



# Stars Behavioral Health Group Starlight Adolescent Center

## OVERVIEW OF PROGRAM

Clients Served July 2003 through Dec 2004

### Mission

*Starlight Adolescent Center* expresses the distinctive mission and vision of residential and community outpatient treatment within the larger mission of *Stars Behavioral Health Group* (SBHG):

*"Develop and operate a full continuum of mental health services that reflect clinical excellence and continuous quality improvements, to maintain an unconditional commitment to assisting clients with mental illness to achieve and maintain their optimum level of functioning and quality of life, and to provide effective mental health treatment and cost-efficient services that involve and respect the diverse resources and talents available within the client, family, staff, and community".*

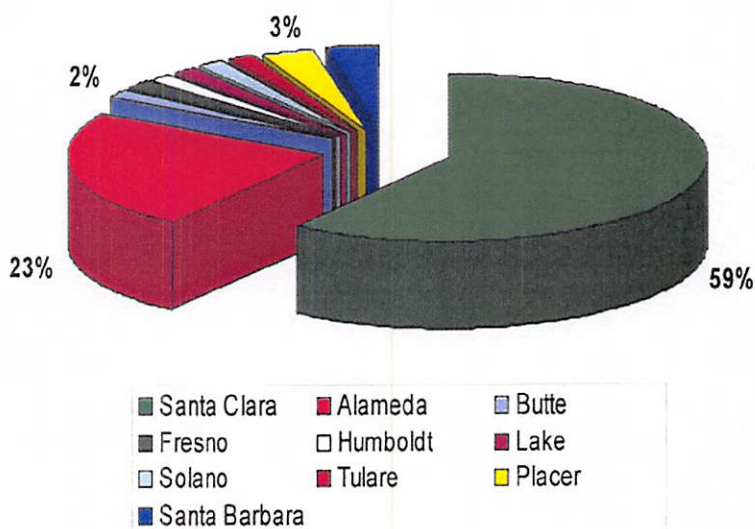
Within the SBHG continuum, *Starlight Adolescent Center* has the important distinction of offering to California the first Community Treatment Facility (CTF) for youth. Started in year 2000, the original CTF mission was to provide local and cost-effective treatment as an alternative to expensive state hospitalization. This mission was accomplished as state hospital populations declined and youth moved into community care. Subsequently, *Starlight* began to play a unique role in the continuum of services available throughout the state by providing a step-up for clients unable to succeed within an RCL Level 12-14 group home. CTFs also offer treatment – as distinct from detention -- to juvenile offenders with mental illness. *Starlight's* CTF and Non-Public School (NPS) make step-down and sustained safety, structure, treatment and education possible for youth coming from acute or sub-acute psychiatric facilities.

Nearly 60% of CTF clients come from Santa Clara County and 23% come from Alameda. Other counties with youth placed in the *Starlight* CTF are shown in the graph to the right.

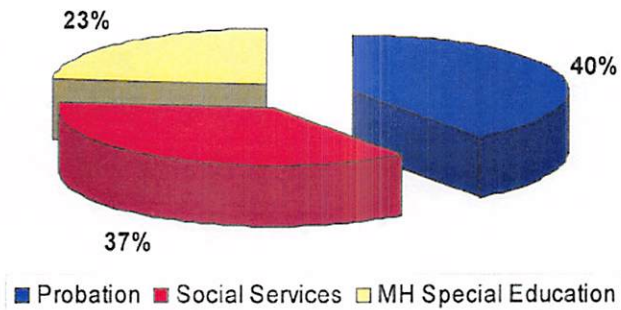
Sixty (60) unduplicated clients were served during the time period of this report. Five clients experienced more than one treatment episode.

The proportion of clients referred for CTF placement by different public agencies include those depicted in the graph below. Clients might be dependents or wards of the court, including some placed

**Counties Served by Starlight's  
Community Treatment Facility**



### Referring Agencies



voluntarily as an alternative to detention. Upon referral, potential CTF clients are assessed and authorized for placement through the Santa Clara County Mental Health Department.

More recently, *Starlight Community Services* has begun to offer intensive day treatment, non-public schooling, specialty outpatient mental health services, and therapeutic behavioral services to community clients in order to prevent the need for higher level placements or hospitalizations in the first place.

