

AGENCY GOAL ASSESSMENT REPORT FY09/10

I. Big Brothers /Big Sisters

1. To serve 500 children for some portion of the year. 210 new matches will be made. (FY 08/09 actual: 585 served; 273 new matches).
RESULT: There were 313 active matches as of 7/1/09. Forty eight new matches were made this quarter (224 YTD). Five hundred thirty seven youth have been served YTD.

2. To achieve a high level of customer satisfaction as measured by a survey of parents and guardians of youth matched in the program (FY08/09 – The results were positive and were reported in more detail in the Annual Consumer Satisfaction Survey.)
RESULT: Parents surveyed indicated a high level of satisfaction. The sample was small due to switching to a new measurement tool required by national BBBS.

3. To see that a sample of the youth who are administered the Youth Asset Measure will show a significant improvement in their rating (FY08/09 actual: Clients in the program demonstrated improvement on many of the 21 key assets measured.)
RESULT: Community-Based Matches: One hundred and seven follow up YAM forms were completed. Volunteers and parents/guardians completed the survey. Results show that 91% of youth experienced better self-confidence; 85% report that the youth had better decision making skills; 78% reported that the youth were better able to use community resources; 82% reported that the youth had better academic performance; 66% reported that the youth had better school preparedness; 91% reported that the youth were better at expressing their feelings; and, 77% reported that youth had better personal hygiene appearance.

School-Based Matches: Twenty four follow up YAM forms were compiled. Volunteers and teachers/school counselors completed the surveys. Results show that 90% of the youth experienced increased self-confidence; 66% of the youth had better decision making skills; 79% of the youth were better able to express feelings; 88% of the youth were better able to use school resources; 83% had improved relationships with peers.

II. Counseling Program

1. To open services to 900 new clients and to provide ongoing counseling services to a total of 1000 clients who have emotional and/or behavioral problems (FY 08/09 actual: 892 new clients).
RESULT: A total of 756 new clients were served in the counseling program this year. Counseling services including individual group or family therapy were provided to a total of 877 clients in the Counseling Program during the 09/10 fiscal year (includes active clients carried over from the previous fiscal year).

2. For the clients who received individual counseling we expect that no more than 15% of those clients will have any additional trouble with the law during follow-up. Follow-up will be conducted at 3 months, 6 months and one year following completion of treatment (FY 08/09 actual: 10%).

RESULT: Since 1993, the Youth Focus Counseling Program has conducted follow-up with legal guardians of clients seen for services at 3 months, 6 months and one year intervals after counseling services were terminated. Cumulative 3 month follow-up data is available for 543 clients, 41 (or 8%) of whom have gotten back into trouble with the legal system. Six month follow-up data is available for 406 clients, 43 of whom (10.6%) have had further legal difficulties. A sample of 291 clients has been followed for a one year follow-up period. Twenty-seven clients had further legal difficulties resulting in a recidivism rate of 9.3%. Thus Goal #2 has been met.

3. 8,000 units of service will be delivered in the counseling program. A unit of service is defined as individual therapy, group therapy, parent collateral and/or family therapy, case management hour and community psycho-education presentations (FY 08/09 actual: 7897.75).

RESULT: Therapists in the counseling Program documented 6933 units of service provided to clients during the 09/10 fiscal year.

4. The Child and Adolescent Functional Assessment Scale (CAFAS) will be administered both before and after treatment to a random sample of outpatient clients who have participated in at least three therapy sessions. There will be improvement in the client's functioning as demonstrated by an average improvement in these pre-post CAFAS scores (FY 08/09 actual: Average CAFAS scores showed a 19.38 point improvement.)

