Kuppinger Report & Coalition's Blueprint: Develop, Fund and Formalize Role of Families in Treatment and Service

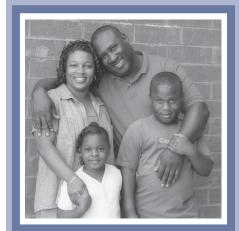
The State Office of Mental Health (OMH) recently released a report reviewing the role of Family Support Services (FSS) in the continuum of care for children with serious emotional and behavioral disorders and their families. This report, commonly referred to as the Kuppinger Report, uses 2001 data to highlight the benefits felt by individual families, traditional service providers and OMH when services, outreach, advocacy, education and informal support are added to the service mix. Because the Coalition's Blueprint for A Children's Mental Health System of Care identifies strengthening the role of families in treatment, care, and program development, there are many similarities between OMH's recommendations and the Coalition's ongoing activities around the Role of Families Priority.

OMH's report makes the following recommendations based on their review of FSS programs and believes these recommendations will assist in monitoring and developing FSS services:

- Collect basic utilization data for FSS:
- Create an FSS Coordinator position at the Bureau of Children and Families;
- Develop a shared vision about the role of FSS in the system of care and implement a regional process to support program development, including family organizations, providers and local government officials;
- Identify best principles and practices of FSS and assure program adhere to family empowerment;
- Regularly assess family satisfaction and participation;
- Assess adequacy of availability of FSS services in each county;
- Identify creative outreach strategies and encourage families to accept services beyond traditional models of support;
- Nurture the development of separately incorporated programs;
- Ensure access is available to all families in the community, without criteria requiring specific enrollment in other agency programs;
- Keep the FSS role as general, don't encourage use of FSS funding for specific support services, such as respite or specialized after-school care; FSS budget should not be consumed by one particular service;
- Assess the availability, models, use, staffing and adequacy of funding for respite services and consider developing a discrete funding stream for respite if the need is identified. While respite should remain a support service available through FSS, the need exceed the resources of FSS;
- Because respite, after school care and vacation programs are identified as priority needs for children and by families, FSS program should be developing linkages with schools and other providers that improve support for children and families;
- Strengthen and develop advocacy for children in the education community because FSS providers identified the great need for educational outreach and advocacy with school districts;
- Hold regional FSS town meetings to discuss issues, proposals, and program development.

Family Initiatives and Best Practices

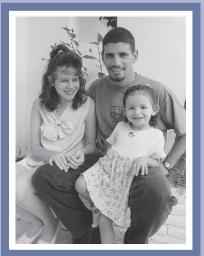
To further enhance the Development, Funding and Formalization of The Role of Families in Treatment and Service for Children's Mental Health.











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New York State Coalition for Children's Mental Health Services

FORMALIZING THE ROLE OF FAMILIES

As part of the New York State Coalition for Children's Mental Health Services strategic initiatives, member agencies passed a resolution on "Formalizing the Role of Families". The Coalition believes that families must drive the service planning for their children. Their influence should be across levels of care and across funding mechanisms and foster cooperation and consultation with the mental health care team - providers, clinicians and caregivers. This resolution, on behalf of the agency members participating in the Coalition, demonstrates the commitment to promote a family friendly culture, which is in the best interests of the child, parents and family members. And, one that integrally involves family members in both the treatment planning and policy/program oversight that guides the quality of services provided by member agencies.

The New York State Coalition for Children's Mental Health Services is pleased to share member's innovations and experiences with providers, children and families. This report summarizes various programs, practices and ideas that have proven to be beneficial in order to maximize family involvement in developing and maintaining children's treatment plans and influencing public policy and program decisions.

