



# Annual Continuous Quality Improvement Report

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**FY 2020**

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**Tides Family Services**



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## Introduction to Tides' CQI Program:

Tides Family Services, Inc. seeks to achieve on-going excellence in service delivery. A primary means of doing so is through the application of our Continuous Quality Improvement (CQI) system. TFS takes a systems wide approach to CQI to assess and improve overall agency operations using multiple methods of measurement. It includes an assessment of internal and external processes that support TFS' Mission and our ability to successfully meet the needs of our clients and stakeholders. The CQI is a cyclic quality management system where TFS' programs and process are assessed as part of a continuous cycle of examination, evaluation, planning and action.

TFS is a state-wide leader providing community-based services to high-risk and high-need youth, young adults, and their families. TFS takes pride in our tag line of "never giving up on a kid...never." A strong CQI program is imperative to succeeding in our tag line...never giving up...never forces us to consistently identify, implement and evaluate creative solutions to challenging problems.

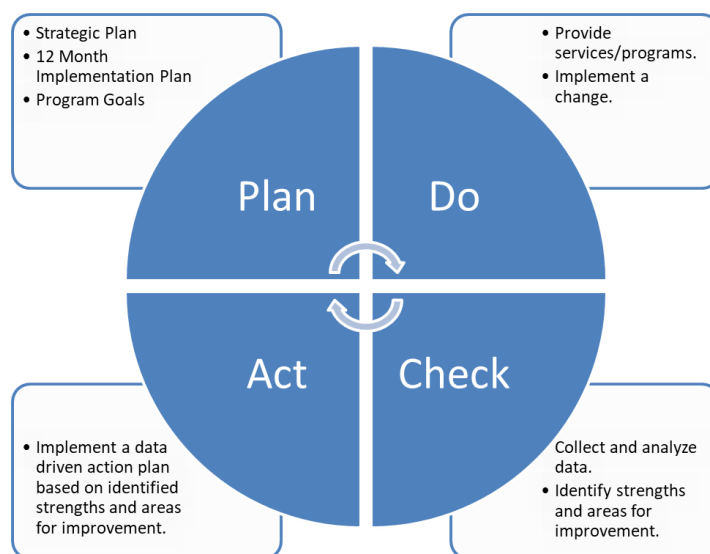
CQI is conceived of as a continuous/or ongoing cycle of examination, evaluation, planning and action. It considers all program areas within the agency and all clients and families served. It enables TFS to identify organization-wide, program-specific, and case-specific issues and implement solutions to improve agency wide efficiencies, client outcomes and client satisfaction. CQI supports/fosters a culture of accountability and excellence throughout TFS, our partner network and the greater community we serve. It is viewed as a vital management tool to promote staff accountability through a broad based, organization wide Performance and Quality Improvement Process.

TFS welcomes all feedback, comments or questions on this report or our work in general. Feel free to outreach Rachel Yoder, Sr. VP of Treatment Programs directly at [ryoder@tidesfs.org](mailto:ryoder@tidesfs.org)

Specifically, the Continuous Quality Improvement Program is structured to enhance staff ability to:



TFS' CQI Program follows a plan-do-check-act (PDCA) process when implementing change. PCDA keeps TFS grounded and focused on our mission as outlined and defined in our strategic plan.



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## 2020 Overview:

TFS was founded in 1983 as a Community Based agency in Rhode Island. TFS has always had a strong Continuous Quality Improvement presence which was strengthened during the initial accreditation process through the Council on Accreditation (COA) which was first obtained in 2009. TFS Performance and Quality Improvement (PQI) Plan describes the agency's ongoing system wide efforts to continuously improve, learn and strive for excellence in the provision of services to the children and families under TFS' care. The plan is designed to be reviewed on an ongoing basis and updated when needed, but no less than annually.

The Board of Directors, along with the Chief Executive Officer (CEO), sets forth quality expectations of excellence and has developed an agency-wide five-year Strategic Plan. The Strategic Plan outlines the agency's broad goals and targets. The CEO promotes a culture within the agency that facilitates excellence and continual improvement. TFS allocates sufficient resources to lead and facilitate the collection and analysis of data.

This report provides stakeholders with a comprehensive understanding of the CQI activities TFS provided throughout the year. The intent of this report is to inform decision making by the Board of Directors and the Senior Management Team to improve the quality of TFS services and guide strategic planning.

Included in this report are narrative summaries from agency committees, programs, and initiatives as well as a summary of demographic and outcome data.

Fiscal Year 2019-2020 marked the twelfth year TFS implemented a full-scale Continuous Quality Improvement (CQI) Program. The CQI Program facilitates the oversight of quality care, client access and quality services by enabling staff to make systematic data driven programmatic decisions.



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## **Impact of COVID-19 on Tides Family Services:**

COVID-19 brought an unforeseeable series of changes to the way TFS operates. Maintaining Staff and public safety are a priority to TFS' Leadership Team. The Leadership Team with input from staff on all levels, community partners and key community stakeholders effectively pivoted our work to a hybrid model within a three-day period in mid-March. Due to the high-risk nature of the youth and families TFS provides services to, it was, and still is, essential for TFS to continue to prioritize a streamlined service delivery model that eliminates barriers to access as well as matches the individual needs of each youth and their families.

### Incorporation of Telehealth:

Governor Gina Raimondo signed an executive order into effect requiring health insurance providers to provide equal funding to services provided via telehealth and in person. The RI Department for Children Youth and Families (DCYF) adopted this standard as well, allowing face to face contacts provided via telehealth to satisfy requirements for face to face contacts in the scope of work for our DCYF contracts. A Federal level executive order from President Trump waived the HIPAA requirements for telehealth platforms allowing providers to implement telehealth quickly and effectively into their practices.

TFS quickly developed practice standards for the use of telehealth including a structured assessment for determining which youth and families required in person support to maintain the youth safely in their homes. Prior to dissemination to all staff, the standards were vetted by an internationally renowned expert in the NASW Code of Ethics to ensure they were in line with current ethical standards. All TFS staff were provided with the equipment they needed to securely incorporate telehealth into their day to day work with families.

### Daily Operations:

To limit opportunities for potential transmission of COVID-19 amongst TFS staff, the workforce transitioned to working remotely as often as possible. Staff use of the buildings was limited to essential staff and activities from mid-March through the end of June. Building usage will expand into the beginning of next FY to incorporate summer

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programming and academic programming in the Fall. Most staff will continue to work remotely until it is safe to have offices fully opened.

Connections and community building are at the core of both TFS' and the Lasallian Missions. Staff remained connected to each other and the Agency through video conferencing for team meetings, supervisions, weekly coffee breaks, trainings, and full staff meetings. Staff were able to creatively celebrate birthdays and special events with each other as well as get together for shared experiences around the impacts of racial justice on our society and work.

### Financial Impacts of COVID-19

Along with other child welfare and behavioral health providers locally and nationally, TFS has experienced negative financial impacts of COVID-19. The primary drivers of this are a decrease in child welfare referrals and the increase in expenses to support the cleaning/sanitation protocols and PPE purchases. TFS applied for and received PPP dollars and several grants to offset losses and expenses incurred due to COVID-19. TFS continues to assess the impacts monthly and has pivoted services to increase in person (with appropriate distancing and safety measures) behavioral health programming to meet the needs identified in the community and maintain staffing patterns across the agency.

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## Stakeholder Feedback

Efficient and effective client and stakeholder satisfaction processes are crucial to TFS' philosophy which recognizes the importance of client-centered representation. Information gathered from the stakeholder feedback process is used to help inform both the development of short-term strategic objectives and the long-term strategic plan.

TFS evaluates client and family, community stakeholder and employee satisfaction on an annual basis. FY 2020 marked the first year of a fully electronic distribution of the client/family survey. Close to 200 surveys were distributed electronically via email with only 6 being returned. Due to the low return rate, TFS will be reviewing the platform and distribution plan and re-issuing the survey in early FY 2021 to allow for a more meaningful survey experience.

All stakeholders of TFS are welcome to file a formal complaint or a grievance at any time if they are dissatisfied with services provided. There were no grievances filed in FY 2020.

We are pleased to share, TFS was selected as a 2020 Providence Business News Best Places to Work in RI. Employees rated TFS on several areas including leadership, supervision, and training and development. The overall average of responses showed a 91% agreement with all areas.

A summary of responses is included on the next page.

## EMPLOYEE

97% OR MORE AGREE  
OR STRONGLY AGREE

- MY SUPERVISOR IS OPEN TO HEARING MY OPINION OR FEEDBACK
- I LIKE THE WORK THAT I DO
- MY JOB PROVIDES ME WITH A SENSE OF MEANING

95% AGREE OR  
STRONGLY AGREE

- I UNDERSTAND THE LONG TERM STRATEGY OF THE ORGANIZATION
- MY EMPLOYER ENABLES A CULTURE OF DIVERSITY
- I FEEL PART OF A TEAM WORKING TOWARDS A SHARED GOAL

## CLIENT/FAMILY

100% AGREE OR  
STRONGLY AGREE

- STAFF TREAT ME WITH RESPECT
- STAFF SPEAK TO ME IN A WAY I UNDERSTAND
- STAFF IS SENSITIVE TO YM CULTURE/ETHNIC BACKGROUND

82% AGREE OR  
STRONGLY AGREE

- OVERALL I AM SATISFIED WITH THE SERVICES PROVIDED
- I UNDERSTAND MY TREATMENT GOALS
- THE PEOPLE WORKING WITH ME HAVE STUCK WITH ME NO MATTER WHAT TIDES SERVICES WERE HELPFUL
- STAFF FOLLOWED THROUGH WITH AGREED UPON ACTIVITIES

## COMMUNITY STAKEHOLDERS

100% AGREE OR  
STRONGLY AGREE

- I AM SATISFIED WITH MY OVERALL EXPERIENCE WITH TIDES FAMILY SERVICES
  - TIDES HAS A POSITIVE IMPACT ON THE COMMUNITY
  - TIDES STAFF ARE COURTEOUS AND HELPFUL
- TIDES STAFF RESPOND TO QUESTIONS, REFERRALS, THE NEED FOR INFORMATION ETC. IN A TIMELY MANNER.

