid personnel supplemented by the Jesuit Volunteer Corps. The principal source of funding is the DFYS grant supplemented by Jesuit volunteer staff. The Group Home provides service for youth from the Western Region and accepts referrals from Youth Services and Family Services.

Governance

The governing board, which may range from seven to nine members, currently has seven members including one Athabaskan and one Black. The by-laws do not provide for rotation of members. Efforts to establish a functioning committee structure have not been very successful. Only the Finance Committee is functioning. Attempts to establish a Program Committee and a Public Relations Committee have not been effective.

The agency has made concerted efforts to increase the minority representation on the board, currently operating with a lower percentage than at some periods in the past. They are actively seeking minority representation including experimenting with the use of telecommunications to involve persons living in villages.

The board has been more active during the past year, meeting almost monthly, having previously often gone for some months

without meeting. The board discussed the agency's grant proposal but did not assist in its preparation. They see their principal involvement related to fund-raising, cash flow and general oversight. Several members are involved in such community activities as the Task Force on Alcoholism, which they view as beneficial to both the community and the Group Home. Their main involvement in planning involves the conversion of their program to a co-ed one. They are reticent to move in this direction but feel pushed by community needs and Division pressure. Modification of the physical facility is underway to accommodate changes in the residential population.

The board members, including recently elected members, have received no training or orientation although the director's goal statement was shared with them. Some members have experience on other boards. Their knowledge of the Home comes from general information and living in the community. The members expressed an interest in training regarding their role and function.

The board did not formally evaluate the administrator during the tenure of the previous director. They now conduct a structured assessment of the current co-directors (see following section re: administration) and the program status twice annually at board meetings when the terms of the two directors overlap.

Administration

The Group Home has an unusual mode of executive leadership. Two men share the Director's position on a six month cycle, each being outside Alaska during their off term. This schedule accomo-

dates to the personal and professional needs of the two incumbents. The board accepted this arrangement, suggested by the incumbents, because of the perceived difficulties in recruiting and retaining personnel unless they can be assured opportunities away from the community. A written contract, overlapping tenure (one month at each turnover), written agency goals and objectives have been developed to smooth the transition and support continuity. The agency feels that resident treatment is not interrupted by this arrangement as neither director is directly involved in the clinical aspects of the program. The board admitted reservations to the arrangement when it was originally suggested but now feel that it is a functional arrangement.

In addition to the Co-Directors, there is a Treatment Director with direct responsibility for the child care personnel (both paid and volunteer). The current Executive Director has considerable experience in health care and the Treatment Director has residential and training experience but neither has clinical or treatment credentials. The other Executive Director is reported to have residential treatment experience.

In the personnel files reviewed, performance evaluations were current but otherwise they revealed serious gaps in content. For example, many of the records lacked employment agreements and documentation of training received. The agency is also cautioned that it is inappropriate to use case names and information in personnel files as part of the employees performance evaluation.

The staff is well-balanced racially and ethnically, being half native or other minority. Aggressive efforts and planning have gone into this accomplishment. Training, careful recruitment, screening and recognition of work attitudes and practices are part of this effort. The staff is half female and somewhat older than most other facilities reviewed for this study. The plan is to phase out the Jesuit volunteer program in the next year or so which will have financial impact as these persons are replaced with paid staff.

The facility has implemented a structured training program for child care staff involving eight hours of orientation at the time of employment, one to two weeks observing the program in action, followed by the "Chapel Hill-North Carolina" child care workers' training curriculum for a total of 92 hours annually per employee. This training is supplemented by weekly staff meetings.

The physical facility and equipment are adequate for the program. Outdoor work, around the facility, to simulate tundra landscape was included as a part of the summer resident employment program. The facility should be carefully cleaned as it shows some shortcomings in this area. The space is somewhat cramped, a problem being addressed as part of the remodeling for the coed program. The facility is licensed. Other inspection reports were in order except for the lack of a sanitation clearance.

