

SHILOH TREATMENT CENTER

PROVIDING OPPORTUNITIES FOR CHILDREN AND YOUTH TO REACH THEIR FULL POTENTIAL.

SHILOH TREATMENT CENTER SPECIALIZES IN PROVIDING TREATMENT SERVICES FOR CHILDREN AND YOUTH WITH BEHAVIORAL AND EMOTIONAL PROBLEMS.



Shiloh Treatment Center, Inc. (Shiloh) operates residential and day treatment centers for children and youth with behavioral and emotional difficulties. Clients and their families receive personalized services tailored to meet their needs.

Shiloh operates twenty-four hours a day, seven days a week. The day treatment center operates a flexible schedule to accommodate parents' and clients' schedule.

Shiloh is accredited by the Joint Commission for the Accreditation of Healthcare Organizations (JCAHO), Texas Education Agency (TEA), California Department of Education, and licensed by the Texas Department of Family and Protective Services (TDFPS).

Shiloh's hallmark is normalization, a familystyle service approach, and residential homes in a rural neighborhood. Research and experience has shown that the problems our clients face may best be treated in an environment that most closely matches home settings. It has been shown that gains are more likely to be made and maintained when they are learned or developed in a setting that is similar to a functional home. In addition, problematic "institutional behaviors" are less likely to develop. While treatment can be more successful in normalized settings, costs are usually lower.

All potential clients are considered for admission to Shiloh according to an intake and diagnostic evaluation. Intake and assessment services are accessed Monday-Friday from 8:30 a.m.-4:30 p.m. by calling the Shiloh administrative office. Emergency admissions may be available upon request. Application for admission may be initiated by the potential client, their parent/guardian, or other authorized persons. If Shiloh does not provide the services needed, efforts to find appropriate services within the community will be made.

Shiloh helped me learn to control my anger so I wasn't always in trouble.

They helped me and my mom learn to get along better, too.

— Paul, 11 years old

ONCE A PERSON IS ADMITTED, SHILOH PROVIDES INTEGRATED SERVICES TAILORED TO THE INDIVIDUAL NEEDS OF THE CLIENT. AN INDIVIDUAL SERVICE PLAN (ISP), DEVELOPED BY EACH CLIENT'S PERSONAL INTERDISCIPLINARY TREATMENT TEAM, COORDINATES SERVICES.

The typical Shiloh client is a child or adolescent, male or female, between the ages of three and twenty-two with mental health issues, an emotional disorder, autism, cognitive impairment, or a behavioral disorder that does not require an acute care hospital placement. These clients pose a serious and persistent danger to themselves or others and they cannot be cared for safely in a less restrictive environment.

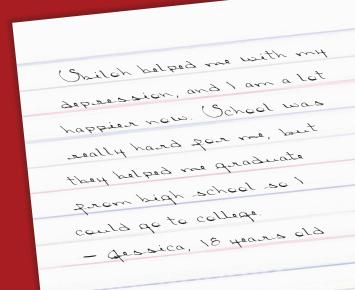
Length of stay varies from one month or less to a year depending on the client's needs. Shiloh also specializes in caring for clients that have previously been in alternative placements without success. These clients often exhibit highly aggressive behavior, have difficulty controlling emotions, do poorly in school, have severe difficulties with interpersonal interactions, and are oppositional.

Most Shiloh clients will be admitted with mental health diagnoses, including conduct bipolar disorder, oppositional defiant disorder, ADHD, depression, and psychosis. Some clients may have, cognitive impairments and behavior difficulties as a result of chronic but stable neurological problems.

The treatment team usually includes the client, parents/guardian, psychiatrist, nurse, schoolteacher, psychologist, counselor, teacher's aide, and direct care staff. The treatment team will include other professional staff such as a medical doctor, an occupational therapist, a physical

therapist, and a speech therapist as needed. When appropriate a representative from contracting agencies such as school districts, insurance companies and mental health authorities among others are also included.

We strive to maximize well regulated independent functioning. When possible our goal is to move the client back to their homes and communities as soon as reasonably feasible. Our goals are to develop inter-personal relationships with clients that maximize growth while they reside in a Shiloh home. We then teach clients the skills they need to more effectively function in their own home, school, and community environment in a manner that most closely approximates naturally occurring situations.



CASE MANAGEMENT

In an effort to transition clients to their homes or a less restrictive community-based group home, aggressive case management efforts are made. Seeking and involving clients in school programs, after school programs, extended family and community support, entitlement programs and outpatient treatment near their own homes is pursued by each client's case manager.