BACKGROUND

In the Coalition's 2003 Strategic Plan (dated 9/18/03), it was stated that "Providers must understand and convey the message that families are an integral component of the team, not only in the treatment for an individual child/family, but on the provider team (parent reps on boards) and the policy team (parents influencing public policy decisions). In so doing, new partnerships, training, and outreach efforts must be implemented... The participants also agreed to support training to better educate stakeholders on the family's role." With the Strategic Plan's implementation in mind, we identified a linkage between family involvement on the treatment team and the policy team. This link relates to policy/program oversight. We believe that this role is as necessary as participation on the treatment team and is an integral element in policy making on the board level. This resolution reflects the belief of all member agencies of the Coalition that family members of the children we serve should be integrally involved in both the treatment planning and policy/program oversight that guides the quality of services that member agencies provide.

RESOLUTION

In the interest of enhancing the policy development/program oversight involvement of family members, the Coalition hereby resolves to establish a guideline that encourages each member to identify structural opportunities for family involvement. Be it resolved that family members be included on a committee or into some existing structure of each agency that has oversight responsibility and/or policy making responsibility for programs that serve the needs of seriously emotionally disturbed children and their families. Be it further resolved that each Coalition member agency provide a range of supports to maximize the involvement and contributions of family members and to assure that their participation is felt to be valuable to the agency.

The New York State Coalition for Children's Mental Health Services PO Box 7124 • Albany, New York 12224 • Phone: 518.436.8715 • Fax: 518.426.8355

directly to families entering the SPOA process. Parsons also has gathering room with a sofa, TV and games. This will be an area that families can socialize and visit in a comfortable, informal five family members who have received service from the agency on its Board of Directors. manner. SCO also has a parent on its Governing Body for a number of years. Currently the Parent Advocate is an active member and the agency is seeking an additional parent as a St. Christopher-Ottilie St. Christopher-Ottilie (SCO) family support and member. This Governing Body approves new policies and goals, Briarwood, New York partnership begins at the reviews incidents, and oversees the functioning of our OMH programs while offering recommendations for continued improvements. The larger SCO agency had a Parent Educator Roundtable (PER) in June of this year.

time of the pre-placement visit when the parent(s)/legal guardian meets with the Social Worker and is given the Parents Handbook and is oriented to the RTF Program. At the time of admission, we meet with families to write safety plans for each child. These plans are completed with the help of the child and their family. The safety plan identifies what soothes a child at times of crisis. A home assessment is conducted at the child's home prior to the first home visit.

Finally, the family is called or met with at the time of admission by the Parent Advocate who provides the family with her job description and answers questions, along with the Social Worker, concerning placement, treatment, and general concerns regarding having a child in placement.

The Parent Partnership Group, established approximately 15 years ago, is a monthly group held at the RTF and co-chaired by the Social Services Supervisor and the Parent Advocate. It is a meeting where transportation is provided for those who cannot use public transportation or do not have their own means of transportation. Dinner is served at the meeting and child care is provided, where needed. This group is primarily run by the families, and guest speakers (ex. School Principal, RTF Director, Nursing Director, Psychiatrist, etc...) are frequently invited to address issues raised by the group. The group is composed of both parents of current residents and several parents of children who have been discharged. This latter group of parents serves as a strong support group for new families and also as a testament to the group's success.

In addition, SCO offers Parent Advocates who contacts the family upon admission, invites family members to treatment meetings and other agency functions, administers an annual family satisfaction survey, provides one to one attention to families who have a need for individual support regarding either RTF or personal issues, and through a waiver from OMH serves as an active member of our Governing Body. SCO is a member of Families Together and recently sent our parent advocate to the annual training in Albany. SCO also attempts to send at least one parent or our Parent Advocate to the annual Coalition Conference.