### Client and Family Outcomes (Program Goals)

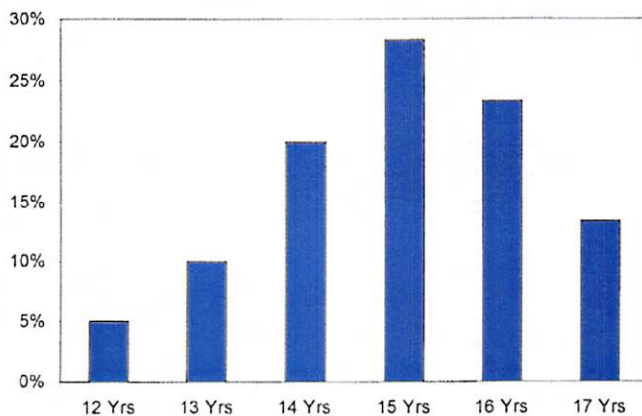
The outcomes we work toward with youth and families are that youth be:

- ★ Safe in home or family like settings – including avoiding out-of-home placements, returning to lower levels of care, fostering permanency, and positively impacting family functioning;
- ★ Attending and progressing in school or vocational endeavors – including improving school/vocational attendance and engagement, improving grades and grade-level advancement, and enhancing standardized achievement test scores;
- ★ Improved health/mental health functioning – including improving access to needed health/mental health care, improved functioning in multiple life domains, reduced psychiatric risk (risk factors and risk behaviors), and building community supports; and,
- ★ Out of trouble with the law – including reducing arrests, criminal detentions, and probation involvement.

### CTF Youth Demographic Profile

*Starlight Adolescent Center* serves adolescents of both genders that come from a variety of backgrounds. Over the time period covered in this report, youth were 53% male and 47% female.

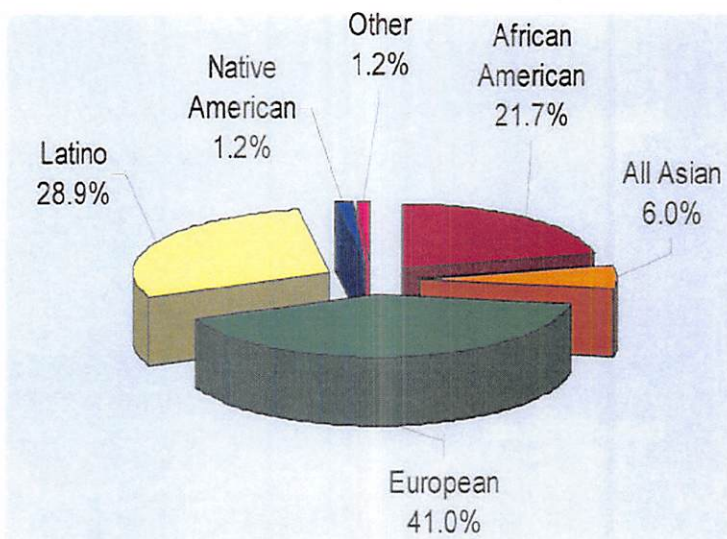
#### Age at Admission of Starlight CTF Clients



*Starlight* youth are ages 12 through 17 upon admission. The average age is 15 and 50% are age 15 or younger.

Clients are in treatment at *Starlight* from less than one month up to 38 months. The average length of stay is 11.9 months (just under a year).

### Ethnicity of Starlight CTF Clients



The ethnicities of clients are: 41% European ancestry, 29% Latino, 22% African American, 6% Asian (3% Vietnamese, 3% Other Asian), and 1% each Native American and Other/Unknown.

*Starlight's* demographic data show an increase in Asian youth served in FY 03-04 compared to the prior year (from 1% to 6% combined, 3% being Vietnamese). This is consistent with the shifting demographics of Santa Clara County, which now reports 4 threshold language groups (Spanish, Mandarin, Tagalog and Vietnamese).

### CTF Youth Clinical Profile

The youth served in the *Starlight Community Treatment Facility* (CTF) suffer from severe emotional disturbance and must meet medical necessity criteria for enrollment in a structured treatment environment. The youth entering the CTF residential program have a history of troubled behavior including aggressive, oppositional, provocative, impulsive, and self-destructive behaviors, often accompanied by intense negativism and social withdrawal. Along with these behaviors, the youth typically suffer from strained or impaired interpersonal and family relationships, resulting in an absence of vital social support.