Service Quality

The service quality is deemed to be good and responsive to the needs of the residents. The cultural awareness and recently

developed summer work and fish camp program (funded by a special grant) are especially valuable components. The program places a heavy emphasis on the group process and peer pressure; thus youth who are unable to adjust their behavior to such an environment often will not work out well in the program. Varied treatment methodologies would strengthen the program. Children who require care in group facilities should have access to varied treatment methods to meet their individual needs. The fact that the Group Home is not fully utilized is apparently related to the "misfit" between the type of youth that "do best" in the program and the profile of many of the youth for whom placement resources are needed.

Case records reviewed indicated generally high quality service provision. Most records contained appropriate information and necessary documents including fully executed placement agreements. Although basic family goals and information are recorded, not much work with families is reflected. It should be noted that the Group Home was one of only two facilities in the state which required confidentiality release from the team in order to read case records.

The residents interviewed know why they are there and what they have to do to leave. They view the program as good, the staff fair and the rules clear. They view the employment program as the best aspect of the service they receive from the Group Home.

Relationships

Community Leaders

Community leaders report good relationships and frequent contacts with the Group Home. Most contacts are informal. Those persons interviewed understand the program and view it as a valued community resource.

Referring Agencies

The relationship between the facility and DFYS is strained by differences of opinion regarding referrals, case planning and implementation, and lack of clarity regarding roles and responsibilities. The relationship has improved recently but still needs work. Impending change in the Family Service leadership in Bethel is likely to interfere with improving the working relationship, at least in the short term.

Among Staff and Between Staff and Residents

The relationship among the staff appears excellent and professional in tone. Not all personnel are clear regarding the lines of authority and to whom they report. They report the atmosphere is tempered with good humor. The interaction between staff and residents was observed to be active and appropriate. A sense of "house pride" is apparent.

CONCLUSIONS

Strengths

- Staff training program.
- Cultural awareness.
- Structured work and fish camp program.
- Community networking.

Weaknesses

- Insufficient individualizing of the treatment methods.
- Insufficient use of community resources for individual therapy/counseling for residents.
- Unclear lines of authority.
- Marginal quality personnel files.

Recommendations

In summary, the Bethel Group Home appears to provide good quality services for a particular type of youth with fairly good coping skills. Absence of individualized treatment interventions within the program and full use of community treatment resources reduces the level of intervention needed by many youth. The following recommendations and suggestions are offered for the consideration of the Bethel Group Home.

- Examine how acting-out behavior is handled as an aspect of expanding the treatment techniques used.
- Work with DFYS to develop clear and mutually acceptable protocols to guide working relationships.
- Work with the referring agency to ensure that the program is responsive to the types of youth for whom placement resources are most needed.
- Explore and plan carefully for program changes if the Group Home is to be converted to a coed facility. The building is relatively small, and even with proposed modifications, the population change will have a major impact on the program. Consideration should be given, through an interagency planning process, together with the Division, to the potential of remaining a male facility and using the Bethel Receiving Home for females. Each program could maintain some shelter capacity for emergencies until such time as a third (shelter) resource could be established in Bethel. As a longer range objective, consideration should be focused in a merger of the Receiving Home and the Group Home to create a single multi-program residential agency.
- Monitor the dual executive director situation carefully. This is a most unusual arrangement. Some strong feelings were

expressed in the professional community that the agency is negatively impacted by the arrangement with regard to organizational continuity. Although no specific evidence that the arrangement is detrimental was found, the reviewers strongly recommend monitoring.

BETHEL RECEIVING HOME

Bethel Receiving Home is operated by Bethel Social Services (BSS). The parent organization is a non-profit community agency which has initiated a number of human services programs. BSS presently operates residential and day programs for both children and adults. The Receiving Home purchases administrative services, including fiscal management, bookkeeping and personnel services from BSS.