90% AGREE OR  
STRONGLY AGREE

- TIDES PROVIDES CULTURALLY COMPETENT SERVICES



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## Clinical Committee Report

*The general charge of the clinical committee is to provide consistent oversight, guidance and management of clinical policies and procedures for Tides Family Services. Clinical committee responsibilities include a quarterly review of Clinical Incident Reports and Clinical Case Record Reviews. These quarterly reviews result in management, oversight, and corrective action planning within the reviewed areas. The clinical committee consists of a broad representation of TFS staff and membership is monitored throughout the year to ensure representation from all offices. The Clinical Committee is also charged with evaluating the new hire and clinical training programs for the Agency. This process is conducted through a subcommittee to the clinical committee.*

The following is a summary of 2019/2020 fiscal year clinical committee activities:

Throughout the past year, the activities and responsibilities of the Clinical Committee were overseen by the Clinical Director. Moving forward, the Director of Quality will facilitate the Clinical Committee. The Training Facilitators Subcommittee was overseen by the Director of Treatment Programs and VP of Human Resources.

Fifty percent of open and closed client files across programs are audited annually through Clinical Case Record Reviews (CCRRs). On a quarterly basis, a random sampling of files is selected and assigned to staff across programs to audit using a standardized audit tool. CCRR's provide both a qualitative and quantitative review of client records to identify areas of improvement within our service delivery and record keeping. The audit tool was modified during the COVID-19 pandemic to allow staff to audit the file based on what was in the electronic database and avoid going into an office to audit the paper chart. A new question has also been added to review cases based on length of stay.

### ETO Reporting and Monthly CQI Reports:

ETO is a web-based database used by Tides to collect client data. All assessment information, demographic information, client contact information, school attendance,

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and clinical case supervision are recorded in ETO. Several reports have been built to allow for a review of data entered into the system. Tides is currently researching alternative databases that will better meet the needs of programs and allow for more efficient data entry.

Through ETO, there is the opportunity to review program outcomes, trends related to clinical needs on cases, and trends related to service delivery. There is a comprehensive array of reports available to monitor for trends in paperwork completion/compliance, as well as opportunity to review program outcomes, trends related to clinical needs on cases, and trends related to service delivery.

Based on program goals and objectives developed at the beginning of the year, the Directors team developed monthly CQI reports that demonstrate whether programs are meeting benchmarks. The Director team review data from ETO reports to identify training and advocacy needs and generate individual work plans for staff behind on clinical documentation. Trends across programs and outcome data are also reviewed. During a monthly CQI meeting, findings are discussed within the team, with Sr. Leadership, and with program staff.

#### Completed and Ongoing Corrective Action Plans:

Throughout FY 2019/2020, progress has been seen in several areas on Clinical Case Record Reviews. Some of those areas include signatures on treatment plans, incomplete biopsychosocial assessments, documentation not being up to date, incomplete risk assessment scales, and lack of aftercare planning.

While there is still room for improvement, several factors contributed to the progress seen in these areas. (1) Internal meetings are scheduled whenever a treatment plan is due. During this internal meeting, the team discussed referral behaviors, treatment goals, client progress on goals, they complete a chart audit, discuss risk assessment scores, and obtain signatures. A Director is always present at these meetings to ensure there is a level of oversight in following the agenda. (2) A Chart Audit Challenge was

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initiated in January 2020 and February 2020 where staff had a chance to earn a gift card if they audited the most charts and completed corrective actions. (3) A DCYF audit occurred in January 2020 in which staff took extra time to improve on documentation and update charts. It resulted in efforts to provide a qualitative review of documentation notes, provider meeting notes, and supervision notes. (4) An Aftercare Planning Training occurred in May 2020 to address the concern that there was a lack of aftercare planning happening on cases that were ready to close. This will also be added to the New Hire Training schedule. (5) Several Performance Improvement Plans were implemented to target specific staff who were behind on paperwork despite numerous interventions to get them caught up. (6) Several clinicians have been hired over the past year which has contributed to having more stable caseloads and a better handle on documentation. (7) Outreach & Tracking staff were trained on how to complete treatment plans.

#### Upcoming Corrective Action Plans:

The proper storage of client case files was an area for corrective action identified by the Clinical Committee. DCYF contracts require Tides to store closed case files for 20 years after a client's 18<sup>th</sup> birthday. Storage space utilized to store closed case files in the West Warwick, Providence, and Pawtucket office is at capacity. This has been an ongoing area for corrective action for the past several years. The agency recently obtained a certificate of occupancy for the Providence basement. The long-term plan to store files would include putting closed files in the Providence basement. This project has been on hold due to the COVID-19 pandemic but will be revisited once staff are able to safely be in offices. This is an area of concern shared by many peer organizations in the state with DCYF contracts. DCYF contracted rates do not include funds dedicated to file storage which presents a major barrier to identifying a long-term solution. The Rhode Island provider community, including TFS, have made requests to DCYF for assistance due to costs that are not covered through current contract language. DCYF is looking into whether or not the Secretary of State should be responsible for offsetting the costs to the provider community.

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Based on feedback from the Clinical Committee, several members felt it would be important to review the risk assessment tools being used. The agency has secured funding for Mirah which is a measurement-based software platform that allows clients to take standardized assessments remotely. It is also being used to assess for emerging factors related to the COVID-19 pandemic.

#### Training Facilitators Subcommittee:

*The purpose of this subcommittee is to identify training needs within the agency both for new hires and for ongoing trainings needs.*

#### New Hire Trainings:

The New Hire Trainings have been reviewed by the subcommittee. It was determined the New Hire Training schedule is too long, taking 2 weeks at a time to train new staff. Therefore, several of the non-clinical trainings will transition into video presentations that staff can watch at their own pace. The clinical trainings will remain in place as in-person presentations to allow for a live question and answer format. Due to the COVID-19 pandemic, the New Hire Trainings will be delivered in a virtual format.

#### Ongoing Trainings:

The subcommittee reviewed potential trainings that would be beneficial as yearly “boosters” for all staff as well as continuing education. A list was developed based on feedback from staff. It was decided that there would be 1 training scheduled per month open to all staff. Training facilitators would be selected both internally and externally based on expertise. Due to the COVID-19 pandemic, this schedule has been modified. The subcommittee continues to look at various webinar options to supplement the in-person trainings that were originally scheduled.

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## Human Resources Department

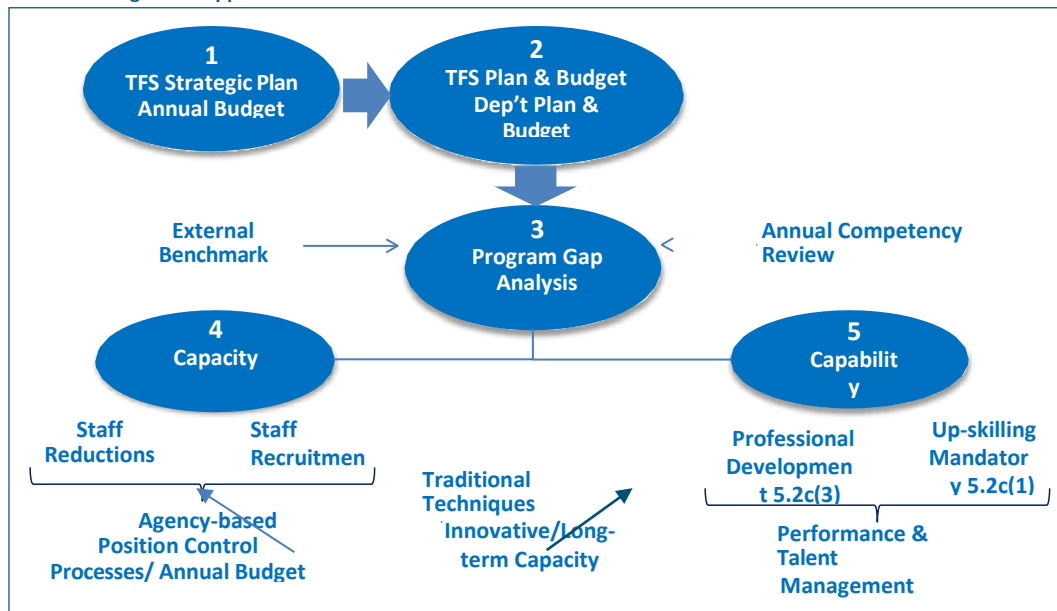
At TFS, our organization is all about people, as individuals and as a team. We inspire each other, bettering ourselves, bettering our teammates, bettering our agency, and ultimately, bettering the communities we serve throughout Rhode Island. Our agency leads tirelessly in all that we do, and we invest in our workforce so that they meet their personal and professional goals.

