CARF Accreditation Report
for
United Cerebral Palsy Seguin of Greater Chicago

Three-Year Accreditation
Contents

Executive Summary
Survey Details
  Survey Participants
  Survey Activities
  Program(s)/Service(s) Surveyed
  Representations and Constraints
Survey Findings
  Program(s)/Service(s) by Location

About CARF

CARF is an independent, nonprofit accreditor of health and human services, enhancing the lives of persons served worldwide.

The accreditation process applies CARF’s internationally recognized standards during an on-site survey conducted by peer surveyors. Accreditation, however, is an ongoing process that distinguishes a provider’s service delivery and signals to the public that the provider is committed to continuous performance improvement, responsive to feedback, and accountable to the community and its other stakeholders.

CARF accreditation promotes providers’ demonstration of value and Quality Across the Lifespan® of millions of persons served through application of rigorous organizational and program standards organized around the ASPIRE to Excellence® continuous quality improvement framework. CARF accreditation has been the recognized benchmark of quality health and human services for more than 50 years.

For more information or to contact CARF, please visit www.carf.org/contact-us.
Organization
United Cerebral Palsy Seguin of Greater Chicago
3100 South Central Avenue
Cicero, IL 60804

Organizational Leadership
Andrea K. Palm, M.S.W., Director of Quality Assurance

Survey Date(s)
December 6, 2017–December 8, 2017

Surveyor(s)
Julia B. Rupp, Administrative
Nichole J. Walla, Program
Sandra M. Manzardo, Program

Program(s)/Service(s) Surveyed
Community Employment Services: Employment Supports
Community Employment Services: Job Development
Employment Planning Services
Adoption (Children and Adolescents)
Behavioral Consultation (Children and Adolescents)
Counseling/Outpatient (Children and Adolescents)
Foster Family and Kinship Care (Children and Adolescents)
Specialized or Treatment Foster Care (Children and Adolescents)

Previous Survey
Three-Year Accreditation
November 17, 2014–November 19, 2014

Accreditation Decision
Three-Year Accreditation
Expiration: November 30, 2020
Executive Summary

This report contains the findings of CARF’s on-site survey of United Cerebral Palsy Seguin of Greater Chicago conducted December 6, 2017–December 8, 2017. This report includes the following information:

- Documentation of the accreditation decision and the basis for the decision as determined by CARF’s consideration of the survey findings.
- Identification of the specific program(s)/service(s) and location(s) to which this accreditation decision applies.
- Identification of the CARF surveyor(s) who conducted the survey and an overview of the CARF survey process and how conformance to the standards was determined.
- Feedback on the organization’s strengths and recognition of any areas where the organization demonstrated exemplary conformance to the standards.
- Documentation of the specific sections of the CARF standards that were applied on the survey.
- Recommendations for improvement in any areas where the organization did not meet the minimum requirements to demonstrate full conformance to the standards.
- Any consultative suggestions documented by the surveyor(s) to help the organization improve its program(s)/service(s) and business operations.

Accreditation Decision

On balance, United Cerebral Palsy Seguin of Greater Chicago demonstrated substantial conformance to the standards. United Cerebral Palsy Seguin of Greater Chicago (UCP Seguin) demonstrated an environment of continuous quality improvement, striving for excellence. As a result, the organization offers highly responsive and quality services to persons served in a variety of locations, and stakeholders report high levels of satisfaction. UCP Seguin has successfully merged two organizations into one and capitalized on each of their strengths, resulting in innovative programs. Opportunities for improvement include expanding the cultural competency plan; developing a written code of ethics; and enhancing documentation of clinical supervision, individual services plans, and quality record reviews.

United Cerebral Palsy Seguin of Greater Chicago appears likely to maintain and/or improve its current method of operation and demonstrates a commitment to ongoing quality improvement. United Cerebral Palsy Seguin of Greater Chicago is required to submit a post-survey Quality Improvement Plan (QIP) to CARF that addresses all recommendations identified in this report.

United Cerebral Palsy Seguin of Greater Chicago has earned a Three-Year Accreditation. The leadership team and staff are complimented and congratulated for this achievement. In order to maintain this accreditation, throughout the term of accreditation, the organization is required to:

- Submit annual reporting documents and other required information to CARF, as detailed in the Accreditation Policies and Procedures section in the standards manual.
- Maintain ongoing conformance to CARF’s standards, satisfy all accreditation conditions, and comply with all accreditation policies and procedures, as they are published and made effective by CARF.
Survey Details

Survey Participants

The survey of United Cerebral Palsy Seguin of Greater Chicago was conducted by the following CARF surveyor(s):

- Julia B. Rupp, Administrative
- Nichole J. Walla, Program
- Sandra M. Manzardo, Program

CARF considers the involvement of persons served to be vital to the survey process. As part of the accreditation survey for all organizations, CARF surveyors interact with and conduct direct, confidential interviews with consenting current and former persons served in the program(s)/service(s) for which the organization is seeking accreditation. In addition, as applicable and available, interviews may be conducted with family members and/or representatives of the persons served such as guardians, advocates, or members of their support system.

Interviews are also conducted with individuals associated with the organization, as applicable, which may include:

- The organization’s leadership, such as board members, executives, owners, and managers.
- Business unit resources, such as finance and human resources.
- Personnel who serve and directly interact with persons served in the program(s)/service(s) for which the organization is seeking accreditation.
- Other stakeholders, such as referral sources, payers, insurers, and fiscal intermediaries.
- Community constituents and governmental representatives.

Survey Activities

Achieving CARF accreditation involves demonstrating conformance to the applicable CARF standards, evidenced through observable practices, verifiable results over time, and comprehensive supporting documentation. The survey of United Cerebral Palsy Seguin of Greater Chicago and its program(s)/service(s) consisted of the following activities:

- Confidential interviews and direct interactions, as outlined in the previous section.
- Direct observation of the organization’s operations and service delivery practices.
- Observation of the organization’s location(s) where services are delivered.
- Review of organizational documents, which may include policies; plans; written procedures; promotional materials; governing documents, such as articles of incorporation and bylaws; financial statements; and other documents necessary to determine conformance to standards.
- Review of documents related to program/service design, delivery, outcomes, and improvement, such as program descriptions, records of services provided, documentation of reviews of program resources and services conducted, and program evaluations.
- Review of records of current and former persons served.
Program(s)/Service(s) Surveyed

The survey addressed by this report is specific to the following program(s)/service(s):

- Community Employment Services: Employment Supports
- Community Employment Services: Job Development
- Employment Planning Services
- Adoption (Children and Adolescents)
- Behavioral Consultation (Children and Adolescents)
- Counseling/Outpatient (Children and Adolescents)
- Foster Family and Kinship Care (Children and Adolescents)
- Specialized or Treatment Foster Care (Children and Adolescents)

A list of the organization’s accredited program(s)/service(s) by location is included at the end of this report.

