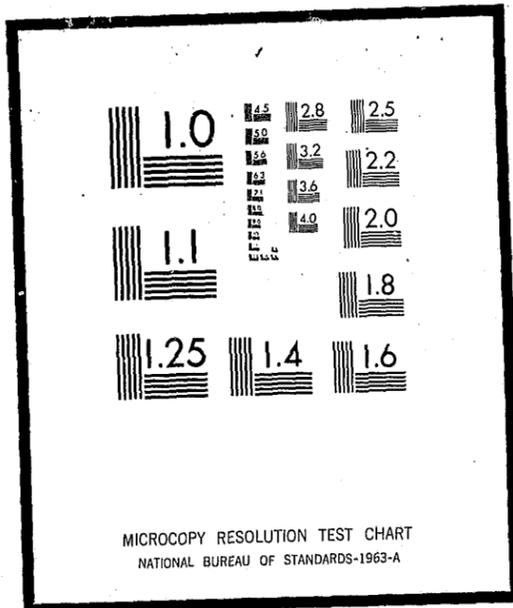


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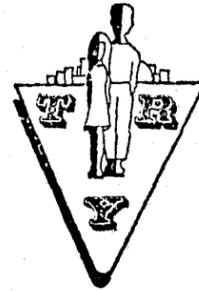
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6/12/75



## THREE RIVERS YOUTH

Mrs. Ruth G. Richardson, ACSW  
Executive Director

2039 TERMON AVENUE • PITTSBURGH, PENNSYLVANIA 15212

PHONE: (412) 766-2215

May 28, 1974

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Mr. Gerald M. Croan  
Evaluation Planner  
Governor's Justice Commission  
Department of Justice  
Commonwealth of Pennsylvania  
P.O. Box 1167  
Harrisburg, Pennsylvania 17120

Dear Mr. Croan:

I have reviewed the evaluation report on our project, AG-158-72A. I have found the report to be factually accurate, however, I do want to emphasize a couple of points that I corrected on Dr. Horlick's copy to make sure that they are on the copy that you have. In the second paragraph of section one of the evaluation highlights the second sentence should read - "Since the homes are conducted for the sole purpose of providing care, maintenance and counseling at these homes." There are no clinical or administrative staff members located in the homes, they are viewed strictly as homes and the youngsters respond accordingly. They appreciate the environment and assume household chores and other home responsibilities. Other professional and direct services are either provided by the several professional personnel who come to the homes for this purpose or by visits by the youth to the community agencies having such services.

I corrected the above section because we view all of our staff as professional staff. Most of our houseparent-counselor staff have professional qualifications. There were other instances in the report where Dr. Horlick used the word professional staff when he was referring only to the clinical staff. This may not be important to you but it is to the personnel at Three Rivers. We see the total staff who work directly with the youth in the homes as special and even though this might be merely terminology, I thought I should call your attention to it. I agree with Dr. Horlick when he mentioned that sufficient time to allow the "treatment effect," of the group home milieu is mandatory if competent and accurate decisions are to be made regarding the programs attainment of its goals. I also agree with his recommendations of our need to identify well defined accepted goals that are measurable, grouped by category, etc.

We have begun to define our clientel in measurable goals for the purpose of being able to apply the appropriate measurement techniques. The staff has constantly been developing ways to clearly spell out how they go about helping to achieve the goals. Our clinical director is currently working on defining the various types of youngsters that we have served and has implemented a process where by each team is developing a clinical chart descriptive of the groups within each house. We are making very definite

15687

Mr. Gerald M. Croan  
May 28, 1974  
Page Two

efforts to make sure that all workers define the treatment goals in measurable terms. The policy committee of the agency will be reviewing the statement of the agency goals and objectives to determine if this can be refined in such a way as to be measurable as well.

In regard to the recommendation of expanding to include a minimum of two additional homes I certainly do agree. However, I am not sure whether or not one of those homes should be for 9 to 13 years of age at this present stage of our development since the community problem at this point in time seems to be the older adolescent and the absence of services to him. Our program is built upon a network of group homes which would give us the flexibility to serve a wide variety of youngsters as well as to change the youngsters program as we see some of his needs change. At the present time we do not have enough flexibility since we only have two choices of homes for both boys and girls, we believe that the coed home has a demention that seems to be a healthy one for adolescents and has provided the kind of programming the other homes has not been able to since the composition of each group home has a great deal to do with the success of the program of that home. A need for more group homes is essential. I would like a minimum of three additional group homes within the next two years. And would project at least 11 before we could have the maximum flexibility for differential treatment programs. With the additon of more group homes our cost of care will decrease or stabilize itself. The addition of additional administrative staff will be unnecessary, however, additional homes might require other supervisory personnel. I believe we can only increase our maximum efficiency with the added complement.

I also agree with Dr. Horlick's recommendations for increase in our training resources for staff. We have already began to do something about this recommendation. We are sponsoring two workshops this month for staff that will be an indepth approach to our group dynamics in working with the adolescent peer group. We included in our 1975 budget request to the commission provision for additional training and provision to relieve our staff from duty at the houses so that this will be possible more often.

I also agree with Dr. Horlick's recommendation in regard to the increase necessary in our present education efforts. I believe we need some means of having the community provide better services, but meanwhile we need an interim program to help put the adolescent who is so far behind education-ally, back into the main stream of educational life, vocational training or special skills programming. Many times the adolescent needs some educational preparation before he can enter some of the programs available in the community. We believe that a professional teacher who can be accredited and linked to the present school system will help fill the present gap.

I suppose that I don't have any real disagreement with Dr. Horlick's recommendations, only with parts of them which I pointed out above. I would make an additional recommendation, and I believe this would be related to the conversation that we had when you were in Pittsburgh, and that is the necessity

Mr. Gerald M. Croan  
May 28, 1974  
Page Three

for having someone who is able to collate and graph and put into a form, our information that can be used, that would enable proper interpretation of some of the things that have happened at Three Rivers Youth in the past three years, as well as to have proper collection of all materials developed in the coming year.

I could really write a book on further recommendations that I might have at Three Rivers, however, I am sure that they would not be appropriate now since I believe I need to look at how our program will look in the light of data that will be developed from the present project. I am sorry that this is late. If there are any questions contact me.

Sincerely yours,

*Ruth G. Richardson*  
(Mrs.) Ruth G. Richardson, ACSW  
Executive Director

RGR/vmc

Reuben S. Horlick, Ph. D.  
3000 CONNECTICUT AVENUE, N. W.  
WASHINGTON, D. C. 20008  
HOBART 2-4300

AG-158-72A

May 1, 1974

Mr. Joel Croan  
Evaluation Management Unit  
Governor's Justice Commission  
Box 1167  
Harrisburg, Pennsylvania 17120.

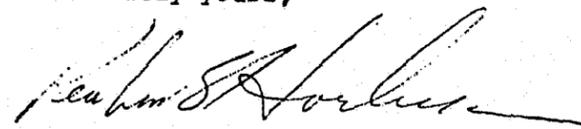
Dear Mr. Croan:

The evaluative study of Three Rivers Youth is enclosed.

It is not as complete as we would like it but it should be recognized that this first year of the project has been a period of expansion, with new staff and new residents. Also, Orientation House operations did not begin until the late fall and necessarily established routines and testing could not be started until well into the operational year.

Although we have had to be content with clinical judgments based on our observations, interviews, and conferences with the staff and residents, we feel our conclusions, though tentative at this phase of our evaluation, are justified. As more data is collected, we shall submit supplementary reports of our findings.

Sincerely yours,



Reuben S. Horlick, Ph.D.

RSH:esp

Enc

Evaluation Study

for

The Three Rivers Youth Orientation House Project

(AG-158-72A)

MAY 1, 1974

submitted by

Reuben S. Horlick, Ph.D.