Our human resources (HR) department is the backbone of our agency when it comes to our biggest asset, our workforce. HR is responsible for developing and executing human resources strategy in support of the overall business plan and strategic direction of the TFS, specifically in the areas of Talent Acquisition, Talent Development and Learning, Total Rewards, Workforce Planning, Employee Engagement, Employee Relations, Human Resources Operations, and Performance Management. She provides strategic leadership by articulating Human Resources needs and plans to the executive leadership team and to the board of directors. Jencks and her team's full responsibility is for all aspects of human resource management in accordance with the strategic direction and operational imperatives of the Tides. The only aspect of human resources that is outsourced is the benefit management through the Hilb group administers COBRA and ERISA for the agency.

TFS is charged with evaluating workforce processes, improving, and/or redesigning them to improve organizational performance. Decision drivers include potential impact on value: cost, quality, and engagement. Several processes have been evaluated and integration decisions made: Affirmative Action, Compensation and Benefits, New Employee Orientation (NEO), Wellness, Recruitment, and Regulatory Compliance. Phased implementation of performance management began in 2020 with integration of Tides values in management appraisals. As part of talent review, talent assessment has been accomplished 100% through the agency in 2020.

Tides strategic plan drives agency program and service plans, which frame the operating budget. Capacity requirements are set through annual budget process (Fig. HR1.1).

Fig HR.1.1: Workforce Management Approach



Executive leadership with HR support, analyze FTE historical trends, projections, targets, and Paylocity and ETO benchmarks. Departmental staffing levels are set through the same budget-driven process. HR position control systems manage off-budget-cycle changes. Need for clinicians, behavioral assistants, caseworkers, and school staff are based on assessing gaps between aligned resources and future programs: clinical, academic, or administrative. Capability is managed through annual update of job descriptions for new requirements. Talent Assessment measures management capability and potential. Role appropriate processes and checklists are in place for competency, certifications and skills assessment for employees, clinicians (including credentialing), internships, and volunteers. Analysis of needed capacity and capabilities flows into planning for training and development, performance review and recruitment. Cycles of improvement have strengthened this process: the Lominger Competency (LLC) model builds skills highlighted in the talent assessment initiative. Workforce Development began its comprehensive analysis of current staff capabilities matched with projections of needs through 2021. Analysis continues, with completion scheduled for later this year.



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## Talent Acquisition

To gain a competitive advantage, TFS has adopted a new approach that focuses less on filling positions quickly and more on aligning talent acquisition with the business. We cannot continue to rely on the same antiquated processes and solutions and expect different results. The world of talent acquisition is complex. The most successful organizations view talent acquisition as a strategic endeavor, not simply an activity in filling open positions. TFS has taken a holistic approach to talent and focus on every element to better address the skill shortages and meet our growth objectives.

To create a modern service line within the Centers of Excellence, talent acquisition has been developed over the last year. This team has re-defined and expanded their strategy within TFS Human Resources to drive business impact. Talent acquisition will align with workforce planning, succession planning, onboarding, development, and performance. An end-to-end talent strategy has been created to provide more precision in finding, keeping, and enhancing the skills needed now and in the future within our human service delivering the “excellence.”

### Strategic elements implemented for success:

- ✚ Talent Acquisition Planning & Strategy – This ensures business alignment, examines workforce plans, requires an understanding of the labor markets, and looks at global considerations.
- ✚ Workforce Segmentation – This requires an understanding of the different workforce segments and positions within these segments, as well as the skills, competencies, and experiences necessary for success.
- ✚ Employment Branding – This includes activities that help to uncover, articulate, and define Tides Family Services image, organizational culture, key differentiators, reputation, and products and services. Employment branding will support the market position and attract quality candidates and depict what it is truly like to work for our human services.
- ✚ Candidate Relationship Management – This includes building a positive candidate experience, managing candidate communities, and maintaining relationships for those candidates who are not selected at present against a skill set, but have few more skills.
- ✚ Metrics & Analytics – It is the continuous tracking and use of key metrics to drive continuous improvement and to make better recruitment decisions, to ultimately improve the quality of hire.

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By leveraging our proprietary methodology, our team will evaluate and test the new functions against industry best practices and develop a roadmap for future improvement.

Talent Acquisition Timeline:

- ✦ Identified current and future state of talent acquisition process – develop a roadmap for process and improvement, gain collective feedback, implementation timeline, and evaluation for sourcing, recruiting and onboarding
- ✦ Developed metrics & analytics to align with overall Tides Family Services business strategy and market reality
- ✦ Determined branding gaps, messaging, demand generation, content marketing, email marketing, lead nurturing, and social media
- ✦ Clarified platforms for applicant tracking aligned to our HRIS system
- ✦ Beta tested 100% of Role Blue Printing throughout the agency to ensure aligned competencies and skills for demands of the industry
- ✦ Designed sourcing map for open and critical roles and test (seminar series, information sessions, networking opportunities, stakeholder relations, social media, etc.)
- ✦ Created an online platform and application for all our open positions
- ✦ Continue to cultivate and prescreen all applicants in a two-tiered competency interviewing process
- ✦ Developed a consistent communication plan in response to applicants and interviewees
- ✦ Asses and redesign behavioral based interviewing questions (review first and second interview questions)
- ✦ Designed a short- and long-term strategic plan to support workforce pipeline (2019-2021 Open/Approved FTE monthly positions system-wide, i.e. career ladders, development, etc.)
- ✦ Created a sense of ownership for the talent acquisition team and ongoing collaboration with senior leadership and directors on structure and delivery efforts

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*Tides Family Services goal is to be the market leader in talent acquisition within social services. We are laying the foundation for our Centers of Excellence, by selecting the right talent in the right roles with the right competence and skills.*

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Tides Family Services Human Resource's team will be able to examine all the key facets of talent acquisition within the next year, to ensure the benchmarks are being met with the right people impacting quality service and satisfaction.

### Workforce Values

At Tides, we believe culture is founded on values, built by everyday behaviors, and reinforced throughout the agency. Mission, vision, goals, espoused values, and standards of behavior must be aligned. The Cultural Assessment identified through Paylocity, The Providence Business News Best of Survey (an independent entity that delivered the survey and compiled the results), and Constant Contact shows the values the workforce cares about and laid the foundation for development and improvement. Leadership and staff behaviors were articulated, and expectations set for consistent values-in-action in interactions with one another, clients and families in the school and the community. Tides continues to have greater workforce participation and fewer negative responses, all good signs.

Our values are embedded in New Employee Orientation through Paylocity, refreshed and reinforced by cascaded, standard program, run downs, clinical committee, and supervision agendas enhance the values deployment process. Our competency model has been recalibrated to support Tides values. Human Resources continual reinforcement and spotlighting Tides values assures top of mind awareness of our high NASW standards. The value of Collaboration: Tides builds partnerships that encourage teamwork and empower friends, families and neighborhoods; Excellence: Tides holds itself to the highest standards of efficiency, program quality and service results; Integrity: Tides builds credibility and trust in the community by aligning its mission, programs, people and results; Respect: Tides demonstrates positive attitude and

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professional regard among staff and community members; Service: Tides serves with compassion and commitment.

### Racial Justice Theory of Change:

In Fall of 2019, TFS embarked on work to become an anti-racist organization. This process included offering a 24-hour anti-racism training to all director and leadership level staff and an anti-racist training to all agency staff. At TFS, equity, diversity and inclusion are built into the fabric of our organization. COVID-19 has magnified the long history of inequalities and demoralization of our society. TFS is committed to justice and equality, and while as an agency we work to provide critical services to families of all backgrounds and identities, we understand that the legacy of structural racism casts a shadow over our work. As such, we are undertaking the work of anti-racism within our own agency, to transform TFS into an agency that truly makes no space for racism and bigotry. As practitioners and learners, we are looking inward to understand how we can make internal changes to support our efforts to ensure equity, diversity and inclusion in all of the work that we do.

A summary of our work to become an anti-racist organization will be crafted into a racial justice theory of change that will be used to guide our work moving forward. TFS values the input of our staff at all levels in this process and completed a preliminary survey on staff experiences with racism in their work at TFS.

## **Racial Justice Survey Results**

**96%** of staff reported they felt safe to have difficult conversations about race in supervision.

**80%** of staff agreed advocacy on behalf of racial equity is part of the organization's work.

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## The Tides School Report

The 2019/2020 school year presented unique and considerable challenges for Tides School students and staff. Beginning on March 13<sup>th</sup>, we converted from a fully functioning special education day school program to a fully functioning online school program in about a week's time. For those students with available technology and capabilities (approximately 75% of our students) we organized small group class sessions through Google Meets so we could have meaningful, face-to-face meetings with the students. For those without the technical means, we provided paper and pencil work. Teachers called all students daily to provide instruction and guidance. Sometimes the calls were just to check in and have a conversation. Due to the efforts of the teaching staff, we had very consistent "attendance" rates throughout the remainder of the year. Additionally, we had extremely high rates of work completion. To maintain a strong therapeutic relationship with our students during this crisis, our school social workers developed regularly scheduled contacts with students either over the phone or through Google Meets. While not the same as in-person therapeutic sessions, these virtual meetings provided students the opportunity to maintain close ties to our staff and to share insights into their lives as well as the issues that impacted them. Given the stress and anxiety associated with the dramatic changes to our society, those meetings were significant.