The Receiving Home provides residential care for children from the Western Region. Referrals are received from both Youth Services and Family Services. The Home is currently funded through a DFYS grant for four emergency beds (intended for 48-hour use) and eight longer term beds.

Governance

There is a separate governing board for the Receiving Home. There is provision for seven to eleven members. There are currently seven members, including one native person, although Bethel is a predominantly native community. There are generally several members of the BSS board on the Receiving Home board, although there seems to be no formal mechanism to which guide the interlocking aspect of the boards.

The by-laws have recently been revised. They provide for rotation of members but do not establish standing committees. As a result, the board operates as a "committee of the whole".

Only one year of board minutes were made available for review.

The board met ten times during the past year. The minutes reflect essentially no attention to program issues and do not well document the activities and decisions of the board. The reviewers note that the Director of the facility serves in lieu of the board secretary essentially all of the time, and in lieu of the chairperson much of the time, which suggests that these officers do not fulfill their proper roles.

The board members indicated that the board has been fairly inactive but has recently added several new members, including the administrator of the other child care residential program in Bethel. The board is working to be more active and has taken an advocacy stance in connection with state role and funding of child and youth resources in the area. They are considering undertaking a joint program evaluation with Bethel Group Home.

The board members have not had very much training but many members have previous experience on other boards. There is no board manual, however a packet of relevant materials has been assembled for each person. They expressed an interest in a workshop on board development.

The board views its principal role as ensuring fiscal soundness. They are working to build their budget based on children's needs. They are critical of the funding level provided in the state grant.

The board does not formally evaluate the Director, although the members feel that they are able to assess her performance informally.

Administration

The Director has a BA in Anthropology and Sociology/Psychology. Her personnel file does not indicate the date she was employed and confirms the lack of performance evaluation. The Director was more articulate regarding program activities and objectives of the facility than administrators in many other facilities. The staff consists of the Director and child care workers. There is no treatment, recreation, or program support personnel. The Director supervises all staff as no hierarchy has been developed. All other administrative functions are performed by BSS. This arrangement appears costly and fails to place the responsibility for the program on the governing board and the director, where it should be. In addition, the Receiving Home does not appear to benefit from being a part of a larger organization in ways which might reasonably be expected, i.e., access to insurance, pension programs, training, programming assistance and consultation.

Review of personnel files indicate that staff are poorly qualified for their assignments. Although a small amount of in-service training was reported, none is documented in the personnel files. Staff turnover is very high, several positions having turned over four or five times in the past year. The community is quite transient and stable staff is reported to be difficult to recruit. The minimum salaries and no fringe benefits complicates an already difficult situation.

The physical facility and equipment are adequate except that the storage space is scarce. Work is needed to repair holes in walls

and some cleaning is indicated, especially in the bathrooms. The facility is licensed. Other inspection reports are in order.

Service Quality

Although the Receiving Home is funded for both longer term care and for some emergency use, it operates as a single program and was reviewed in that manner. It operates essentially as a shelter program and the longer term concept merely recognizes the reality that the Division is unable to move some children as quickly as desired. Thus, this program should be viewed as an antenuated-stay shelter program rather than a treatment resource. The agency does not have a clear sense of the role it plays in the system.

Several areas of concern regarding this program were identified by the reviewers, and although the staff exhibit motivation to improve their skills and to correct past problems, the quality of this program is judged to be minimal. The skill level of staff is low, the children stay for a fairly long period of time and the planned programming is weak. In addition, the native population is poorly represented among the staff.

Although the environment appears to be safe and nurturing, staff indicated the desire for training and for program materials such as books and recreational equipment to support them in their work. The layout of the physical facility also makes it difficult for staff to supervise children and contributes to programming problems. The new structure projected for 1987 should alleviate some of these problems.

