PROGRAM INFORMATION If you have questions about this report, please contact: Ron Bertsch at (859)-331-2040

DCCH Center for Children and Families TFC

Parent Agency: Diocesan Catholic Children's Home, Inc.

75 Orphanage Road Fort Mitchell, KY 41017 **Phone:** (859) 331-2040 **Fax:** (859) 344-5022

AgencyWebsite: www.dcchcenter.org

Referral Contact: Ron Bertsch

General Referral Email: tfc2040@dcchcenter.org

Referral Phone: (859) 331-2040 Child Caring License(s): None

Child Placing License(s): Foster Care; Adoption; Therapeutic Foster Care; Setting: Rural & Urban/Suburban On Site School: No

Male Operational Bed Capacity: 0 County(s) of Boone; Bracken; Campbell; Grant; Harrison; Kenton; Pendleton; Scott;

Female Operational Bed Capacity: 0 Program or Either Sex Operational Bed Capacity: 156 Foster Homes:

Supplemental Information

We strive to help every child we accept into TFC placement to reach their permanency goal. We recruit and train foster to adopt families, actually having more prospective adoptive homes available than foster homes. Our goal is to serve the child with no further losses or moves. DCCH in 2019 started a mentoring program for new foster parents as they can be matched with experienced families for extra guidance and support.

Included/Excluded Populations

Gender Accepted: Both Age Range Accepted: 0 to 18 LOC Range Accepted: 1 to 3 Minumum IQ Accepted: 50

Client History at Admission

<u>Citent History at Aan</u>	nission_					
Average Age at Date U	Updated: 1	1.3 Average LOC at Intake	2.9		Number IQ 0 - 59:	0
Number of Residents:		20 LOC Unknown:	2		Number IQ 60 - 69:	1
Number of Males:		9 Number LOC 1:	0		Number IQ 70 and above:	1
Number of Females:		11 Number LOC 2:	5		Number IQ Unknown:	18
		Number LOC 3:	11			
		Number LOC 4:	1			
		Number LOC 5:	1			
Number of Current Res	sidents Inc	cluded in Risk Indicator Percen	tage	23		
Animal Abuse:	0%	Low Functioning:	(0%	Substance Abuse:	0%
Aggressive Acts:	22%	Runaway:		0%	Suicidal Gestures:	0%
Destroys Property:	0%	Self Abusive:	(0%		
Fire Setting:	0%	Sexual Perpetration:	(0%		
Failure to Comply:	0%	Dangerous Impulsivity:	(0%		
Homicidal Gestures:	0%	Sexual Acting Out:	(0%		

STAFF INFORMATION

	<u>Number</u>	High School	Some College	<u>BA</u>	MA or Higher
Administration:	2	0%	50%	0%	50%
Case Management Staff:	5	0%	0%	60%	40%
Clinical Staff:	7	0%	0%	0%	100%
Direct Care Staff:	0	0%	0%	0%	0%
Average Number of Mon	ths Foster	Parents have	Fostered for the	Agency:	71.1
Treatment Director: Ron	Bertsch N	MSW			

Psychiatric Services

We contract with a Psychiatrist and she sees our children within one week of admission and every other month thereafter unless need warrants more. She is on-site weekly and on-call daily.

SERVICES AND OUTCOMES

Safety

Number of Substantiated Abuse Allegations in the Past Year: 0								
Total # of Bedrooms:	29	Percentage of D	irect Care	Staff Trained in Physical Management	N/A			
Single Bedrooms:	25							
Double Bedrooms:	4	Percent of Foste	er Families	8.6%				
3+ Bedrooms:	0	Percent of Famil	lies with 2	or more Children and a Sibling Group:	4.3%			
Critical Incident and Physical Management ratios are compiled for the period 12/1/2022 through 11/30/2023								
Deadly Weapon Per 100 I	Reside	ent Days	0.00	NO INCIDENTS DURING REPORTING	PERIOD	Number of Months		
Serious Injury Per 100 Re	esider	nt Days	0.00	NO INCIDENTS DURING REPORTING	PERIOD	Data Received:		
AWOL Per 100 Resident I	Days		0.01	WITHIN AVERAGE RANGE		12 of 12		
Suicide Attempt Per 100 F	Reside	ent Days	0.00	NO INCIDENTS DURING REPORTING	PERIOD			
Criminal Activity Per 100 l	Resid	ent Days:	0.00	NO INCIDENTS DURING REPORTING	PERIOD			
Injury to Other Per 100 Re	esider	t Days:	0.00	NO INCIDENTS DURING REPORTING	PERIOD			
Sexual Acting Out Per 10	0 Res	ident Day	0.00	NO INCIDENTS DURING REPORTING	PERIOD			
Total Critical Incidents Pe	r 100	Resident Days:	0.01	WITHIN AVERAGE RANGE				
Physical Managements Pe	er 100	Resident Days:		N/A				

Permanency

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Length of stay and discharge data are calculated on discharges between 12/1/2022 through 11/30/2023								
<u>Measure</u>	<u>Number</u>	<u>Percent</u>	Length of Stay	<u>Outlier</u>				
Child Progress toward Permanency Discharges	20	90.9%	508.1	BETTER THAN AVERAGE RANGE				
Progress Discharge to Home Like Placement	20	90.9%	508.1	BETTER THAN AVERAGE RANGE				
Progress Discharge to Less Restrictive Placement	20	90.9%	508.1	BETTER THAN AVERAGE RANGE				
Child Behavioral Difficulty Discharges	2	9.1%	140.5	WITHIN AVERAGE RANGE				
Runaway Discharges	0	0.0%		WITHIN AVERAGE RANGE				
Psychiatric Discharges	1	4.5%	120.0	WITHIN AVERAGE RANGE				
Agency/System Discharges	0	0.0%		WITHIN AVERAGE RANGE				
Caretaker Incapacity Discharges	0	0.0%		WITHIN AVERAGE RANGE				
Caretaker Failure Discharges	0	0.0%		WITHIN AVERAGE RANGE				
Caretaker Investigation Discharges	0	0.0%		WITHIN AVERAGE RANGE				

Well Being

Does this program have a PCC Foster to Adopt Agreement?	Yes	Educational Disruptions in the Past Year:	3
Adoptions by the Program's Foster Homes in the Past Year:	10	School Changes in the Past Year:	3

Describe How the Program Supports Family Connections

As a program we offer guidance & support as well as mileage reimbursement to our foster parents who are willing to transport their children to birth family visitations, sibling visits etc. We often times offer to host the setting for such visits at our office facilities. We usually take at least if not more than 50% responsibility in supervising the visits. Our staff will help with transportation for the DCBS worker too at least 50% of the time when our foster parents cannot. Family therapy for birth parents and children is also an option when deemed appropriate by DCBS. We make ourselves available for direct communication with the birth family when the DCBS worker feels that is safe and offers permission to do so. Many of our foster parents have informal contact with birth parents in the hopes to encourage, role model and support them in reunification efforts. Some have hosted visits in the foster home or agreed to meet birth families at parks, restaurants etc.

Special Interventions Available Internally

We also have on contract a child psychologist with DCCH for assessment, consultation and support for the program staff, foster/adoptive parents and our program therapists. The psychologist is available to our program 3 hours a week and attends all treatment planning conferences that the psychiatrist might not attend. She also meets with our clinical therapists on a weekly basis for consultation for our TFC cases approximately 1 to 2 hours a week. Both our psychiatrist and psychologist are on grounds more hours for our Residential program, so if we needed to communicate with them, we have that opportunity as well.