## Evaluation Study

### The Three Rivers Youth Orientation House Project

#### I. Evaluation Highlights

The site visits in August, October, and November 1973 and January and May, 1974 afforded opportunities to observe each of the five homes in operation and to discuss with the administrative staff and board members their problems and methods in conducting their diverse programs. Several periods were devoted to conferences with the houseparent-counselors and professional staff at Orientation House, permitting an exchange and sharing of views. We were impressed throughout with their dedication and enthusiasm and concern for the welfare of the young people in their charge.

Interviews with the young men and women at each home reflected their overall satisfaction with the home settings. Since the homes are conducted for the sole purpose of providing care and maintenance at each home and there are no professional staff or administrative staff members located in the homes, they are viewed strictly as homes and the youngsters respond accordingly. They appreciate the home environment and assume household chores and other home responsibilities. Professional and direct services are either provided by the several professional personnel who come to the homes for this purpose or by visits by the youths to the community agencies having such services. Unlike institutional placements, far from the residents' home setting, the boys and girls live in homes in neighborhoods compatible with their own.

During the site visits, a number of conferences were held with regard to clarification of goals and objectives and the need for measuring progress and goal attainment. A number of test techniques were introduced and data is being collected. Much time was spent with the administrative staff about re-defining and re-writing the goals and objectives so that objective measurement of goal achievement would be feasible. Post measures will make available a fund of data for subsequent analysis and decision-making.

Central to the treatment model is the concept of the core team and the treatment programs which have been geared to provide quality care for both the short-term and long-term stays. Consistent with this goal, new individual treatment modalities (i.e., education, art, psychotherapy, community services) have been added and integrated as component parts of the total program. A detailed analysis of their effectiveness will be reported in the next follow-up phase of the evaluation.

The involvement of community agency services is of paramount importance in extending the range of direct and indirect services now provided and, with

the appointment of the Community Services Coordinator, there has been a greater utilization of and participation with community agencies in the metropolitan area of Pittsburgh.

The multidisciplinary approach to evaluate and treat each child in as short a period of time as possible is clinically sound and follow-up interviews indicate that most of the residents are returning to the community more active, more self-reliant and more self-fulfilling than when they entered the Three Rivers Youth program. Through individual and group therapy, case work services, child care, educational remediation, art and leisure activities, the multidisciplinary staff is helping the young residents to gain self-respect and self-control, to sublimate their unconscious impulsive drives and to recognize the rights of others.

The improvement in educational performance has been of crucial importance since academic achievement is readily observed by the youth and tends to enhance their self-concepts and feelings of self-confidence. A major thrust in this area is being directed to the public school system which is responding with remedial programs and student involvement in school activities.

In the area of personnel staffing, employee turnover continues to be a major concern and Three Rivers Youth has introduced an in-service training program for its child care and clinical staff. Greater attention is being given to improved recruitment and selection and interne training, in conjunction with local academic facilities, is being expanded as a potential resource for professional staff appointments.

The financial operations of the project are based upon sound budget planning and appropriate management of funds, operating income and expenditures.

## II. Conclusions and Recommendations

A rational approach to evaluating treatment programs involving human subjects includes at least two elements: (1) clinical impressions and (2) objective measurements. While clinical impressions may have some subjective components, for the most part they are tempered through years of professional training and experience. ~~Such impressions~~ <sup>and</sup> are based on prior exposure to effective treatment programs.

This evaluative study during the past year has concentrated on the development and implementation of strategies for measuring outcomes of this program. While it would have been desirable to have included pertinent, quantifiable research findings to buttress observations and clinical impressions, it must be recognized that the time element and the need to restructure some of the techniques instituted during the project period have imposed some constraints on the research component itself. Sufficient time to allow the "treatment effect" of the group-home milieu is mandatory if competent and accurate decisions are to be made regarding the program's attainment of its goals.

During the next phase, much data will become available and a more comprehensive evaluative report will be forthcoming. During the first year, observation and appraisal of the initial program operation, and the necessary feedback stemming from them, were of crucial importance. The next phase will seek to examine the extent to which new innovative techniques and measurement instruments have been implemented and/or modified to meet changing conditions in the handling and treatment of the emotionally disturbed pre-delinquent boy or girl at Three Rivers Youth.

A start has been made in clarifying and defining goals and objectives in a format permitting easier measurement of overall effectiveness. The Three Rivers Youth staff developed an individualized treatment plan for each boy and girl with proposed short and long term goals. While the goals were generally considered appropriate, they usually failed to include a measurable component to determine if the goals were finally attained. For example, some of the goals were "to provide (name of child) with a sense of stability and acceptance" but there was no indication if the child will behave differently when he is stable and has acceptance. Informal institutes were set up by the evaluators with various staff members to focus on the design and measurement of desirable goals for each adolescent. The staff's enthusiasm for this approach to the evaluation of the "treatment plan" suggests that they are flexible professionals with realistic needs for objective outcome measures.

Writing good, measurable goal statements, grouped by category or parameter, i.e., medical symptomatology, self-image, behavioral change, educational attainment and social behavior, will clarify the goals and objectives to be

attained and spell out the process or methodology by which they can be achieved. Therefore, well-defined and accepted goals, essential to the success of the Three Rivers Youth program should be clearly stated and delineated so that appropriate measurement techniques may be applied.

The primary objectives of Three Rivers Youth are to provide group-living experiences for children and adolescents in a family type home in which the group itself is regarded as a significant treatment entity with most educational, employment and recreational activities provided by community based programs. The core program of clinical services is well organized and presents, through the team management, a delivery system of direct and indirect services and there has been a decline in runaways and recidivistic behavior. The clinical evidence, based on observations and interviews by the evaluators, has amply demonstrated the overall effectiveness of combining a group-home atmosphere where youngsters are warmly and sympathetically accepted and provided with appropriate differential treatment programs, directly from within the group home and indirectly from the community. The youth in the Three Rivers Youth group-homes have fared better in school, associated more with reputable and dependable persons and were less assaultive and hostile. When considered against family backgrounds of disorganized living, divorce, separation, alcoholism, brutality and poor supervision, the improvement in their behavior and attitudes is dramatic proof of what good care and treatment can accomplish. Moreover, not only have the youngsters been helped but the state has been spared the investment of large sums of money in new buildings, rent or staff.

The present funding has enabled Three Rivers Youth to expand its direct services and magnifying the value of the project. There has been no additional increase, proportionally, in administrative costs. As a result, there has occurred a corollary reduction in the percent of funds expended for administrative operation resulting from the funneling of funds into direct services - primarily for the youth in Orientation House, i.e., from 6.8% of the budget in the spring of 1973 to 2.8% in the fall of 1973 when funds became available for recruiting professional staff. To maximize the utility and efficiency of this type of programmings, we would recommend that the overall Three Rivers Youth administrative structure be expanded to include a minimum of two additional homes, one for younger applicants, nine to thirteen years of age, and another for those persons who have reached the age of eighteen and require a halfway house approach as a transition from the Three Rivers Youth program to full self-sufficiency and responsibility. It would be feasible to increase the number of group homes and its required staffing without adding professional staff or administrative personnel.

The child care staff now holds jobs that are more clearly defined than they were when Three Rivers Youth began its work three years ago. Since then,

the staff is more experienced and better equipped but the need for more experienced personnel has led to improved selection procedures and a consequent reduction in staff turnover. This marked improvement in the present staff as compared with earlier staff patterning is quickly discernable. Better insight in dealing with other staff members and with youthful clients has created a more sophisticated, better articulated group of people who understand human dynamics and apply consultant recommendations.

