



Residential Services Outcome Analysis

During the year of 2019, PrairieCare Residential Services (formerly Paragon Residential Treatment for Youth) admitted 48 children. These youth were majority white females (75% white; 64% female).

Admission and discharge data on overall level of impairment and social/emotional functioning (Impairment Rating Scale, IRS, & Strengths and Difficulties Questionnaires, SDQ, respectively), self-report of depressive symptoms (Patient Health Questionnaire, PHQ-9), self-report of anxiety symptoms (Generalized Anxiety Disorder, seven item questionnaire, GAD 7), and family functioning (Family Adaptability and Cohesion Scale IV, FACES IV). Residents and families admitted in 2019 experienced substantial reductions in symptoms as described in table below.

| | GAD-7 Child Report | PHQ-9 Child Report | SDQ Parent report | SDQ Child report | IRS Parent report |
|------------------|------------------------------|------------------------------|-----------------------------|----------------------------|-----------------------------|
| Admission | Av: 13.28 SD: 5.46 | Av: 14.49 SD: 6.23 | Av: 23.57 SD: 6.70 | Av: 18.85 SD: 6.36 | Av: 34.50 SD: 6.37 |
| Discharge | Av: 6.25 SD: 4.65 | Av: 4.25 SD: 4.41 | Av: 19.13 SD: 7.05 | Av: 10.45 SD: 6.23 | Av: 28.56 SD: 5.24 |
| Change | -7.03* | -10.24** | -4.45* | -8.39** | -5.92 |

*This represents a categorical change in severity in symptoms (EG, for GAD-7, a change from moderate symptomology to mild symptomology)

**This represents two categorical changes in severity in symptoms (EG: for PHQ-9, a change from moderate symptomology to subclinical symptoms)

Data on family functioning was measured using an assessment tool that is based on the circumplex model (FACES IV). In this model, parent and child data is used together to establish the degree to which a family is functioning adaptively on dimensions of flexibility and cohesion. It also measures family levels of communication and overall satisfaction with the family system. In general, families presenting for care admitted with family high proportions of functional dynamics (majority balanced in terms of both flexibility and cohesion, 95% and 81% respectively of those who reported). Family communication was more evenly distributed along the mean, with 27% endorsing high levels of communication at admission, 36% endorsing moderate levels of communication at admission, and another 36% of families endorsing low or very low levels of communication. Overall satisfaction with family dynamics at admission was generally poor with 70% of families report low or very low satisfaction.

Improvements in family functioning were also noted in 2019. By discharge, 100% of reporting families were balanced in terms of both flexibility and cohesion. Families generally reported improved levels of communication with half reporting high levels of communication (an increase of 23%), 12% reporting moderate levels of communication, and only 25% reporting low levels of communication. More families also endorsed increased overall satisfaction with their family systems. Only half reported low or very low levels of satisfaction with their family systems (an improvement of 20%), about 38% of families reported moderate levels of satisfaction with the families and about 13% of responding families reported high levels of satisfaction with their families.