Parents/legal guardians and family members are actively encouraged in their involvement with the program. They are invited to participate in all planning meetings regarding their child, and may request to have the Parent Advocate included as a part of these meetings. Parents/family members are also invited to all major RTF functions including a large holiday Christmas party, a school open house, IEP Meetings, and a carnival in the summer as well as a family barbeque. We are in the process of converting one of our multipurpose rooms into a family friendly

St. Joseph's Villa of Rochester Rochester, New York

St. Joseph's Villa has made parents and

family members an integral part of the child's treatment and the overall agency service planning. Redesigned treatment plans now incorporate the family's language into the treatment goals. This shift has resulted in families feeling that their input is a driving force in the child's treatment planning. The agency has also introduced FACES (Families Achieving Change and Experiencing Success), a family program that uses adventure-based activities to emphasize family strengths, build positive attitudes and provide successful experiences that are connected to the family's life in the community. Agency residences have added family rooms so that families will have a private, comfortable place to spend time with their children.

At the policy-development level, a client parent serves on the Villa Board of Directors, which oversees program development and strategic planning. In addition, family satisfaction and parental involvement are established components of the agency's strategic plan. Parents join with agency leadership annually to meet with State legislators defining State policy and funding. The formation of an agency-wide Parent Advisory Group is also underway.



Vanderheyden Hall offers 1.5 parent advocates on staff, which is provided through funding

from a partial grant of local county government and the NYS Office of Mental Health. These parents serve on Vanderheyden Hall's management teams, committees, and other groups to provide feedback both as an employee and family member. Parent advocates are consulted regarding internal development. And the support group, Wit's End, is consulted with new initiatives. In addition, parent advocates participate in interviews for staff going into the family homes. Both parent advocates and parents not on staff are consulted about program development and are actively involved in all processes. Also Vanderheyden Hall has recently welcomed a family member to their Board. Vanderheyden Hall values the family's voice through out all its programs and continues to solicit family input through their quarterly family satisfaction.

consisting of a family therapist, family advocates, an entitlements counselor, and outside providers, to ensure that the family's voice is heard and that treatment is coordinated and responsive to parents' needs and preferences. In addition, the Family Advocates of ICL's Family Support Program have a regular presence in our clinic waiting rooms, introducing parents to their individual and group services, and helping parents to understand treatment options and their role in treatment and treatment decisions, locate and advocate for resources, and obtain peer support. The Brooklyn Parent Resource Center (BPRC) provides training, information, advocacy and support, accepting referrals from mental health agencies and other sources throughout the borough; BPRC has provided services to mentally ill parents housed in ICL's own family supported apartment programs as they encountered emotional and behavioral disturbances in their children. Our new family supported housing program includes a peer advocate on staff, to model and support parents' active participation in their children's treatment and services.

Jewish Board of Family and Children's Services Staten Island Staten Island, New York

Caring Families, as all FBT programs, has hired a family counselor to work specifically with our clients' natural families. The family counselor is both a guide and advocate for the natural family. The family counselor meets once a month with the family to determine and deliver the concrete and clinical needs necessary to facilitate the eventual reunification of parent and child. The families meet once a month in a support group. They take part in their children's initial service plan, as well as being invited to the quarterly service plan reviews. In this way they are able to have input into the goals and objectives of their children's treatment. They partake in family therapy sessions with their children, particularly when discharge back to the home is imminent. The natural families are invited to participate in several of the program recreational activities, fostering camaraderie between the natural families, the professional parents and the Caring Families staff. By including the natural families in the clinical and social activities of the program, they become an active part of the overall treatment plan.

The Jewish Board of Family & Children's Services on Staten Island administers an array of mental health services specializing in service to children, adolescents and families. Some of these programs have formally funded positions for parent advocates/ family members (Parent Resource Center and HCBS Waiver). These positions have helped to infuse a larger parent/family perspective into the other services on site beyond the individual programs they serve. Examples of this influence include parent advocate involvement in the development of therapeutic groups being run through the outpatient mental health clinic and Waiver programs and even co-leading these groups at times. Additionally, these family members have been instrumental in helping develop/ spearhead a new initiative to hold quarterly consumer advisory committee meetings, in which agency Board members are invited to attend and hear direct feedback from consumers and family members about the agency's services as well as future needs/

priorities. The experience with incorporating family members into program services has also been an innovation which funding sources have noted in recent grants to our site. The agency recently received a grant for an attendance improvement/drop-out prevention program largely on the model we proposed (and experience of our center) in using parents as well as clinical staff in reaching and serving the targeted youth. The incorporation of parent/consumer positions into programs enhances the particular services as well as the professional composition and richness of the staff and JBFCS is eager to pursue formal funding to integrate this role into more of our programs/services.

