

St. Catherine's Center for Children

Annual Report
July 1, 2006-June 30, 2007

Our Mission

St. Catherine's Center for Children
provides a comprehensive
range of human services designed to offer hope,
foster growth, and improve the lives
of the children and families we serve.

A message from St. Catherine's Center for Children

Dear Friends:

We are proud to present this annual report covering the period from July 1, 2006 to June 30, 2007.

St. Catherine's Center for Children first opened its doors in 1886 at historic Schuyler Mansion in Albany. We were an orphanage back then, and in the intervening years we have grown and expanded the range of services we offer to meet the changing and more challenging needs of the community. Generations of children and adults have since passed through our doors, each looking to St. Catherine's to provide them with hope for a brighter future. While our programs have changed to meet the challenges of a new society, our mission of providing hope remains the same.

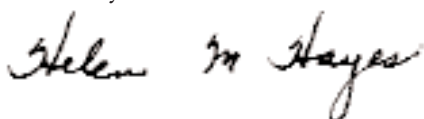
As you review this report, remember that there is a deep and meaningful story behind every number: an abused or neglected child who faces an uncertain future; a family that needs a new home and the resources to succeed in the community; a student who has difficulty thriving in a traditional public school; a foster child who needs a stable home. Whatever their background or circumstances, our children and families require the support of an experienced staff that understand their needs. At St. Catherine's, they are fortunate to find just such a caring group of people.

St. Catherine's Center for Children has a dedicated full and part-time staff of more than 300 employees working at nine locations throughout the Capital Region. Our employees, who include social workers, therapists, counselors, teachers, mental health professionals, nurses, childcare specialists, and administrative support staff, are dedicated to bringing about positive and lasting change in the lives of our children and families. We are supported by a board of directors and donors in the community who understand the importance of our mission. Without that support from the community, our work, difficult under the best of circumstances, would be impossible.

We are proud of the work we do here at St. Catherine's, and hope this report provides you with a better understanding of our mission and goals. If you want to learn more about us--our staff, our programs, and the children and families we serve--we invite you to visit one of our facilities and discover for yourself what makes St. Catherine's Center for Children such a valuable part of our community.

As always, we are grateful to our friends in the community who generously offer their time, energy, and resources to help us. On behalf of our children and families, thank you for your continued support!

Sincerely,



Helen Hayes
Executive Director



Kevin Quinn
President, Board of Directors

We are proud of the work we do here at St. Catherine's, and hope this report provides you with a better understanding of our mission and goals.



Residential Program



St. Catherine's Residential Program served 78 children

from 17

counties this year. We served children from as far away as Suffolk County.

St. Catherine's **Residential Program** serves five to 13-year-old children who have been removed from the care of their families or legal guardians and require 24-hour supervised care. Children in the program have a history of trauma or mental illness, and are placed based on their need to live in a safe setting that provides intensive, therapeutic care. In the continuum of available child care services, our **Residential Program** serves children who require a greater level of care than they would receive in a foster care setting, but generally less than is needed in a psychiatric hospital.

The goal of our **Residential Program** is to treat a child for identified behavioral or emotional issues and return the child to a permanent home as soon as possible. To ensure the shortest possible stay in residential care, discharge planning begins as soon as a child is placed with the agency. Reunification with the child's birth family or legal guardian is the preferred treatment outcome. When that is not possible, or is not considered in the best interest of the child, placement with a foster family or adoption becomes the placement goal.

St. Catherine's **Residential Program** has a dedicated staff of professionals who work with each child to provide daily, individualized treatment to maximize strengths and improve identified behavioral areas. Services include:

- Individual, group and family therapy
- Psychiatric and psychological evaluations
- Individualized medical/health care
- Emergency/crisis stabilization and assessment
- Daily recreational activity planning
- Permanency planning

St. Catherine's operates two group residential facilities which, together, can accommodate about 41 children. A third facility, a group home, serves up to eight children in a less restrictive environment for children who can function in a more home-like setting. St. Catherine's is licensed to operate up to four residential units. As the fiscal year ended, we were evaluating the possibility of re-opening a group home because of the increasing residential care needs of the community.