Nevertheless, continuing in-service training programs and University interne training programs (to maintain a ready resource of qualified personnel in the event of expansion or attrition) are recommended, and implemented with special emphasis on adolescent growth and development, behavioral psychopathology, effective human relations sensitivity training, psychodrama, encounter group structure and other related courses. All staff members should be in a program of self-development through participation in in-service programs and related regional and national conferences and meetings with funds set aside for that purpose. A bibliographic reference file and staff library would prove beneficial and stimulating toward in-depth reading and study.

The basic goal of the counseling and therapy programs has been to develop personality growth and responsibility through the establishment of an internal set of controls - rather than a superficial conformity to externally imposed rules that are rarely incorporated as personal standards for living. The system at Three Rivers Youth is an active one where the youth resident has to do things for himself in a participant role rather than wait or demand that others do something for him. The behavioral changes that have taken place over a period of months are impressive. The staff is involved daily from the social worker, who works intensively with each youngster under supervision and the parent counselor who oversees the day-to-day routines, to the treatment staff members who provide the individualized or group therapy and/or academic assistance and/or art therapy. This kind of intensive treatment and care is rarely seen in institutions and the youth are keenly aware of it and appreciatively respond to it. This can readily be noted in the reduced number of runaways and the personal involvement in the home. One can conclude that the home settings and the personal and sympathetic care and treatment have a salutary effect upon them.

The present educational effort, due to limited resources, is limited to one educational specialist. In the short time he has been employed it has become patently clear that the youngsters at Orientation House are seriously deficient in basic skills resulting from years of deprivation and neglect. We recommend these services should be increased and the assistance of the public school system in providing additional resources be explored. Also, we feel that educational rehabilitation should not be restricted to remedial reading and arithmetic - though they are of primary importance - but should be directed to other areas of skill training, such as, modern consumer education aimed at survival in a competitive environment, or personal grooming.

The potential of community agency resources, public and private, has only been tapped and Three Rivers Youth is endeavoring to expand this fertile field. Three Rivers Youth works closely with a variety of community agencies to provide a continuum of services difficult to duplicate. In attempting to derive maximum utilization of all available resources, Three Rivers Youth maintains a type of symbiotic relationship that should be cultivated and encouraged so that wherever possible, at little or no extra cost, indirect services can be provided as an integral part of the total program of Three Rivers Youth. It would be desirable to formulate policies and procedures establishing the functions of the Community Resources Specialist as a means of integrating and coordinating the efforts of individual houseparents, social workers and other specialists. With the employment of a Community Resources Specialist, new leads can be explored, ranging from individual volunteer services to State and Federal programs.

The Three Rivers Youth project contains many elements that have proved effective in modifying adolescent behavior problems and they deserve continuous monitoring and evaluation. Much of the data being collected and analyzed is centered about the present evaluative effort. No research specialist was available either as consultant or staff during the early phase of the project's development and growth. Based on our experience, it would be desirable that an on-going research effort be incorporated into the project's operation, either on a full-time basis or as a part-time consultative service, since staff members are too involved with day-to-day operations and, as the research training or sophistication nor the patience to concern themselves with this phase of evaluative research. A consistent and meaningful record system, necessary to the achievement of these goals, should be integrated with the plan in order to provide a full range of informational data about the program.

In conclusion, we are of the opinion that the Three Rivers Youth program concept and the differential treatment program it offers possess those substantive components that could well be emulated in other jurisdictions. The per capita cost per resident would probably be relatively higher initially than other residential centers or institutions but as the project expands its direct services and maximizes the utilization of its staff, the immediate costs would be reduced proportionately, yielding a low administrative overhead. The total program shows dynamic strength and the close coordination among the staff members, through appropriate team committees, enhances the program's overall effectiveness. The success of Orientation House as a co-educational facility justifies the establishment of another co-educational group-home for the emotionally disturbed nine-to-thirteen age group for whom little is available.

The next phase of the evaluation will determine how well the program has worked and what improvements have resulted.

### III. Evaluative Methodology

While there are many methods for organizational evaluation as evidenced by the numerous approaches used around the country, the purpose of this study, however, is not to structure rigidly the evaluative approach to the Orientation House project but rather to formulate a framework against which the Three Rivers Youth program's effectiveness may be judged. This study, therefore, utilized a series of guideline standards or principles and a number of inquiries destined to elicit information and data about the program's organization and operation so that its effectiveness may be judged.

In evaluating this project, many factors were taken into consideration. To what extent would the program be an effective model that would aid the Governor's Justice Commission in its regional planning of criminal justice programs? Were there project methods which deserve replication in other projects or programs? What was the cost-effectiveness of the project?

The evaluation plan was projected along several dimensions:

- a) in terms of program goals and objectives, their clear delineation and their attainment as well as the program attributes and services and their measurement;
- b) in terms of client self-development, behavioral change, and the measurement of improvement in self-concept and self-observation;
- c) in terms of cost effectiveness, fiscal management, staff accountability and methods of measurement;
- d) in terms of organizational design, personnel manning, range of community services, feedback and follow-up.

The method is empirical, rooted in the framework of the group-home concept combined with a differential treatment program for emotionally disturbed adolescents.

### IV. Introductory Statement

The acute need for specialized group care for children, especially adolescents, has been clearly indicated in recent years. The Health and Welfare Association of Allegheny County has referred to such need in several of its publications. In 1964, the Association stated that the children's institutions not directly associated with multi-function programs should concentrate on the provision of specialized services best rendered by a single purpose agency. Again, in their 1967 report on emotionally disturbed children, the Health and Welfare Association called attention to the extremely short supply of direct services provided through residential and foster care facilities, particularly for disturbed teenagers and they recommended an expansion of such services.

There are a considerable number of adolescents in need of a small group residential center who are waiting in shelters and detention centers or juvenile institutions with no real place to go, or in foster homes which are inadequate for their particular needs, or in their own homes awaiting an opportunity for the right placement. Representatives from other agencies have expressed their concern for residential group care for the adolescent who may have emotional problems or may be in a transition from institutional treatment to a return to the community. There are probably many other dimensions to the problem but those mentioned serve to highlight the concern and interest of the Three Rivers Youth agency in developing group home services.

Three Rivers Youth provides group home services and has recommended an expansion of its programs, sufficiently comprehensive to meet the current needs for services and differential treatment programs. These include a redefinition of those served and a variety of group home settings designed to serve a range of dependent and troubled adolescents and staffed with a highly qualified supporting staff. Operation under a single auspice with a central administration and professional staff enables the services to be more effective and better coordinated with the total plan for children in Allegheny County.

Three Rivers Youth views the group home basically within the small residential family concept through which small and well structured living units, based on a family model, and established and designed to facilitate the development of needed intensive helping relationships between the youth and staff. Effective implementation of this group home concept is the core of the Three Rivers Youth operation and effective evaluation will determine its efficacy.

Three Rivers Youth consists of five group homes located in residential areas of Pittsburgh. Orientation House, the newest of the five, specifically constructed as a group home, is planned as the reception and assessment center

prior to the assignment of each client to one of the four homes. Two of the homes are for girls and two for boys. Orientation House houses boys and girls who are awaiting transfer; this is a pioneering effort in this type of coeducational living arrangement for emotionally disturbed children.

Each group home is within walking distance of all levels of public schools, recreational parks, libraries and other community facilities. None of the homes possess extensive facilities, the plan being to have community agencies and their resources available to provide necessary extensions in care, schooling, recreation, medical and dental services, and other related functions.

Orientation House is a carefully planned home that has combined architectural insight with staff experience to provide for privacy, group interaction and staff coordination. Child relationships start in a basic living group of eight to ten and then move out to the larger community and school.

Three Rivers Youth is under the administrative and clinical direction of an executive director who is responsible for the overall administration and direction of the program. She furnishes the leadership and guidance to integrate the multiple treatment approaches in the residential setting.