Once the school closed in March, our culinary staff began providing weekly meals for all our students and their families. Each week, our culinary staff made bulk purchases of nonperishable food items, created care packages for each of our families and delivered them throughout the state. This also provided opportunities to deliver and pick up schoolwork for those students who needed paperwork. From the close of school in March to the end of the year, the Tides culinary team prepared and delivered approximately 300 care packs to our families. Furthermore, we were able to set up a camera in our woodshop to provide live virtual lessons with our carpentry students. This virtual woodshop provided instruction, allow students to give feedback and ideas as projects developed, but most importantly, kept students connected to school.

2020/2021 School Year.

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Given the significant health risks associated with the Covid-19 outbreak and the uncertainty surrounding school in the fall, the following represents options we are pursuing as potential schedules for the return of school in September 2020. These plans would apply to both campuses though could be modified by campus depending on need and student population.

All school plans for the opening of the 2020/2021 school year will follow guidelines promulgated by the Rhode Island Department of Education, the Rhode Island Department of Health and the Rhode Island Governor's office. All school preparation plans are subject to approval from the Rhode Island Department of Education. Both Tides School locations will be modified to ensure compliance with health standards set by the RIDOH and the CDC. Fortunately, we already maintain small class sizes and we have sufficient space to ensure proper social distancing during the school day. We will work closely with the Tides Maintenance Department to ensure regular cleaning of the school as well as other health and safety measures required by the Rhode Island Department of Health and the Rhode Island Department of Education, to include staff and students wearing masks.

In the event that additional schedule changes are required during the year, we have developed three contingency plans that can be implemented quickly and can be used as stand-alone programs or in combination to ensure that our students continue to receive the educational and therapeutic supports they need to be successful.

- 1) An Odd/Even schedule: Students can be broken into three small groups based on academic ability and social skills. Two of the groups would attend school two days a week and complete work remotely the other three days. Remote work would be a mix of self-guided assignments through IXL and Khan Academy along with individual and small group classes using Zoom or Google Meets. The third group would work in our vocational program for a day and would attend classes on Fridays. This group would also work remotely with self-guided assignments with individual and small group classes using Zoom or Google Meets.
- 2) AM/PM Schedule: Students will be broken into two groups and will attend school daily four days a week with Friday classes being either individual or small



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group classes using Zoom or Google Meets. The morning group would attend from 7:30 am to 10:30 am and the afternoon group would attend from 11 am to 2 pm. The half-hour transition period would provide time for students to exit the building and for staff to clean regular contact points prior to the afternoon group attending. When students are not in school, they will have self-guided assignments to complete through IXL, Khan Academy or other resources. Individual and small group classes through Zoom or Google Meets will also be provided when students are not in the building.

- 3) Should circumstances dictate, we can continue the online format that we have used during the spring of the 2019-2020 school year. Our students and their families have responded well to this approach and we have the technical and academic infrastructure in place should this method continue to be necessary.

It is foreseeable that all or some combination of these approaches could be used next school year should there be a phased-in approach to the opening of school. We will continue to update and refine this document as new information becomes available.

### Goals for Growth

A goal for program growth is to further develop transition programming available to our student. All our students have transition IEP's which requires that students have work development opportunities and/or job readiness skills as part of their educational plan. Most out-of-district programs provide services through the Office of Rehabilitative Services (ORS) and the Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH).

Currently we offer those services as well, but we supplement them with our culinary arts program and our vocational program, which most other days schools do not have available. Our goal is to develop partnerships with other programs and agencies, allowing us to provide a full menu of hands-on experiential learning opportunities, internships, and job readiness placements.

By March of 2021, our goal will be to offer students the following transition services: ORS, BHDDH, Culinary Arts, Intro to Carpentry, apprenticeships with We Make RI,

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Apprenticeship RI, St. Elizabeth Home, Skills for RI's Future and CCAP. This broad range of experiential learning opportunities coupled with our trauma-informed approach will make us the leader in academic transitional services for at-risk, special needs youth in Rhode Island.

We will develop marketing material that underscores the variety of opportunities we offer our students. Further, we will meet with local school leaders to demonstrate the efficacy of our approach and how it differentiates us from other school programs. Executing this plan by March of 2021 will allow us to reasonably increase tuition costs for the 2021-22 school year.

## Facilities/Risk Management Report

### Incident Reporting and Insurance Claims

**FY 2019-2020 saw a reduction in employee safety and property damage related incident reports, as well as a reduction in insurance claims.**

- |  |                                   |
|--|-----------------------------------|
| • 11 incident reports filed                    | (14 incident reports in 2018-19)  |
| • 5 insurance claims filed                     | (8 insurance claims in 2018-19)   |
| • 0 staff injuries resulting in lost work time | (3 lost time injuries in 2018-19) |
| • \$10,307 in total loss                       | (\$216,620 total loss in 2018-19) |

### Capital Improvements and Safety Renovations

**FY 2019-2020 saw several completed capital improvement projects and renovations to enhance safety**

- Providence basement renovation was completed and occupancy approved for the entire building
  - New computer lab
  - 6 new offices
  - Designated space for future music studio
  - All ground floor exit signs and emergency lighting replaced
- Pawtucket roof work and interior repairs required to meet fire code completed and inspected
- Pawtucket Parking lot lights replaced with additional lights added for safety
- West Warwick driveway repaired to prevent pedestrian injury and automobile damage
- West Warwick school renovation completed, including renovated former garage space into a gym
- West Warwick parking lot lighting repaired for safety

### Notable Activities by Location

#### Providence

**Governor Raimondo signs her Executive Order on Juvenile and Criminal Justice Reform**

**Providence Police Department hosts a 3-3 basketball tournament in our renovated Cappuccino Gymnasium**

**Comprehensive Community Action Program (CCAP) leases space for their GED and Job Readiness Program.**

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### Pawtucket/Central Falls

US Senator Sheldon Whitehouse and US Representative David Cicilline **host a press conference to announce the success of their 5-year congressional initiative to pass Federal renewal of Juvenile Justice legislation.**

Community Care Alliance (CCA) **psychiatrist co-locates weekly providing access to services that enhance our clinical ability to meet client needs**

Neighborhood Block Parties **inside our building and in the parking lot with BVCAP and other provider partners draw over 500 youth and their family members to enjoy food and fun while making connections to service providers**

Parent Support Network **co-locates twice a month to hold one of its four regional Rhode Island Fatherhood Initiative group meetings**

### West Warwick

CCAP **leases space and moves their Kent County GED and Job Readiness Program in to our second smaller building.**

Nutrition and Wellness Program **meets weekly with families and youth to teach planning healthy meals and managing food budgets and how to cook various healthy meals after school hours in our kitchen space**

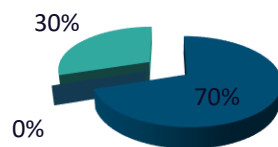
### *Room to Grow*



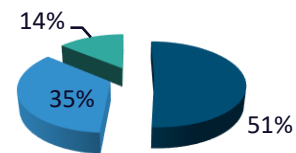
*Aside from our own program expansion plans, Comprehensive Community Action Plan (CCAP) is leasing space in our West Warwick and Providence locations. CCAP funding streams can benefit our service population with in-house program development and facilities improvements to meet the growing demand for vocational skill building. Co-location with Community Care Alliance and Parent Support Network provides our youth and families Psychiatric, group counseling, and parent engagement workshops. The following infographics illustrate our current space usage and the opportunities for growth. We are evaluating the space we currently occupy as well to look for opportunities to manage our programs more efficiently, particularly in Pawtucket and Providence.*

	Pawtucket/CF	Providence	West Warwick-Main	West Warwick-Small
Space Utilized				
Square footage (Tides occupied "as is")	16,572 sq ft	9,680 sq ft	11,668 sq ft	1,213 sq ft
Square footage (Lease eligible "as is")	0 sq ft	6,672 sq ft (1,600 sq ft CCAP)	0 sq ft	702 sq ft. (CCAP)
Square footage Unoccupied Potential	4,860 sq ft	2,650 sq ft.	1,560 sq ft	0 sq ft

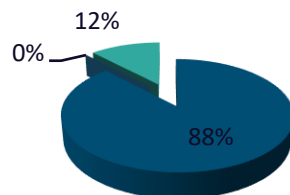
**Pawtucket/CF**



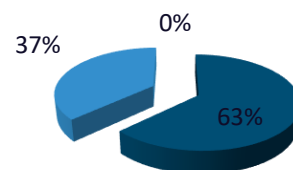
**Providence**



**West Warwick Main**



**West Warwick Small**



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## Financials

### REVENUES

DCYF	\$ 6,895,680	80.71 %
Fee Programs	\$ 104,615	1.22 %
Educational	\$ 1,184,365	13.86 %
Other	\$ 359,247	4.20 %

### PROGRAM EXPENSES

DCYF	\$ 6,581,948	79.81 %
Educational	\$ 1,073,706	13.02 %
Fee Programs	\$ 280,265	3.40 %
Other	\$ 311,108	3.77 %

