Serving Youth in Their Communities

Philadelphia made dramatic strides in increasing community-based care for youth while reducing reliance on out-of-state residential treatment facilities.

Youth with severe behavioral health challenges are often placed in residential treatment facilities (RTFs) where they receive full-time mental health care and supervision by child care workers and mental health professionals.

Youth placed in RTFs often encounter difficulty re-integrating with their families and communities upon discharge. Research shows a recidivism rate of 15 percent or more for these youth.

Unfortunately, youth with less severe behavioral health challenges are placed in RTFs due to the lack of sufficient community-based resources. According to national data, many youth with behavioral health challenges can be maintained at home, within their families, schools and social environments if home and community-based resources are available.

State and local entities recognized that increased home and community-based options promote better community integration by strengthening relationships with family members, mentors, and other caring adults in the community. As a result, efforts focused on reducing the use of out-of-state facilities while developing more community and home-based resources.

The Blue Ribbon Commission (BRC) on Children’s Behavioral Health was created during February 2006 to promote social and emotional wellness for all children in Philadelphia. The BRC recommendations include making a concerted effort to move youth from distant and residential treatment facilities to community and home-based settings. The Philadelphia Compact developed implementation plans to meet BRC goals.

During 2007, the Office of Mental Health and Substance Abuse Services (OMHSAS) in conjunction with Office of Children, Youth and Families (OCYF) reviewed policies and practices regarding Pennsylvania’s residential treatment facilities (RTFs). OMHSAS developed goals for reducing RTF capacity and increasing community capacity while encouraging more family involvement.

Results

- DBH/MRS reduced the use of out-of-state placements by 39% while simultaneously increasing the use of functional family therapy by 47%.
- Reduced the number of youth in specialized out-of-state facilities from 151 (January 2009) to 59 (March 2010).
- Increased the number of youth in functional family therapy from 84 (January 2009) to 176 (March 2010).
- Expanded local RTF capacity by enrolling six local RTFs in the Community Behavioral Health (CBH) network.
- Removed eight out-of-state providers from the network.