Representations and Constraints

The accreditation decision and survey findings contained in this report are based on an on-balance consideration of the information obtained by the surveyor(s) during the on-site survey. Any information that was unavailable, not presented, or outside the scope of the survey was not considered and, had it been considered, may have affected the contents of this report. If at any time CARF subsequently learns or has reason to believe that the organization did not participate in the accreditation process in good faith or that any information presented was not accurate, truthful, or complete, CARF may modify the accreditation decision, up to and including revocation of accreditation.

Survey Findings

This report provides a summary of the organization’s strengths and identifies the sections of the CARF standards that were applied on the survey and the findings in each area. In conjunction with its evaluation of conformance to the specific program/service standards, CARF assessed conformance to its business practice standards, referred to as Section 1. ASPIRE to Excellence, which are designed to support the delivery of the program(s)/service(s) within a sound business operating framework to promote long-term success.

The specific standards applied from each section vary based on a variety of factors, including, but not limited to, the scope(s) of the program(s)/service(s), population(s) served, location(s), methods of service delivery, and survey type. Information about the specific standards applied on each survey is included in the standards manual and other instructions that may be provided by CARF.

Areas of Strength

CARF found that United Cerebral Palsy Seguin of Greater Chicago demonstrated the following strengths:

- The board of directors understands the larger environmental factors that impact the organization and is committed to providing leadership and support in this area. Board members are dedicated and enthusiastic about the mission of the organization.
- The leadership team is mission driven and dedicated to continuous quality control. The leadership clearly demonstrates a desire to be the provider of choice and does what it takes to maintain that status.

- UCP Seguin has an excellent staff development program that goes beyond meeting the required training and ongoing learning opportunities. Performance appraisals include goals that address job competencies and development goals. In addition, the Infinitec training program provides a library of training and development opportunities. Further, the organization offers a succession program that any staff member can participate in and have access to mentors and other supports to further address his/her development. The organization is clearly committed to the personal development of its staff.

- UCP Seguin is dedicated to improving customer service, using numerous ways to gather stakeholder input, including focus groups, opportunities for ongoing staff input, focus groups of various stakeholders, and review of complaints. This input is used to develop the strategic plan and adapt programs and services as needed.

- The organization is dedicated to reducing stigma and other barriers to community inclusion for persons served. The organization has made great strides in providing additional community-based opportunities for persons served.

- The organization's leadership highly values the contributions of staff members at all levels as demonstrated through its attention to staff safety, ongoing emphasis to staff retention efforts, programs for staff recognition, and the annual bonuses to staff members.

- At the core of the employment services are program staff members who are motivated, soulful, innovative, and enthusiastic in providing services. Personnel represent the organization’s mission and take pride in its strong, well-organized program and in the progress of the persons served.

- Infinitec is a unique assistive technology program that advances independence and promotes opportunities for independence for children and adults though technology. The Infinitec department has continued to grow and expand, and it offers much opportunity for the organization. It improves access to youth in transition to adult services as anyone served in this program while in school is offered services. The public website is an excellent resource that can be used to expand its membership, and the Infinitec website offered to membership, which has grown substantially, offers valuable services not readily available elsewhere such as mobile app reviews and identification.

- UCP Seguin has created very strong partnerships in the community with employers. Staff members take pride in making connections with existing and new businesses in hopes of creating employment opportunities for persons served and building long-lasting relationships with employers.

- Employers state they are extremely happy and satisfied with the services offered by UCP Seguin and express interest in having more persons employed who are referred by the organization when openings become available. Employers appreciate the openness and willingness of staff members being available when questions or concerns arise or additional duties have been added to those employed.

- Referral sources are very satisfied with services that are offered by UCP Seguin, stating that they appreciate the constant communication, timely reporting, and adaptive nature and continued professionalism of all the staff members.

- Parents and family members of persons served indicate that they are very pleased with the organization, stating that their family members have learned many things during their time with the organization, including effectively interacting with others, new work skills, and increased socialization.

- Persons served consistently state they are getting the services they needed, satisfied with the services, and treated with dignity and respect.

- The commitment of staff members and foster care providers in the child and youth services (CYS) program at UCP Seguin is demonstrated by being well trained, caring, and going above and beyond for each of the children and families served.
The training provided to foster parents is notable in its variety and content. Foster parents enjoy the monthly opportunity to gather and learn, and they have grown to provide co-facilitation of training to their peers. Foster parents have been encouraged to create a support group among themselves, which is becoming more formalized in an effort to continue to provide mutual support.

The CYS program is viewed as an excellent example of wraparound services to the most vulnerable children and youth in the area. The program is respected by its colleagues from outside agencies for "knowing its stuff" and as responsive. The program can be relied upon to do whatever is necessary to address any and every issue, whether it is a crisis or simply a service request.

The children and youth served at UCP Seguin are clearly the focus of every level of the CYS program. They all know that they will be taken care of and they know what to expect and that they can talk to anyone at any time if they have a problem. The CYS program goes above and beyond to meet the kids and families where they are at and to do all it can to provide for the needs of every child in care.

The CYS program has staff members who are fully engaged, hardworking, and forward thinking. Succession planning is in evidence, and it is clear UCP Seguin has been as good at recruiting people who are the right fit for their role in each program and finding the best fit for the kids and families.

Opportunities for Quality Improvement

The CARF survey process identifies opportunities for continuous improvement, a core concept of “aspiring to excellence.” This section of the report lists the sections of the CARF standards that were applied on the survey, including a description of the business practice area and/or the specific program(s)/service(s) surveyed and a summary of the key areas addressed in that section of the standards.

In this section of the report, a recommendation identifies any standard for which CARF determined that the organization did not meet the minimum requirements to demonstrate full conformance. All recommendations must be addressed in a QIP submitted to CARF.

