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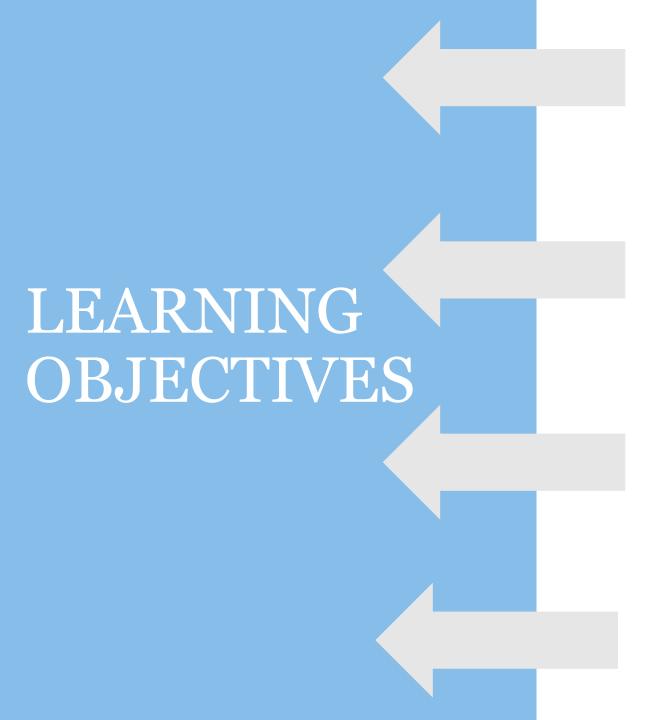
Mission-Driven Risk Taking



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Recognize some of the best practices of change-leadership.

Understand how an agency shifted its service array and target population dramatically to meet changing needs of children and families.

Learn how our agency made strategic decisions, taking risks driven by mission.

Learn practical change management implementation strategies through the Ädelbrook case study.



OUR HISTORY

Ädelbrook was founded in 1900 by the Swedish Evangelical Covenant Church. Dedicated and opened as The Swedish Christian Orphanage, its purpose was to "provide a home for homeless and neglected children" and *help individuals find a future filled with achievement, dignity, happiness, and hope.*





Ädelbrook continues to adapt to meet the changing needs of the community while remaining dedicated to the principles of its original mission. Today, we are a state-of-the-art residential treatment center, special education school, and family treatment center.

After more than 100 years of caring for children and their families



After more than 100 years of caring for children and their families, Ädelbrook continues to be committed to being the premier resource for children, families, and communities. Today, we meet the needs of youth and young adults with Autism Spectrum Disorders and other behavioral and developmental challenges.

















Ädelbræk
PHASES OF CHANGE

- Accepted that change was vital for our mission and survival.
- Mourned the past.
- Let go of the past and look towards the future with hope.
- Embraced the future with enthusiasm and broad engagement.

State Policy Changes Population Shift Major Risk

2009

Juvenile Justice Population Served

State Policy and Regulation Changes created a financial crisis among residential providers in the state.

Completion of a market analysis

Ädelbrook commits to being the premier resource for children, families, and communities to meet the needs of youth and young adults with Autism Spectrum Disorders and other behavioral and developmental challenges...

On a LONG JOURNEY



Residential Treatment Changes

Leaders in advocacy, policy, and program development to bring innovative models and best practices to those who need services

Team Approach (Behavioral, Clinical, Medical, Education) and Inclusion of Parents and Community Involvement and Planning

Data-Driven,
Evidence-Based
Practices

Person-Centered Individualized Treatment



Expansion Continued Risk Taking

- •Continuous Residential Support
- Community Living Arrangements
- •Respite
- Step Up Step Down
- •Child Health and Development Institute
 - •TF-CBT
 - •MATCH
 - •CBITS
- •Trauma Informed Care



Trauma-Informed Lens



Development of Behavioral Approaches using a Trauma-Informed Lens

Acuity/Need

The "Whole Body" Approach

Trauma-Informed
Care with ASD
Population

Innovative Approaches





Training Approaches

- Need for change/Population
- Incoming Staff/Orientation
- o Best Practice Training
- o Innovative Training Models



Supporting Students Before the Pivot: A Very Different Treatment Modality

- Shifting Brand Identity
- One school for on campus residents
- IEP Identification: Emotional Disturbance
- Treatment philosophy: more closely aligned to traditional mental/behavioral health methods



After the Pivot: Reimagining Education for a New Population

- •How did we pivot and change?
- •Person-centered approach and focus on the whole student
- •New treatment modalities
- •Programming to support all areas of functioning
- •Expanded experiences for students
- •New programs to serve the entire age range





Questions and Answers