Linden Hill and Goldsmith Center Jewish Board of Family and Children's Services Hawthorne Center, New York

Linden Hill and Goldsmith Center are working together to include our resident's parents more directly in program development initiatives. The NYS OMH is working hand in hand with the statewide RTF's to move our programs into the best practices arena. We are focusing our efforts towards achieving several desired outcomes such as strength- based and positive youth development, trauma sensitivity, linkage with the community and fully partnering with families. Towards this end, we are developing a performance improvement plan that will monitor our path and highlight our successes towards this goal.

In addition, our agency held an initial Parent Council to develop this plan. This group includes parents from each program. The intent is to open a dialogue that will provide a means for our consumers to have a direct voice in the on-going development of these programs. What stands out is that parents have a perspective of the services we provide that generate positive ideas. For instance, a common theme all parents share is that preparing our youth for a less structured, more independent living situation should be tailored to the level of care they will be discharged to. This is of particular importance to families as it is a key to a youngster's success in their new setting.

Linden Hill and Goldsmith Center will continue to develop this partnership with families. We are building on parent-centered programs that have become a part of our facilities culture - such as a monthly Parent Workshop where we present aspects of our treatment program to parents. It is our belief that the more families play an active role in the treatment of their children, the more successful these youth will be with reintegrating into their communities.

Parsons Child and Family Center Albany, New York

Child and Familv

Parsons

Center received funding from the NYS Office of Mental Health to develop a department of family members who are service providers within the Albany SPOA. The department, known as Families United Network, provides advocacy/support throughout Albany County, has a Prevention contract with the County, and has recently been awarded a contract to provide parent support

Astor Home Rhinebeck, New York

The Astor Home has focused, over the past two years, on increasing parent involvement in

treatment and education by developing a Parent Newsletter with detailed reporting on classroom curricula and activities. The newsletter is distributed quarterly. The Astor Learning Center (our school), working with a group of parent advocates, also developed a new parent handbook and distributed it to all parents (it now is distributed to new parents at admission). We added an annual parent-teacher conference day in the school. Social work coordinates attendance and transportation and parents have an opportunity to tour the school and meet individually with their child's teacher. We also have begun to coordinate parents' ordering school pictures annually, we send 'good job cards' about educational successes to parents regularly, and the school submits classroom point sheets to the unit social workers so that parents can review their child's educational progress weekly. We purchased a high-tech speaker telephone to improve quality of sound transmission during treatment team meetings and CSE meetings so that families who cannot attend physically can participate easily in these meetings.

Astor Home has linked family input and concerns with our Board and our policies/procedures by hiring 6 part-time parent advocates. The advocates have formed interest groups. For example, the school group has worked with our principal to review the parent handbook, change the CSE process to be more family friendly, and help support new parents as they traverse our educational program. The administrative interest group sends a representative to all department leadership meetings and to all quality assurance meetings (incident review, health and safety, incident review). The representative participates fully and all meeting minutes are submitted to the Executive Director and Board of Directors for review. We have focused on identifying reimbursement for family services by intensifying our support and assistance to all families in applying for SSI, and have begun to focus on integrating family services by making SPOA referrals for ALL discharges, inviting SPOA and district of origin CSE representatives to all team meetings (in the RTF and the RTC), and by working with our parent advocates to review discharge procedures and practices.