Despite the fact that staff skill level appears low, the review of case records reveals that average quality work with the children is performed. The records were well-organized and dictation was current but scant. Fully executed placement agreements were not contained in any of the records reviewed, which reflects the overall lack of planning for the children. Of equal concern to the reviewers was the apparent lack of involvement with parents. It should be noted that the Receiving Home was one of only two facilities in the state which required confidentiality release from the parent in order to read case records. The records revealed that essentially no involvement with parents is maintained, although there is evidence that the Receiving Home is quite willing to invite a child's entire family to visit and share meals. Several "outsiders" mentioned that this practice is a positive aspect of the Receiving Home. More emphasis should be placed on working the parents toward family reunification when appropriate.

Relationships

Community Leaders

The relationship with the community leaders appears to be functional. Most of the contacts are informal and fairly frequent. Timely and appropriate feedback is reported.

Referring Agencies

Relationships are reported to be greatly improved during the past two years. There is open communication, with weekly case conferences between Family Services and the facility staff that

provide a forum for problem solving and case planning and tracking. There is daily communication regarding vacancies. The working relationship appears to meet the needs of both the Receiving Home and the Division.

Among Staff and Between Staff and Residents

The relationship among staff appears positive and supportive. Staff interaction with residents appeared to be warm, appropriate and gentle. There was minimal opportunity to interview residents, but they appeared clean, comfortable and appropriately occupied.

CONCLUSIONS

Strengths

- Staff motivation to learn and improve the program.
- Openess to working cooperatively within the community and with the referring agencies.
- Safe nuturing environment for residents.

Weaknesses

- Costly but not particularly supportive relationship with the parent organization.
- Low native representation on board and staff.
- Board is not fully functioning and thus unable to provide either the program or the Director with needed support.
- Dearth of in-service training and adequately trained personnel to design and implement a program which is responsive to case dynamics and the length of time the residents remain in care.

Recommendations

In summary, the Bethel Receiving Home appears to be marginally funded and a portion of its limited resources are channeled to its parent organization. Training is needed for staff and

additional programming for residents should be instituted if this is to be a mid-term care facility rather than a short term emergency shelter. The following recommendations and suggestions are presented for the consideration of the Receiving Home.

- Develop and implement a plan to examine the board's role and responsibility. The assistance of an outside consultant may be required. This task could be coupled with needed training.
- Develop and implement a plan for increasing the native representation on the staff and the board.
- Undertake a formal assessment of the agency's relationship with Bethel Social Services. Alternative means of accomplishing needed administrative functions should be examined. Additional staff and/or the use of an independent accountant offers options to be explored. The goal of a fully independent organization should be thoroughly explored.
- Develop and implement a comprehensive staff training plan. The use of local persons with skill and knowledge to share information, planned and structured self-training, books and other available training materials, and the borrowing of state library and Division training materials offer options for the "ingredients" of such a training plan.
- Increase the activities and programming for the residents, including recreation, games, life skills in addition to counseling and group meetings. Group meetings should be used for a variety of purposes such as problem-solving, use of group dynamics to affect behavior and activity planning.
- Undertake some local, small scale fund raising to supplement resources. Local events and local service organizations offer potential for this purpose.
- Give consideration, through an interagency planning process, together the Division, to the potential of becoming a longer term female facility while the Bethel Group home continues as a male facility. Each program could maintain some emergency capacity until such time as a third (shelter) resource could be established in Bethel. A longer range objective, consideration should also be focussed on a merger of the Receiving Home and the Group Home create a single, multi-program residential agency.

C. NORTHERN REGION

NORTH SLOPE BOROUGH (BARROW) RECEIVING HOME

The North Slope Borough Health Department administers the Children's Receiving Home. The Receiving Home provides emergency shelter for up to 12 children of either sex. The children come from Barrow and surrounding villages. The purpose is to reduce off-Slope placements of children and to facilitate their return home. Funding is provided by the DFYS grant and through the Borough, principally in the form of administrative and supervisory support services. Most children are placed at the Receiving Home by Family Services and only occasionally by Youth Services.