### EXPENDITURES

DCYF	\$ 5,440,299	69.97 %
Educational	\$ 887,045	10.76 %
Fee Programs	\$ 237,174	2.88 %
Management	\$ 1,403,985	17.02 %
Fund/Other	\$ 278,524	3.38 %

### SALARIES

Direct Program	87.02 %
Administration	12.26 %
Fund Development	0.72 %



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## Look Into 2021

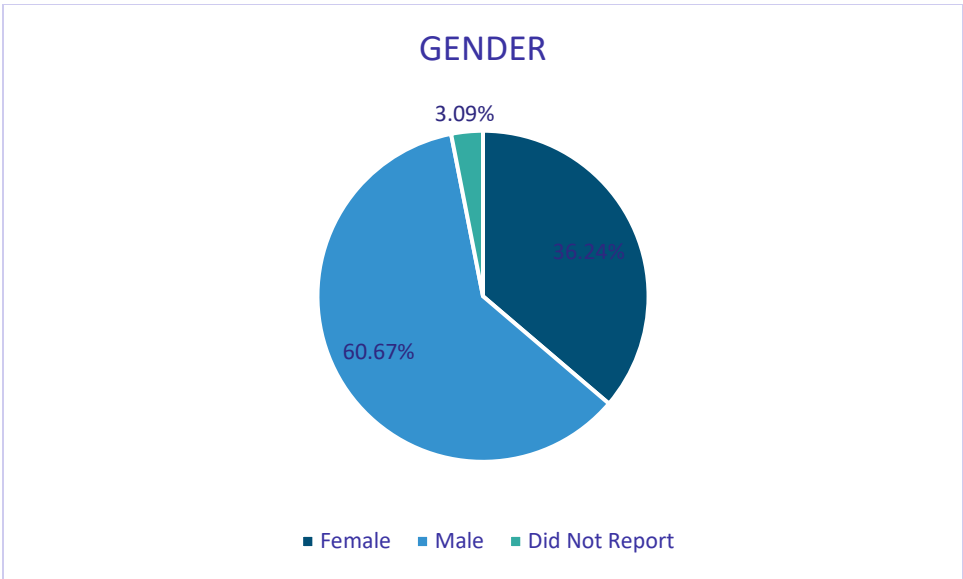
Tides Family Services is pleased to share the addition of a new program into our service array in 2020. In response to community stakeholder feedback and our own experiences seeking out substance abuse treatment for youth in our programs, TFS recognized the need for substance abuse treatment as an unmet community need. In March of 2019, TFS applied for grant funding through the Department of Behavioral Healthcare Developmental Disabilities and Hospitals for funding to support a new substance abuse treatment model at TFS. The Seven Challenges is an evidence-based treatment model geared towards the treatment of substance use in youth. TFS began accepting referrals in the program in December and will include outcome data on this program starting in FY 2021.

An additional unmet need further highlighted by COVID-19 is the need for Children's Mobile Crisis Response. TFS, in partnership with Thrive and Community Care Alliance, are in the preliminary stages of developing a Children's Mobile Crisis Response program with funding through CCBHC dollars awarded to Thrive. TFS expects to start accepting referrals in August 2020.

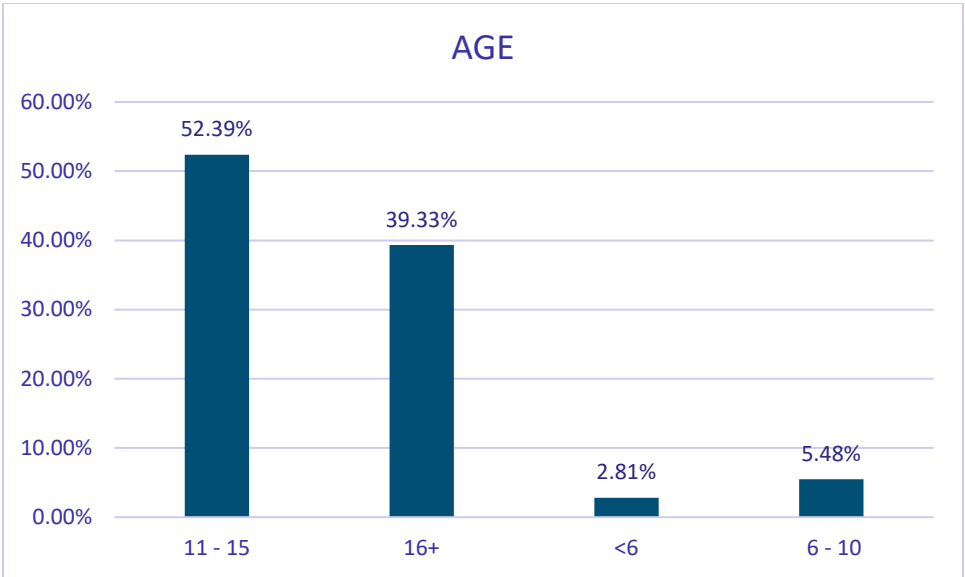
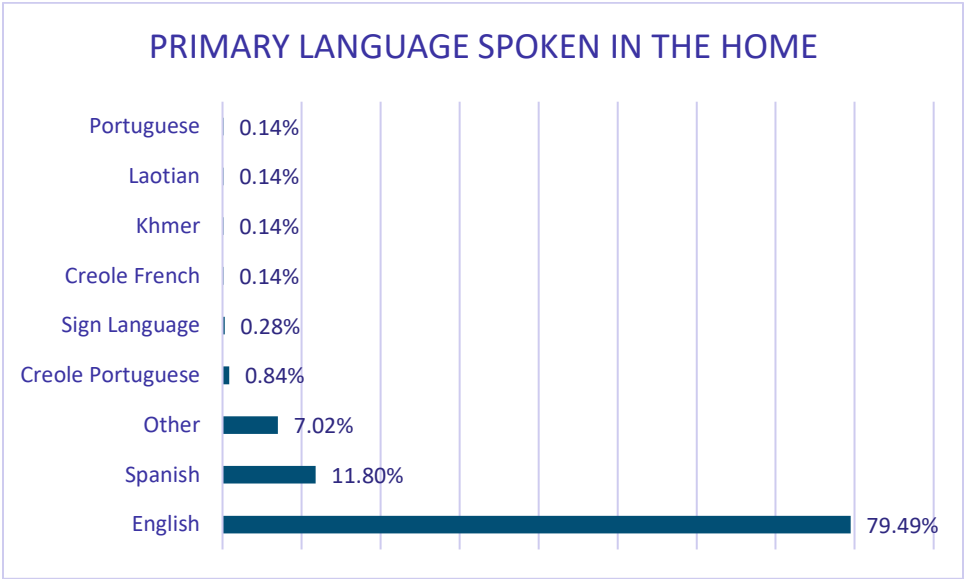
# Program Evaluation

