
HOME-BASED SERVICES FOR HIGH-RISK YOUTH

**Assessment, Wraparound Planning,
and Service Delivery**

By
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*To my family who carries me through all of life's challenges and rewards:
My husband, Nathan, who is my greatest love and support.
My children, Logan, Gabrielle, Heather, Josie, and Lanie, who have
shown me the true meaning of unconditional love.*

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I would also like to recognize the positive support and guidance that Joseph D. Stephens has given me. As the executive director of Community Mental Health Center in Lawrenceburg, Indiana, for the past twenty-two years, I have seen firsthand the importance of a true leader who has the gift of a vision that reflects an understanding of what recovery truly means. His constant support and belief in the value of home- and community-based services has been to the good fortune of the families of southeastern Indiana.

I also want to thank Dr. Joseph Cresci for his mentorship in developing an appreciation for the complexities related to serving youth and families. The constant reminder of the power of the attachment relationship has led me to a strong appreciation of the value of a relationship-based practitioner.

Foreword

It is a distinct pleasure for me to write the foreword for this important book. The child-serving system has been evolving consistently over the past several decades beginning with the introduction of the system of care philosophy. And though principles of this approach have stood the test of time, we now know a great deal about the process of effective implementation. This book is a practical treatise on how to implement and manage high-quality, effective home- and community-based services for children, youth, and families. Such a broad-based but practice-focused guide can be enormously helpful to agency and program directors, planners, administrators, and clinicians.

Program managers are always faced with the challenge of creating uniform individuality. Programs have rules and regulations that emphasize uniformity but that make the program less sensitive to individual differences. In this book, designing programs and interventions based on the needs and strengths of the individual youth and family is emphasized while respecting the need for program thinking. This is a valuable contribution to the evolution of our system to actually achieve the vision of youth- and family-driven systems that do not devalue the simultaneous contributions of family and youth and professionals to an effective service system.

By organizing the book developmentally, Stacey Cornett makes the content more accessible to people whose work focuses on a specific stage without losing the reality that planning for developmental transitions can be as important as addressing needs within any given period of development. While infants develop into toddlers, toddlers to children, children to youth, and youth to adults, the years from birth to age 18 remain a unique period of life. The chapter on working with infants and toddlers particularly builds from Stacey's expertise. However, the school-age and transition-to-adult chapters also provide valuable concepts and strategies for program and system planners and managers. Further, the book's focus on caregivers as a critical component of the child- and family-serving system is something that is often missing in books on child and youth mental health.

The writing style is testimony to the author's personality. For those who do not know her, Stacey Cornett is a smart, experienced, passionate professional who is also down to earth and quite practical. She is a no-nonsense clinician and administrator who has maintained both her integrity and sense of humor. These traits shine through the pages of this text making it a very accessible reading experience. Jargon and the sometimes overproduced sentence structures of more academic texts simply are not a part of this experience. Valuable content presented in a straightforward and clear style draw from Stacey's Midwestern roots. I believe you will find this text a very informative read. I also believe it will find a place on your bookshelf where you will periodically pull it back down to reread when faced with questions about designing, implementing, and managing home- and community-based services for children and youth. I certainly applaud Stacey on this excellent work. I believe that you will too.

—John S. Lyons, Ph.D.
Endowed Chair of Child &
Youth Mental Health
University of Ottawa
Children's Hospital of Eastern Ontario
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Introduction

I still remember the first family home that I visited. I remember seeing the creek that separated the road and the house on top of the hill. I had to be in the right place, as there were no other houses for miles. I sat in the car for a few moments collecting my thoughts about how I would help this family to “get along and manage behavior,” as my supervisor had instructed me to do. As I found my way across the creek, I had no idea the impact that this experience would have on me. I have thought about this family many times over the years. I remember the overwhelming feelings this family evoked in me—the worry, the joy, and the sense of wonder about how to best support family members in their journey. Little did I know that they were there to show me. As I left the home nearly two years later, with a little girl walking alongside me, the power of her words stunned me as I drove away: “Thank you for helping my Momma like me.”

As I drove down the road, I came to the conclusion that I knew two things to be true about the time I spent with this family. First, upon meeting the family members, I had no idea what I could possibly do to help a situation that seemed overwhelming and untenable. The only thing I could do was to keep showing up. Surprisingly, that strategy was later referenced in a comment by the mother: “I really didn’t think you’d keep showing back up.” Second, the true change came from the family’s own bravery in facing a multitude of challenges. The only thing I had to offer this family was myself. The relationship that we developed trumped any magical “clinical strategy” or knowledge that I could have possibly pulled out of my hat. If there was an “expert hat” that I was wearing, I certainly lost it the moment my hair got tangled in the fly strip that hung in the doorway. I am certain that at that moment, the second time I came, the mother decided that she would give me a try. We made eye contact and laughed till our sides ached. No expert “diagnosis” or lecture on child development could have replaced the value of that moment.

Those of us who are given the privilege of meeting with families in their own homes must never forget the awesome opportunities for growth that this offers both us and the families we serve. If there is a third idea that I am certain about, it is the fact that this family, as well as many others, would simply not be empowered in the same way within an office setting. We do not do home visits simply because it is easier for families not to have to drive to the office. We do them because we know the power of this type of intervention. It certainly is not easy work. It takes a special mindset that respects families for who they are and the possibilities for change rather than focusing on the deficits. It takes special radar to hone in on unique strengths and capabilities. It means being a guide that offers hope. My hope is that this book will serve as a guide to the many home visitors that recognize the importance of these principles or want to consider a new way of thinking. And in learning from the words of the mother, who taught me so much, it is important to remember the value in “just showing back up.”