BEHAVIORAL TREATMENT

A wide variety of social learning and cognitive-behavioral techniques are used, including positive reinforcement, natural consequences, modeling, and verbal prompting. At times, dangerous behaviors are managed by Shiloh staff, primarily the direct care staff, using Safe Crisis Management (SCM) techniques and other industry standard interventions for behavior management. Shiloh does not use aversive behavior management techniques, seclusion, time out rooms, or mechanical restraint.

EDUCATION SERVICES

Shiloh maintains an on-campus school approved by TEA with certified teachers. The educational program focuses on basic academic skills, vocational skills, and living skills. The education program addresses school-based behavior problems that prevent a client from participating in regular school classes. An educational diagnostician, or other qualified personnel is responsible for assessing each client's academic skills, learning competencies, living skills and behavior.

RECREATION AND LEISURE SERVICES

A regular schedule of recreation and leisure opportunities provides a variety of options for client participation both on and off campus, and in the nearby metropolitan area. The primary focus is on activities that can be generalized to the client's home community environment.

MEDICAL SERVICES

Shiloh provides exceptional psychiatric services through its specialized child and adolescent psychiatrists. Shiloh is a mental health facil-ity and relies on nearby hospitals and con-tracted physicians to treat serious physical health needs.

COUNSELING SERVICES

Counseling services are provided as indicated by the psychosocial assessment completed during the admission process and directed by the service plan. Clients receive individual and group counseling depending on specific needs. Family counseling is considered critical and provided when families are able to participate. Counseling staff include two licensed doctoral level psychologists, and several master's degree level licensed professional counselors and social workers.

RESIDENTIAL SERVICES

Shiloh clients reside in residential homes in a rural neighborhood, thirty minutes from a major metropolitan city. A typical home houses up to eight clients. The homes are staffed by at least two trained houseparents who live with the clients, cook meals with them, ensure education services, and go on com-munity outings with them.

FOOD SERVICES

Meals are served and prepared family-style in the home. Nutritious meals are prepared in safe and sanitary conditions and special diets are implemented according to physi-cian orders when necessary. A registered di-etitian provides monitoring and evaluation of the food service and assists direct care staff in dietary planning and nutrition edu-cation.



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SECURE**C**ARE

A Specialized Program from Shiloh Treatment Center, Inc.

Shiloh Treatment Center developed a SECURE-CARE (Special Education, Cardiac Ultrasound & Risk Evaluation) program to ensure that all clients are evaluated thoroughly for potentially significant health issues. The program is designed to uncover and address key health issues proven problematic in the educational and mental health care system.

The New England Journal of Medicine has published studies indicating the need to perform cardiac screening measures for active individuals. Decreasing cardiac fitness along with increasing heart disease and obesity have led to serious health problems in young people. Our testing begins with an electrocardiogram known as an EKG, which measures the electrical activity of the heart. If this test identifies any abnormalities, a physician orders an echocardiogram, or ultrasound of the heart. Next, screening of blood glucose, liver functions, kidney functions, and lipid profiles (high cholesterol) is completed to further check for heart disease and diabetes risk. As a result of new data regarding heart attack from Hypertrophic Cardiomyopathy (HCM) and other undiagnosed heart abnormalities, Shiloh has an automated external defibrillator (AED) at each client location. Staff training for AED use is provided by the American Red Cross with annual CPR training.

SECURECARE also uses cutting edge Safe Crisis Management techniques for emergency situations requiring a therapeutic hold. For over five years, our unique 2MR© (two-minute-restraint) procedure has consistently proven better than the national average in reducing the total length of time a client is held. Shiloh participates in a national data bank that shows average therapeutic hold durations to be 10-12 minutes. Shiloh's average is consistently 2-3 minutes. Shiloh's research in this area has been presented at the Child Welfare League of America annual convention in Washington DC and the American Association of Residential Treatment Centers annual convention in Chicago.

Shiloh is now engaged in tracking its diagnostic rate of discovery of heart abnormality with regard to procedures related to the use of EKG and echocardiograms and screening for blood glucose, liver functions, kidney functions, and lipid profiles (high cholesterol). Preliminary data shows that Shiloh's unique combination of procedures has discovered previously undetected problems in numerous children that have led to proper treatments and significant reductions in health risks.

Shiloh will continue to research, develop, and implement new and innovative programs to increase safety and reduce risks to our clients.



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