Governance

There is no Receiving Home board. The Health Department Board oversees all of the programs under their aegis, however no special committee of that body focuses specifically on the Receiving Home. Rather it operates through functional committees which cut across all programs. A written plan of long term goals and annual objectives has been prepared for the Children's Receiving Home.

Administration

The North Slope Borough Health Department is organized into four units: Administrative Services; Physical Health Services; Behavioral Health Services and Social Services, each under a Deputy Director. The Children's Receiving Center is part of Social Services. Borough personnel policies apply to Receiving Home personnel.

The Receiving Home is organized with a director, to whom house-
parents and domestic workers report. The director reports to
the Borough Deputy Director of Social Services, who is respon-
sible for her performance evaluation.

The Health Department's administrative and programmatic support
and services is available to facility staff and residents.

The director is quite new, having joined the staff in December
1985. She has experience in residential group care in several
other settings.

Houseparents consist of two couples who "live-in" and rotate. The
two couples share a single home away from the Receiving Home
where they spend their off time (the couples are related). There
is no awake night staff. Very high staff turnover experienced
some time ago is reported to have been reduced, but is still
higher than most other Health Department programs. The Home has
found it difficult to attract and maintain staff, including
native persons. It was suggested that other Department care
programs are viewed by some persons to offer greater benefits
than the Receiving Home, i.e., training opportunities and less
demanding task assignments.

Recent in-service training included workshops in teaching
nurturing skills to parents and in fire safety. Staff have had
some training in connection with sex abuse, both locally and
through attending a workshop in Anchorage. Interest was expres-
sed in more intense training, especially regarding working with

older children and youth.

Review of personnel files indicates that performance evaluations are current. Training is documented in each of the employee files, several showing substantial and varied participation.

The physical facility is appropriate for the program. Equipment is more appropriate for younger residents than for older ones. The facility was clean and in good repair. Space is somewhat cramped; indoor space for large muscle activities for all ages is limited. The facility has a provisional license (through June 1986) requiring corrective action which is not yet underway. Fire safety inspection required corrective action which is underway.

Service Quality

The program is suitable for the short term care of children. The quality is most appropriate for the youngest residents. These are the preschoolers whose needs would generally be better met in family home settings rather than in group care if foster family homes were available. The quality of the program is deemed to be good, especially for younger children. The staff is stable, mature and ongoing staff training is provided, however the facility, program and staff skill level are less appropriate for older youth. The entire staff, from director to cook, participate in case staffings and work as a team. A functioning system of "stars" for the youngest and "points" for older residents has been developed to reward desired behavior. The program evidences less attention and support for native heritage than is desirable.

This is especially true for residents too young to benefit from the heritage programs in the public schools.

Utilization of the program is erratic. The North Slope population is sparse and the area isolated. The maintenance of sufficient bedspace to reduce off-Slope emergency placements was taken into account when the program was established and funded; thus the utilization pattern is not unexpected.

Review of the case records reflects erratic work, half being rated high quality and the other half rated minimally acceptable. There is little evidence of work with families except for visiting plans. Records reviewed contained very little social history and none of the reviewed records contained fully executed placement agreements. "Treatment" plans for residents were satisfactory and reflect the developmental needs of the youngsters (all were records of young children). A good "Enrichment Program" form is used in some records to plot the specific developmental needs of a child and outline the actions that were to be undertaken to address the needs.

Relationships

Community Leaders

The relationship with community leaders is generally good. The contacts are both informal and formal and vary in frequency from weekly to quite infrequent. The community leaders perceive significant improvement in the facility programs during the past several years; improvement which is reflected in a better and more

professional community relationship.

Referring Agencies

The primary relationship with referring agencies is with Family Services, which makes most placements, and far less frequently with Youth Services. Contacts between social workers and probation officers is frequent, often daily, when they have a child in residence. The relationships are generally functional and cooperative. Information and feedback are timely and appropriate. Some difficulty is encountered regarding vacancies when either Youth Services or Family Services use beds (such as with a family group) often the other unit is not aware a bed is no longer vacant. The referring agencies and the Home try to work closely together to consider the composition of the resident population at any given time before deciding whether to place a particular child.