Adjusting our services to meet the changing needs of the community is a long-standing tradition at St. Catherine's. This year, we offered short-term placements in addition to our traditional long-term residential placements. In emergency situations, our residential program offered beds for counties that needed to immediately remove a child from his or her home to ensure the safety of the child. We also offered short-term placements that included 30 and 60-day assessments that allowed counties to gain a more comprehensive understanding of a child and family's needs before considering long-term placement in a residential program. Such short-term placements allow time for the development of a plan that minimizes family disruption and prevents long-term placement of a child in a residential program where none is needed.

St. Catherine's Residential Program served 78 children from 41 families this year. The average length of stay for a child leaving the program was 450 days. The program served children from 17 New York State counties. While we generally serve counties in the Capital Region, two of our children came from Suffolk County on Long Island.

Therapeutic Family Programs

St. Catherine's *Therapeutic Family Programs* offer two treatment programs: *Specialized Foster Care* and *Family Based Treatment*. These programs serve children with emotional, behavioral or developmental disabilities similar to those found among our residential children. The difference in treatment approach is that these children can be served in a home setting. Children in the program are identified and matched with professionally trained foster families who provide a consistent, predictable and nurturing home environment to help a child learn and grow.

The philosophy behind our *Therapeutic Family Programs* is that children with emotional or behavioral disorders are best served in family settings where they are nurtured and can learn social skills as part of their daily treatment. Critical to the success of the program are professional foster parents who receive extensive training, support services, and financial compensation to help them meet their foster care commitment. Support services for foster parents include, but are not limited to: respite, pre-placement training and education, ongoing training, peer support group meetings, participation in planning and implementation of the foster child's treatment plan, and availability of program staff 24 hours a day.

Another aspect of St. Catherine's foster care philosophy is the assumption that children are best served by those to whom they have primary attachments. Therefore, a key component of our *Therapeutic Family Programs* is service to the foster child's family of origin or legal guardian. This service may be provided directly by the agency's *Therapeutic Family Programs* staff or by linking the family of origin to additional community resources that may be available.

This year, both *Specialized Foster Care* and *Family Based Treatment* served about the same number of children and families as last year. Also similar to last year, 60% of the children admitted to *Specialized Foster Care* entered the program through an emergency referral. This two-year record suggests a shifting trend by local counties away from planned placements to crisis-driven placements. While we have been able to accommodate a great number of emergency referrals, many have been turned away because of a shortage of foster parents who are willing to accept emergency referrals. This shortage highlights St. Catherine's need to recruit families with the capacity to serve children who need emergency placement.

Both of our *Therapeutic Family Programs* continue to achieve outcomes consistent with the overall mission and goals of their respective regulatory state agencies (*Specialized Foster Care* is regulated through the New York State Office of Children and Family Services, and *Family Based Treatment* is regulated through the New York State Office of Mental Health).

In *Family Based Treatment*, six of the nine children who left our program returned to their families of origin or an adoptive home. All were discharged with improvement in their overall mental health and functioning, and with a reduction in their need for psychiatric hospitalization. *Specialized Foster Care* continues to achieve permanency for the children who leave the program. Seven of nine discharged children went to a permanent home, either with their birth family or an adoptive family.

Overall, St. Catherine's Therapeutic Family Programs served 38 children from 20 families this year. The average length of enrollment for a child in the Family Based Treatment Program was 316 days, and average enrollment in Specialized Foster Care was 834 days. The program served residents from eight Capital Region counties.

*St. Catherine's
Therapeutic Family
Programs
served 38 children
from eight
counties this year.
Thirteen
of 18 children who
left the program
returned to their home
of origin or an adoptive
home.*



R & E May School Day Treatment Program



The *R & E May School* serves an elementary school population of students with special education and therapeutic needs that cannot be met in a traditional academic setting. Students, ranging in age from five to 13, have emotional and behavioral issues that are best addressed in an environment that meets both educational and psychological needs (identified behaviors exhibited by some students in the program include verbal and physical aggression, provoking peers, running from supervision, and property destruction). Each child attending the R & E May School receives comprehensive, integrated services tailored to meet his or her individual educational and therapeutic needs.

