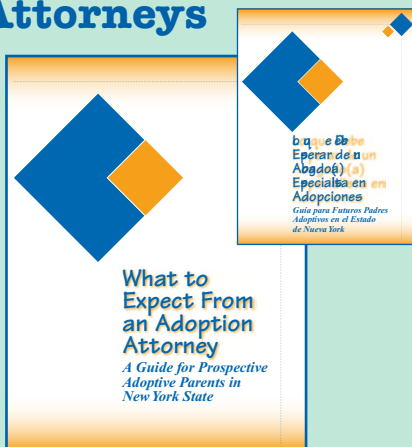


# Challenges & Solutions

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STRATEGIES FOR PROMOTING CHILD SAFETY, PERMANENCY, AND WELL-BEING IN NYS

## Explaining the Relationship Between Adoptive Parents and Attorneys



The 4-page pamphlet, *What To Expect From an Adoption Attorney*, was written as a guide for prospective adoptive parents. It includes information on the legal relationship of adoption, filing an adoption petition, hiring an adoption attorney, paying for an attorney, signing retainer agreements, and the client's rights.

The pamphlet is a product of the Adoption Now Workgroup. This multidisciplinary collaborative workgroup was formed as a result of the initiative of Chief Judge Judith Kaye of the NYS Court of Appeals to bring together the commissioners of the New York State Office of Children and Family Services (OCFS) and the New York City Administration for Children's Services (ACS) to identify and resolve systemic barriers to achieving timely permanency for children who have been freed for adoption yet linger in foster care. The workgroup is composed of representatives of the courts, Office of Court Administration, OCFS, ACS, and other local social services district personnel.

*What to Expect from an Adoption Attorney* (Pub. 5054) is available in English and Spanish on the OCFS website at [www.ocfs.state.ny.us/main/publications](http://www.ocfs.state.ny.us/main/publications).

## Sanctuary Model Offers Promise for Residential Care

Identified as one of the most promising of "promising practices," the Sanctuary Model® offers residential care programs a vision that can lead to system-wide change and healing. Based on the creation of a nonviolent community that understands trauma and its effects, the model is designed to shift the organizational culture from one of control to one of collaboration.

In April 2006, the NYS Office of Children and Family Services (OCFS) invited voluntary authorized agencies to apply for participation in the Andrus Sanctuary Leadership Institute (ASLI) of the Andrus Children's Center in Yonkers. In doing so, agencies would have the opportunity to implement the Sanctuary Model in their residential care programs. Dr. Sandra Bloom, who created the model for use in a number of settings, worked with Andrus to develop a training module for agencies offering residential care.

To participate in the three-year institute, OCFS selected five voluntary authorized agencies—Astor Home for Children, Glove House, Jewish Child Care Association, Mercy First, and St. Catherine's Center for Children—and two OCFS residential centers—Annsville (for boys) and Brentwood (for girls). After initial discussions, research, and training, implementation of the Sanctuary Model is under way.

### Benefits of the model

The Sanctuary Model represents a trauma-informed method for changing an organizational culture in order to address the psychological and social trauma experienced by youth entering residential care.

OCFS Executive Deputy Commissioner Larry Brown recently noted, "We believe the model supports our efforts to create safe, secure, and therapeutic environments in our residential facilities."\*

"We are very interested in promoting trauma-based initiatives," said Phil Williams, OCFS Division of Rehabilitative Services (DRS). Citing statistics on children entering residential care, he said "Many of our adolescents' behaviors are based on past events in life. The model helps programs and staff to be sensitive and change behavior, which will lead to a more positive discharge from care."