In addition, consultation may be provided for areas of or specific standards where the surveyor(s) documented suggestions that the organization may consider to improve its business or service delivery practices. Note that consultation may be offered for areas of specific standards that do not have any recommendations. Such consultation does not indicate nonconformance to the standards; it is intended to offer ideas that the organization might find helpful in its ongoing quality improvement efforts. The organization is not required to address consultation.

When CARF surveyors visit an organization, their role is that of independent peer reviewers, and their goal is not only to gather an assess information to determine conformance to the standards, but also to engage in relevant and meaningful consultative dialogue. Not all consultation or suggestions discussed during the survey are noted in this report. The organization is encouraged to review any notes made during the survey and consider the consultation or suggestions that were discussed.

During the process of preparing for a CARF accreditation survey, an organization may conduct a detailed self-assessment and engage in deliberations and discussions within the organization as well as with external stakeholders as it considers ways to implement and use the standards to guide its quality improvement efforts. The organization is encouraged to review these discussions and deliberations as it considers ways to implement innovative changes and further advance its business and service delivery practices.
Section 1. ASPIRE to Excellence®

1.A. Leadership

Description
CARF-accredited organizations identify leadership that embraces the values of accountability and responsibility to the individual organization’s stated mission. The leadership demonstrates corporate social responsibility.

Key Areas Addressed

- Leadership structure
- Leadership guidance
- Commitment to diversity
- Corporate responsibility
- Corporate compliance

Recommendations

1.A.5.b.(2)
1.A.5.b.(3)
UCP Seguin should expand its cultural competency and diversity plan to be based on the consideration of age and gender.

1.A.6.a.(1)
1.A.6.a.(2)
1.A.6.a.(3)
1.A.6.a.(4)
1.A.6.a.(5)
1.A.6.a.(6)(a)(i)
1.A.6.a.(6)(a)(ii)
1.A.6.a.(6)(a)(iii)
1.A.6.a.(6)(b)
1.A.6.a.(6)(c)
1.A.6.a.(6)(d)
1.A.6.a.(6)(e)
1.A.6.a.(7)
1.A.6.a.(8)
1.A.6.a.(9)(a)
1.A.6.a.(9)(b)
1.A.6.a.(9)(c)
1.A.6.a.(9)(d)
1.A.6.b.(1)
1.A.6.b.(2)(a)
1.A.6.b.(2)(b)
1.A.6.c.
1.A.6.d.
1.A.6.e.

Although the organization has a policy referencing ethical codes of conduct, it continues to refer to a multitude of policies guiding behavior and does not have an ethical code of conduct. The organization should have written ethical codes of conduct that relate to business; marketing; contractual relationships; conflicts of interests; use of social media; exchange of gifts, money, and gratuities; personal fundraising; personal property; setting boundaries;
witnessing of legal documents; professional responsibilities; human resources; and prohibition of waste, fraud, abuse, and other wrongdoing. Corporate responsibility should also include written procedures to deal with allegations of violations of ethical codes, including a no-reprisal approach for personnel reporting and timeframes that are adequate for prompt consideration and result in timely decisions; education on ethical codes of conduct for stakeholders; advocacy efforts for the persons served; and corporate citizenship.

1.C. Strategic Planning

Description
CARF-accredited organizations establish a foundation for success through strategic planning focused on taking advantage of strengths and opportunities and addressing weaknesses and threats.

Key Areas Addressed
- Strategic planning considers stakeholder expectations and environmental impacts
- Written strategic plan sets goals
- Plan is implemented, shared, and kept relevant

Recommendations
There are no recommendations in this area.

Consultation
- It is suggested that UCP Seguin explore using Infinitec as a financial opportunity.

1.D. Input from Persons Served and Other Stakeholders

Description
CARF-accredited organizations continually focus on the expectations of the persons served and other stakeholders. The standards in this subsection direct the organization’s focus to soliciting, collecting, analyzing, and using input from all stakeholders to create services that meet or exceed the expectations of the persons served, the community, and other stakeholders.

Key Areas Addressed
- Ongoing collection of information from a variety of sources
- Analysis and integration into business practices
- Leadership response to information collected

Recommendations
There are no recommendations in this area.

1.E. Legal Requirements

Description
CARF-accredited organizations comply with all legal and regulatory requirements.

Key Areas Addressed
- Compliance with all legal/regulatory requirements
Recommendations
There are no recommendations in this area.

1.F. Financial Planning and Management

Description
CARF-accredited organizations strive to be financially responsible and solvent, conducting fiscal management in a manner that supports their mission, values, and performance objectives. Fiscal practices adhere to established accounting principles and business practices. Fiscal management covers daily operational cost management and incorporates plans for long-term solvency.

Key Areas Addressed
- Budget(s) prepared, shared, and reflective of strategic planning
- Financial results reported/compared to budgeted performance
- Organization review
- Fiscal policies and procedures
- Review of service billing records and fee structure
- Financial review/audit
- Safeguarding funds of persons served

Recommendations
There are no recommendations in this area.

1.G. Risk Management

Description
CARF-accredited organizations engage in a coordinated set of activities designed to control threats to their people, property, income, goodwill, and ability to accomplish goals.

Key Areas Addressed
- Identification of loss exposures
- Development of risk management plan
- Adequate insurance coverage

Recommendations
There are no recommendations in this area.

1.H. Health and Safety

Description
CARF-accredited organizations maintain healthy, safe, and clean environments that support quality services and minimize risk of harm to persons served, personnel, and other stakeholders.
Key Areas Addressed

- Inspections
- Emergency procedures
- Access to emergency first aid
- Competency of personnel in safety procedures
- Reporting/reviewing critical incidents
- Infection control

Recommendations

There are no recommendations in this area.

Consultation

- It is suggested that the organization provide training on active shooter scenarios as part of its workplace violence drills.

- It is suggested that the plans for shelter be revised to provide more specific guidance regarding the relocation and/or continuation of essential services; for example, how will relocation of services be communicated to persons served and how will persons be transported to identified temporary locations.

- Although UCP Seguin has exit maps posted and clearly marked exit routes, it is suggested that the exit routes be simplified with arrows or other means, especially in areas near classrooms.

- Although UCP Seguin identifies areas for improvement and actions to be taken regarding testing of emergency plans, this is often identified in the debriefing process with the risk committee. It is suggested that it encourage those completing the drill form to also consistently include this information so as not to forget any observations.

- Although personnel information is available through human resources, it is suggested that at each location critical personnel information, including emergency contacts, be readily available to first responders. This information could be kept in a sealed enveloped readily accessible in case of emergency.