The residential staff child care workers, under the direction of the Director of Child Care, are responsible for the on-site management and supervision of the group home, coordinating the operations, delegating responsibilities within the home and submitting necessary reports. The psychiatric social workers, under the direction of the Director of Clinical Services, are responsible for the casework services with the youth and their families, as well as for the intake and placement of youths.

As part of project operations, there are a clinical psychologist, an art therapist, an educational specialist, and a community resources specialist. The full clinical team, i.e., the house parents and the above-named staff, utilizes every resource available to relieve the pain of emotional conflict in order to foster self-growth and development and to point the way to maturity.

The group residence is a focal point for staff coordination and program development designed to meet the individual needs and requirements of each resident. The house coordinator serves as the team leader and guides the efforts of his staff in coordination with the professional staff.

## V. Goals and Objectives

Well defined and accepted goals, essential to the success of any cooperative human endeavor, should be clearly stated and delineated. Clearly stated goals provide a measuring instrument for evaluating effectiveness of the agency project. Unless the goals and objectives are clearly defined, the outcome of the endeavor becomes clouded and damaging to the forward progress of the agency.

Three Rivers Youth states that its purpose is to treat and care for neglected, dependent and/or mildly emotionally disturbed adolescents who need a controlled group living experience in an open setting to effect their social adjustment. The major service is aimed at rehabilitation of the individual during 24 hours care in a group home environment. This includes social casework, group therapy, psychotherapy and vocational guidance, whichever services are deemed applicable to the needs of the individual. Community facilities, and facilities of other agencies, are employed to meet educational, medical, dental and recreational needs. Casework service is offered to parents or responsible family members with the view toward reuniting the family wherever possible. When this is not possible, goals for the child are directed, with his or her participation, toward foster family care or independence.

Specific goals include: (1) To provide youth with special living arrangements and supportive services in a more positive setting geared to be adaptable to his needs, as a means to help the child toward a solution of his problems and to enable him to return to a more permanent life in the community. (2) To use the community based residential group home as a locale for caring for and treating adolescents unable to benefit by remaining in their own homes or unable to remain with their own families, in order to provide them the services they need to develop their individual capacity to overcome the obstacles they have encountered in living as part of a family unit and as a participating member of school and community (3) To identify the individual needs of each adolescent in regard to their (a) social needs; (b) learning needs; (c) their own expectations; (d) community expectations. (4) To provide appropriate prevention of more severe problems, reoccurring problems and remedial treatment, and (5) To develop communication and positive relations between the group homes, family and the community.

During the first year of its operation, Three Rivers Youth has endeavored to not only clarify its objectives and goals but to identify them as measurable goals. Thus, a start has been made to define the objectives and goals in a format permitting easier measurement.

The organizational structure of the agency is designed to contribute effectively to the implementation of its goals and to the fulfillment of its objectives; and toward their achievement, it utilizes its personnel, facilities and resources toward the attainment of its stated goals.

Three Rivers Youth is a private, non-profit social agency which provides observation, treatment and training for adolescent girls or boys who need care away from their own family and home.

The agency has a Board of Directors of thirty-five members, an executive director and an experienced and trained staff from the fields of social work, child care, psychiatry, and psychology and education.

The role of the Board of Directors of Three Rivers Youth, as spelled out in the By-Laws of the agency, consists of taking final action on questions and all general plans for carrying out the work of the corporation; responsibility for an annual report to the membership of the corporation, an annual audit of the corporation's finances...and the authority to do or cause to have done anything necessary to fulfill the purposes of the corporation.

The Executive Director has the overall responsibility and accountability for the administration of the Group Home Services in accordance with the policies established and approved by the Board of Directors.

Throughout there is an organizational cohesiveness that expresses the essence of the major structural components designed to effect efficient coordination (and line command) of personnel resources and facilities. Each employee cognizant of his role and his place and interrelationships in the overall achievement of goals. The lines of communication and responsibilities for staff members are clearly expressed, and appropriate guidelines, job descriptions, by-laws, etc. describe the functions and responsibilities of each member of the organization.

## VI. Program of Services

The project provides for a continuity and integratedness of services for its clientele so that stated goals may be accomplished. This concept involves an accurate assessment of client needs as well as personnel needs. When deficiencies in skills are apparent, the administration undertakes, as part of its obligations, to obtain assistance to rectify the deficiency.

Three Rivers Youth provides a continuum of services and a number of group homes designed to treat and care for those adolescents as described in the target population and the objectives. The decentralized community-based homes serve the small group and are located so as to coordinate with community facilities. The five homes enable it to deal with the varied spectrum of adolescents in need of this service who have the potential for functioning in the community. Following in-depth intake procedures, youth are placed according to type of neighborhood, schools, and the nature of the staff composition, and present clients of a particular home which best suits one's rehabilitative needs.

There are several intimately related variables that are essential components to the program. The intermingling and integration of these variables define the program and distinguishes it as an innovative approach to the problem and adaptable to the particular needs and characteristics of the age group of this target population.

### A. Development of a Non-Institutional Setting:

The group home is conceived of as part of the community. It consciously seeks to avoid the creation of a setting with institutional overtones. In terms of the physical facility, non-institutionalization is dependent on the group living situation, community participation, community attitudes, the use of community resources. The non-institutional setting provides a climate in which the behavior and attitudes can change, such as, the development of a home atmosphere with regard to arrangement and selection of furniture, etc. Both formal and informal contacts are encouraged between residents and community.

### B. Range of Residential Settings:

The residential settings are located in various parts of the city. In each locale the home is a reasonable distance from the schools, public transportation, churches, community recreational facilities, job part-time opportunities, shopping etc. The duplex type structures consist of: twin bedrooms for the adolescents, provision for single bedrooms, living room, laundry and utility room, and bedroom and living facilities for house parents and relief workers.

### C. Differential Treatment Programs:

Treatment and training modalities vary with the kind of adolescents selected for group home living with allied educational, vocational and on-the-job training facilities available outside the homes or the jurisdiction of the project. Through individual and group treatment and training, opportunities exist for developing self-understanding and attitudinal change in the group home settings. At present, plans are being made to expand the in-house facilities and programs as originally envisaged by the project administration, and integrate them with community agency activities.

#### Requirements and Procedures for Admission

The priority and emphasis on services for the teenager are, because of the acute need for specialized residential facilities and services, on an adolescent population between the ages of 13 and 19 who have emotional problems and who present disturbing behavior.

Accordingly, the requirements for admission focus on youth who have emotional problems that require special treatment in a residential setting and may be served in the Three Rivers Youth program. Youth with little behavioral control and who require maximum external control in a highly restrictive environment are not appropriate candidates for the open setting provided by Three Rivers Youth. Youth must have the potential for exercising sufficient responsibility for and control over their own behavior so they can live in a community without risking injury or damage to themselves and others and should have the capacity to move about responsibly in a neighborhood area and should be able to function without constant supervision. Youth must be able to live in close proximity to other youth and be able to apply themselves, with help, to educational and vocational programs geared to their personal needs and abilities. The community is a necessary tool for treatment and its expectations must also be considered. However, available placement will not be denied to a youth if there is some evidence he might be able to utilize and profit from the family group living in our group home placement, even though the youth may have had a previous history of behavior difficulty or poor school adjustment fraught with conflict. In some cases, close examination may prove that placement with supportive services needs to be tested. Acceptance, in these referrals, is based upon an awareness of the reasons for such behavior and a recognition that the group home might effectively reduce, control, or change behavior through change in environment, therapeutically managed group living, casework, psychotherapy, consistent physical care, medical care and educational planning. The intake study, which combines the work of the caseworker, the diagnostic evaluation of the psychiatric consultant, and the pre-placement staff conference is utilized to make appropriate decision. Youth must be 13 to 17 at the point of admission, although care may be continued through age 19, if indicated. There is no automatic age cut off, however, though age 18 is used as a guide, a youth may be accepted anywhere in Pennsylvania but out-of-state referrals

are considered. Preference and priority, however, is given to youth from Allegheny County and from the surrounding counties. A youth must have some indication of potential to function at an average level but it is not necessary that he should have passed a certain grade level for admittance. However, some identifiable motivation for school work, regardless of academic achievement should be evident. Youth must be free from any contagious disease and any physical handicaps must not prevent normal movement in and about the house or neighborhood. Legal custody should be clearly established and a plan for financial responsibility worked out prior to admission to Three Rivers Youth.