RESULT: During the 2009/2010 fiscal year, a study of randomly selected counseling cases was undertaken to see if three or more counseling sessions promoted positive outcome scores on the CAFAS within this program. Improvement on the CAFAS scores would reflect improvement in functioning and behavior exhibited at home, in school and in the community. The CAFAS scores also reflect individual functioning where positive scores denote improved patterns of thinking, less suicidal thought and a more positive outlook on oneself. Of the 47 cases in the current random sample 39 cases showed improvement in CAFAS scores, 7 showed no change and one worsened. There was an average improvement in CAFAS scores of 29.15. Further analyzing these changes in pre –post CAFAS scores utilizing a correlated t-test we find this improvement between before treatment and after treatment scores to be statistically significant at the .01 level of confidence ($t = 7.69$; $df = 46$; $p < .01$).

5. Clients will have improved behavioral functioning as measured by the percentage of parents that rate their child's behavior as improved. At least 75% of the parents surveyed will rate their child's behavior as improved (FY 08/09 actual: 71%). YTD: 69%

RESULT: During the 2009/2010 fiscal year, 75% of parents surveyed indicated that their child's behavior improved as a result of their involvement with the Youth Focus Counseling Program.

III. Community Support Services

1. We expect to serve 20 clients with Community Support Services (FY 08/09: 36 clients served).
RESULT: The Community Support Program provided case management services to 32 new clients during the 09/10 fiscal year, thus meeting this goal.
2. Community Support clients will rate Community Support services as “better than average” on the Community Support consumer satisfaction survey. (FY 08/09: Participant satisfaction averaged 7.94 on a scale of 1 to 9 where 5 was average).
RESULT: Consumer satisfaction data was available for 25 CS program participants this year who on average rated their satisfaction with Community Support Services a 8.16 on a scale from one to nine, nine being “extremely pleased” and a rating of five labeled as “average”.

IV. Family Preservation Services

1. The Family Preservation Program will serve 80 new families this fiscal year (FY 08/09 actual: 79 new families were served).
RESULT: This goal was not met. We served 72 new families with a total of 83 children this fiscal year. When the new fiscal year began a total of 19 cases were active and carried over from the 08-09 year, which can account for lower number of new cases for the new fiscal year.
2. Many of the children served by the juvenile justice component of Family Preservation would have been committed to state Youth Development Centers (YDC) were it not for this program. Accordingly, we expect that less than 10% those clients will go to a state YDC during a one-year follow-up period (FY 08/09 actual: 0%).
RESULT: Reports from the Department of Juvenile Justice and Delinquency Prevention indicate that three of the 20 children followed for one year after completing services or 15% went to a Youth Development Center within a year after termination.
3. Ninety-five per cent of the youth served by the program shall, at termination, remain in the home (FY 08/09 actual: 98%).
Result: This goal was met for the 09/10 fiscal year. Year end data shows that 98.8% of children whose cases closed this fiscal year remained in their home at termination. Only one child was not in the home at service termination.
4. The North Carolina Family Assessment Scale (NCFAS) will be administered to all family preservation clients prior to and immediately after service delivery. Ninety percent of clients will, on the average, show improvement on at least three of the five scales of the NCFAS. (Ninety-four percent of clients who completed service delivery during FY 08/09, on average, had shown improvement on at least three of the five scales of the NCFAS.)

RESULT: For the 09/10 fiscal year this goal was met. Ninety-two percent of clients and their families showed improvement on at least three of the five NCFAS scales.

5. No more than 30% of the youth served by the juvenile justice component of the program will have additional trouble with the law during the one-year period following successful completion of FPS (FY 08/09 actual: 33%).

RESULT: This goal was met during the 09/10 fiscal year. Reports from the Department of Juvenile Justice and Delinquency Prevention indicate that only four of 21 children served or 19% had additional charges within one year of termination.

V. Adolescent Substance Abuse Program

1. ASAP will average at a minimum 80% occupancy rate for the ten beds in the ASAP program. (FY 08/09 actual: 79% male ASAP beds; 38% female beds)

RESULT: The male beds averaged 58% YTD. The two female beds averaged 61% YTD. Overall occupancy of the 10 beds was 58% for the year.

