

Service Standard for Residential Services for Teen Moms and Baby Programs

I. Service Description

This program provides comprehensive, specialized services to pregnant or parenting teens and their children, designed to increase/improve the parenting skills and increase independent living skills of mothers while they are in a setting that assures the safety of their children. The program is also geared toward facilitating the child's achievement of appropriate developmental milestones. This program may be located within a setting that is licensed as a group home or child caring institution. Approved programs will be granted a waiver to admit children younger than the age of six, the youngest age allowed by 465 IAC 2. Since these programs are geared towards pregnant or parenting teens, program participation is limited to pregnant teens and to only teen mothers whose child/children are also present. If the mother or baby is removed or leaves the program, an alternative placement must be found for the mother and baby. Mothers over the age of 18 may be admitted if the mother is a CHINS.

II. Program Components

A. Therapeutic Services

Therapeutic services should be geared towards the unique needs of pregnant and parenting teens and the developmental needs of small children and babies. These services should be aimed at improving functioning and stability, decreasing depression and eliminating social isolation of mothers over time. Therapeutic Services must include:

1. Family therapy as indicated with the parenting/pregnant teen, father of the child, person who will act as co-parent and/or parents of the mother/father
2. Group therapy: support groups
3. Individual therapy
4. Parenting classes
5. Developmental assessments and activities
6. IL services to include parenting services and support in the community, child development and healthcare
7. Appropriate early care and education

B. EOC rounds must include factors relevant to the safety of small children and infants.

C. The program shall place an emphasis regarding involvement of the father of the baby if appropriate.

D. The program must have procedures for assuring that mothers receive prenatal and post-partum care.

E. Population Specific Competencies:

1. Staff and mothers shall receive training in Infant and Pediatric First Aid and CPR as well as Safe Sleep environments.
2. Staff training shall include child development, post-partum depression, and positive discipline.

F. The program shall develop and implement policy and procedure describing the role of staff of the home as related to care of the babies; acceptable behavior of mothers with babies other than their own, how babies will be cared for when the mother is not

present, how babies will be cared for in the event of an emergency absence by mother and the use of external child care centers.

- G. The physical plant, including sleeping arrangements, shall be arranged so as to facilitate the mother's care of her own child/children.
- H. Cribs for babies shall meet federal safety regulations for children aged 2 or under.
- I. The bed and mattress for children over the age of 2 and under the age of 6 shall be developmentally appropriate and of a size to accommodate the child.

III. Service Delivery--Services for Teen Mom and Baby Programs must meet the following requirements in service delivery:

A. Licensure Programs must meet the licensure requirements for 465 IAC 2-9 or 465 IAC 2-12.

B. Staffing

- 1. For programs licensed as a CCIs, the program must have a full time administrator that meets the qualifications of the position as described in 465 IAC 2-9-48. Additionally, the program director must have experience and training in early childhood development or teen pregnancy.
- 2. For programs licensed as group homes, the administrator must meet the qualifications of 465 IAC 2-12-48. Additionally, the administrator must have experience and training in early childhood development or teen pregnancy. If the group home is owned and administered by a parent agency and the parent agency employs an administrator who meets the qualifications of this section, and the parent agency chooses not to employ a separate administrator but chooses instead to provide supervision of the group home by a person having a bachelor's degree in social work or a bachelor's degree in a human service area of study from an accredited school and two (2) years of experience in a professional capacity in a child welfare agency or therapeutic setting that serves children, then the person providing supervision of the group home shall have experience in early childhood development or teen pregnancy.
- 3. Therapists – persons providing behavior health services to children admitted to the program must meet the requirements for provisions of behavioral health services by Medicaid. Additionally, therapists must be certified to provide TF/CBT.
- 4. Case managers must meet the requirements for the case worker position as required by 465 IAC 2-9-49 or 465 IAC 2-12-49 and a sufficient number of case workers must be made available to allow for a case worker to child ratio of no more than 1-6 not including babies.
- 5. Direct Care Workers -- the ratio of direct care staff to children, both mothers and babies, shall be 1:4 both when the children are awake or asleep.

C. Discipline--The program shall have training in de-escalation techniques and must have policies and procedures to ensure the environment is restraint and confinement free.

- 1. Corporal punishment, including physical hitting or physical punishment, shall not be used to discipline children.
- 2. Discipline shall be appropriate to the developmental age of the child and shall be related to the child's actions.

D. Documentation

- 1. The program shall maintain documentation in a manner consistent with the Residential Treatment Services Provider Contract

2. The agency will also maintain a file for the baby to include the following:
 - (1) Food and fluid offered and taken
 - (2) Time of diaper changes
 - (3) Unusual mood of the child
 - (4) Unusual health conditions, such as:
 - (a) Nose bleeds;
 - (b) Skin rash;
 - (c) Elevated temperature;
 - (d) Signs of constipation or diarrhea;
 - (e) Injuries; and
 - (f) Special health needs
 - (5) Developmental Assessments that are consistent with materials from the CDC, Learn the Signs Act Early.
 - (6) If the baby is age 1 year old or older, the facility shall develop a treatment plan which meets the requirements of 465 IAC 2-12-64 or 465 IAC 2-9-66 for the baby. This treatment plan must be developmental in nature and pertinent to the needs and developmental level of the baby. The facility is not required to develop a treatment plan as described in the Residential Contract. The treatment plan shall contain goals and objectives for well-baby medical care.

E. Training and Competency Assessment

1. The residential provider will develop and maintain a training /supervision program to ensure the ongoing competence of staff who work with parenting or pregnant teens. The training curriculum should be based on “best-practice” approaches with this population and should include trauma-informed principles as a foundational component that are consistent with evidence based practices such as the “Conscious Discipline,” “The Incredible Years” and the “Pyramid Model” programs.
2. All direct care staff should receive training prior to working with program youth. In addition, on-the-job competency evaluations of direct care staff should be completed by supervisors within the first 45 days of employment. Any identified deficiencies should be addressed through refresher training, supervisor coaching and/or counseling sessions. The provider will maintain policies and procedures to ensure population-specific competencies are maintained at all times.

F. Discharge Planning

Discharge planning shall include but not be limited to locating a primary care physician for the mother and baby, individual and family therapy as needed and community resources.

G. Medical

1. The program shall comply with the requirements of 465 IAC 2-9-75 or 465 IAC 2-12-73.
2. The program shall assure that children under the age of six receive well-child care as recommended by the American Academy of Pediatrics (AAP).
3. The program shall assure that mothers receive appropriate prenatal and postnatal care.

H. Safety

1. All staff and mothers must be trained in the proper use and installment of car seats. Babies must be in car seats any time they are transported in a vehicle.
2. The facility shall install and maintain child safety measures inside and outside of the facility.
3. Children must have appropriate sleeping arrangements. Agency must have policies and provide training related to safe sleeping practices.
4. The program shall develop and implement policy and procedure regarding infection control consistent with standard and universal precautions in early care and educational environments.

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