- Although debriefings occur after critical incidents, it is suggested that UCP Seguin add a notation to the incident form to indicate that debriefing is required and to track that the debriefing did occur. It is further suggested that staff members be available to do the debriefings outside the supervision structure. It could would work well to have the safety care instructors in this role.

- Although staff members have cell phones, it is suggested that the transportation policies note that staff members are required to carry their cell phones when transporting persons served.

1.1. Human Resources

Description

CARF-accredited organizations demonstrate that they value their human resources. It should be evident that personnel are involved and engaged in the success of the organization and the persons they serve.

Key Areas Addressed

- Adequate staffing
- Verification of background/credentials
- Recruitment/retention efforts
- Personnel skills/characteristics
- Annual review of job descriptions/performance
- Policies regarding students/volunteers, if applicable
Recommendations

1.1.5.b.(5)
The organization should provide documented personnel training that addresses ethical codes of conduct.

1.J. Technology

Description
CARF-accredited organizations plan for the use of technology to support and advance effective and efficient service and business practices.

Key Areas Addressed
- Written technology and system plan
- Written procedures for the use of information and communication technologies (ICT) in service delivery, if applicable
- Training for personnel, persons served, and others on ICT equipment, if applicable
- Provision of information relevant to the ICT session, if applicable
- Maintenance of ICT equipment in accordance with manufacturer recommendations, if applicable
- Emergency procedures that address unique aspects of service delivery via ICT, if applicable

Recommendations
There are no recommendations in this area.

1.K. Rights of Persons Served

Description
CARF-accredited organizations protect and promote the rights of all persons served. This commitment guides the delivery of services and ongoing interactions with the persons served.

Key Areas Addressed
- Communication of rights
- Policies that promote rights
- Complaint, grievance, and appeals policy
- Annual review of complaints

Recommendations
There are no recommendations in this area.

Consultation
- UCP Seguin provides the rights of the persons served initially and annually through the handbook for persons served. It is suggested that rights be posted in common areas where persons have access to them when needed.
- UCP Seguin makes complaint procedures and applicable forms available through handbooks for persons served and contact with direct staff and/or managers. It might be helpful for the organization to post the forms in common areas such as community boards of persons served so that they can be easily accessed when needed.
1.L. Accessibility

Description
CARF-accredited organizations promote accessibility and the removal of barriers for the persons served and other stakeholders.

Key Areas Addressed
- Written accessibility plan(s)
- Requests for reasonable accommodations

Recommendations
There are no recommendations in this area.

Consultation
- Although requests from personnel for reasonable accommodations are documented in work orders, it is suggested that UCP Seguin fully implement its new "request for accommodation form" to clearly document all requests and actions taken.

1.M. Performance Measurement and Management

Description
CARF-accredited organizations are committed to continually improving their organizations and service delivery to the persons served. Data are collected and analyzed, and information is used to manage and improve service delivery.

Key Areas Addressed
- Information collection, use, and management
- Setting and measuring performance indicators

Recommendations
1.M.7.c.
For each service delivery performance indicator, UCP Seguin should determine to whom the indicator will be applied and the source from which data will be collected.

1.N. Performance Improvement

Description
The dynamic nature of continuous improvement in a CARF-accredited organization sets it apart from other organizations providing similar services. CARF-accredited organizations share and provide the persons served and other interested stakeholders with ongoing information about their actual performance as a business entity and their ability to achieve optimal outcomes for the persons served through their programs and services.

Key Areas Addressed
- Proactive performance improvement
- Performance information shared with all stakeholders
Recommendations
There are no recommendations in this area.

Section 2. Quality Individualized Services and Supports

2.A. Program/Service Structure

Description
A fundamental responsibility of the organization is to provide a comprehensive program structure. The staffing is designed to maximize opportunities for the persons served to obtain and participate in the services provided.

Key Areas Addressed
- Services are person-centered and individualized
- Persons are given information about the organization’s purposes and ability to address desired outcomes
- Documented scope of services shared with stakeholders
- Service delivery based on accepted field practices
- Communication for effective service delivery
- Entrance/exit/transition criteria

Recommendations
There are no recommendations in this area.

Consultation
- UCP Seguin has a complete record for persons served that includes an annual service plan for all services offered. Additional portions of the records regarding employment are located in the employment department. It may be helpful to, in the order of record, designate where additional parts of the record are located or to add all documentation in its entirety to the complete record.

2.B. Individual-Centered Service Planning, Design, and Delivery

Description
Improvement of the quality of an individual’s services/supports requires a focus on the person and/or family served and their identified strengths, abilities, needs, and preferences. The organization’s services are designed around the identified needs and desires of the persons served, are responsive to their expectations and desired outcomes from services, and are relevant to their maximum participation in the environments of their choice.

The person served participates in decision making, directing, and planning that affects his or her life. Efforts to include the person served in the direction or delivery of those services/supports are evident.

Key Areas Addressed
- Services are person-centered and individualized
- Persons are given information about the organization’s purposes and ability to address desired outcomes

Recommendations
There are no recommendations in this area.
2.D. Employment Services Principle Standards

Description
An organization seeking CARF accreditation in the area of employment services provides individualized services and supports to achieve identified employment outcomes. The array of services and supports may include:

- Identification of employment opportunities and resources in the local job market.
- Development of viable work skills that match workforce needs within the geographic area.
- Development of realistic employment goals.
- Establishment of service plans to achieve employment outcomes.
- Identification of resources and supports to achieve and maintain employment.
- Coordination of and referral to employment-related services and supports.

The organization maintains its strategic positioning in the employment sector of the community by designing and continually improving its services based on input from the persons served and from employers in the local job market, and managing results of the organization’s outcomes management system. The provision of quality employment services requires a continuous focus on the persons served and the personnel needs of employers in the organization’s local job market.

Some examples of the quality results desired by the different stakeholders of these services and supports include:

- Individualized, appropriate accommodations.
- A flexible, interactive process that involves the person.
- Increased independence.
- Increased employment options.
- Timely services and reports.
- Persons served obtain and maintain employment consistent with their preferences, strengths, and needs.
- Person served obtains a job at minimum wage or higher and maintains appropriate benefits.
- Person served maintains the job.

Key Areas Addressed
- Goals of the persons served
- Personnel needs of local employers
- Community resources available
- Economic trends in the local employment sector

Recommendations
There are no recommendations in this area.