2. We anticipate that 75% of parents of the group home residents will participate in their child's treatment by attending parent education, collateral or family therapy sessions while their child is in the group home program. (FY 08-09 actual: 82%).

RESULT: 100% of our ASAP client families had at least one parent participate in some aspect of their child's treatment while the child participated in the ASAP program during the 09-10 FY.

3. The CAFAS will be administered just prior to and just after program participation for each group home client. We expect improvement in average client functioning as indicated by pre-post CAFAS score comparisons as follows:

A.) 80% of the clients who participate in the ASAP program will demonstrate improvement on the CAFAS Substance Use scale (FY 08-09 actual: 93%).

During FY 09/10 71% of ASAP clients demonstrated improvement on the CAFAS Substance Use scale.

B.) 80% of the clients who participate in the ASAP program will demonstrate improvement in Global Functioning via improved average scores on the combined CAFAS scale score. (FY 08-09 actual: 93%).

During FY 09/10 71% of ASAP clients demonstrated improvement in global functioning via improved average scores on the combined CAFAS score.

4. The ASAP program will successfully graduate 65% of the clients admitted to the program. (FY 08-09 actual: 64.3%)

RESULT: The ASAP program successfully graduated 40% of our clients in the FY 09-10. This was largely due to the lull in referrals experienced during the second quarter of the FY and terminations following runaways.

5. Seventy-five percent of ASAP clients who successfully graduate the program will have significantly reduced or eliminated drug usage during a one year follow-up period. (FY 08-09 actual: 80%).

RESULT: 82% had reduced or eliminated drug use at 1 year follow-up.

VI. Transitional Living Program

1. Clients served will demonstrate improved self concept as measured by the Self Esteem Index (FY 08/09 actual: 2.1 point improvement in self concept).

RESULT: Six pre-post tests were administered during the 2009/2010 fiscal year. The average increase in the self esteem index was 2.83 points.

2. Seventy-five percent of clients who meaningfully participated in the TLP program (minimum three months) will be discharged into a stable, permanent and appropriate living placement (FY 08/09 actual - 60% of the clients were discharged into a stable and appropriate placement).

RESULT: Ten clients were discharged from TLP during fiscal year 2009/2010, three of whom were children of parenting teens. All the clients discharged, or 100% went on to live in permanent stable and appropriate housing.

3. Fourteen clients will be served in the TLP (FY 08/09 actual: 16)

RESULT: Fourteen clients were served in the Transitional Living Program in 2009/2010.

4. Each of the clients in placement at the TLP program for at least three months will accomplish three of the goals in her action plan by the time she leaves the program, (new)

RESULT: Of the fourteen clients served, ten were in the program three months or more during the fiscal year. Of these, nine, or 90%, accomplished three of the goals on her action plan prior to leaving the program.

VII. Mell Burton School

1. A total of 35 students will be served in the two classrooms. (FY 08/09 - 30 students served)

RESULT: Ten students were enrolled in the program on 7/1/09. Twenty four new students were admitted this year. Thirty four students have been served YTD.

2. A total of 2000 Medicaid billable days will be obtained. (FY 08/09 – 2347 Medicaid billable days)

RESULT: At the end of the fiscal year a total of 1975 Medicaid billable days were obtained, which is 98.7% of the goal.

