

# 2016-2017 Annual Report

## *A Message from Our Executive Director — Karen Y. Richmond*



For nearly 160 years, the Children's Home has continued to evolve to meet the ever-changing needs of the individuals and communities we serve. Once again, we find ourselves in the midst of seismic change involving every facet of our Agency. The transition to Medicaid Managed Care requires cost-effective, outcome-based delivery of services. In response, our restructured Care Coordination of Northern New York, focuses on helping individuals remain healthy, functioning members of society. To provide a holistic approach to mental and physical wellness, the Community Clinic of Jefferson County is in the process of integrating primary care to its scope of services. New York State's *Raise the Age* initiative extends Residential Treatment services to older youth aged 16 and 17, currently incarcerated in adult correctional facilities, and lacking the age-appropriate services they need for a second chance.

Not only do these initiatives demand sweeping change to established care practices, they also require renovation and upgrades to our facilities. Our efforts have been concentrated on not only strengthening our services, but also on ensuring their value with quantifiable outcomes. We have also remained a strong, persistent voice in national and statewide forums, ensuring the needs of North Country residents are brought forward and acted upon.

All of this requires a tremendous team effort including the support of our dynamic and committed Board of Directors, staff, and community partners. We recently welcomed new Board members, bringing a fresh approach and unique perspective, including E. Hartley Bonisteel-Schweitzer, Community Planner, Development Authority of the North Country (DANC); Mark Lavarney, President, Watertown Savings Bank; and Jennifer Loonan, Local Advertising Sales Manager, Spectrum Reach. We are thrilled to engage their opinions and insights.

We have been making great strides through the careful blending of evidenced-based data, proven expertise, and fiscally-sound practices. Remaining paramount is our commitment to CHJC's mission of *"Creating opportunities to enhance lives, one relationship at a time."* I am amazed, humbled, and forever grateful for the huge level of support extended by the caring and committed members of our community. Always willing to go the extra mile, you allow us to continue to develop innovative new programming and better serve our clients. Each individual deserves quality care delivered with respect and compassion. Each child deserves a safe, loving and permanent environment in which to grow and thrive. Working together, I am confident we will not only achieve this vision but surpass it, all the while embracing CHJC's historic legacy and fully prepared to face tomorrow's opportunities.

## **BOARD OF DIRECTORS**

### **BOARD OFFICERS:**

Kate Couch - President, Rob Gefell - Vice President, Michael J. Hawthorne - Treasurer, Mark Waterbury - Secretary

### **BOARD MEMBERS:**

Kenneth Baker, David Conklin, E. Hartley Bonisteel-Schweitzer, Michael J. Harris, Joseph LaClair, Mark Lavarney, Jennifer Loonan, Linda Petrie, Mark Purcell, Eugene Renzi, Patti Signor, Dr. David VanEenenaam

### **STAFF MANAGEMENT TEAM:**

Jennifer Barlow—Integrated Services; Brooke Bazinet— Special Projects; Joseph Lubashevsky—Clinical Services Manager; Michelle Monnat— Systems Administration; Dave Loomis— Buildings and Grounds; Barbara Peck— Administration Services; Victoria Peck- Foster Care; R. Michael Woznicki, M.D.—Medical Director

## **AGENCY LOCATIONS**

### **Main Campus—Administration, Fostering Futures, Visitation Center and Residential Treatment:**

1704 State Street, Watertown; Phone (315)788-7430

### **Community Clinic of Jefferson County, Care Coordination (Adult), and Boys & Girls Club SoZo Teen Center:**

Marcy Building, 167 Polk Street, Watertown; Phone (315)782-7445

**Care Coordination of Northern New York (Child):** 120 Washington Street, Watertown; (315)788-7430

**Fostering Futures of St. Lawrence County:** 80 State Highway 310, Canton; (315)229-3480

**AGENCY MAILING ADDRESS:** PO Box 6550, Watertown, New York 13601

**WEBSITE:** [www.nnychildrenshome.com](http://www.nnychildrenshome.com)

***Our Mission: "Creating opportunities to enhance lives, one relationship at a time."***

## 2017 Agency Highlights

- More than \$17,000.00 was donated to the 2016 Holiday Fund Appeal with more than 40 groups and individuals donating toys, gift cards, books, clothing and pajamas
- Boys & Girls Club SoZo Teen Center Program received grant funding from Stewart's Holiday Match, the Taco Bell Foundation, and the Jefferson County Youth Bureau



