# A New Experience of Old Values

Our structured setting removes students from their "emotional comfort zone", including their familiar negative interactions with family member, peers and teachers. Students begin to drop destructive patterns and habits in the new environment. With a fresh perspective, they

are receptive to learning adaptive skills that enable them to reenter their home and school community.



The therapeutic environment helps them recognize the consequences of their behavioral choices. As a result, students begin to accept responsibility for personal decisions, address individual and family issues, and become invested in their own character development. Through hard work, self-examination, and community building, the residents are encouraged to develop a new, realistic sense of their talents and capabilities, to value the talents of others, and to make meaningful contributions to those around them.

Milhous stresses teaching core values throughout all aspects of the program.

- Accepting responsibility for your actions
- Showing respect for ourselves and others
- Building healthy relationships with family and friends
- Development of a strong work ethic
- Contributing to our community

## Student Profiles

Milhous

California's children and adolescent residential programs are classified from Level 1 to 14, in accordance with the <u>intensity of services needed</u>, level 14 being the highest intensity of

services. All Milhous Programs are certified as level 14 by the California Department of Social Services.

Milhous residential treatment programs provide an array of comprehensive services for children with emotional, behavioral and educational problems that are severe enough to keep them from functioning in their home, school and community.

Milhous accepts boys and girls 10 to 19 years of age. The boys program is located on a 1000 acre ranch in the Sierra foothills near Nevada City, California. The girls programs are each located on three 5 acre ranch style properties just south of Sacramento, California.

Types of disabilities and behaviors may include DSM-V diagnostic classifications, emotional disability, behavior disorder, learning disability, or a combination of issues that prevent the child from functioning successfully.

Milhous will accept students on medication. Students in need of medication evaluation are referred to our consulting psychiatrist.

#### Behavioral issues may include:

- Anger control issues including lack of respect for authority
- Anxiety (including generalized anxiety, obsessive compulsive tendencies, eating disordered behavior, and social phobias)
- Low self-esteem and failure to perform to potential
- Poor peer and family relationships / Beyond parental control
- Physical and verbal aggression
- School violence, including threats to teachers and peers
- Sexual misbehavior
- Terrorist type threats towards teachers, administrators, and peers
- Isolation, withdrawal, underdeveloped social skills
- Truancy / Suspended or expelled from class.

Milhous can work with students who are transitioning from other programs or schools. This includes students who have been expelled and are looking for re-admission. We work closely with parents, professionals, and the school in this process.

Program exclusions: Clients who are *actively* suicidal, *adjudicated* in arson behavior, unresponsive psychosis, or drug-addicted as the *primary* focus, will be considered ineligible for the Milhous Children's Services program.

# Our Focus

m BEHAVIOR – Modify the behaviors that have warranted placement in a residential treatment program.

Each child's targeted behaviors are identified, and an individual behavioral plan is developed. Associated interventions are trained, so that line and clinical staff approach the students as counselors, not guards.

 $F_{AMILY}$ - Identify and address factors with in the student's home environment critical to future success once back in their home and community.

Milhous recognizes that the child is part of his own family unit. Family therapy, phone calls, and visits promote development of positive interactions between parents and children. Therapists step the families through

graduated changes needed for continued success.

Helping to develop

positive and productive

strategies with the student's

support base is 'key' to the

overall success for our students.

Including the family in case

management, aftercare

coordination and planning, as

well as scheduled therapy, we

work toward total success at

every stage...

EDUCATION – Create a therapeutic environment and educational approach that fulfills each student's style of learning.

Each child's Individualized Educational Program is adhered to by Special Education teachers and aids, in intimate classes of six to seven students. Learning may take place through creative projects that encourage student enthusiasm. Individual attention provides the opportunity for our students catch up on credit deficiencies in order to fulfill their school districts high school requirements.

MENTAL HEALTH - Identify and treat the underlying

mental health disorders perpetuating those harmful behaviors.

Our licensed therapists and psychiatrists evaluate our students upon admission and continuously throughout placement. Evidence based interventions are tailored to each child's unique symptoms and personality. Cognitive behavioral therapy, family system approaches, examination of past traumas, and teaching coping and relaxation skills are some of the services provided by our clinicians.



Individual Target Behaviors are identified and prioritized upon admission. These are

behaviors identified as the basis for residential placement and preventing the child's success in public school, home and community; such as physical and verbal aggression, suicidal behaviors, running away, non-compliance, substance abuse or property destruction. Once the predominant behaviors have been identified, a treatment plan as well as an hourly charting system is established to monitor progress with program participation and the identified maladaptive behaviors.



Data is continuously collected for evaluating students' progress, program

effectiveness, and staff effectiveness. Information generated by this charting is used by the therapist during clinical sessions with the families and student and in preparing the individual treatment plan and quarterly reviews.

#### Behavioral Intervention Plan is developed

Each student is assessed by our psychiatrists and clinical staff for the presence of symptoms related to a mental health DSM diagnosis. Our system produces charting tools to capture and report the presence and intensity of the symptoms through charting, this includes charting nighttime sleep patterns, a vital tool used by our psychiatrists' in evaluation of any prescribed medications. Behaviors and interventions are discussed with the Milhous Treatment Team and student for their input and concurrence. Interventions are established by the student's assigned therapist and disseminated to all staff through the clinician's orders.

#### Interventions are reviewed for effectiveness and progress

The treatment team (therapist, teacher, house administrator and program specialist) meets with the student for their feedback on the effectiveness of the interventions. The student's treatment team reviews the frequency and intensity of harmful behaviors. Interventions are modified in accordance with progress. Mental health workers provide immediate counseling interventions throughout the day as students experience problems or opportunities for learning.