The May School's psycho-educational approach stresses the teaching of self-control, school success, and social skills, as well as providing a stimulating and challenging academic environment. Day Treatment's interdisciplinary approach starts with a comprehensive, strength-based assessment of the student. Then, in collaboration with the child's family, service providers, and school district, the school works toward

developing the skills, attitudes, and knowledge necessary for the child to successfully return to a less restrictive educational environment when possible.

The *R & E May School* is staffed by a dedicated group of professionals that includes masters' level teachers, certified cooperating teachers, assistant teachers, crisis counselors, nurses, psychologists, speech therapists, and administrative support staff. In addition to academic work, May School students receive counseling and clinical services, occupational therapy, and speech/language therapy. Two, part-time child psychiatrists provide consultation and supervision of medication. Parents or guardians, other extended family members, caretakers, and home school district personnel work as partners with the staff to mutually support one another in the educational and therapeutic activities of May School students.

During the 2006-2007 school year, the May School continued working on a social skills program, along with a continued emphasis on improved student behavior, and the implementation of the Sanctuary Model[®] of treatment (see page 11 for a detailed discussion of the Sanctuary Model). The school also held monthly assemblies to celebrate community spirit, teach and reinforce social skills, and offer students opportunities for public speaking and performance. The May School also began the process of curriculum mapping and generating a May School Curriculum Guide to further support students in their academic achievement and growth.

The R & E May School served 96 children during this report year. Seventy-four of those students lived with their parents or legal guardians, and 22 were enrolled in St. Catherine's residential program. The average length of enrollment for a child discharged from the May School was 525 school days. The program served students from 25 school districts around the Capital Region.

The R & E May School served 96 children from 25 school districts during the 2006-2007 school year. The average length of stay for a child enrolled in the program was 525 school days.

Marillac Family Shelter

St. Catherine's *Marillac Family Shelter* provides temporary shelter and supplemental services to families who have lost their homes. Marillac, Albany County's only shelter designed exclusively for families, has units to accommodate up to 24 families at a time. Families in the program may be housed for up to six months.

Marillac not only offers shelter for homeless families, but also provides advocacy and assistance to address conflicts and issues that lead to homelessness. Services are designed to aid families in securing permanent adequate housing, employment, and other services essential for the welfare of the family (i.e. substance abuse counseling, day care, and mental health counseling if needed).

Securing safe, affordable housing for families in the Capital Region living at or near the poverty level continues to be a challenge, not only for the families, but also for agencies and organizations that work with the homeless. During this report year, Marillac's waiting list sometimes exceeded 40 families. To meet the challenges of homelessness, Marillac's staff collaborated with other service providers during the year. They met monthly with Albany County representatives, not only to prioritize the waiting list for families residing temporarily in hotels, but also to ensure that families living at Marillac received benefits in a timely fashion.

This year, Marillac also continued its collaboration with ClearView Center of Albany (and Advocates for Human Potential) on *Empowerment Project*, a community-based program designed to help families as they make the transition from shelter back into homes of their own. *Empowerment Project* is funded through a five-year, two million dollar federal grant awarded by the Substance Abuse and Mental Health Services Administration (SAMHSA). Families enrolled in *Empowerment Project* receive counseling and case management services, and also assistance in accessing programs offered by other service providers. Since homeless families often have extensive histories of domestic violence and abuse, trauma counseling is an integral part of *Empowerment Project*. The ultimate aim of the program is to reduce homelessness in the Capital Region, a major goal of both Marillac and the Albany County Coalition for Homelessness (Marillac is an active participant in Albany County's 10-Year Plan to End Homelessness).

This year marked the second year of funding for *Empowerment Project*, and our primary goal is to work on program sustainability into the future. SAMHSA is providing assistance to St. Catherine's and ClearView to help search for the funding needed to continue this critical program beyond the life of the five-year federal grant.

St. Catherine's Marillac Homeless Family Program served 360 children and 200 adults representing 153 families during this report year. Of those 153 families, 81% were headed by women. The average length of stay for a family at Marillac was 60 days, among the lowest averages for family shelters in the state.