management techniques. The Astor Waiver program hired a skill builder/family support worker as part of the Waiver staff. The position requires that the person be a parent with a child who has a Serious Emotional Also, Conners received feedback from families stating that they Disturbance. The sense of team that is so important to the Waiver were appreciative of the calls about their child's dr. appointments Program, has been enhanced due to the fact that the skill builder/ and if restraints were needed. However, the calls more commonly are of a problem, and parents weren't hearing all the good stuff family support person is on site and is able to collaborate daily their kids do. Conners now offers a weekly phone call that the with families, the ICC, clinic therapist and other providers. child care staff make to the parents that focuses only on positives Family contact is increased and the relationship is strengthened by the full time availability of another worker as a resource for that have occurred over the course of that week. Child and families to reach their goals. Increased contact with families Family Services, Conners Children's Center provides families with therapeutic crisis intervention training. Families had long asked and providers allows the staff member to effectively advocate the agency to be trained in the same skills as the childcare workers. and represent the families in discussion that relate to the child's treatment plan. The connection to the host agency has allowed The agency developed training appropriate for families on crisis the worker to encourage and accompany parents to monthly intervention techniques. Families can come as many times as consumer advisory meetings where they can express their mental they like. The training is then followed up with a "shadowing health needs and concerns to Astor administration. The more program". This program has parents/guardians coming into the living units and spending as many hours as they can "shadowing" integrated the team is in its composition, the stronger and more a child care worker. The child care staff can role model for the effective "wraparound services" becomes as a tool for families.



Baker/Victory Services developed a Parent Advisory Board (PAB) in

1995 that meet on a monthly basis and include two staff members. These parents provide feedback on policy and practices to the programs, the Board of Directors and the Administration. One member of the PAB now sits on the Board of Directors. Annual Parent Professional Partnership training for the RTF staff will take place on Sept. 29. The OCFS programs will hold a Parent Forum on August 4 in which parents will discuss their experiences and provide feedback and suggestions to all OCFS Residential Staff. As standard practice, each RTF unit is required to hold a family "fun" event annually, parents are invited to all treatment plan review meetings and are encouraged to attend unit staff meetings, particularly upon admission, to "present" their child to the staff in a strength based manner. Forums for parents on specific issues and plans in the RTF have been held, most recently, discussions of plans for becoming a coed program and also as part of the implementation of the OMH QI plan for the RTF. All staff are instructed in our philosophy and are expected to be welcoming, cordial to parents and to provide appropriate strength based information on how a child is doing when parents call.

Baker/Victory also developed a video, which was a national award winner from CWLA, on parent involvement. Recently Baker/ Victory has hired a parent to welcome new parents at their initial intake and to be part of the family's treatment team. This parent role is still under development but already has proven to be a great support to our families. In addition, Baker Victory Services has hired a Family Advocate to work with their OMH Certified Programs.

Child & Family Services/Conners Children's Center Buffalo, New York

Conners Children's Centers holds focus groups with parents, which provides feedback on policies and procedures, ways of making them feel more comfortable, ways of involving them more fully in treatment planning and treatment decisions, and ways of identifying what additional services Conners can provide to get their children home sooner, etc. This feedback has resulted in families requesting more training on crisis intervention/behavior

parents the techniques they learned in the training. The shadowing randomly selects parents or primary resource persons to program is then followed up with a session with their Case Coordinator, who reviews with the parents/guardians the skills they learned and then help the families figure out how they can integrate the skills on home visits. In addition, parents are actively involved in policy and program initiatives and participate on Conner's Quality Improvement Team.

The Children's Home RTF Chenango Forks, New York

Involving families is a priority for The Children's Home RTF. The RTF involves

families in numerous ways and are always trying to expand their involvement. Families participate in family therapy, treatment planning, and CSE meetings. Most recently, family members are included in the development of Individual Crisis Management Plans (ICMP). Parents are encouraged to be part of the behavior management strategies and are often the first line of defense when a crisis is developing.