Section 3. Employment Services

Description
An organization seeking CARF accreditation in the area of employment services assists the persons served through an individualized person-centered process to obtain access to the services, supports, and resources of their choice to achieve their desired outcomes. This may be accomplished by direct service provision, linkages to existing generic opportunities and natural supports in the community, or any combination of these. The persons served are included in their communities to the degree they desire.
The organization provides the persons served with information so that they may make informed choices and decisions. Although we use the phrase person served, this may also include family served, as appropriate to the service and the individual.

The services and supports are arranged and changed as necessary to meet the identified desires of the persons served. Service designs address identified individual, family, socioeconomic, and cultural preferences.

Depending on the program’s scope of services, expected results from these services/supports may include:

- Increased inclusion in community activities.
- Increased self-direction, self-determination, and self-reliance
- Self-esteem.
- Community citizenship.
- Increased independence.
- Meaningful activities.
- Increased employment options.
- Employment obtained and maintained.
- Competitive employment.
- Employment at or above minimum wage.
- Economic self-sufficiency.
- Employment with benefits.
- Career advancement.

3.A. Employment Planning Services (EPS)

Description

Employment planning services are designed to assist a person seeking employment to learn about employment opportunities within the community and to make informed decisions. Employment planning services are individualized to assist a person to choose employment outcomes and/or career development opportunities based on his or her preferences, strengths, abilities, and needs. Services begin from a presumption of employability for all persons and seek to provide meaningful information related to planning effective programs for persons with intervention strategies needed to achieve the goal of employment.

Employment planning uses some type of employment exploration model. This may involve one or more of the following:

- Situational assessments.
- Paid work trials.
- Job tryouts (may be individual, crew, enclave, cluster, etc.).
- Job shadowing.
- Community-based assessments.
- Simulated job sites.
- Staffing agencies/temporary employment agencies.
- Volunteer opportunities.
- Transitional employment.

Some examples of quality outcomes desired by the different stakeholders of these services include:

- Work interests are explored and identified.
- Recommendations for employment options are appropriate.
- Employment planning reports lead to job goals.
Transferable work skills and employment barriers are identified.
Benefits planning is included.
Services are timely in their delivery.
Services are cost-effective.
Individuals served understand recommendations that are made.
Individuals served identify desired employment outcomes.

Key Areas Addressed
- Employment opportunities within the community
- Informed decision-making by participants
- Referrals to services to implement employment plan

Recommendations
There are no recommendations in this area.

3.6. Community Employment Services

Description
Community employment services assist persons to obtain successful community employment opportunities that are responsive to their choices and preferences. Through a strengths-based approach the program provides person-directed services/supports to individuals to choose, achieve, and maintain employment in integrated community employment settings.

Work is a fundamental part of adult life. Individually tailored job development, training, and support recognize each person’s employability and potential contribution to the labor market. Persons are supported as needed through an individualized person-centered model of services to choose and obtain a successful employment opportunity consistent with their preferences, keep the employment, and find new employment if necessary or for purposes of career advancement.

Such services may be described as individualized competitive employment, individual placements, contracted temporary personnel services, competitive employment, supported employment, transitional employment, mobile work crews, contracted work groups in the community, community-based SourceAmerica® contracts, and other business-based work groups in community-integrated designs. In Canada, employment in the form of bona fide volunteer placements is possible.

Individuals may be paid by community employers or by the organization. Employment is in the community.

The following service categories are available under Community Employment Services (please refer to the program descriptions and applicable standards):

- Job Development (CES:JD)
- Employment Supports (CES:ES)

If an organization provides only Job Development or Employment Supports, then it may be accredited for only that service. If it is providing both Job Development and Employment Supports, then it must seek accreditation for both. If any clarification is needed, please contact your CARF resource specialist. There is no charge for consultation.

Note: In making the determination of what an organization is actually providing in comparison to these service descriptions, these factors are considered: the mission of the services, the program descriptions, brochures and marketing image for these services, and the outcomes of the services.
Depending on the scope of the services provided, some examples of the quality outcomes desired by the different stakeholders of these services include:

- Persons obtain community employment.
- Persons obtain individualized competitive employment.
- Employment matches interests and desires of persons.
- Wages, benefits, and hours of employment achieved as desired.
- Average number of hours worked per week increases.
- Average number of hours worked per week meets the desires of the person served.
- Full-time employment with benefits.
- Transition-age youth move directly from their educational environment into community employment.
- Potential for upward mobility.
- Self-sufficiency.
- Integration.
- Responsive services.
- Safe working conditions.
- Cost-effective for placement achieved.
- Performance level achieved meets requirements of job or position.
- Increase in skills.
- Increase in productivity.
- Increase in hours worked.
- Increase in pay.
- Employment retention.
- Increase in natural supports from coworkers.
- Persons served treated with respect.
- Minimize length of time for supports.
- Type and amount of staff interaction meets needs.
- Employer satisfaction.
- Responsiveness to customers.

Job Development (CES:JD): Successful job development concurrently uses assessment information about the strengths and interests of the person seeking employment to target the types of jobs available from potential employers in the local labor market. Typical job development activities include reviewing local employment opportunities and developing potential employers/customers through direct and indirect promotional strategies. Job development may include facilitating a hiring agreement between an employer and a person seeking employment. Some persons seeking employment may want assistance at only a basic, informational level, such as support for a self-directed job search.

Employment Supports (CES:ES): Employment support services promote successful training of a person to a new job, job adjustment, retention, and advancement. These services are based on the individual employee with a focus on achieving long-term retention of the person in the job. The level of employment support services is individualized to each employee and the complexity of the job.

Often supports are intensive for the initial orientation and training of an employee with the intent of leading to natural supports and/or reduced external job coaching. However, some persons may not require any employment supports at the job site; others may require intensive initial training with a quick decrease in supports, while some will be most successful when long-term supports are provided.

Supports can include assisting the employee with understanding the job culture, industry practices, and work behaviors expected by the employer. It may also include helping the employer and coworkers to understand the support strategies and accommodations needed by the worker.
Supports are a critical element of the long-term effectiveness of community employment. Support services address issues such as assistance in training a person to complete new tasks, changes in work schedule or work promotion, a decrease in productivity of the person served, adjusting to new supervisors, and managing changes in nonwork environments or other critical life activities that may affect work performance. Routine follow-up with the employer and the employee is crucial to continued job success.