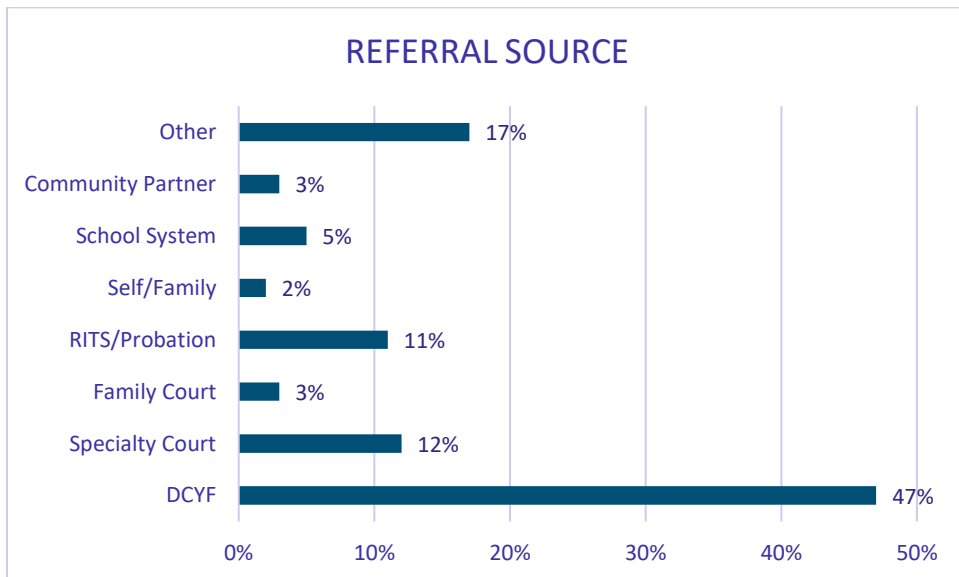
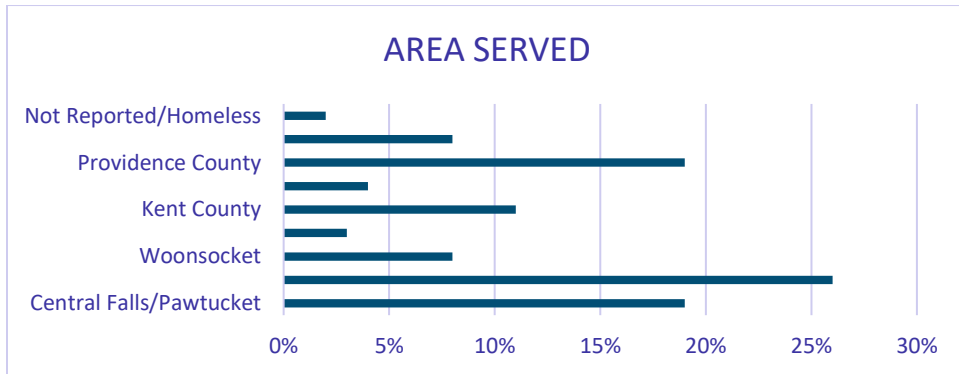
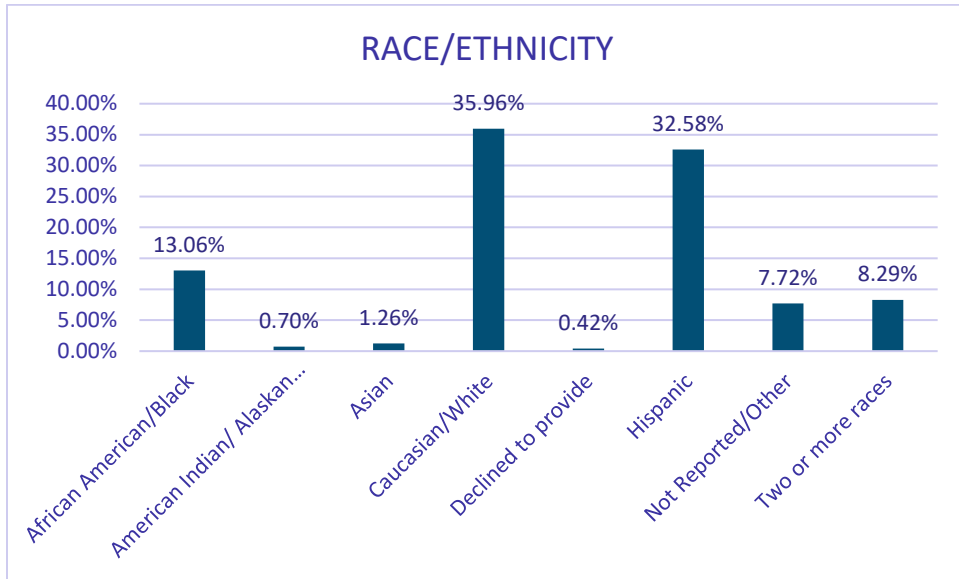
Quick Look at FY 2020	
717 youth received services at TFS	
586 new enrollments during the year	
23% of youth had more than one enrollment during this period	
Average length of stay was 213 days	
6% of families required a translator	
54% of youth lived in of the 4 core cities in RI (Providence, Pawtucket, Central Falls, and Woonsocket)	

## Who Does TFS Serve?



\*The current structure of the Tides database does not include non-binary options for gender identity. Youth who do not identify as either male or female are included in the category of did not report.





Risk Factors Reported at Intake		
Mental Health History	Substance Use	Trauma History
<b>76%</b> of clients had a DSM-V diagnosis prior to intake <b>37%</b> of clients reported suicidal ideation <b>21%</b> had a psychiatric hospitalization within the 6 months prior to intake	<b>29%</b> of clients reported involvement with drugs and/or alcohol <b>38%</b> of clients lived with somebody who abused substances	<b>40%</b> of clients experienced emotional abuse <b>42%</b> of clients experienced verbal abuse <b>24%</b> of clients experienced physical abuse <b>17%</b> of clients experienced sexual abuse <b>25%</b> of clients have run away from home one or more times <b>39%</b> of clients witnessed violence between adults in the home

## Traumatic Events Screening Inventory (TESI)

The TESI assesses a child's experience of a variety of potentially traumatic events including current and previous injuries, hospitalization, domestic violence, community violence, disasters, accidents, physical abuse, and sexual abuse. There are 14 questions on the TESI and each question is equal to 1 point. A client with a score of 5 has experienced 5 different types of traumatic events. The TESI does not identify the frequency of traumatic events; a client who experienced the same type of trauma at different times or settings is scored the same as a client who experienced the event 1 time. TFS administers the TESI as part of a comprehensive intake assessment.

**Average TESI score: 7**

## Risk Assessment Scales-Change Over Time

TFS assess client functioning at intake, throughout the course of treatment and at discharge using the Modified Children's Global Assessment Scale and the Ohio Scales. TFS has observed a trend of youth scoring higher on initial assessments than they do on subsequent assessments throughout the course of treatment and at termination. We speculate this may be due to youth being referred for reunification home from a

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more restrictive setting or due to the therapeutic relationship with TFS not being fully established for several weeks after treatment starts. TFS continually evaluates the timing and appropriateness of assessment tools being utilized in measuring client functioning.

## Modified Children's Global Assessment Scale (MCGAS):

The MCGAS is a numeric scale adapted from the Global Assessment Scale for adults that is used to rate the functioning of youth under the age of 18. TFS uses the MCGAS to assess functioning within the first 30 days of a case opening, throughout the course of treatment and at termination.

MCGAS Benchmark: 65% of clients will show an increase in their MCGAS score from intake to termination.

MCGAS Change Over Time			
Program	Average Baseline MCGAS	Average Termination MCGAS	% with Increase MCGAS Score
Agency Wide	44	46	48%
PFN	43	45	59%
PFN Lite	44	46	53%
OT	43	44	37%
Schools	53	59	56%
FFT	42	50	90%
YTC	46	45	42%
Fee Programs	54	54	25%



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## Ohio Scales

TFS uses the Ohio Youth Problems and Functioning Scales to both assess youth functioning and problem severity (e.g. behavior) at intake and with every treatment plan throughout treatment to assess the effectiveness of services provided over time. The youth's parent or caregiver, the youth, and the agency worker each complete the Ohio Scales at each administration. This parallel process allows assessment of the client's strengths and weaknesses from multiple perspectives. Ohio Risk Scales data informs the direction of treatment and provides a standardized measure of client progress throughout treatment. Below is a summary of the change over time for worker Ohio Scales.

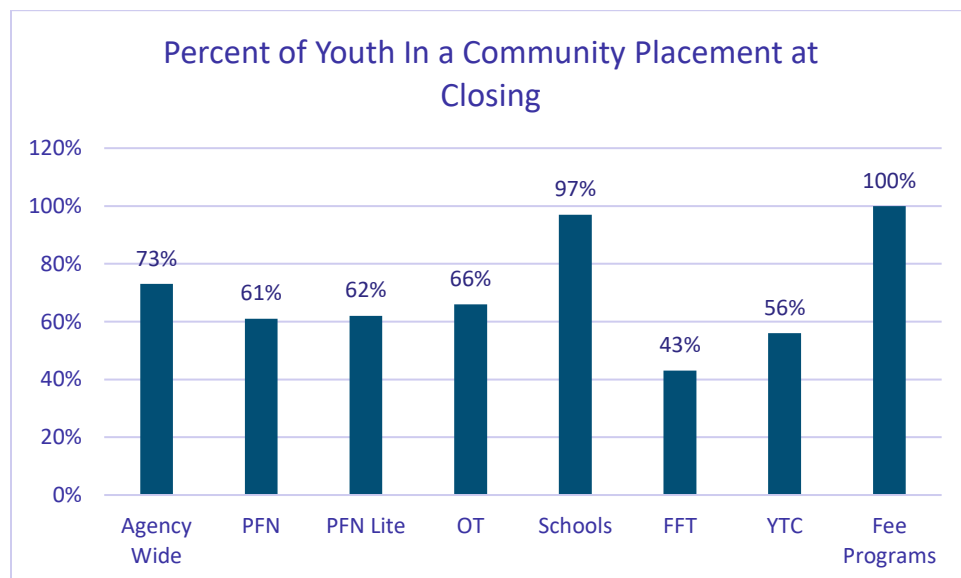
Ohio Scale Benchmarks: 65% of clients will show an increase in functioning and 65% of clients will show a decrease in problem severity.

Ohio Scale Functioning Change Over Time			
Program	Average Baseline Functioning	Average Termination Functioning	% with Increase in Functioning
Agency Wide	45	47	48%
PFN	42	45	52%
PFN Lite	46	47	41%
OT	47	49	37%
Schools	44	49	61%
FFT	52	57	71%
YTC	68	69	33%
Fee Programs	50	47	0%

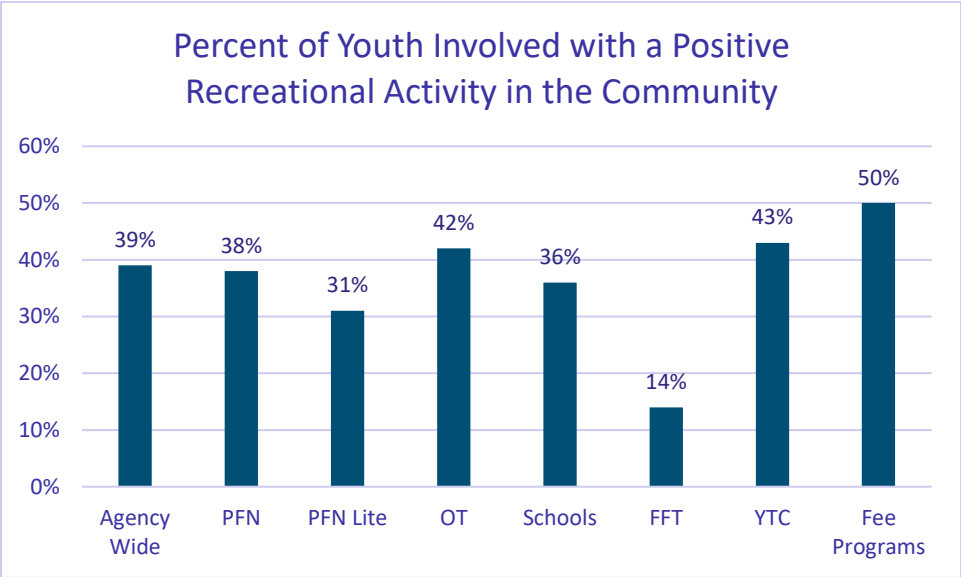
Ohio Scale Problem Severity Change Over Time			
Program	Average Baseline Problem Severity	Average Termination Problem Severity	% with Decrease in Problem Severity
Agency Wide	19	18	48%
PFN	22	20	52%
PFN Lite	19	19	41%
OT	16	16	41%
Schools	20	19	61%
FFT	17	12	71%
YTC	14	16	32%
Fee Programs	22	24	0%

## Outcome Data:

The overarching goal of all TFS services is to maintain youth living at home or other community placements. The performance benchmark for youth residing in a community placement at closing is 70%.