The staff has become very creative in making sure that family involvement occurs. Family therapy often occurs in the family home, transportation is arranged for families to attend and participate in treatment planning, whether that is financial reimbursement or an actual transport, and families can participate in meetings via telephone conferencing. Currently the RTF is working with a family that lives five hours away. The agency has put them up in hotels, held the first sleepover at a local camp site and the social worker goes to their home to facilitate family therapy and stays in a hotel which allows the resident to stay with her family overnight.

On June 4th, 2004 the Children's Home RTF held its first Annual Family VIP Conference. Families (parents, siblings, grandparents) came and participated in a day of learning and fun which involved educational segments from each department, as well as an afternoon of Wilderness Adventure Programming. Participants were able to meet other families and share their experiences, face their fears on the elements and see their children being successful in their environment. Discussions were initiated about the development of a Family Support Group and development of a Web page/site for families to communicate with each other. In so doing, some families exchanged phone numbers and email addresses to remain in contact. Future plans include the development of a Family Support Group, continued family conferences, a family newsletter and involvement with our Board of Directors.

The Children's Village Dobbs Ferry, New York

The Children's Village is committed to delivering its services to its consumers

from a point-of-need and strength-based perspective that incorporates their input and full participation. The agency offers its services and programs in a culturally competent manner. The consumers of service (youth, family members, primary caretakers, extended kin, meaningful adults) are actively encouraged to participate in all aspects of the agency's services/ programs (treatment planning meetings, parent education programs (offered in English and Spanish), post-care and family support services. Annually the agency's Research Department

administer the Family Feedback Survey. The Survey consists of 20 closed-ended items in which parents rate their satisfaction with various aspects of the agency's services and programs. The results are shared with various agency committees, including the Board of Directors along with parents (during Parent Orientation and on-going) in order to strengthen the agency's family focused work.

Coalition for Hispanic Families Brooklyn, New York

the creator of the Family Counselor position that has now been incorporated into the FBTP model across the State. Families are an integral part of what we do from the moment a child gets referred to the program. For us it is not just about how we involve families in the process, it is about an entire belief system. We have to have a strong belief in the power of family. We believe the following:

- Family is the most important thing in a child's life.
- Children sustain themselves with the love of family.
- Families have to be maintained in their parenting role throughout the child's participation in the program.
- Family's have tremendous capacity to heal and thus, heal their children.
- A child has a better prognosis for improvement when they are connected to their family.

These beliefs are what drives everything we do - the families become just as important to us as they are to the children we serve. As such, we spend a lot of time in the building of relationships between the children, parent(s), professional parent and the staff.

The Community Missions of Niagara Frontier, Inc. Niagara Falls, New York

The Community Missions of Niagara Frontier, Inc.'s Family Service Program provides support services

Coalition for

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to families in both youth and adult divisions. The Board of Directors includes several family members among its membership and the Parent Advocate for the Aurora House Program is a parent and active member of our Open Family Meetings. The Family Service Liaison for the Youth Service Division meets with prospective families prior to admission to obtain a family history and explain the Family Service Program. Once a child is admitted to our Aurora House program the Family Service Liaison offers on-going support through group meetings, telephone contact, home visits, an annual Family Picnic and Holiday Party, and referrals to additional support services and parenting classes including links to family advocacy services in the family's home county. Childcare and transportation for families living in Niagara or Erie Counties are provided for families attending our monthly Open Family Meetings, featuring speakers discussing topics of concern to the families, e.g., An Overview of Mental Illness, Psychotropic Medications and Side Effects, Listening and Communication Skills/Conflict Resolution. Families are an integral part of developing the child's initial service plan and are involved in on-going service plan reviews. Frequently invited to attend Aurora House activities and outings with their children, families enjoy opportunities for continued involvement and relationship

strengthening activities. When necessary the Family Service Liaison facilitates communication between the family and program staff or collateral service providers. These services are provided with the hope that both the therapeutic environment of the Aurora House Program along with on-going family support will lead to successful family reunification.