**Key Areas Addressed**
- Integrated employment choice
- Integrated employment attainment
- Employment provided in regular business settings
- Integrated employment retention
- Provides career advancement resources

**Recommendations**
There are no recommendations in this area.

**2017 Child and Youth Services standards were also applied during this survey. The following sections of this report reflect the application of those standards.**

**Section 2. General Program Standards**

**Description**
For an organization to achieve quality services, the philosophical foundation of child- and family-centered care practices must be demonstrated. Children/youths and families are involved in the design, implementation, delivery, and ongoing evaluation of applicable services offered by the organization. A commitment to quality and the involvement of the persons served span the entire time that they are involved with the organization. The service planning process is individualized, establishing goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the person served. The persons served have the opportunity to transition easily through a system of care.

The guiding principles include:
- Child/youth and family driven services.
- Promotion of resiliency.
- Cultural and linguistic competence.
- Strengths-based approach.
- Focus on whole person in context of family and community.
- Trauma-informed, where applicable.

**2.A. Program/Service Structure**

**Description**
A fundamental responsibility of the organization is to provide a comprehensive program structure. The staffing is designed to maximize opportunities for the persons served to obtain and participate in the services provided.

The organization, where appropriate, provides information to the child/youth served and in collaboration with the parent and/or legal representative.
Child- and family-centered care includes the following:

- Recognition that, when possible, the family is the constant in the child’s/youth’s life, while the service systems and personnel within those systems fluctuate.
- Facilitation of family-professional collaboration at all levels of care.
- Sharing of unbiased and complete information about a child’s/youth’s care on an ongoing basis, in an appropriate and supportive manner.
- Implementation of appropriate policies and programs that are comprehensive and provide necessary support to meet the needs of children/youths and families.
- Recognition of child/youth and family strengths and individuality and respect for different methods of coping.
- Understanding and incorporating the developmental needs of children/youths and families into service systems.
- Assurance that the design of health and social service delivery systems is flexible, accessible, and responsive to the needs of children/youth and families.

**Key Areas Addressed**

- Written plan that guides service delivery
- Team member responsibilities
- Developmentally appropriate surroundings and equipment
- Crisis intervention provided
- Medical consultation
- Services relevant to diversity
- Collaborative partnerships
- Child/youth/family role in decision making
- Policies and procedures that facilitate collaboration
- Coordination of services for child/youth
- Qualifications and competency of direct service staff
- Family participation
- Team composition/duties
- Relevant education
- Clinical supervision
- Assistance with advocacy and support groups
- Effective information sharing
- Arrangement or provision of appropriate services
- Gathering customer satisfaction information

**Recommendations**

2.A.21.g.(4)
2.A.21.g.(5)

It is recommended that the organization's documentation of ongoing supervision of direct service personnel be expanded to address issues of self-care and secondary trauma. These areas could be added to the form being currently used. It is also suggested that UCP Seguin consider enhancing the form's practical use by moving it to an electronic format to enable supervisors to elaborate on how issues are being addressed when they emerge.

**2.B. Screening and Access to Services**

**Description**

The process of screening and assessment is designed to determine a person’s eligibility for services and the organization’s ability to provide those services. A person-centered assessment process helps to maximize opportunities for the persons served to gain access to the organization’s programs and services. Each person served
is actively involved in, and has a significant role in, the assessment process. Assessments are conducted in a manner that identifies the historical and current information of the person served as well as his or her strengths, needs, abilities, and preferences. Assessment data may be gathered through various means including face-to-face contact, telehealth, or written material; and from various sources including the person served, his or her family or significant others, or from external resources.

**Key Areas Addressed**
- Policies and procedures defining access
- Waiting list criteria
- Orientation to services
- Primary assessment
- Interpretive summary

**Recommendations**
There are no recommendations in this area.

### 2.C. Individualized Plan

**Description**
Each person served is actively involved in and has a significant role in the individual planning process and has a major role in determining the direction of the individualized plan. The individualized plan contains goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the persons served, as well as identified challenges and problems. Individualized plans may consider the significance of traumatic events.

**Key Areas Addressed**
- Participation of child/youth in preparation of individual plan
- Components of individual plan
- Co-occurring disabilities/disorders
- Content of program notes

**Recommendations**

2.C.2.a.(1)
It is recommended that the individualized plan include goals that are expressed in the words of the person(s) served in the counseling/outpatient program. It is suggested that all CYS programs continue to adapt the wording of goals to a more child-friendly and understandable language as is used in the assessments. The implementation of the use of life books could assist case workers in this shift.

### 2.D. Transition/Discharge

**Description**
Transition, continuing care, or discharge planning assists the persons served to move from one level of care to another within the organization or to obtain services that are needed but are not available within the organization. The transition process is planned with the active participation of each person served. Transition may include planned discharge, placement on inactive status, movement to a different level of service or intensity of contact, reunification, re-entry in a juvenile justice system, or transition to adulthood.
The transition plan is a document that is developed in collaboration with and for the person served, family, and other interested persons who have participated with the individual in services. It is meant to be a plan that the person served uses when leaving the program to identify important supports and actions to prevent the need to return to the program or other higher level of care.

A discharge summary is a document written by the program when the person leaves the program and includes information about the person’s progress while in the program, including the completion of his or her goals. It is a document that is intended for the record of the person served and released, with appropriate authorization, to describe the course of services that the organization provided and the response by the person served.

Just as the assessment is critical to the success of treatment, transition services are critical for the support of the individual’s ongoing well-being. The organization proactively attempts to contact the person served after formal transition or discharge to gather needed information related to his or her postdischarge status.

The transition plan and/or discharge summary may be included in a combined document or as part of the individualized plan as long as it is clear whether the information relates to a transition or discharge planning.

Key Areas Addressed
- Transition/discharge planning
- Components of transition plan
- Follow-up after program participation

Recommendations
2.D.11.i. For all persons leaving services, UCP Seguin should prepare a written discharge summary that includes information on medication(s) prescribed or administered, when applicable.

2.E. Medication Use

Description
Medication use is the practice of handling, prescribing, dispensing, and/or administering medications to persons served in response to specific symptoms, behaviors, and conditions for which the use of medications is indicated and deemed efficacious. Medication use may include self-administration, or be provided by personnel of the organization or under contract with a licensed individual. Medication use is directed toward maximizing the functioning of the persons served while reducing their specific symptoms and minimizing the impact of side effects.