- CHJC held a Ribbon Cutting and Dedication Ceremony to celebrate the completion of the new Campus Playground and the new Campus Gazebo, dedicated in honor of CHJC Ladies' Auxiliary 75th Anniversary

- The 12th Annual Children's Home of Jefferson County Golf Tournament raised critical funds for Community Based Services

- New York Air Brake Engineer Volunteers coached CHJC youth in the construction of a trebuchet for the annual Clayton Rotary "Punkin Chunkin" competition. The team took first place!



- CHJC added the Community School Liaison Program (CSLP) to our repertoire of services, assisting School Districts with a comprehensive range of community and school-based services for Jefferson County families and youth experiencing a mental health crisis.



### *A Second Chance for Family Love and Permanency*

"If anyone would have told us three years ago we would welcome five little ones into our lives, our home, and our hearts, and they would be staying forever, we would have told them they were crazy. When we were approached about accepting a sibling group of five, we had recently raised our biological children with success. One was in college and the other graduating that year from high school. We were told the children needed a home where they could all be placed together, and Foster Parents willing to work toward reuniting them with their birth parent. As a family, we understood the importance of reunification and gladly accepted the challenge. We then met two of the cutest boys, as they first came into our lives and home. The boys had been placed in a different Foster Home than their sisters after previous placements could not maintain all five children together. After taking a couple weeks to get them settled in, we then met their amazing sisters. Life went from having teens in our home and an occasional younger child, to a house full of little human beings. We were reintroduced to being up several times a night with an infant, potty training, and crayons on the wall. Thank goodness for nap time, washing machines, and Mr. Clean Magic Erasers®!

Over the course of 15 months, we worked closely with the children's birth mother by facilitating nightly conversations and including her in all doctors' appointments, parent teacher conferences, and events. When it wasn't possible for the little ones to be reunited with their mother, we were asked if we were willing to be their "forever family." How could we possibly say no? They had completely taken over our hearts. We said yes! Knowing someday the five children were going to be a permanent part of our family triggered both happy and sad feelings. Even though our hearts were filled, we were also filled with sorrow for the mother who was not going to be able to watch her babies grow. She was not going to be able to experience all the milestones/special events that come along with raising children. We couldn't help but think that while we were laughing because of tickles and silly jokes, she would be listening to a quiet house and looking at pictures. That is the hardest part of our story. We think of her often, and how she brought these wonderful children into the world.

They have grown, advanced, and are thriving; all the while, healing from things they shouldn't have had to go through. All of our little ones are happy their adoptions are complete. They now have a family to call their own. They find comfort in knowing they do not need to worry about where they will be tomorrow, and what a new place might be like. We are proud of them. Every single one of them comes to us for a hug and kiss each night, followed by an "I love you." We cannot think of a day without them and are blessed for that day we said yes."

- Mrs. Kimberly Doerr, Saint Lawrence County Adoptive Mother



**FOSTERING FUTURES**  
An Affiliate of the Children's Home of Jefferson County

## Responding to Crisis With a Caring, Trauma-Informed Approach

To “Create Opportunities to Enhance Lives, One Relationship at a Time,” CHJC reaches various community members through the Crisis Response Hotline and Therapeutic Crisis Respite Program. Our well trained staff respond to phone calls received. The types of crisis each individual encounters vary greatly. Some of our clients are seen at our Community Clinic, some at their homes, and others referred to our Therapeutic Crisis Respite Program. Following are just a few examples of how our Crisis Response services impacted the community:

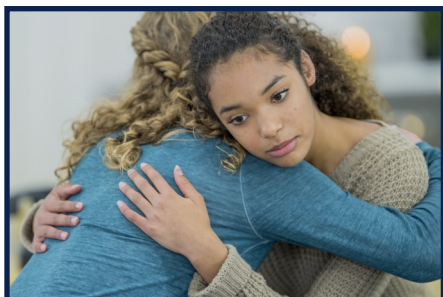


*A Community Clinic of Jefferson County (CCJC) Crisis Worker met with a girl and her parents. The girl's Primary Care Physician connected her to the Crisis Hotline after the girl presented a note stating she "cries daily" and feels "worthless." The girl also said she had trouble sleeping and reoccurring suicidal thoughts. For more than a year, she had also been suffering from migraines. The CCJC Crisis Worker met with the girl, who agreed to verbal and medication management therapy. Diagnosed with Major Depression Disorder, the girl was given the 24-hour text line for Crisis Services, and referred to CCJC for long term services. The CCJC worker was able to respond to requests for treatment within 24 hours, and provide a warm hand-off resulting in the girl's mood improving. When the family was later faced with a crisis involving the girl's older brother, they did not hesitate to contact the Crisis Worker.*

A boy and his foster mother were having difficulties at home. CCJC's Waiver Services Provider (WSP) took the boy to the local library where the two of them sat on beanbag chairs and used role-playing to help the understand how the issue at home could have been handled differently. Playing the role of the boy, she made him laugh by imitating how he looked slamming things around. The WSP coached the boy on the reality of being the child, and how sometimes fair does not seem fair. She encouraged him to be respectful when in situations with “known and safe” adults, and shared some example of what that looks like. The boy was open to trying something new, and agreed to keep that tool in his mind the next time he got angry with his foster mother. The boy was able to understand he was not respectful and said he would apologize. The WSP praised the boy for being able to see another person's perspective. Arriving home, the boy walked over to his foster mother and said he was sorry. She offered him a hug.



*A parent called saying his son was making suicidal statements. The father explained his son had just been caught stealing a phone from church and was afraid of the consequences. The father asked if a staff would be able to come out to the home and speak with his son. Staff was sent to the home. After speaking with the father and son about the seriousness of his suicidal statements, the staff, boy and father believed it would be best for the boy to come back to TCRP for the evening. Staff returned to Campus with the boy and the situation was revisited in the morning.*



A hotline call was made by a parent whose daughter had locked herself in her room. The girl had explained to her father she was getting cyber-bullied by peers from school and not feeling safe. The father asked if a staff could come out to the home and discuss the situation with his daughter. A staff was sent out to the home, and after speaking with the girl, discovered she had been self-harming again, reported hearing voices, and did not feel her current medication was working properly. Staff discussed bringing the girl to the Therapeutic Crisis Respite Program for a few days for a medication management appointment, and reviewing her coping skills. All agreed to the plan. The girl came into TCRP, came back to baseline, and said she felt safe.