Among Staff and Between Staff and Residents

The relationship between staff is warm and supportive. A team atmosphere prevails. The current houseparents are related. The couple who will replace one couple who are leaving is the previous director and his wife. There is awareness that this has the potential for difficulties, but staff are prepared to work through any problems which may arise. They feel that possible difficulties are outweighed by the new couple's familiarity with the program and the community.

All of the residents were quite young at the time of the review.

The relationship between staff and children was casual, warm and nurturing. Visiting neighbor children, including a few somewhat older past residents, stopped in for afternoon snacks and were welcomed by staff and the little residents. The residents were too young to be interviewed but observation of them and the interaction with staff was appropriate to their ages and developmental levels.

CONCLUSIONS

Strengths

- Warm nurturing environment.
- Stable staff.
- Team work and case staffings.
- Appropriate supervision of children.
- Program manual.
- Good community reputation.
- Good facility.
- Professional support available from the Borough Health Department.

Weaknesses

- Weak case recording.
- Limited work with families.
- Insufficient understanding and training in the dynamics which underlie child and family functioning.
- Weak program for older children.
- Insufficient program enrichment in light of the length of stay many residents experience.
- Limited native staff and attention to children's heritage.
- Limited opportunity for staff to "get away" from the program which contributes to burnout.

Recommendations

In summary, the program has demonstrated significant improvement over recent years. It offers good nurturing care and supervision to residents, especially the young age groups. Staff skill and coverage do not support a strong program for older residents. The administrative tie to the Health Department and good working relationships with DFYS are positive aspects of the program. The following recommendations and suggestions are offered to the Health Department and the Receiving Home for consideration.

- Develop and implement a training program. The objectives should include increasing staff understanding of the dynamics of child and family functioning and the development of skills in constructive intervention. Special attention should be focused on the needs of older children. Local persons with skill and knowledge in these areas and the use of materials borrowed from the state library and DFYS training resources can support training. Self-training and sharing with other staff through the planned use of reading and taped materials followed by staff discussions is an excellent training format to supplement more formal opportunities.
- Implement increased programming and child development activities which will enrich the care of children staying for long periods. The need for program enrichment increases as children are in care for more than very short periods. For preschool children, day care or Head Start type activities are good models for young residents. Activities for older residents, outside of school time, should extend beyond recreation to activities which teach skills and positive coping behavior.
- Develop and implement a plan to ensure sufficient attention to childrens' heritage. Some of the ways that this can be done include crafts, games, stories, language awareness and use. Actively seeking and involving elders in the program offers additional opportunities to enrich this aspect of the program.
- Seek to strengthen the "one-on-one" attention accorded children, especially the youngest ones. Using volunteers and "foster grandparents" are effective ways to accomplish this objective.

- Conduct fire drills at varied hours including meal times and when residents are asleep. This is especially critical for a program with a sleep night staff and many very young children.
- Work closely with DFYS to develop appropriate forms and focus for improved case recordkeeping.
- Develop a long range community plan, in cooperation with DFYS, to convert the Receiving Home to a long term treatment-oriented facility for older children and, at the same time, strengthen the foster family care for the youngest children.
- Group care for preschool age children generally does not enjoy professional support. The rationale in support of group care for preschoolers in Barrow is apparently based on the scarcity of native foster homes for native children and reticence to place such youngsters in Caucasian homes. As the Receiving Home is currently staffed, these children are subjected to all of the disadvantages of group care and to non-native caretakers as well. Placement in good non-native foster homes would be no worse, culturally, and a less restrictive setting than a group care facility.
- Consider the creation of a committee of the Health Board or a citizens advisory group to focus on the Receiving Home. Such attention would increase community awareness of the program and support staff.