An exploratory phone call from the referring agent is suggested for purposes of preliminary screening and, subsequently, this is followed by a referral letter indicating the following: identifying information, reason for referral, social and developmental history, current situation and description of past and present functioning, physical health, findings of any psychological and psychiatric work-ups, an evaluation of the child's need for group care and his ability to be maintained in a community setting.

A preplacement visit is scheduled prior to admission and at the time of an admission, the following current information and agreements are obtained and clarified: clarification of custody, verification of birth, placement agreement, current medical report (supported by medical examination immediately prior to placement), financial agreement or plan (covering board, clothing, allowance, special education, special medicare, psychotherapy).

These admission requirements and procedures are clearly delineated by a formal brochure that outlines the specific eligibility requirements and constraints in selecting clients for the program, and the necessary admission forms, release forms, agreement forms, and medical forms are available for use by referral agencies and intake staff. However, the personal-social data and other demographic information are not collected in usable form for research and advance planning. Three Rivers Youth should prepare an informational data form indicating the kinds of personal, social and demographic and tests collected routinely and in a form that is easily codeable for research purposes and statistical analysis.

#### Social Services

The Intake Process provides an opportunity to discover or describe the personality characteristics and behavior patterns of each client, as he presents himself in terms of his abilities, his attitudes, his conflicts, his achievements and his productivity.

The intake process is an important aspect of the service and a team approach involving the social work Director, the Psychiatric Consultant and the Executive Director. Diagnosis is made in depth, as much as possible, to determine the appropriateness of the service for the particular youth as well as development of a well thought out and accurate preparation for placement. Intake policies

are developed with staff and Board which will serve as a guide to staff and referring agencies.

There have been instituted a number of procedures, written and unwritten, to direct the attention of the caseworkers to the salient historical and developmental factors and necessary forms for recording information and data about the clients are easily available for use by staff. (A detailed "Social Service Information Manual" has been prepared for the clinical services staff.)

#### Diagnostic Assessment

Diagnostic procedures are an essential element in the intake process and appropriate psychological testing is integrated with the medical, psychiatric and social services. The primary responsibility for conducting and coordinating the assessment belongs with the social worker assigned to the youth. The intake process provides an opportunity to discover or describe the personality characteristics and behavior patterns of each client as he presents himself in terms of his abilities, attitudes, conflicts and achievements. The intake process is an important aspect of the total service.

Generally, a medical examination by a licensed physician is required within forty-eight hours prior to a youth's admission except where the referring agency verifies, in writing, that the adolescent is in good health. A medical consultant serves the agency and meets with the staff. A part-time consulting psychiatrist sees each youth individually when indicated and consults regularly with the staff regarding the needs of the youth and the care to be provided. He consults with the social workers concerning therapy and social work treatment and assists in making arrangements for psychotherapeutic intervention outside the agency. The clinical psychologist is responsible for the administration and evaluation of all psychological testing procedures. The test findings are incorporated into the social worker's intake report. (With the full-time employment of the clinical psychologist, there will be a greater involvement in individual and group therapy with the youths at each home.)

Included in the test battery are a test of general intelligence, a personality inventory, a test of educational achievement, and several projective techniques. When indicated, an inventory of vocational interests is administered. Vocational aptitude testing, for the older adolescent, is referred to the Division of Vocational Rehabilitation or the Employment Service. (The above battery has been recently adopted and is undergoing refinements at the present time.)

The social worker interviews the youth and consolidates the findings of the other specialists into the intake report and their recommendations are reviewed and incorporated with the general treatment plan outlined for each child.

All staff members are responsible for conducting and coordinating the assessment program upon conclusion of the intake and admissions procedures. A general plan or prescription for treatment and training is outlined for each client with recommendations consistent with intake findings and appropriate to the needs and opportunities of the client. Generally, appropriate in-house treatment and/or training modalities are available for differential treatment but community services strongly supplement them.

It is anticipated that the information collected through this process will become part of the record-keeping procedures and utilized in the final preparation of annual reports and in developing base data for measuring outcomes of treatment and training.

#### Counseling and Therapy

Adolescents in counseling and therapy programs learn and gain social control through the study and application of basic concepts of counseling and therapy and, therefore, these are included as integral components of the agency's goal toward client improvement and growth toward self-awareness and more open communication with others.

Three Rivers Youth believes that, within the group-home setting, can be group interaction and peer relationships used constructively as a part of the total program of rehabilitation. The program is concerned with socialization, education and treatment, and complies with the standards required in Title 7100 "Group Homes for Children" published by the Office of Family Service, Pennsylvania Department of Public Welfare. Many hours of group experience are provided in the "rap" sessions, group discussions, "analytic" sessions, individual and group counseling therapy and ultimately the effects will be measured in terms of gain, improvement in behavior and/or positive attitude change.

#### Educational and Vocational Training

The overwhelming body of contemporary research points insistently to the relationship between self-esteem and academic/vocational achievement and suggests strongly that the self-concept can no longer be ignored by parents and teachers. Consequently, educational and vocational skill achievement and upgrading of client capacity should be an integral component in the agency's program toward increasing the growth and developmental potential of its clients.

Over one fourth of the adolescents accepted in the past year had severe educational problems for which the normal public school class was not sufficient. They used the special education resources within the public schools or special school settings in the community. This was especially difficult because of the limited, overcrowded resources, and the delays in obtaining such services. One of the changes in the program developed was to obtain educational diagnosis, testing, and evaluation for each adolescent that we could, and coordinate this

information with out total treatment plan which included trying to obtain educational placements for the adolescent that would provide the optimum benefits for him. They further obtained tutoring services indicated by the evaluation and used consultation in helping staff try to deal with these problems effectively. With this kind of approach, they were able to maintain some of these youngsters in the community setting.

The individualized educational program is part of the differential treatment and functions as part of the total milieu therapy by developing skills which build ego. This matter is of great importance to the emotionally disturbed young person for the one common denominator for all of the residents has been previous failure and success, therefore, is of special significance.

At Three Rivers Youth, public school attendance is encouraged because the community school system offers an opportunity for reality testing - for measuring and comparing their skill accomplishments with their fellow classmates.

Although the typical public school system lacks the flexibility required to utilize the classroom as a therapeutic skill, the individualized approach in the group home allows the youngster to do only what he is capable at a given time. Goals are short-term with small but meaningful steps. Therapeutic grading is based on individual ability to perform rather than on a rigid standard.

The needs of the individual person are of primary importance and the grouping within each group-home should, when feasible, give priority to a group structure according to level of emotional adjustment, level of social development, intellectual development, chronological age and educational level.

#### Community Resources

A knowledge of the health, educational, social, recreational and psychological facilities and their use in the community is shared by the administrative and professional staff of the agency so that staff members can gain proficiency and skill in the utilization of community resources. The total group home services is closely related with other social service and mental health agencies and consideration is given to inter-agency contractual relationships, purchase of care, cooperation with special educational services, mental health programs, local projects, etc. Universities in the city are explored for their potential in regard to cooperative relationships which may benefit the program now and in the future. Contracts may be let with the potential referring agencies because community agencies contributed to resocialization, treatment and training of target population so as to involve their thinking and experiences in the initial development of group homes and placement resources for adolescents. Staff members are encouraged to visit and utilize these agencies.