## 2017 Programs and Finances

- ◆ **Aftercare:** Designed to assist youth and their families through the transition from Residential treatment or Foster Care.
- ◆ **Article 10:** Administered in partnership with Jefferson County's Department of Social Services (DSS), this program assists families with children at imminent risk of out-of-home placement.
- ◆ **Boys & Girls Club Beyond the Bell:** A fun and exciting Afterschool program meeting the needs and interests of Potsdam A. A. Kingston Middle School students.
- ◆ **Boys and Girls Club Indian River After School/AYPYN:** A fun and exciting after-school program for Indian River Middle School students, contracted through the United States Army Youth Programs In Your Neighborhood (AYPYN).
- ◆ **Boys and Girls Club SoZo Teen Center:** A safe, well supervised drop-in center for teens aged 13 through 19, where they can participate in life skills training, recreation, and receive homework assistance and tutoring. Nutritious snacks and a hot dinner are served daily.
- ◆ **Bridges to Health (B2H):** Designed to provide community-based health care services and supports to children in Foster Care.
- ◆ **Care Coordination of Northern New York:** Provides critical services to seriously and emotionally-disturbed children and adults living within the community.
- ◆ **Children's Home Intensive Preventative Services (CHIPS):** In partnership with Jefferson County Community Services, this program is designed to prevent out-of-home placement for youth. By assisting clients and families achieve their health and safety needs, as well as family and youth service needs, it also reduces the risk of child abuse and neglect.
- ◆ **Co-Location Program:** In partnership with the Jefferson County Department of Social Services, this program assists Child Protective Services (CPS) by co-locating a behavioral health specialist within the CPS offices. The Specialist provides brief counseling, clinical/diagnostic referrals and recommendations for families, as well as staff education.
- ◆ **Community Clinic of Jefferson County:** An Article 31 behavioral and mental health outpatient clinic treating a majority of Medicaid patients including adults and children.
- ◆ **Community School Liaison:** Assists School Districts by providing a comprehensive range of community and school based services to Jefferson County families and youth experiencing a mental health crisis.
- ◆ **Crisis Response:** In partnership with Jefferson County Community Services, this 24-hour crisis hotline accessible to anyone in Jefferson County, provides immediate crisis triage to individuals experiencing a mental health crisis. To help connect individuals to appropriate services, follow-up care is also provided.
- ◆ **Forensics:** Provides mental health and Care Coordination services to incarcerated individuals. To assist in reducing recidivism, transition planning helps released individuals connect to community supports.
- ◆ **Fostering Futures:** Provides both long and short-term Foster Care services for children unable to be cared for by their birth families or legal guardians.
- ◆ **Non-Secure Detention:** A court ordered temporary, short-term program for youth between the ages of 10 and 17, who cannot be safely maintained in their community while they await Family Court action, placement into Foster Care, or entrance into a treatment facility.
- ◆ **Persons In Need of Supervision (PINS):** In conjunction with the Department of Social Services and the Family Court system, in cases of serious child misbehavior, this program assists in avoiding out-of-home placement and family disruption.
- ◆ **Residential Treatment Center:** A therapeutic, structured environment for at-risk youth between the ages of 10 and 17 with supervision 24 hours a day, seven days a week. Youth are placed through the New York State Family Court system.
- ◆ **Single Point of Access (SPOA):** The process whereby children in the community can be referred to the appropriate service providers to assist in meeting identified needs.
- ◆ **Single Point of Entry (SPOE):** The process whereby adults in the community can be referred to the appropriate service providers to assist in meeting identified needs.
- ◆ **Post-Adoption Program:** To help prevent re-entry into the foster care system, this program supports families struggling after the adoption process is complete.
- ◆ **Therapeutic Crisis Respite Program (TCRP):** A unique short-residential program for youth ages 10 through 17, experiencing a mental health crisis and requiring 24 hour supervision but not meeting admission criteria for hospitalization.
- ◆ **Wrap Around Casework (WAC):** In partnership with the Jefferson County Probation Department, this intensive program provides services including counseling to youth engaged in probation services.

### More than 3,000 clients served:

Aftercare: 6
Article 10: 76
Boys & Girls Club Beyond the Bell: 82
Boys & Girls Club SoZo Teen Center: 268
Boys & Girls Club Indian River Middle School/AYPYN: 290
Bridges to Health (B2H): 10
Care Coordination of Northern New York: 559
CHJC Intensive Prevention Services (CHIPS): 8
Co-Location: 103
Community Clinic of Jefferson County (CCJC): 1,275
Crisis Response: 134 outreaches & 185 hotline calls/month (average)
Forensics: 646
Fostering Futures: 349
Non-Secure Detention: 25
Persons In Need of Supervision (PINS): 14
Residential Treatment: 31
Single Point of Access (SPOA): 122
Single Point of Entry (SPOE): 107
Post Adoption Permanency: 14 families
Therapeutic Crisis Respite (TCRP): 61
Wrap Around Casework (WAC): 10

*Each year, the Children's Home undergoes a comprehensive financial audit by an independent accounting firm, presented to, and adopted by, our Board of Directors. Once again, the agency has been found to be in compliance within all program areas with no reported weaknesses or deficiencies regarding fiscal practices or internal controls.*

### Total Revenue \$15,621,996



Foster Care	30%
Residential and Non Secure Detention	11%
Medicaid	19%
Community Clinic	14%
Community Based Programs	5%
Fundraising and Grants	19%
Other Income	2%

### Total Expenses \$15,182,451



Program Services	93%
Management and General	7%
Fundraising	.02%