TFS values the importance of relationships in all of the work that we do. Research on trauma demonstrates that relationships between marginalized youth and at least one trusting adult can change the trajectory of a youth’s life. The benchmark for involvement in a prosocial activity at the time of closing is 65%.



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## Program Descriptions

### Outreach and Tracking (OT):

Outreach and Tracking services youth statewide. The program services youth in the community referred by DCYF and by Family Court Diversion workers. Youth are seen in school, at home and in the community multiple times a day, seven days a week, with a 24-hour on-call service.

Outreach and Tracking teams continue to have the split responsibility of providing services to families that come under the Outreach and Tracking contract as well as families receiving PFN services. For the families in Outreach and Tracking services, the tracking team is a stand-alone service. The opposite is true for families receiving PFN services- in these cases the tracking teams collaborate with clinical and behavioral assistant staff to provide a treatment team treatment approach.

The purpose of this program is to preserve families that are involved with the Rhode Island Family Court and the Department of Children, Youth and Families. Often, these youth are at high risk for placement outside of the home. Outreach and Tracking youth need positive interaction with adults on a social, educational, and interpersonal level and success on the neighborhood and community level.

Outreach and Tracking is a family-focused program that provides intensive contact with youth while working with their families to address therapeutic needs. This approach encourages individual and family responsibility, develops educational, job and life skills and empowers the entire family.

### Outreach and Tracking Entry Paths:

- DCYF social worker referrals
- Family Court Diversion Workers
- Family Care Community Partnership

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The target population for the Outreach and Tracking program is youth at risk for disruption in their placement at home. Outreach and Tracking participants are male and female adolescents from a variety of cultural and socioeconomic backgrounds experiencing a wide array of behavioral, social, health/mental health, educational/vocational, and family problems. These youth often exhibit behaviors such as truancy, parent/child relationship issues, and peer/social issues. In many cases, youth can present as impulsive, aggressive and in conflict.

### Staffing

Outreach and Tracking services are provided by teams of bachelor level staff located at several sites throughout the agency. Each site has a supervisor who plans, designs, and implements a comprehensive continuum of community based, culturally competent, support services and supervision to serve the needs of every youth referred. Oversight is provided by a team of independently licensed clinicians as well as a Clinical Director of Outreach and Tracking.

### Core Services

Outreach and Tracking services include early identification, assessment, referral, crisis intervention, individual and family counseling, group counseling and recreation; educational and Court advocacy and case planning.

- Individualized outreach services including family visits, up to three times a day, 6-7 days per week as required by the individual case;
- Individual Service Plan for each youth including risk and needs assessments, behavioral contract, parent/family involvement,
- Outreach efforts to link families to treatment to meet the needs of clientele referred, including : anger management, communication, decision making, conflict management, bullying and educational importance.
- Families in the TOP program have access to an Agency wide on-call system 24 hours a day 7 days a week for emergencies.
- Therapeutic recreational services
- Educational and/or vocational attendance support
- Individual/family service, resource development, and recreational/community service activities

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- Coordinate and encourage enrollment into existing community resources to ensure comprehensive access to education, vocational planning, job placement, health, mental health, substance abuse and other services essential to targeted youth needs as needed per assessment

### Preserving Families Network (PFN):

The Preserving Families Network (PFN) Preserving Families Network is a Tides Family Services network developed to address the treatment needs of youth who had historically been unsuccessful being maintained in their homes. The overall goal of the PFN program is to reunify youth back home from residential placement and prevent high-risk youth from being removed from their homes and communities.

The eligibility criteria for receiving PFN services is that the child and family are involved with the Department of Children, Youth and Families (DCYF), between the ages of 7 and 21, and one of the following is true: client is being discharged from RI Training School for Youth; client is currently placed out of state with aim of returning home; client currently in hospitals needing additional services to be discharged; client is in high end in-state placements with aim of returning home; client is in foster care needing services in order to maintain placement; client/family have significant family court involvement (including Truancy, Drug and Re-Entry Court); client is at imminent risk for out of home placement or client is involved with probation or parole.

The Preserving Families Network combines Outreach and Tracking services and Home Based Clinical Services HBCS for an intensive treatment approach.

### PFN Entry Paths:

Youth referred to the PFN by referral via DCYF Central Referral Unit. Referrals can be made by:

- DCYF
- Juvenile Probation
- Family Court Diversion Workers

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The target population for PFN is male/female youth from a variety of cultural and socioeconomic backgrounds experiencing a wide range of behavioral, social, health/mental health, educational/vocational, and family problems. These youth often are impulsive, aggressive, and in conflict, and they have an intense need for structure, supervision, safety, and predictability. They need intensive in-home family stabilization, positive interaction with adults on a social, educational, and interpersonal level; and need positive success on the educational and community level.

### Staffing

Tides Family Services' caseworkers from both Outreach and Tracking and Home-Based Clinical Services (Clinician and Bachelor level) work together to provide comprehensive services to the youth and their families. Clinical staff plan, design, and implement a comprehensive continuum of community based, culturally competent support services in partnership with Bachelor level staff in a team approach. In many cases, PFN partners with other providers to ensure that services necessary for home preservation are available.

### Core Services

- Individualized outreach supervision and tracking services including 24 hour/6 day per week monitoring with daily direct contact and/or multiple direct contact per week as required by the individual case;
- Individual Service Plan for each youth including risk and needs assessments, behavioral contract, parent/family involvement, individual/family counseling and/or social skills training, educational and vocational skills development and job training and placement services, substance abuse counseling and treatment.
- Psycho-educational groups (non-violence & substance abuse, life skills)
- Access to community resources
- On-call crisis intervention services (24 hours a day, seven days a week)
- Individual Treatment Planning
- Coordination of service delivery/connection to other community resources
- Therapeutic recreational services
- Meals/snacks
- Educational and/or vocational attendance support
- Case management, advocacy, and support services to targeted youth to enhance their involvement with the educational/vocational/job readiness systems;



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- Individual/family service, resource development, and recreational/community service activities
  - Provide access to short term day treatment and/or educational/vocational program (also after school and evening);
  - Coordinate and encourage in-house services to be provided by existing community resources and coordinating mechanism, to ensure comprehensive access to education, vocational planning, job placement, health, mental health, substance abuse and other services essential to targeted youth needs as described by DCYF and Individual Service Plan;

Throughout treatment, at 60 day intervals, an independently licensed clinician assesses the treatment progress and overall service plan for each of the PFN youth through a Utilization Review/Provider Meeting and ongoing crisis and safety planning. Service delivery and target treatment goals are adjusted based on youth progress and needs. During the Provider Meeting, termination and aftercare plans are developed for individual youth as needed. Provider Meetings coincide with each Treatment Update in order to establish that all providers, DCYF, and the family are in agreement with the direction of treatment.

#### Preserving Families Network Lite (PFN Lite):

Preserving Families Network Lite is a Tides Family Services network developed to address the treatment needs of youth who had historically been unsuccessful being maintained in their homes. The overall goal of the PFN Lite program is to reunify youth back home from residential placement and prevent high-risk youth from being removed from their homes and communities.

The eligibility criteria for receiving PFN Lite services is that the child and family are involved with the Department of Children, Youth and Families (DCYF), between the ages of 7 and 21, and one of the following is true: client is being discharged from RI Training School for Youth; client is currently placed out of state with aim of returning home; client currently in hospitals needing additional services to be discharged; client is in high end in-state placements with aim of returning home; client is in foster care needing services in order to maintain placement; client/family have significant family

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court involvement (including Truancy, Drug and Re-Entry Court); client is at imminent risk for out of home placement or client is involved with probation or parole.

The Preserving Families Network combines Outreach and Tracking services and Home Based Services HBCS for an intensive treatment approach.

#### PFN Lite Entry Paths:

Youth are referred to PFN Lite by referral via DCYF Central Referral Unit. Referrals can be made by:

- DCYF
- Juvenile Probation
- Family Court Diversion Workers

The target population for PFN Lite is male/female youth from a variety of cultural and socioeconomic backgrounds experiencing a wide range of behavioral, social, health/mental health, educational/vocational, and family problems. These youth often are impulsive, aggressive, and in conflict, and they have an intense need for structure, supervision, safety, and predictability. They need intensive in-home family stabilization, positive interaction with adults on a social, educational, and interpersonal level; and need positive success on the educational and community level.