Glove House Elmira, New York

Glove House takes pride in encouraging family members to participate in social, recreational and

treatment focused activities. From a treatment perspective, parents attend intakes, treatment team meetings, and two parents have volunteered to sit in on admission meetings to help new parents learn about the Community Residence program. Common Sense Parenting Class is held at the Community Residence twice annually. Parent meetings are held each quarter to solicit parental input and feedback about program concerns/issues. Parents are encouraged to attend appointments, complete inventory shopping, etc. for their child(ren). Recreationally, families are invited to any nightly recreational activity. Families have also been invited to participate in the annual summer camp trip this year with residents. Quarterly family events are held including a Car Wash/ Family Fun Day, Halloween Party and Holiday Fest with Talent Show, Mid Winter Beach Party, and Spring Garden bring a dish supper. Once a week, a parent (if interested) makes dinner for all of the clients of the residence. This year, we will also have a parent attending the Children's Mental Health Coalition Conference at the Sagamore. Impressed with the care her son received at the community residence, one parent even put in an application for employment following her son's discharge, and Glove House is hiring her to work in one of our other agency group homes.

Green Chimneys Children's Services Brewster, New York

We are always striving to identify ways to have family involved in our programs. There is an open door policy at the community residence for participation. They are always welcome. Green Chimneys offers the following family services: • Social Workers invite family members to all treatment team

- meetings.
- Weekly (more often if necessary) phone contact.
- Transportation or reimbursement for families to and from campus.
- · Social Worker aids in helping families in obtaining support in their communities.
- Family satisfaction surveys done annually.
- Annual family day on campus.
- Flexible visiting hours and phone times to increase family contact.

Institute for Community Living, Inc. (ICL) recently developed a Family Empowerment track at its Highland Park Clinic, which Seasonal activities available on campus for families include hay will be replicated at our other outpatient programs. This is a wagon rides, swimming, fishing, and organized recreation activities. strength-based treatment approach for families involved in Week-end retreats are also available for families. multiple service systems. It surrounds the family with a team

Hillside Family of Agencies Rochester, New York

Hillside Family of Agencies (HFA) offers Parents as

Partners Roundtable, which are monthly meetings comprised of parents and staff from all HFA affiliates. In addition, HFA's Balanced Scorecard (strategic planning methodology) provides a framework to translate the HFA vision and strategy into operational terms that drives behavior and performance, while committing to Parents as Partners. This scorecard designates 36 parent seats on leadership committees or roundtables where policies and procedures are either created and/or implemented. Parent members participating in these roles receive a stipend for sharing their time and expertise.

HFA's strategic projects supporting efforts to create a family focused culture include parent advocacy curriculum and training to assist parents in developing skills to be effective advocates and to make systemic changes in each affiliate by representing the parent perspective. In addition, HFA offers a 24 hour Customer Satisfaction Line which is set up to receive kudos or complaints from families. A staff member is assigned to work with parents and the agency to fully resolve the issues. Trends are tracked, reported on and addressed within various programs; training is sometimes developed to address the issues.

House of the Good Shepherd Utica. New York

The House of the Good Shepherd's primary focus

over recent years has been in ensuring that family members are an integral part of each child's treatment. The creation of a Parent Handbook, facilitating and subsidizing family visits, and the use of conference call technology are just some examples of this commitment. Recently, we have developed a treatment agreement with families that details the importance of partnership and gives an honest portraval in family language of the benefits and risks of treatment in our agency. This agreement is our commitment to involve families at all levels of their children's treatment including goal setting, implementation and satisfaction.

Over the past year, we have also consulted with several Coalition member parents and agencies to design a strategy to expand the role of families into the policy development, quality improvement, and governance functions. Based on these consultations, we surveyed parents and staff regarding their different perspectives on the current roles of families in the life of our agency and incorporated the Coalition's resolution of "formalizing the role of families" into our agency's strategic plan. Key action items will be to address concerns identified by the parent and staff surveys, the creation of subsidized parental advisory positions, and enhanced communication and information-sharing practices.

Institute for Community Living, Inc. New York, New York