A partial listing of agencies providing services are as follows: (a) Agencies involved in cross referral of cases, periodic conferences on common problems and agreements or understandings on conduct of various phases of the program:

1. Craig House
2. Home to Crippled Children
3. Catholic Social Services
4. Catholic Social Services Group Home for Pregnant Girls
5. Juvenile Court of Allegheny County

6. Child Welfare of Allegheny County
7. Child Welfare of Beaver County
8. Child Guidance/ Pittsburgh
9. Karma House
10. Waynesboro Youth Development Center
11. Western State School and Hospital
12. Woodville State School and Hospital
13. Mental Health and Retardation Program (base service units)

b) List of agencies and organizations providing health care services (involving inter-staff periodic conferences on common problems on which joint understanding is needed.)

1. Homewood Health Clinic
2. Childrens Hospital
3. Magee Womens Hospital
4. Montiforce Hospital
5. Presbyterian University Hospital
6. Shadyside Hospital
7. West Pennsylvania Hospital
8. Homewood-Brighton Neighborhood Health Center
9. Pittsburgh Hospital
10. Allegheny General Hospital
11. Divine Providence Hospital
12. Western Psychiatric Institute and Clinic

c) List of agencies providing activity or job resources (involving regular periodic conferences and joint planning)

1. YWCA
2. Young Life
3. Vocational Rehabilitation Center
4. Bureau of Vocational Rehabilitation
5. Neighborhood Youth Corps
6. Public Library
7. Selma Burke Art Gallery
8. Youth City

d) List of agencies providing educational resources and maintaining clients in community schools.

1. Allegheny County Learning Disabilities Association for Children
2. Chatham College Students
3. Schenley High School
4. St. Paul's Cathedral High School
5. Pittsburg Board of Public Education
6. Catholic Schools Office
7. Carnegie Library of Pittsburgh Allegheny Regional Branch East Library Branch

Agencies providing educational resources and maintaining clients in community schools (continued)

8. State Regional Film Center
9. Carnegie Museum
10. South High School
11. Craig House
12. Peabody High School
13. Taylor Allderdice Jr. High School
14. Stirrett School
15. Allegheny High School
16. Columbus Middle School
17. Oliver High School
18. Perry High School
19. Carlow College
20. Carnegie - Mellon University
21. Community College of Allegheny County
22. Point Park College
23. Robert Morris College
24. University of Pittsburgh
25. Chatham College
26. Duquesne University

e) List of religious organizations offering religious attendance and affiliation.

1. Bellefield Presbyterian Church
2. First Baptist Church
3. Heinz Memorial Society
4. St. Paul's Cathedral
5. NACA
6. Eastminister Unired Presbyterian Church
7. Nazarene Baptist Church
8. St. Phillips Church
9. Homewood AME Zion Church
10. Fieldstone Baptist Church
11. Cofraternity of Christian Doctrine
12. 1st United Presbyterian Church, Allegheny

f) List of organizations providing additional leisure and recreational activities.

Bowling

1. Forward Lanes
2. McKnight Lanes
3. Strand Bowling Lanes

Camp

1. Burning Bush Camp
2. Camp Caronkowanna
3. Camp Kon-o-kwee

Skating

1. Alpine Arena
2. Ardmore Roller Skating Palace
3. Bridgeville Roller and Ice Skating Rink
4. Monroeville Ice Palace

Parks

1. North Park
2. South Park
3. Kennywood Park
4. West View Park

Swimming Pools

1. Bloomfield
2. Highland
3. Homewood
4. Paulson

5. Schenley
6. Riverview
7. YWCA
8. Y - IKC
9. YMCA
10. Carnegie Mellon University
11. Inter City Youth Group
12. Model City Program
13. Young Life Company
14. Young Men's Christian Association
15. Young Women's Christian Association
16. Young Men and Women's Hebrew Association

g) List of referral resources from Three Rivers Youth to Agencies offering care and maintenance.

1. Child Welfare Societies of Allegheny County
2. Gilmann School
3. Holy Family Institute
4. Juvenile Court Detention Home
5. Child Welfare Shelter
6. Youth Development Center at Warrendale
7. Youth Development Center at Waynesburg

h) Other Agencies

Drug Program: Karma House  
Sex Education: Planned Parenthood Center of Pittsburgh  
 Legal Aid Society

#### VII. Fiscal Management

The financial operations of the project are based upon sound financial planning and appropriate management of funds, operating income and expenditures. Three Rivers Youth has the responsibility for maintaining its financial solvency through such means as setting and collecting fees, and obtaining endowments or other public or private support.

The Executive Committee and Finance Committee, and administrative staff, use the budget throughout the year. Operating fiscal reports are available on a monthly basis to the committees and the Board. Comparisons of actual experience with budgeted figures are used continually by staff. Supervisory staff reviews this information on a monthly basis and staff participates in development of budget figures.

The Board of Directors receive the following financial and operating reports:

1. Monthly financial report - showing operating income and expense for the month, for the year to date, for the previous year to date. It also shows the budget amount year to date plus non-operating income.

2. Monthly Treasurer's report - to each Board member showing basic income, and budgeted amount, receipts to date, expenses to date.

The project conforms to applicable legal requirements and sound business practices compatible with its goals. The accounting practices conform to the standards of social welfare organizations and adhere to the functional classification system of the Health and Welfare Council.

#### VIII. The Data and Analysis

Three Rivers Youth has two major goals: (1) to implement and test the concept of group homes and (2) to provide a complement of differential treatment/training modalities. To provide meaningful data on each client, Three Rivers Youth maintains a central file and storage area for all client data. The central records form the hub around which the entire program of services revolve.

Initially, the emphasis was on establishing an effective set of operations and to communicate its results and other information to an interested Board of Directors and concerned community agencies which referred emotionally disturbed youths to its care. While the importance of immediately recording as much data as could be collected about the residents and the operations of the agency was recognized, the immediate need for direct services was paramount. To measure and analyze performance, too, was essential to the design but its priority was not of the highest order as was immediate care and treatment. When the Federal funding was provided by the Governor's Justice Commission, it was evident that a system of data collection and of reporting, for internal monitoring and external evaluation, needed immediate incorporation into the total of each plan.

The project was too small to establish experimental and control groups or to establish services from selected participants for research purposes. A small staff totally committed to doing whatever could be done for an adolescent would be severely impaired if it was to extend or withhold services as dictated by "research" and/or "measurement" considerations alone. Nevertheless, a start had to be made and as part of the evaluation study as much data about the participants, the direct and indirect services provided, the staff activities and the operations of the community agencies with which Three Rivers Youth was involved now is being collected. The importance of immediately recording as much data as could be collected, even if some of it has no apparent immediate value is underscored. Otherwise, much data would be irretrievable.

In selecting data to be collected, many published reports or residential homes and manpower projects were reviewed; participant activities were observed and recorded; staff activities were examined to note how they meshed with those of central administration

#### Records and Reports

Accountability clearly depends on efficient data collection, storage and retrieval. Admissions, treatment and discharge information is important

for outcome studies. In conjunction with other data, such information allows study of treatment effectiveness, cost efficiency and cost effectiveness. Documenting clinical and child care activities and services permits evaluation of treatment modalities. Third party payers and regulatory agencies often have the kind of evidence needed to make evaluation and cost efficiency studies.

The basic admissions and termination data systems should be expanded to provide a range of data utilized by Three Rivers Youth in continuing and refining its programming for healthy change in youthful behavior.