Around the country, more and more programs are being developed to address the needs of youth with serious emotional challenges. The emphasis on providing home- and community-based services is apparent. We are in an age when the field of child mental health is being recognized as a critical need in addressing the needs of youth and families in an effort to invest in the future. The field has evolved in a manner that represents the principles and value base that have many ties and parallels to those

established in the fields of early intervention as well as adult mental health services. The emphasis on strength-based services is one such example of this trend. The book is divided into four parts. Part 1, "Therapeutic Services for Youth With Serious Emotional Challenges and Their Families," begins with an overview of the origin and development of home- and community-based services. This review demonstrates the rich history of this intervention and the many areas that have been preserved, as well as modified, to take us to our present-day practices. An understanding of the way in which practice evolved has great merit. This part also offers the reader a common understanding of what the term "serious emotional disturbance" refers to in relation to children and how these issues are often manifested, often changing significantly as a child develops. It is critical to have a strong understanding of who we are trying to help. Last, this part provides the very important understanding of the theoretical underpinnings of empowerment, wraparound principles, and a recovery/resiliency orientation. If the field is going to work as a whole to improve the services to this underserved population, a common value base is crucial.

Part 2, "Building and Supporting the Workforce," offers essential and practical information regarding hiring, developing, and maintaining staff to support our youth. It has been my experience that the staffs who work best within these programs are unique and exhibit characteristics that are very important. This work can be challenging, and the staff "fit" in a program must be strongly evaluated. Unfortunately, our universities are not yet as effective as they could be in arming potential employees with the skill set and philosophical base that is needed to effectively meet the needs of families. Many newly graduated staff members have strong feelings about being "the expert," or they believe they are "wasting their education" on the services that are described in this book. Sadly, this is a huge misconception that supervisors must be aware of, and they must counter this by developing effective training programs. Strong clinical, administrative, and reflective supervision is required if we are to train staff members in an alternate way of thinking. Supervisors will benefit greatly from the information presented in Chapter 6, which offers guidance on the various types of models that can be utilized in a program. The important element to consider in this context is the strong need to understand the needs of the families being served, the cultural of the community, and the staffing issues/considerations in making this important decision.

Part 3, "Assessment of Youth With Serious Emotional Challenges and the Families Who Support Them," emphasizes the importance of a comprehensive, strength-based, family-driven, youth-guided, and culturally competent assessment. As there are distinct differences in the assessment needs of the youth that may be served in a particular program, this part devotes separate chapters to young children, school-age youth, and transition-age youth. The power of a good assessment cannot be overestimated. It is this information that should inform the service planning process to ensure that the services provided are related to client needs and preferences.

Finally, Part 4, "Service Planning and Implementation of Therapeutic Interventions," provides a plethora of information related to the concrete day-to-day tasks that must be performed by a practitioner in a home- and community-based program. It begins with an overview of important components to include in the service planning process. Many practitioners are accustomed to designing a plan in isolation from the family and then filing it away in a chart. The approach presented here very much suggests the contrary and fully supports the thinking that a plan should be a "living, breathing document," as a very smart woman once told me. The designing of nontraditional and

specific interventions is also underscored in this part. Practitioners often feel frustrated with a sense of not knowing what to do once they arrive in a home. Many practitioners have told me that families often present with many crises, and it is overwhelming to develop a plan and stay on track. This is a common issue and can best be assisted by engaging the family members in a plan that makes sense to them, having the plan serve as a guide, and developing excellent crisis plans. Crisis planning along with transition planning are critical tasks in this process. This area is often overlooked; it is my hope that the book will support ways to prioritize these tasks. Sample forms and facilitation processes are offered. The wraparound process has been demonstrated, both in the research as well as in my personal experience, to be a valuable service to families of youth with serious mental health challenges. It often is the *only* thing that works for families. When one has the good fortune to work where home- and community-based services are a part of a wraparound process, it is critical to clearly understand how the principles that should be followed are manifested in the work that must be done. Commitment to this process has been my passion. I truly believe that families must experience services in this manner if the benefits are to be achieved. This is by no means an easy process, but it is definitely one that can make a difference. As practitioners continually challenge themselves to develop their skills and understanding in this area, they must embrace the concept of life-long learning. Perhaps, the most important way in which this can happen is the alliance with our most precious partners, the families. This book, I hope, fully supports the ways in which that can occur.

—Stacey M. Cornett

About the Author

Stacey M. Cornett, MSW, LCSW, IMH-E®(IV), is the director of Intensive Youth Services/Co-Project Director/Clinical Director of Systems of Care at the Community Mental Health Center in Lawrenceburg, Indiana. In this position, Ms. Cornett is responsible for the development and administration of intensive home- and community-based services and a system of care initiative for youth ages 0-22. She has served as a consultant to the state of Indiana in the development of the Indiana Comprehensive Child and Adolescent Needs and Strengths Assessment, birth to 5 version (CANS). In addition, she worked with the Allegheny County, Pennsylvania, early childhood system of care initiative to develop an early childhood version of the CANS. Ms. Cornett serves as the co-chair of the Indiana Association of Infant and Toddler Mental Health and has a governor appointment to the Indiana Mental Health Commission. She serves as a consultant to various early childhood and mental health programs, and frequently provides trainings around the country. She received her master's degree in social work from Saint Louis University in 1988 and completed a clinical traineeship with Michael Trout in infant parent psychotherapy in 1999.