#### Staffing

Tides Family Services' caseworkers from both Outreach and Tracking and Home-Based Services (Bachelor level caseworkers under the supervision of a clinician) work together to provide comprehensive services to the youth and their families. Staff plan, design, and implement a comprehensive continuum of community based, culturally competent support services in a team approach. In many cases, PFN Lite partners with other providers to ensure that services necessary for home preservation are available.

#### Core Services

- Individualized outreach supervision and tracking services including 24 hour/6 day per week monitoring with daily direct contact and/or multiple direct contact per week as required by the individual case;

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- Individual Service Plan for each youth including risk and needs assessments, behavioral contract, parent/family involvement, individual/family counseling and/or social skills training, educational and vocational skills development and job training and placement services, substance abuse counseling and treatment.
  - Psycho-educational groups (non-violence & substance abuse, life skills)
  - Access to community resources
  - On-call crisis intervention services (24 hours a day, seven days a week)
  - Individual Treatment Planning
  - Coordination of service delivery/connection to other community resources
  - Therapeutic recreational services
  - Meals/snacks
  - Educational and/or vocational attendance support
  - Case management, advocacy, and support services to targeted youth to enhance their involvement with the educational/vocational/job readiness systems;
  - Individual/family service, resource development, and recreational/community service activities
  - Provide access to short term day treatment and/or educational/vocational program (also after school and evening);
  - Coordinate and encourage in-house services to be provided by existing community resources and coordinating mechanism, to ensure comprehensive access to education, vocational planning, job placement, health, mental health, substance abuse and other services essential to targeted youth needs as described by DCYF and Individual Service Plan;

Throughout treatment, at 90-day intervals, an independently licensed clinician assesses the treatment progress and overall service plan for each of the PFN youth through a Utilization Review/Provider Meeting and ongoing crisis and safety planning. Service delivery and target treatment goals are adjusted based on youth progress and needs. During the Provider Meeting, termination and aftercare plans are developed for individual youth as needed. Provider Meetings coincide with each Treatment Update in order to establish that all providers, DCYF, and the family are in agreement with the direction of treatment.

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## Youth Transition Center

The Youth Transition Center (YTC) is a collaborative, community re-entry and maintenance program between Tides Family Services, Inc. (TFS) and the State of Rhode Island's DCYF Juvenile Probation and Parole unit. The primary purpose of the YTC is to provide court involved youth with the intensive supervision services they need to function in and remain in the community. YTC youth have an intense need for structure, supervision, safety and predictability. YTC youth need positive interaction with adults on a social, educational, and interpersonal level and success on the neighborhood/community level.

The YTC is a family-focused program that provides intensive contact with youth and their families to provide individualized treatment. This approach encourages individual and family responsibility, develops educational, job and life skills and empowers the entire family. The YTC serves youth on probation between the ages of 13-19 who are either returning to their community in Providence/Eastern Cranston or Pawtucket/Central Falls, or other areas of Rhode Island. YTC youth must be deemed appropriate by the probation administration following detainment at the Rhode Island Training School (RITS) or be court ordered to participate as a deterrent to RITS entry.

YTC Entry Paths: Youth ordered into the YTC by RITS or Probation referral.

The target population for the YTC program is high-risk youth on probation. YTC participants are male and female adolescents from a variety of cultural and socioeconomic backgrounds experiencing a wide array of behavioral, social, health/mental health, educational/vocational, and family problems. These youth are often impulsive, aggressive and in conflict. YTC youth are at-risk for probation violation, continuing offending behaviors, sentence/return to the RITS, and/or engaging in unsafe behaviors. Staffing TFS staff and Juvenile Probation Officers work together to provide comprehensive services to the YTC youth and to their families. Each site has a team of Bachelors level staff led by a site supervisor who plans, designs, and implements a comprehensive continuum of community based, culturally competent, support services and supervision to serve the goal of seventy-two (72)

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targeted youth annually. Each site partners with the Juvenile Probation Officers assigned to that geographic location. The sites share a program director.

Core Services:

- Graduated level of supervision (i.e. phone check ins, in person check-ins at the YTC, mandatory attendance at the YTC, electronic monitoring, home confinement, tracking, curfew monitoring)
- Individualized outreach supervision and tracking services including 24 hour/6 day per week monitoring with daily direct contact and/or multiple direct contact per week as required by the individual case;
- Individual Service Plan for each youth including risk and needs assessments, behavioral contract, parent/family involvement, individual/family counseling and/or social skills training, educational and vocational skills development and job training and placement services, substance abuse counseling and treatment.
- Psycho-educational groups (non-violence & substance abuse, life skills)
- Access to community resources
- On-call crisis intervention services (24 hours a day, seven days a week)
- Individual Treatment Planning
- Coordination of service delivery/connection to other community resources
- Therapeutic recreational services
- Restorative Justice Program (youth have opportunity to earn stipends for community service projects as means of paying restitution)
- Educational and/or vocational attendance support
- Case management, advocacy, and support services to targeted youth to enhance their involvement with the educational/vocational/job readiness systems;
- Individual/family service, resource development, and recreational/community service activities
- Provide access to short term day treatment and/or educational/vocational program (also after school and evening);
- Coordinate and encourage in-house services to be provided by existing community resources and coordinating mechanism, to ensure comprehensive access to education, vocational planning, job placement, health, mental health,

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substance abuse and other services essential to targeted youth needs as described by the Conditions of Probation and Individual Service Plan

### Functional Family Therapy (FFT)

“Functional Family Therapy was founded in the 1970s by Dr. James F. Alexander. FFT LLC is the model's training and dissemination organization. The FFT model has received international recognition for its outcomes in helping troubled youth and their families to overcome delinquency, substance abuse, and violence. It is a short-term treatment strategy that is built on a foundation of respect of individuals, families and cultures, but that includes powerful treatment strategies that pave the way for motivating individuals and families to become more adaptive and successful in their own lives. In doing so, FFT helps to save families while at the same time preventing crime and victimization in communities.” (<http://www.fftllc.com/>)

- FFT is an evidence-based, strengths-based model built on the foundation of acceptance and respect
- FFT works with youth ages 10/11-18 and their caregiver to address the youth’s mental health or behavioral needs
- Treatment requires the youth and at least one caregiver present for each session
- FFT utilizes behavioral and cognitive interventions to enhance family interactions to better understand how the presenting issue functions within their family system
- FFT increases problem solving skills and parenting skills
- Average duration of treatment: 3-5 months

### FFT Entry Paths

Target population are:

- Delinquent or antisocial youth
- Age range of 10-18
- Youth is low-high risk of placement
- Youth is involved with DCYF/Probation
- Youth is adjudicated

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- Physical aggression at home, school or in the community
  - Verbal aggression, verbal threats to harm others
  - Substance use
  - Youth being reunified in the home
  - Youth who has an identified primary caregiver
  - Symptoms of mental health or emotional disturbance

### Staffing

Team consists of 2 full time FFT Therapists and 1 full time FFT Supervisor and the average therapist caseload: 10-12 families; Average supervisor caseload: 5 families

### Core Services

FFT consists of five major components: engagement, motivation, relational assessment, behavior change and generalization. Each of these components has its own goals, focus and intervention strategies and techniques.

### The Tides School

The Tides School offers a flexible, student-centered school environment, inviting families to parent-teacher nights, reaching out with positive phone calls and regular home visits. The Tides School strives to be a place of hope, encouragement, and success as well as a valuable part of the community where families feel the school is making their entire family stronger. This level of commitment nurtures strong, lasting bonds with students, families, and the communities in which they live. As a result, the Tides School has developed a culturally competent, nurturing program where education is more than just academics: education encompasses social/emotional development as well so that students from all backgrounds learn the skills necessary to maintain healthy relationships, to establish appropriate boundaries and to resolve conflicts with family, peers, and the community.

Tides School Entry Paths:

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Students are referred by their local LEA.

#### Staffing:

The educational team is comprised of educators, special educators, behavioral support staff, and licensed clinical social workers.

#### Core Services:

- The Tides School is certified by the Rhode Island Department of Education.
- Provides programming from grades 5-12.
- Maintains a client-centered, strengths based, therapeutic and academic program for all students.
- Private school placements
- Full Culinary Arts Program
- Introductory Construction Skills Program
- No Additional Cost, Six-Week Summer Tutorial Program
- Individualized academic support
- Clinically based therapeutic services
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#### Fee Programs

Fee programs combine our insurance-based programming (outpatient and enhanced outpatient). These home-based clinical programs provide services to youth and young adults starting at age 6. Services are funded through health insurance.

#### Entry Paths:

Referrals can be made by caregivers, community stakeholders, courts, and other mental health or social service agencies.

#### Staffing:

Teams consistent of clinical staff and behavioral assistant support staff. All treatment is overseen by an independently licensed clinical supervisor.



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Core Services:

- Short term intensive services
- Individual and Family Therapy
- Coordination of Care with Primary Care Providers
- Coordination of Care with Psychiatrists
- Crisis Intervention/Stabilization
- Flexible Scheduling