Marillac served 560 children and adults during the year. That figure represented 153 families, 81% of which were headed by women.



Community Based Services



*St. Catherine's
Community Based
Services
served 376 children
from 228 families dur-
ing the year. Those
families came from 22
cities, towns, and vil-
lages in the Capital
Region.*

St. Catherine's Center for Children offers a variety of **Community Based Services** designed to enhance and preserve family life. Working closely with representatives of other community agencies and institutions, St. Catherine's designed these programs to equip families with the skills they need to function in today's world. Community Based Services include:

- Clinical assessment of children, adults, and families
- Parent skills training and parent support groups
- Individual, marital, and family counseling programs
- Parent aide/home aide services which provide transportation, advocacy, role-modeling, budgeting, and other services for parents
 - Parent care services to help developmentally disabled adults with children organize their daily lives
 - Respite care to provide breaks for parents with children who have emotional or behavioral problems
 - The Berne-Knox-Westerlo after-school program for students with developmental or behavioral problems
 - A Comprehensive Access and Visitation Program

that oversees court-ordered visits between children and non-custodial parents in families where parents have separation agreements

Community Based Services encourage the development of mutually satisfying and growth-enhancing family relations. They differ from many of the other services offered by St. Catherine's because most of them are home based. The focus of these programs is often the whole family, and problem areas are addressed in a respectful and confidential manner. St. Catherine's *Community Based Services* are highly valued by the counties that use them because of the role they play in maintaining family stability and reducing the need for more costly services.

St. Catherine's Community Based Services fall into three categories: Prevention programs, the Comprehensive Access and Visitation program, and Respite services. During this report year, Prevention programs served 180 children from 75 families; Access and Visitation served 104 children from 81 families; and Respite served 92 children from 72 families. As a whole, Community Based Services reached 376 children from 228 families.

The average length of enrollment in Prevention programs varied, ranging from a low of 418 days in the Parent Aide program to 750 days in the Family Care Program.

The average length of stay for families in the Comprehensive Access and Visitation program was 90 days.

The average length of enrollment for families using Respite services was 480 days.

Families enrolled in Community Based Services represented 22 cities, towns, and villages in the Capital Region.

Facts and figures

Founded as a home for orphans in 1886, today St. Catherine's Center for Children is a leading provider of human services in the Capital Region. We offer a continuum of services, both at our facilities and in the home, that offer hope, foster growth, and improve the lives of the children and families we serve. Other interesting facts and figures about St. Catherine's:

- St. Catherine's serves five to 13-year-old children in our residential and day treatment programs. Our family shelter, foster care programs, and community based service programs reach a broader group of children ranging from infant to adolescent.
- Children and families often come to us with a history of trauma. Mental illness, abuse, neglect, and physical and substance abuse are some of root causes of that trauma.
- St. Catherine's is a regional human services provider. This year, we served children and adults from 31 cities, towns and villages; 25 school districts; and 18 counties in New York State.
- We employ about 300 full and part-time people at nine facilities in Albany. Our work force includes social workers, counselors, master's level teachers, clinicians, nurses, mental health professionals, and administrative support staff.
- St. Catherine's services reached upwards of 2,000 men, women, and children this year. These services represent thousands of days of care, and tens of thousands of hours of therapy, counseling, clinical reviews, special education, training, and other combined services.
- St. Catherine's was founded by an order of Roman Catholic nuns known as the Daughters of Charity. For much of the agency's history, the Daughters ran St. Catherine's. Sister Dorothy Copson, the last Daughter of Charity, left the agency in 2007. While St. Catherine's still retains historical ties with the church, it is today a publicly funded not-for-profit human services agency.
- St. Catherine's is funded primarily through local, state, and federal government programs. Funding comes from a variety of sources depending on the population served. Our Day Treatment program, for instance, is overseen by the New York State Department of Education and is funded by a student's local school district. Other funding sources include the New York State Office of Mental Health, county departments of social services, and referring agencies.