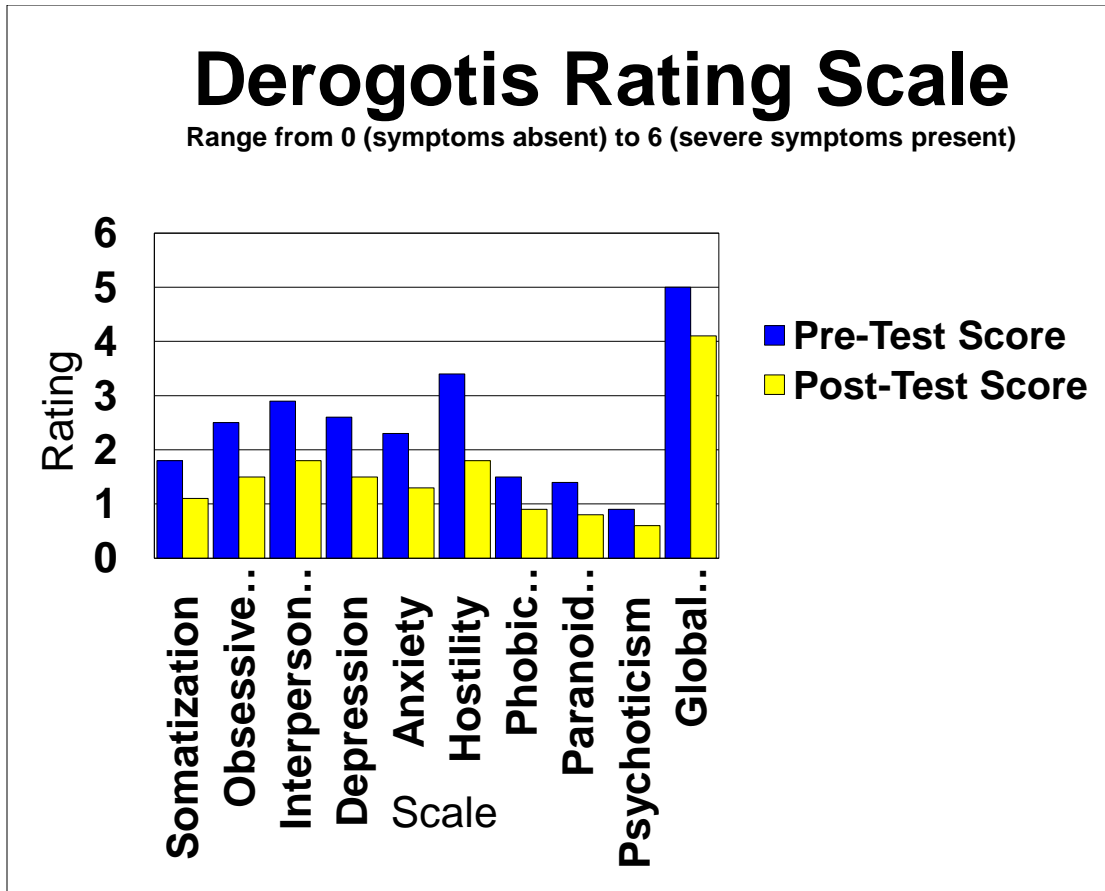
3. Students will show improvement in academic functioning as measured by pre and post WRAT test scores. (FY 08/09 – improvement noted in math with slightly lower scores in word pronunciation and spelling)

RESULT: Pre-WRAT scores were obtained upon the admission of new students and post WRAT scores were obtained prior to the end of the school year. The following table depicts the changes in standard scores and grade equivalents. As scores are adjusted according to age, a youth who scored 100 at the beginning of the school year would be expected to score 100 at the end of the school year if average progress was made. As seen from the table below, significant improvement was observed in all three areas assessed.

<u>Domain/Subtest</u>	<u>Score Change(Standard Score)</u>	<u>Score Change(Grade Equivalent)</u>
Math Computation	19.1	0.5
Word Reading	20.7	0.9
Spelling	17.7	0.7

4. Students will show an improvement in their behavioral/emotional development as measured by pre and post scores on the Derogatis rating scale. (FY 08/09 – overall improvement noted with significant change in depression, hostility, and obsessive compulsive behaviors)

RESULT: The Brief Derogatis Psychiatric Rating Scale is administered at the time of admission and discharge. The pre-B-DPRS and post-B-DPRS scores depict improvements in all tested areas. Significant decreases in symptoms were made in the areas of interpersonal sensitivity (1.10), depression (1.10), hostility (1.6), anxiety (1.0) and obsessive compulsive (1.0). Average decreases can be seen in somatization (.70) phobic anxiety and paranoid ideation (.60). Global Pathology decreased by an average of .90.