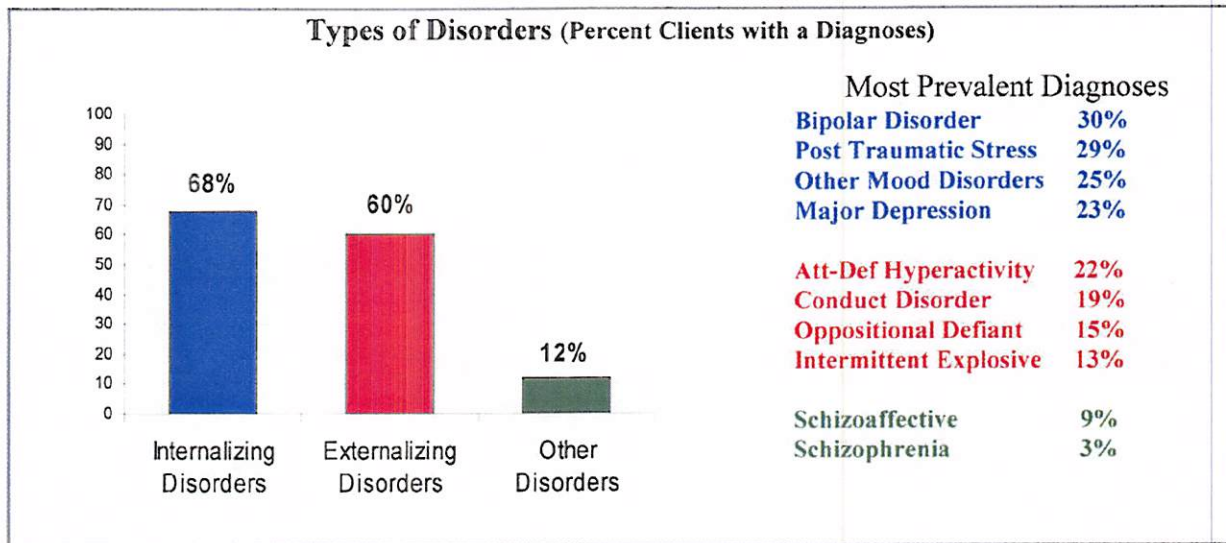
The residential youngsters have experienced one or more treatment failures in outpatient, extended care management, or less restrictive settings. If not in the stable and intensive treatment environment of the *Starlight CTF*, the youth would be in psychiatric hospitals, or continue to move among placements, treatment settings, shelters, and juvenile detention. Their behavior may represent a potential danger to self, others and/or property, and their treatment requires comprehensive evaluation, close staff supervision, intensive therapy, remedial education, and monitoring of the need for pharmacotherapy.

#### Prior Service History<sup>1</sup>

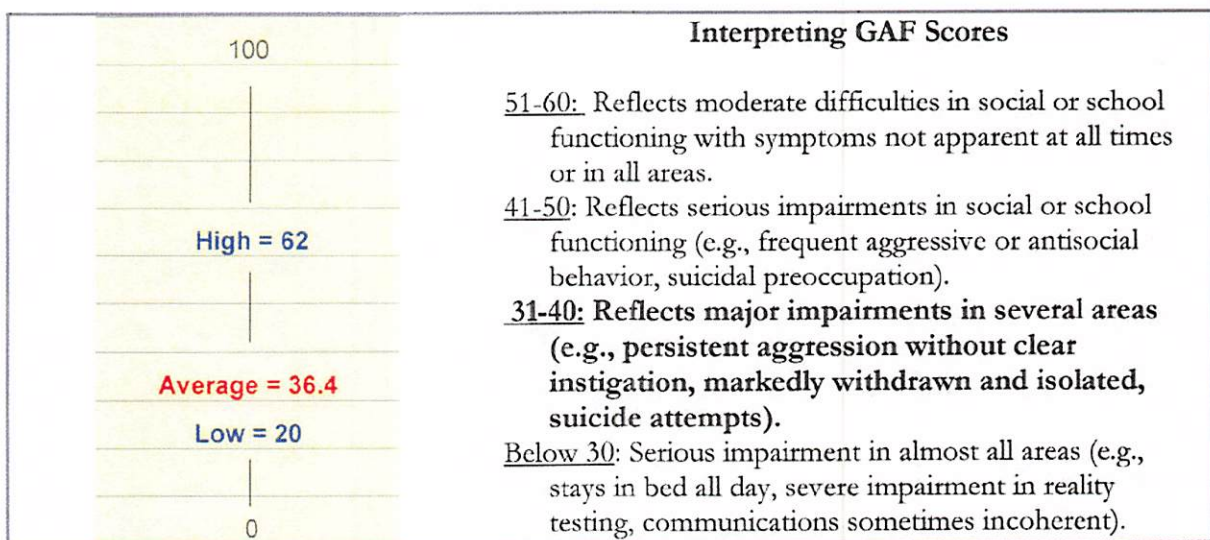
Type	Average	Range
Psychiatric Hospitalizations	3.6	0 to 15
Group Home Placements	4.1	0 to 21
Foster Family Placements	1.0	0 to 10
Shelters	.3	0 to 3
Combined Prior Placements	8.7	1 to 28

The psychiatric problems of the CTF youth include both internalizing (e.g., anxiety, depression and self-harm behavior) and externalizing (e.g., attentional, impulsive and aggressive behaviors) problems. Many clients exhibit a combination of disorders across these broad spectrums. On average, CTF clients have two major diagnoses (on Axis I of the DSM IV) and many of the diagnoses are characterized by complicating features (e.g., psychotic features associated with a diagnosis of Bipolar Disorder).