#### Transition back to home and community

When will the child be ready for transition? When the student can consistently displays their ability to self-manage their own behavior. This goal is determined upon admission and tracked with the Milhous daily behavior charting system (e.g. Reduction in severe physical aggression towards peers from baseline 3X weekly to 1X per month or less...) To maintain and advance the behavioral progress achieved while at Milhous, the student's family is coached on the Positive Replacements and Interventions used in reducing the adverse target behaviors.



## Families and Education

Working together with Families to identify and remedy issues that will support the student's successful return to their home and community.

#### Parents / Family members:

- Contribute to the identification of Target Behaviors prompting residential placement
- Participate in family therapy with the student
- Participate in progress reviews
- Participate in identifying community issues detrimental to the child's return home
- Assist in identifying and resolving potential future conflicts with family members
- Actively participate in the IEP process
- Work with the therapist in "gaining insight" on their child's issues and perspectives
- Provide home visits with structure and purpose in practicing new skills.
- Communicate with the consulting psychiatrist regarding medication management



For more information, resources or descriptions, visit us at <a href="https://www.milhous.org">www.milhous.org</a>

Milhous creates an environment and approach that accommodates each student's style of learning.

- Milhous School is a non-public school certified by the State Department of Education, offers on-grounds educational services to all of our residents.
- Our classrooms contain six to seven students, with one teacher and two aides.
- Each classroom is directed by qualified Special Education teachers.
- Additionally, all teachers receive the same in-house training as our mental health staff, and are trained to de-escalate behavior problems in the class and provide conflict resolution.
- The program affords youngsters access to licensed speech therapists and other supportive professionals on an as needed basis.
- Milhous School provides small group and one to one instruction in academic deficiencies. Students come to us with experiences that have pre-conditioned school failure.
- A critical portion of our success is related to the integration of each child's academic and treatment program. Teachers and therapists participate jointly in case conferences and the development of the Individualized Education Plan.
- The integration of the treatment program and the educational program allows consistent, uniform addressing of serious behavior problems.



### Mental Health Services

Our treatment teams, consisting of licensed therapists (MFT, MFTI, and LCSW) special education teachers, psychiatrists and nurses, measure long-term goals and short term objectives and address issues with structured therapeutic interventions designed to reduce symptoms and improve functioning consistent with the goals of learning, development, independent living and enhanced self-sufficiency.

As part of our assessment and planning services, the Milhous treatment team meets quarterly with County agencies and families to report on progress and review the treatment plan. This process ensures coordination of care during placement and during the transition process leading to family reunification.

Milhous offers an array of mental health services to support each child's individual needs and goals. These services include:

INDIVIDUAL THERAPY Licensed therapists provide individual therapy at least twice per month. Measurable long term goals and short term objectives are addressed with structured therapeutic interventions.

FAMILY THERAPY Licensed therapists provide family therapy at least twice a month. Sessions focus on the family's understanding and support of the child's treatment goals and on the problems that are most acute or disruptive to the family. Family therapy is imperative to the successful and sustainable reunification of the child with the family.

DAY TREATMENT The Day Treatment Intensive Program provides a structured, therapeutic milieu in which a range of treatment interventions are incorporated.

- **Psychotherapy**: Led by the therapist, psychotherapy assists children in gaining a deeper understanding of psychosocial issues in order to identify thoughts, feelings, and behavior that effect internal and interpersonal progressions.
- **Skill-Building Groups**: Skill building groups help children to identify barriers to their mental health and emotional issues. Groups focus on both a learning process along with the development of skills and adaptive behaviors necessary for positive growth.
- Adjunctive Groups: These groups provide an opportunity for children to express their thoughts and emotions, to explore a deeper understanding of self, and to increase self-esteem through personal expressions. Modalities include art, recreation, movement, music, therapeutic animal interactions, etc.
- Community Meetings: Led by the therapist, these meetings include reviewing the day's schedule, resolving issues affecting children and staff as a cooperative community, conflict resolution, planning for special events, and review of the previous day treatment experiences.



# Mental Health Services Continued

MEDICATION SUPPORT Many of our students benefit from psychotropic medications. All children are assessed by Milhous' psychiatrist for mental status review and diagnostic examination, oversight of therapist's work, and evaluation for necessity of medication. Our policy has always been to use medication sparingly, and medicate is never used for the purpose of sedation for behavior management. Our nurse meets with the children between visits with the psychiatrist to evaluate the clinical effectiveness and side effects of medications.

CRISIS INTERVENTION Milhous is prepared to provide crisis intervention services as needed. All staff working with the children are trained in crisis intervention. Not all the children placed with Milhous require crisis intervention services. Crisis intervention services are limited to stabilization of the presenting emergency.

THERAPEUTIC BEHAVIORAL SERVICES (TBS) Milhous has added a new mental health program to provide additional support to children who are at risk of failing their placement from unsafe disruptive behaviors. The TBS coach provides behavior modeling and support as well as behavior replacement interventions that assist the child to reduce impulsivity, and increase social and community skills.

EVIDENCE BASED TREATMENT PLANNING Milhous has developed a behavioral charting and reporting program that is uniquely developed to help each student manage his or her behavioral responses. Key features include levels of Participation, Cooperation and Targeted behavioral profiles. Singular and detailed data is collected as incidents occur and/ or behaviors are present. Reports and charts are entered into a system that analyses all aspects of the behavior for frequency, intensity and/ or impairment.

DISCHARGE PLANNING The child's planned discharge is identified upon admission. This plan identifies the steps and time frame involved in the child's transition process for discharge. The treatment team, through case conferences, will monitor the child's progress towards discharge and make recommendation for post treatment.

Our admissions staff would be pleased to assist you by answering any questions and providing all the information necessary to complete the referral process.

Admissions Office (530) 265-9057 Fax (530) 292-1120

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