Medication use includes prescribed or sample medications, and may, when required as part of the treatment regimen, include over-the-counter or alternative medications provided to the person served. Alternative medications can include herbal or mineral supplements, vitamins, homeopathic remedies, hormone therapy, or culturally specific treatments.

Medication control is identified as the process of physically controlling, transporting, storing, and disposing of medications, including those self-administered by the person served.

Self-administration for adults is the application of a medication (whether by injection, inhalation, oral ingestion, or any other means) by the person served, to his/her body; and may include the organization storing the medication for the person served, or may include staff handing the bottle or blister-pak to the person served, instructing or verbally prompting the person served to take the medication, coaching the person served through the steps to ensure proper adherence, and closely observing the person served self-administering the medication.
Self-administration by children or adolescents in a residential setting must be directly supervised by personnel, and standards related to medication use applied.

Dispensing is considered the practice of pharmacy; the process of preparing and delivering a prescribed medication (including samples) that has been packaged or re-packaged and labeled by a physician or pharmacist or other qualified professional licensed to dispense (for later oral ingestion, injection, inhalation, or other means of administration).

Prescribing is evaluating, determining what agent is to be used by and giving direction to a person served (or family/legal guardian), in the preparation and administration of a remedy to be used in the treatment of disease. It includes a verbal or written order, by a qualified professional licensed to prescribe, that details what medication should be given to whom, in what formulation and dose, by what route, when, how frequently, and for what length of time. These standards are applied regardless of whether the prescriber is employed directly by the organization or works under contract.

Key Areas Addressed
- Individual records of medication
- Physician review
- Policies and procedures for prescribing, dispensing, and administering medications
- Training regarding medications
- Policies and procedures for safe handling of medication

Recommendations
2.E.3.d.
2.E.3.j.
When the foster parents physically control medications, including medications self-administered by the person served or the use of samples, written procedures should be implemented that include safe storage and self-administration. The organization could follow up to ensure that procedures are being followed.

2.F. Nonviolent Practices

Description
Programs strive to be learning environments and to support persons served in the development of recovery, resiliency, and wellness. Relationships are central to supporting individuals in recovery and wellness. Programs are challenged to establish quality relationships as a foundation to supporting recovery and wellness. Providers need to be mindful of developing cultures that create healing, healthy and safe environments, and include the following:

- Engagement
- Partnership—power with, not over
- Holistic approaches
- Respect
- Hope
- Self-direction

Programs need to recognize that individuals may require supports to fully benefit from their services. Staff are expected to access or provide those supports wanted and needed by the individual. Supports may include environmental supports, verbal prompts, written expectations, clarity of rules and expectations, or praise and encouragement.
Even with supports, there are times when individuals may show signs of fear, anger, or pain, which may lead to aggression or agitation. Staff members are trained to recognize and respond to these signs through de-escalation, changes to the physical environmental, implementation of meaningful and engaging activities, redirection, active listening, etc. On the rare occasions when these interventions are not successful and there is imminent danger of serious harm, seclusion or restraint may be used to ensure safety. Seclusion and restraint are never considered treatment interventions; they are always considered actions of last resort. The use of seclusion and restraint must always be followed by a full review, as part of the process to eliminate the use of these in the future.

The goal is to eliminate the use of seclusion and restraint in child and youth services, as the use of seclusion or restraint creates potential physical and psychological dangers to the persons subject to the interventions, to the staff members who administer them, or those who witness the practice. Each organization still utilizing seclusion or restraint should have the elimination thereof as an eventual goal.

Restraint is the use of physical force or mechanical means to temporarily limit a person’s freedom of movement; chemical restraint is the involuntary emergency administration of medication, in immediate response to a dangerous behavior. Restraints used as an assistive device for persons with physical or medical needs are not considered restraints for purposes of this section. Briefly holding a person served, without undue force, for the purpose of comforting him or her or to prevent self-injurious behavior or injury to others, or holding a person’s hand or arm to safely guide him or her from one area to another, is not a restraint. Separating individuals threatening to harm one another, without implementing restraints, is not considered restraint.

Seclusion refers to restriction of the person served to a segregated room with the person’s freedom to leave physically restricted. Voluntary time out is not considered seclusion, even though the voluntary time out may occur in response to verbal direction; the person served is considered in seclusion if freedom to leave the segregated room is denied.

Seclusion or restraint by trained and competent personnel is used only when other less restrictive measures have been found to be ineffective to protect the person served or others from injury or serious harm. Peer restraint is not considered an acceptable alternative to restraint by personnel. Seclusion or restraint is not used as a means of coercion, discipline, convenience, or retaliation.

In a correctional setting, the use of seclusion or restraint for purposes of security is not considered seclusion or restraint under these standards. Security doors designed to prevent elopement or wandering are not considered seclusion or restraint. Security measures for forensic purposes, such as the use of handcuffs instituted by law enforcement personnel, are not subject to these standards. When permissible, consideration is made to removal of physical restraints while the person is receiving services in the behavioral healthcare setting.

**Key Areas Addressed**
- Training and procedures supporting nonviolent practices
- Policies and procedures for use of seclusion and restraint
- Patterns of use reviewed
- Persons trained in use
- Plans for reduction/elimination of use

**Recommendations**
There are no recommendations in this area.

**Consultation**
- It is suggested that the organization more clearly identify in its policy that it does not use restraint in its CYS programs.
2.G. Records of the Person Served

Description
A complete and accurate record is developed to ensure that all appropriate individuals have access to relevant clinical and other information regarding each person served.

Key Areas Addressed
- Authorization for release of information
- Timeframes for entries to records
- Individual record requirements
- Duplicate records

Recommendations
There are no recommendations in this area.

2.H. Quality Records Review

Description
The program has systems and procedures that provide for the ongoing monitoring of the quality, appropriateness, and utilization of the services provided. This is largely accomplished through a systematic review of the records of the persons served. The review assists the program in improving the quality of services provided to each person served.

Key Areas Addressed
- Focus of quarterly review
- Use of information from quarterly review

Recommendations
2.H.1.b.(1)
Although the program conducts a documented review of the services provided, it is recommended that the review address, as evidenced by the record of the youth, quality of service delivery in the CYS programs.

2.H.2.d.(2)
It is recommended that the organization ensure that a quarterly review is performed that includes a sample of closed records. Because open records are reviewed quarterly, it is suggested that a final closing review "checklist" could capture all documents added after the most recent quality file review.