<sup>1</sup> The combined figure is an undercount, as counts of prior juvenile detentions are not currently available.



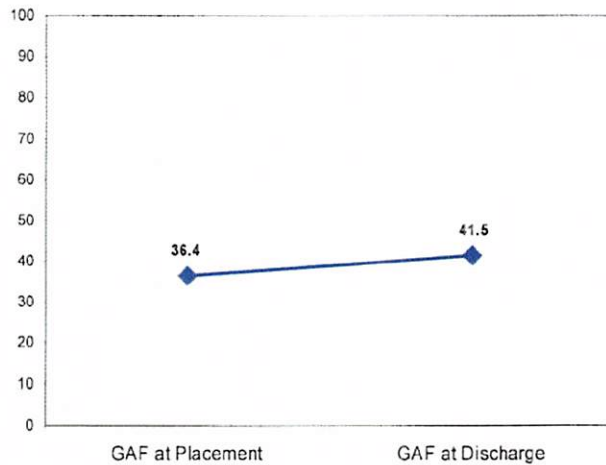
As can be seen in the graph below, *Starlight* clients have DSM IV Axis V *Global Assessment of Functioning* (GAF) scores ranging from 20 to 62 on a 0 to 100 point rating scale, where 100 is optimal functioning. The average GAF score is 36.4, median is 35.0, and the standard deviation is 8.75 (modest amount of variation in physician's ratings of functioning). Twenty-five percent (25%) of clients have a GAF score of below 30 upon enrollment.



### Youth Outcomes

Effecting outreach, family building, and transition planning is always challenging with a high-end service population. Many families are ill-equipped and need much help to receive and maintain troubled youth in the home. Poor and mentally disturbed young adults struggle with a shortage of safe, low-cost housing in the Bay Area. Educational options are often limited and ongoing support may be needed to help youth stay focused and on track with educational or vocational endeavors. Cultural competency implies we help youth and families with these kinds of everyday life challenges. For all of the above reasons, permanency or emancipation planning is a major focus of *Starlight* staff attention and effort.

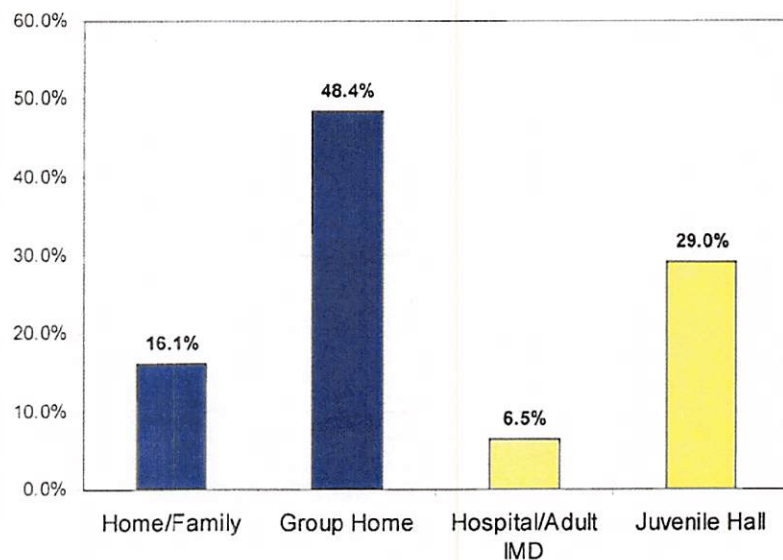
### Increase in Functioning



One measure of mental health functioning is the change in GAF scores from admission to discharge. On average, the CTF youth show a 5.14 gain in their rating, which is statistically significant ( $p < .005$ ) improvement of modest size (that is, clients move up one scale level on the description of the GAF found on the previous page).

Another indicator of treatment impact is the ability of clients to transition to a lower level of care. As can be seen from the chart at right, over half of youth (64.5%) are able to step-down to their family home, foster family, or a lower level group home.

### Placement at Discharge (As Percent of All Discharged Clients)



Along with the increasing numbers of youth admitted from juvenile probation, we have seen an increase in discharges back to juvenile hall, usually related to significant violence and aggression. Currently, we are meeting this challenge by implementing a restorative justice component to the treatment program.

In summary, *Starlight* remains an intensive, multifaceted community mental health treatment program for the most seriously emotionally disturbed youth in California. The program is effective in stabilizing and reunifying youth with their families in shorter periods of time and with greater frequency than other previous mental health and social service programs. Through the *Starlight Community Services* program, *Starlight* is able to ensure continued stabilization of these youth in their homes, school and community.