5. A favorable response will be obtained from the parent/guardian satisfaction surveys. (FY 08/09 – overall satisfaction with a very high score noted in staff interactions with clients and a relatively low score observed in child’s ability to function in public school)
RESULT: A parent/guardian survey was distributed to parents/guardians of current and past students of the Mell-Burton School. Over a four week period, ten client surveys were returned and seven guardian surveys were returned. The survey contained eight questions and the parent/guardian rated these as follows: 5 = strongly agree, 4 = agree, 3 = neutral, 2 = disagree, 1 = strongly disagree. High scores were obtained from parents/guardians in the areas of communication with program staff, staff interactions with clients and interventions used by staff with clients. Average scores were obtained in the areas of clients’ progress towards IEP goals, interactions with peers, and ability to function in public school.

Below are some of the additional comments were made by parents/guardians on the surveys:

The type of program that Mell-Burton offers or goes by is great! I appreciate all of the staff.

My daughter learned to improve her social interactions and follow directions.

I appreciate the patience and effort that staff utilized with my student.

VIII. Structured Day Program

1. A total of 50 students will be served. (FY 08/09 - 52 students served)
RESULT: This goal was met as a total of 52 students were served in the Structured Day Program for the 2009-10 fiscal year.

2. A total of 2000 Medicaid billable days will be obtained. (FY 08/09 – 2121 Medicaid billable days)
RESULT: This year end goal was met as a total of 2821 Medicaid billable days of service were provided for the fiscal year.

3. Less than 15% of the clients served will enter a Youth Development Center within a one year follow-up period. (FY 08/09 – 11 percent entered a YDC)
RESULT: This year end goal was met as 3 or 8% of the 38 students who fell within this sample group entered a Youth Development Center.

4. No more than 30% of clients served will have additional trouble with the law during a one year follow up period. (FY 08/09 – recidivism 30 percent)
RESULT: This year end goal was met as 11 or 29% of the 38 students who fell within this sample group had additional trouble with the law.

5. Students will show improvement in academic functioning as measured by pre and post WRAT test scores. (FY 08/09 – overall improvement noted in math, word pronunciation and spelling)
RESULT: Pre-WRAT scores were obtained upon the admission of new students and post WRAT scores were obtained prior to the end of the school year. The following table depicts the changes in standard scores (SS) and grade equivalents (GE). As scores are adjusted according to age, a youth who scored 100 at the beginning of the school year would be expected to score 100 at the end of the school year if average progress was made. As seen from the scores below, improvement was observed in all three areas.

<u>Domain/Subtest</u>	<u>Score Change</u>	
	<u>SS</u>	<u>GE</u>
Math Computation	3.5	0.3
Word Reading	7.1	1.3