Tom Hoeg, also from OCFS DRS, agreed: "This is a wonderful opportunity

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Sandra Bloom, M.D., presents the Sanctuary Model at the training session for OCFS residential centers. From left to right, participants Valerie Fitts and Rebecca Piwinski, Brentwood Residential Center, and Craig Allen, OCFS



\* Testimony, New York State Assembly Standing Committees on Children and Families and Codes, December 18, 2006

# Sanctuary Model from page 1

to pilot a trauma-sensitive, therapeutic model, using all aspects of the environment and staff. Often we focus on the ‘customer’ and forget the staff. Having a common goal is very important. Everyone has ground-floor investment.”

“Sanctuary works,” he said. “It’s a means of changing the levels of trauma in staff and youth and reducing the need to physically intervene with kids.” He explained that “the spirit of the model is an open and respectful atmosphere.” Recognizing that implementation requires time and effort, OCFS staff from the two DRS centers are working to iron out issues regarding “how we mix and match the model with our existing policies and procedures.”

## Launching the model

The first step was an intensive on-site review of each agency conducted by ASLI staff who asked hard questions about challenges and gaps in agency practice. In fall 2006, two five-day training sessions (one for agency staff and one for OCFS center staff) were held at Andrus. Each agency sent 4–9 staff members, who then formed a steering committee to bring the model back to their agencies.

Sarah Yanosey, ASLI Coordinator and OCFS liaison, noted that the faculty are staff at Andrus Children’s Center who were chosen for their experience, diversity of roles, and potential as good teachers. She said, “It was exciting to

## Commitments of the Sanctuary Model

The Sanctuary Model is committed to a culture of:

- ✓ nonviolence
- ✓ emotional intelligence
- ✓ inquiry & social learning
- ✓ democracy
- ✓ open communication
- ✓ social responsibility
- ✓ growth & change

use our experience with the Sanctuary Model to help other agencies. It was also an opportunity to be open and honest about the things we didn’t do well. In that way, it was refreshing.” Some of the lecture topics by experts in the field such as Dr. Bloom included *The S.E.L.F. Model of Trauma Treatment and Community Responses to Traumatized Youth*.

Don Smith, Deputy Executive Director, St. Catherine’s Center for Children, appreciated the ASLI faculty. “They were excellent: very supportive, challenging, and honest. As people who have been ‘living the model,’ they could talk about theories and practice from the perspective of caregivers. We left the training all fired up and anxious to get started.” After a daylong retreat presenting the model

to the agency’s board of directors, “the leadership responded enthusiastically and gave their full support to go ahead.” St. Catherine’s will be implementing the model throughout all programs.

The Jewish Child Care Association (JCCA) also has the full support of its board and administration to implement the Sanctuary Model. According to Mike Spindler, Executive Senior Vice President, “The model provides a lens for looking at young people.” As a long-standing family-centered agency, JCCA has used other models, but this one “resonates with us and lends itself beautifully to our current approaches.” While it represents “a sea change, an all-encompassing way of looking at residential care, it is also contagious.” Even at this early stage, other programs at JCCA are beginning to ask about using the model as well.

There is general agreement that the greatest challenge in implementing the model will be asking people to change. Letting go of old ways of perceiving and communicating will be difficult for some staff. The ASLI faculty provides ongoing support through monthly telephone contact and six on-site visits per year.

For more information on the Sanctuary Model, contact Bill McLaughlin, (518) 474-9465; [william.mclaughlin@ocfs.state.ny.us](mailto:william.mclaughlin@ocfs.state.ny.us); or Patricia Sheehy (914) 377-2080; [patricia.sheehy@ocfs.state.ny.us](mailto:patricia.sheehy@ocfs.state.ny.us).

## The Sanctuary Model works toward these outcomes:

- ✓ Create a truly collaborative treatment environment.
- ✓ Work more effectively and therapeutically with your traumatized clients.
- ✓ Improve treatment outcomes.
- ✓ Reduce restraints and other coercive practices.
- ✓ Build high-functioning multidisciplinary teams.
- ✓ Improve staff morale.
- ✓ Increase employee retention.
- ✓ Reclaim the commitment upon which your organization was built.