A consistent and meaningful record system, necessary to the achievement of its goals, is being established by Three Rivers Youth in order to provide complete and concise information concerning the individual client, administrative procedures, fiscal management, legal requirements and other agency matters. At present, administrative records and reports and forms are available to guide the operations of the agency, measure and communicate productivity and reflect the project's status, including minutes of governing board meetings, administrative and professional meetings, personnel records, fiscal records, statistical records, etc. Client records are maintained on a consistently current basis, with reports of completed evaluation procedures being transmitted to the central file without delay, and are retained for a period of time consistent with professional, administrative and legal requirements.

The importance of a systematic evaluation in measuring change and productivity cannot be understated and the ability of quantitative tools to assess and describe those changes that reflect project achievements - and failures - serve as the medium for measuring them. A prime purpose of this evaluation will be to study the effectiveness in achieving its objectives. The collection of varied information and data concerning the operation of the program and its effects will have a central role in record keeping and preparation of research reports.

In evaluating this project, many factors are taken into consideration, i.e., the extent to which the program can be an effective model that will aid the Governor's Justice Commission in its regional planning of criminal justice activities and the cost-effectiveness of the project. There would be little value in describing a program which operates with a budget which is disproportionately high in relation to the number of clients served simply because not many localities or regions would be able to implement it.

The evaluation of the project proceeds along several dimensions: (a) in terms of program goals and objectives, their clear delineation and their attainment as well as the program attributes and services and their measurement; (b) in terms of client self-development, behavioral change, and the measurement of improvement in self-concept and self-observation; (c) in terms of cost-effectiveness, fiscal management, staff accountability and methods of measurement, and (d) in terms of organizational design, personnel manning, range of community services, feedback and follow-up.

The initial stages will seek to clarify the scope and direction of the evaluative study, the data collection process and the anticipated results and implications. Subsequent stages will concern themselves with the collection and analysis of the data.

APPENDIX A

THREE RIVERS YOUTH: TABLE OF ORGANIZATION

Board of Directors

Executive Committee

Standing Committees of the Board of Directors

<u>Budget &amp; Finance</u>	<u>Public Relations</u>	<u>Personnel Committee</u>	<u>Legal Committee</u>	<u>Nominating Committee</u>	<u>Building Committee</u>
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Special Committees of the Board

Special Events

HWC Legislative

Executive Director

Director of Clinical Services

Director of Child Care

Community Supportive Services

Social Work  
 Psychological Services  
 Psychiatric Consultation  
 Remedial Education  
 Arts Therapy  
 Family Counseling

Orientation House	Care & Maintenance
Dithridge House	Group Interaction
Thomas House	Therapeutic Furloughs
Academy House	Counseling
Perry House	

Education & Tutoring  
 Legal Assistance  
 Recreation  
 Arts & Crafts  
 Vocational Rehabilitation  
 Employment Counseling  
 Job Placement  
 Religious Services

APPENDIX A

Table of Organization

Three Rivers Youth

THREE RIVERS YOUTH

PERSONNEL

(October, 1973)

Main Office - 2039 Termon Avenue, 766-9393; 766-1575 766-1862; 766-1994

Mrs. Ruth G. Richardson, Executive Director

Mrs. Rose Washington, Administrative Assistant

Mrs. Vivian Colbert, Secretary to Executive

Mrs. Vivian Wang, Bookkeeper

Mrs. Mae Humberson, Clinical Services Secretary

Mrs. Betty Hartlep, Child Care Secretary (Part Time)

Don Murray, Secretary/Clerk (Part Time)

Dave Smith, Community Resource Specialist —

Joseph Glaab, Maintenance Supervisor

Robert Wade, Maintenance (Retired-Part Time)

Don Callender, Maintenance (Part Time)

Mrs. Ethel Jackson, Housekeeper

Mrs. Ann Flynn, Housekeeper (Part Time)

Stanley Cook, Director of Clinical Services

Mary Garrett, Psychologist

George Lee, Group Work-Specialist

Cheryl Poropatich, Art Therapist

Thomas Fogarty, Educational Specialist

Jack Vernon, Intake-Clinical Social Worker (Orientation House)

Boyd Guenther, Social Group Worker (Perry House)

Mrs. Joan Miller, Psychiatric Social Worker (Thomas House)

APPENDIX B

Three Rivers Youth  
Personnel Staffing

Clinical Services (Continued)

- ✓ Evon Moore, Social Worker (Dithridge House)
- ✓ Ann Brownlee, Psychiatric Social Worker (Academy House)
- ✓ Brad Joseph, Graduate Social Work Student in Social Casework (Academy House - Student in residence at Perry House)

Gwen Bailey, Graduate Social Work Student in Group Work

- ✓ Nick Belich, Director of Child Care (Main Office)

(RESIDENCES)

Thomas House, 6955 Thomas Boulevard, 361-6555

✓ Mrs. Ida Walker, Coordinator

Janice Tercek, Houseparent  
Valeria Williams, Houseparent  
Mr. & Mrs. Harold Taylor, Students in Residence  
Joy Helmar, Graduate Student Child Care/Development

Dithridge House, 200 Dithridge Street(N), 637-6583

Miss Bonnie Jean Isle, Coordinator

- ✓ Ms. Flora Wimbely, Houseparent
- ✓ Larry Anderson, Houseparent

Perry House, 2650 Perrysville Avenue, 322-7335-

Dwight Mayo, Coordinator

Joseph Hughes, Houseparent  
Mary Fisher, Houseparent

Academy House, 235 Academy Avenue, 344-7596

Ed Schleicher, Coordinator

Harriet Reiter, Houseparent  
Dan Edmunds, Houseparent  
Ernest Jolly, House Parent (Part Time)  
Mark Sussman, Student in Child Care/Development

Orientation House, 2051 Farmen Avenue, 766-3753

✓ Joyce Kelly, Coordinator

Mary Martin, Houseparent  
Dan Thomas, Houseparent

Orientation House, Continued

- ✓ Marla Dickholtz, Houseparent
- Charles Burgess, Houseparent
- Michael Costley, Houseparent

Mrs. Eula Parks (Retired) On call relief

- ✓ Dr. Richard Cohen, Psychiatric Consultant  
Director, Child Guidance Center

Family Doctors To Residents:

Dr. Joel Safier, Academy House  
341-8181

Dr. Mangubat, Dithridge House  
681-7700 ext. 587

Dr. Remsen Behrer, Perry House  
237-3161

Dr. Joseph Glick, Thomas House  
682-8096



TRY 53  
10-31-73

THREE RIVERS YOUTH  
BASIC INFORMATION SHEET - ORIENTATION/DIAGNOSTIC UNIT

Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Admitted Date: \_\_\_\_\_

Medical Assist/Blue Cross No.: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age: \_\_\_\_\_

Physical Description: Wt. \_\_\_\_\_ lbs.; hgt: \_\_\_\_\_ ft. \_\_\_\_\_ in.; complexion: \_\_\_\_\_

Coloring: Eyes \_\_\_\_\_ Hair \_\_\_\_\_ ; Identifying Marks: \_\_\_\_\_

Referral Source: Juvenile Ct.: \_\_\_\_\_ ; Child Welfare Ser.: \_\_\_\_\_ ; MH/MR: \_\_\_\_\_

Last (Public) School Attended: \_\_\_\_\_ Grade: \_\_\_\_\_

Other Schools: (dates & grades) \_\_\_\_\_

School Assigned: \_\_\_\_\_ Grade: \_\_\_\_\_

Parents or Guardian	Address	Phone
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Father: \_\_\_\_\_

Mother: \_\_\_\_\_

Siblings: \_\_\_\_\_

Reason for Referral or Transfer: \_\_\_\_\_

Interview with Child: \_\_\_\_\_

School Behavior: \_\_\_\_\_

Intellectual Level: (Use phrases in place of I.Q. numbers) \_\_\_\_\_

Physical & Medical Factors: \_\_\_\_\_

Family: Father:\* \_\_\_\_\_

Mother:\* \_\_\_\_\_

Home/Neighborhood: \_\_\_\_\_

[\*Brief factual data, age, birthplace, employment, contribution to problem.]