Spelling

4.0

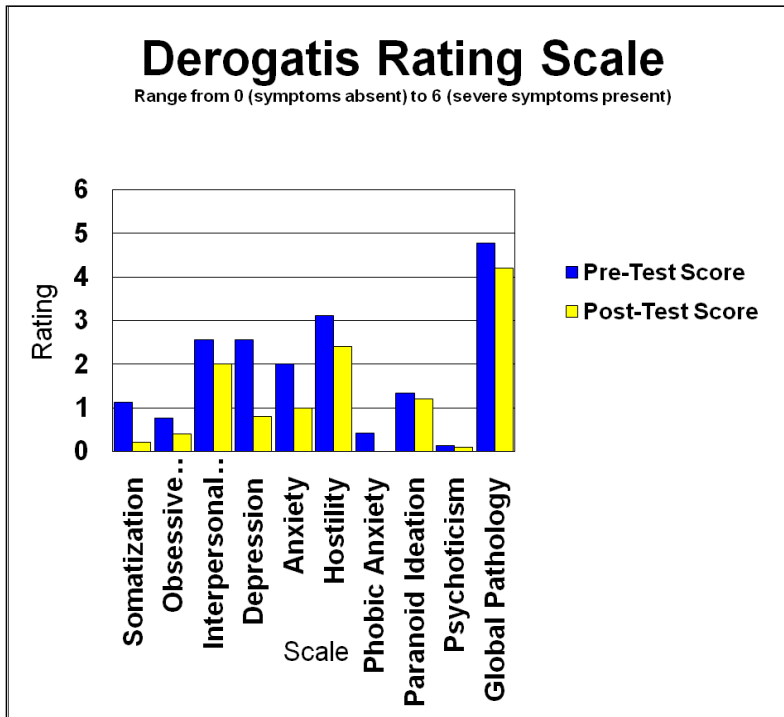
0.6

6. Students will show an improvement in their behavioral/emotional development as measured by pre and post scores on the Derogatis rating scale. (FY 08/09 – overall improvement with significant improvement noted in interpersonal sensitivity, depression and hostility)

RESULT: Pre-treatment B-DPRS data is collected at the time of admission. Clients are then assessed again prior to their discharge to obtain post-treatment B-DPRS data. The data shown below was aggregated in June 2010.

The average scores of the nine dimensions measured by the Derogatis showed a decrease in clients' symptomatology. Particularly significant average decreases were noted in the symptom dimensions of interpersonal sensitivity (1.8), depression (2.4), anxiety (1.2) and hostility (.8).

The B-DPRS also contains a Global Pathology Index, which assists in measuring a subject's overall level of functioning. The Global Pathology Index uses a Likert scale that ranges from 0 (absent) to 8 (extreme). The students' Global Pathology Index scores decreased by an average of 1.60.



7. A favorable response will be obtained from the parent/guardian satisfaction surveys. (FY 08/09 – overall satisfaction observed with area of concern being whether their child was getting enough food at lunch)

RESULT: A parent/guardian survey was distributed to seventeen students' families participating in the Mell-Burton Structured Day program. Ten out of seventeen were returned over a one-week period. The survey contained seven questions and the parent/guardian rated these as follows: 5 = strongly agree, 4 = agree, 3 = neutral, 2 = disagree, 1 = strongly disagree.

The results of the survey are averaged as follows:

1. Staff is responsive to inquiries about the program and students. 4.50
2. Staff is appropriate in their interactions with children. 4.25
3. Staff utilizes appropriate interventions with children. 4.13
4. My child's progress towards IEP goals has improved since admission into Structured Day. 3.38
5. My child's ability to engage in appropriate problem solving has improved since admission. 3.63
6. My child's ability to interact with others has improved since admission. 3.63
7. My child's ability to function in public school after attending Structured Day has increased. 3.50

Favorable responses were given most often in the categories stating that the parents feel like staff here likes them and their children, and overall feeling that their children are doing better at MBS Structured Day program than they had done at their home schools. No areas of concern were indicated on the surveys.

IX. Act Together Crisis Care

1. To provide residential services to 240 youth in the Act Together Shelter (FY 08/09 – 228 youth served).

RESULT: Year-to-date the shelter has served 193 youth (80% of the stated goal for FY 2009-2010). The decrease in the number of youth served FY 2009-2010 as compared to FY 2008-2009, may be attributed in part to an increase in referrals of youth with more severe and persistent mental health issues than what the shelter is capable of serving, availability of financial resources and a reduction in staffing throughout the reporting period.

2. To provide 2600 days of client care (FY 08/09 – 2626 days of client care).

RESULT: Total service days for the year are 2338 which equates to 89% of the annual goal. The decline in the number of service days provided at the crisis shelter this reporting period is reflective of the decrease in the number of admissions during FY 2009-2010.