2.H.4.c.(1)
2.H.4.d.(1)
2.H.4.d.(2)
2.H.4.e.(1)(a)
2.H.4.g.(1)
2.H.4.g.(2)
It is recommended that the review address whether the assessments of the person served were thorough; risk factors were adequately addressed and resulted in safety plans, when appropriate; the goals and service/treatment objectives of the persons served were based on the results of the assessments; and the actual services reflect appropriate level of care and reasonable duration.
Section 3. Core Program Standards

3.A. Adoption

Description
Adoption programs are inclusive of open, closed, customary, and international adoptions as well as other permanent custody or care arrangements and provide children/youths with legal and social stability. Customary adoption is a traditional indigenous practice recognized by the community that gives a child/youth a permanent parent-child relationship with someone other than the child’s/youth’s birth parent(s). Adoption programs ideally provide continuity of life-long relationships and maintain cultural identity.

The adoption program promotes the active participation of all affected by the permanent placement, including the foster family, birth family, extended family, adoptive family, child/youth, advocate, caregivers, members of indigenous or other communities of origin, or other individuals who are significant to the child/youth. Services are based on the best interest of the child/youth.

Programs can be delivered by public or indigenous child/youth welfare authorities, private licensed agencies, or licensed individuals.

Signatories to the UN Convention on the Rights of the Child must meet the identified requirements. These organizations must ensure that the child’s/youth’s fundamental right to identity, family, and culture is addressed. When applicable, programs must also conform to the requirements of the Indian Child Welfare Act, Adoption and Safe Families Act, Multi-Ethnic Placement Act, Interethnic Adoption Provisions Act, Fostering Connections, Hague Convention, and the Act to Promote Safe and Stable Families, as well as all other applicable regulatory requirements.

Key Areas Addressed
- Promotion of the active participation of birth, foster, and adoptive families and of the children and youth served
- Recruitment practices for adoptive families
- Placement and matching for the child/youth served with adoptive family
- Assessments for selection of adoptive families
- Training for adoptive families
- Post-adoption services

Recommendations
There are no recommendations in this area.

3.C. Behavioral Consultation

Description
In behavioral consultation programs emphasis is placed on the reduction or elimination of problematic behaviors. The focus of the program is to replace inappropriate behaviors with positive behaviors or increase the ability of the person served to express more effective and appropriate behaviors. Behavioral strategies are used to teach the person other means to deal with targeted behaviors and the environment to ensure that inappropriate behaviors are discouraged and positive behaviors are learned and maintained. This may include services to young children with autism spectrum disorders (ASD) or behaviors symptomatic of ASD, persons with eating disorders, or those who exhibit self-injurious behaviors.
Key Areas Addressed
- Skill/knowledge of personnel
- Team meetings
- Behavioral assessment input
- Family support
- Problem behaviors
- Monitoring of strategies

Recommendations
There are no recommendations in this area.

3.1. Counseling/Outpatient

Description
Counseling/outpatient programs provide culturally and linguistically appropriate services that include, but are not limited to, individual, group, and family counseling and education on wellness, recovery, and resiliency. These programs offer comprehensive, coordinated, and defined services that may vary in level of intensity. Counseling/outpatient programs may address a variety of needs, including, but not limited to, situational stressors, family relations, interpersonal relationships, behavior management, mental health issues, life span issues, psychiatric illnesses, substance use disorders and other addictive behaviors, and the needs of victims of abuse, neglect, domestic violence, or other traumas.

Key Areas Addressed
- Service modalities
- Evidence-based practice

Recommendations
There are no recommendations in this area.

Section 4. Core Residential Program Standards

4.D. Foster Family and Kinship Care

Description
Foster/kinship care is provided under a contract or agreement for the placement of a child/youth in a family setting outside the birth or adoptive family home. Foster/kinship care is provided to a family to establish and maintain a home for the child/youth. The courts may be involved in establishing this relationship.

Foster/kinship care is comprehensive and establishes a system of supports and services for the child/youth, the family of origin, and the foster/kinship family. Programs assist foster and/or kinship families to recognize their strengths and abilities to effect change for the child/youth and family in order to establish stability in the life of the child/youth. Foster/kinship care may include relative care, preadoption placements, or care in parent/counselor homes. In Canada this would include such programs as out of care options and general foster care homes.
Key Areas Addressed

- Advocacy
- Permanency planning
- Foster family requirements
- Provider training
- Needs of child/youth

Recommendations
There are no recommendations in this area.

4.G. Specialized or Treatment Foster Care

Description

Specialized or treatment foster care programs use a community-based treatment approach for children/youth with emotional and/or behavioral issues. This intensive, clinically based treatment is child/youth centered and family focused and offers an alternative to inpatient or residential treatment when a child/youth can no longer live in his or her family home. Treatment is delivered through an integrated team approach that individualizes services for each child/youth. The treatment foster parents are trained, supervised, and supported by the program staff and play a primary role in therapeutic interventions. The program’s goal is permanency, either to reunite the child/youth with his or her family or to assist in facilitating an alternative permanent placement. Program staff monitors the child’s/youth’s progress in services and provide adjunctive services per the individualized plan and program design.

Children/youth who participate in the program may also have documented reports of maltreatment, involvement with juvenile justice, and/or co-occurring disorders. The program may also be called intensive foster care, therapeutic family services, or therapeutic foster care.

Key Areas Addressed

- Advocacy
- Training of specialized providers
- Referral network
- Organization responsibilities
- Clinical supervision

Recommendations
There are no recommendations in this area.
Program(s)/Service(s) by Location

United Cerebral Palsy Seguin of Greater Chicago

3100 South Central Avenue
Cicero, IL 60804

Community Employment Services: Employment Supports
Community Employment Services: Job Development
Employment Planning Services
Adoption (Children and Adolescents)
Behavioral Consultation (Children and Adolescents)
Counseling/Outpatient (Children and Adolescents)
Foster Family and Kinship Care (Children and Adolescents)
Specialized or Treatment Foster Care (Children and Adolescents)

UCP Seguin Infinitec Southwest - The Rubloff Building

7550 183rd Street
Tinley Park, IL 60477

Community Employment Services: Employment Supports
Community Employment Services: Job Development
Employment Planning Services
Adoption (Children and Adolescents)
Behavioral Consultation (Children and Adolescents)
Counseling/Outpatient (Children and Adolescents)
Foster Family and Kinship Care (Children and Adolescents)
Specialized or Treatment Foster Care (Children and Adolescents)