Assigned to: \_\_\_\_\_ Prepared by: \_\_\_\_\_

APPENDIX D<sub>1</sub>

Basic Information Sheet

10-11-73

THREE RIVERS YOUTH  
ORIENTATION DIAGNOSTIC UNIT - TERMON HOUSE  
MINIMAL DATA ON EVALUATION FOR RESIDENTIAL PLACEMENT

I. Relevant factors in understanding child's behavior:

1. Describe the mood of the child:
2. Is there evidence of troubling behavior or misbehavior? Describe it:
3. What prompted the behavior (troubling behavior or misbehavior)?
4. Age at which first signs of troubling behavior began?
5. Is the behavior steady, or is it changeable?
6. Describe any variation observed in the behavior:
  - a. Are there any indications of decline (in behavior) over any period of time?
  - b. Does the behavior change in difficulty in various environments?  
  
If it does, describe it:

APPENDIX D<sub>2</sub>

Three Rivers Youth  
Residential Placement & Evaluation Form

c. Is the behavior consistent?

d. Is the behavior persistent? [tenacious]?

Explain:

7. Did the onset of puberty affect the child's behavior?

8. Briefly describe the observed normal functioning in the adolescent:

9. Briefly describe child's ability to adjust to new situations - school, people, recreation, etc.:

10. Is the adolescent easily provoked to anger? Describe the aggravating situations:

11. List approaches which are effective with the adolescent:

II. Assessment of available community, family, and kinship supports:

1. Are the adolescent's parents involved?

- Describe parental involvement:

- Is the parent contributing financially toward child's placement?

- Define the financial status of the family:

2. Are the child's guardians, foster parents, or relatives involved with the child? If they are, describe the relationship:

3. How does the parent or substitute parent describe and feel about the child's behavior?

a. How do the parents cope with the child's behavior?

b. Do they tolerate the behavior?

III. Community supports or systems related to the adolescent:

1. Laws affecting children:

a. Is the child adjudged delinquent? Describe behavior:

b. Is the child dependent and neglected? Describe behavior:

2. What are the aims of the systems - community?

2.1 What impact do the various systems have on the child? Describe each briefly:

- a. Law enforcement and corrections:
  - b. Social welfare system:
  - c. Medical system:
  - d. Educational system:
3. Which system is sponsoring the adolescent?

PSYCHOLOGICAL QUESTIONNAIRE

NAME: HOME:
CASE NO: REFERRED BY:
AGE: EXAMINATION DATE:
COUNTY: BIRTH DATE:
ADMISSION DATE: RACE:

RECORD INTERVIEW

I. General History

A. Education A. How far did you go in school?

Why did you stop then?

What kind of grades did you make?

How many friends in school?

What do you do in your spare time?

What did you do for entertainment?

Did you feel your teachers had it in for you?

Giving you a bad time?

Did you belong to any clubs or play sports?

How do you feel about school?

Did you ever get into trouble in school?

What for?

What did you like about school?

What are your plans about school?

B. Family Background

1. Home 1. Where were you living before you came

here (describe)?

2. Father 2. Describe your father (or adult male

guardian).

How do you and he get along?

3. Mother 3. Describe your mother (or adult female

guardian).

How do you and she get along?

4. Parents 4. How do your mother and father get along?

What do your parents make you do that you don't like to do?

What do your parents not let you do that you want to do? \_\_\_\_\_

5. Punishment \_\_\_\_\_

5. What do your parents punish you for? \_\_\_\_\_

How do they punish you? \_\_\_\_\_

How does being punished make you feel? \_\_\_\_\_

What do you do when your parents punish you? \_\_\_\_\_

6. Siblings \_\_\_\_\_

6. Do you have any brothers or sisters? \_\_\_\_\_

How old are they? \_\_\_\_\_

How do you get along with them? \_\_\_\_\_

C. Future Plans \_\_\_\_\_

C. What do you want to do when you grow up? \_\_\_\_\_

D. Occupation and Work History \_\_\_\_\_

D. Have you done any kind of work before you came here? What kind? \_\_\_\_\_

Did you like your work? \_\_\_\_\_

How long have you done this? \_\_\_\_\_

What other jobs have you had and how long have you worked on them? \_\_\_\_\_

Work History (continued) \_\_\_\_\_

What was the reason for leaving these jobs? \_\_\_\_\_

Do you feel you are pretty capable and smart? \_\_\_\_\_

What other income do you have? \_\_\_\_\_

E. Criminal Record \_\_\_\_\_

Have you ever been arrested? \_\_\_\_\_ How many times? \_\_\_\_\_ What for? \_\_\_\_\_

Have you ever been in prison? \_\_\_\_\_

How long? \_\_\_\_\_ When did you first get in trouble with the police? \_\_\_\_\_

What kind of trouble? \_\_\_\_\_

When was the last time you were arrested? \_\_\_\_\_

What for? \_\_\_\_\_

Do you feel guilty about having done these things? \_\_\_\_\_

F. Sexual History \_\_\_\_\_

F. When did you first start dating? \_\_\_\_\_

(If single) How often do you date now? \_\_\_\_\_

Have you ever had sexual intercourse with some member of the opposite sex? \_\_\_\_\_

Recently? \_\_\_\_\_ Who was this with (Husband, Wife, Boyfriend)? \_\_\_\_\_

How often do you have intercourse? \_\_\_\_\_

**APPENDIX E**

**Information Data Form**

**APPENDIX F**

**INFORMATION DATA FORM**

1. Age
2. Highest School Grade Completed
3. Referral Agency
  - a) School
  - b) Family
  - c) Agency
    - Public
    - Private
4. Current Geographic Community Location
5. Family structure
  - a) Both parents present in home
  - b) Father absent
  - c) Mother absent
6. Other Siblings in family
  - a) Brothers
  - b) Sisters
7. Sibling Order of Client
8. Prior Placement in Foster Home or Other Care
9. School Attendance Pattern in Elementary School Level
  - a) Regular Attendance
  - b) Sporadic Attendance
  - c) Required prodding from Authorities
  - d) Below legally required attendance
10. School Attendance Pattern in Secondary School Level
  - a) Regular Attendance

- b) Sporadic Attendance
- c) Required prodding from Authorities
- d) Below legally required attendance

11. With whom client lives

- a) With both parents
- b) With Mother
- c) With Father
- d) Other

12. Highest Educational Achievement of Father/Mother

- 0 - 4
- 5 - 6
- 7 - 8
- 9
- 10
- 11
- 12

Past High School

No Reply

13. Father's Job Status

Unemployed

Seasonal Employment

Sporadic Employment

Steady Employment

Other

No Reply

Mother's Job Status

14. Family Income

\$2000 or less

2000 - 4000

4000 - 6000

6000 - 8000

8000 - 10000

\$10000 or more

15. Stability of Present Parents' Marriage

16. Describe Client's Degree of Emotional Stability

17. Describe Client's Need for Three Rivers Youth Program

18. Prior Residential Home Experience

a) None

b) Less than Three Months

c) 3 - 6 Months

d) 6 - 12 Months

e) 1 - 2 Years

f) Two or More Years

19. Family Structure

Number of Rooms in Client's Home

3 or less

4

5

6

7

8

9

10

11 or More

20. Number of People Living in the Home

2

3

4

5

6

7

8

9

10 or More

**END**