2006-2007 Revenues

Revenue	Amount
Fees for service	\$10,020,642
Grants	\$ 75,047
Other income	\$ 1,296,202
Total Revenues	\$11,391,891

2006-2007 Expenses

Expenses	Amount
Program	\$10,020,642
Administrative	\$ 1,392,803
Total Expenses	\$11,401,147

- Contributions from friends, as well as grants from business and community foundations, also support St. Catherine's. These contributions fund special programs, such as art and music education, that our children might not otherwise receive. A list of friends and contributors who supported us during this year begins on the next page of this report.

Each year, St. Catherine's receives hundreds of referrals. We carefully review each referral to determine if our services fit the needs of the child or family. If we cannot provide assistance, we refer people to other service providers who can help. For more information about referring people to our programs, contact our Director of Centralized Intake and Census Management at 518-453-6783.



Friends and Contributors

The Foundation of St. Catherine's is grateful to the following groups and individuals who supported us with monetary contributions during this report year, July 1, 2006 to June 30, 2007. Your continuing generosity allows us to deliver quality care and treatment to children and families.

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Donations were made in honor of the following people during the year.

Robert Curley
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Special Thanks

The Foundation is fortunate to have the support of hundreds of contributors who help us meet the needs of our children and families each year. Many of you provide in-kind support of clothing, books, toys, and services. You also buy gifts for children and families during the holidays and on other special occasions. To everyone who said yes when you were invited to support St. Catherine's, we extend our sincere thanks and appreciation.

A move toward sanctuary

"Organizations committed to working with troubled individuals all face enormous stresses. Unfavorable financial, regulatory, social and political environments can adversely impact organizational functioning and make us lose sight of the mission, goals and values that should guide our work. Over time, stressed systems can become reactive, change resistant, hierarchical, and coercive. In fact, the organizations themselves may begin to exhibit post-traumatic stress disorder symptoms similar to those of their clients, creating a trauma-organized culture...."

**-From the Sanctuary Institute, Andrus Children's Center,
Yonkers, New York**

St. Catherine's Center for Children has long been interested in applying "best practice" treatment methods in working with its children. What approach works best when working with a troubled child? What systems can help an organization deliver effective, long-lasting treatment? The Sanctuary Model® of treatment, developed by Dr. Sandra Bloom, offers an exciting approach to working with troubled children and adults. Over three decades, Dr. Bloom studied the effects of trauma on individuals. She learned that many organizations treated specific behaviors, but failed to address early life traumas that created those behaviors.

Dr. Bloom's 1997 book, *Creating Sanctuary: Toward the Evolution of Sane Societies*, examines the role that trauma plays, not only in individuals, but also in organizations. Through her work, Dr. Bloom developed the Sanctuary Model, a method of treatment that addresses organizational structure and practice as a means of creating a better treatment environment for individuals. Dr. Bloom's Sanctuary Model was applied initially with traumatized adults in in-patient hospital settings, but has since been adapted and proven successful in residential treatment programs, foster care programs, schools, and other settings. Today, more than 28 human services agencies nationwide and abroad have adopted Sanctuary as a treatment model.

In 2006, St. Catherine's Center for Children applied for and received a grant from New York State's Office of Children and Family Services (OCFS) to fund the training and consultation necessary to become a Sanctuary agency. A group of seven employees attended training at the Sanctuary Leadership Development Institute at Andrus Children's Center in Yonkers. This group became a Steering Committee that spent the next twelve months training a Core Team composed of nearly 40 agency employees. It will be the responsibility of the Core Team to bring Sanctuary principles to the rest of the agency.

Don Smith, St. Catherine's Deputy Executive Director for Agency Operations, is a member of the Steering Committee, and has been active in Sanctuary Core Team Training. "St. Catherine's has a great deal invested in Sanctuary because we believe it offers a sensible approach to meeting the needs of our families," he said. "The agency's Sanctuary Core Team has been training for a year. Our next step is to roll out Sanctuary among all of our programs, and encourage it to become part of the culture of St. Catherine's. We are looking forward to it. We believe Sanctuary represents a logical step in the evolution of our services."



*"We believe
Sanctuary
represents a
logical step in the
evolution of
our services."
- Don Smith,
Deputy Executive
Director for
Agency Operations*

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