3. To have 20 youth access Act Together via the Safe Place Program (FY 08/09 - 23 youth accessed the shelter through Safe Place)

RESULT: Annually, the shelter has processed 20 Safe Place referrals and admitted a total of 17 youth (85% of the goal) for shelter services. All Safe Place referrals deemed inappropriate for emergency shelter services were appropriately referred to other community resources.

4. Follow-up one-month parent/guardian satisfaction surveys will indicate that the youth made behavioral/emotional improvement by being placed at the shelter (FY 08/09 - Survey findings indicated continued overall satisfaction with the shelter's services. Improvement noted in timely placement and parent/client participation in service plans.)

RESULT: The responses to the parent/guardian discharge surveys indicate overall satisfaction with services received, with all items receiving a score of 4 or above out of a 5 point scale. Increased emphasis on case management services, delivery of community resource guides at the outset of emergency crisis care and increased parent involvement in the shelter program have been instituted to minimize difficulty with identifying local resources and assist with referrals to mental health services. Increased individual and family therapy services while in care over the past few months, have helped ease discharge transitions and are beginning to improve parent/guardian follow through with mental health support services.

5. To make 10,000 children and adolescents in Guilford County aware of the services available to runaway and homeless youth through school presentations and via distribution of Safe Place literature at schools, train and bus stations. (FY 08/09 – 10,125 youth made aware of the shelter)

RESULT: Through outreach efforts, such as community fairs, literature distribution and presentations a total of 10,550 youth were contacted through outreach efforts with 106 % of the annual goal being achieved.

6. To secure and maintain 110 Safe Place sites. (FY 08/09 – 115 sites)

RESULT: The shelter currently has 120 Safe Place sites in the community and surrounding areas, which represents 109% of the stated annual goal. The emergency shelter continues to make diligent efforts to improve awareness about Safe Place services in the community and increase the number of locations serving as Safe Place sites throughout the area. During the current reporting period, Safe Place efforts have focused on contacting local schools to conduct presentations to adolescents, continuing to train new Safe Place sites and promoting community awareness through public relations efforts.

7. To make family counseling services available to all shelter residents and their families with 25 percent of the residents and their families agreeing to participate in family counseling each year. (FY 08/09 – 21 percent participation in family counseling)

RESULT: Family counseling and mediation was offered to all Act Together Crisis Care residents and their families during the year. It is noted that participation in

family counseling during Fiscal Year 2009-2010, has stabilized at an average of 20% of families participating in family support services.

8. To return 90 percent of the shelter youth to their family of origin, when appropriate, or transition them to a safe and appropriate alternative living arrangement. (FY 08/09 – 92 percent transitioned to safe living arrangement)

RESULT: During Fiscal Year 2009-2010, 154 of the 193 (79.7%) youth served were discharged to safe long-term placements and those youth that were not permanently placed eloped, were hospitalized or incarcerated.

VIII. Therapeutic Foster Care

1. A total of 20 new families will be licensed (new goal).

RESULT: There were 6 new licensed TFC families this past year. There is one family whose license application has been submitted to the state and is awaiting licensure within the next month. A new foster parent training is scheduled for fall of 2010.

2. Youth will show improvement in their emotional/behavioral development as measured by scores on the Brief Derogatis Behavior Rating Scale (FY 08/09 - clients showed significant improvement in several domains).

RESULT: Clients are assessed after 30 days within the program, and then every 30 days thereafter with the Brief Derogatis Behavior Rating Scale. During this quarter, assessment findings indicated that stability or improvements were observed in most of the dimensions examined with noticeable improvements being noted in the areas of Somatization, Hostility, Phobia, Paranoia, and Global Pathology. Overall, the results show an increased level of functioning among clients within the program.

For the year, clients showed the most overall improvement in Depression, Interpersonal Sensitivity, Psychoticism, Anxiety, Somatization, and Global Pathology.

Also during the 2009/2010 fiscal year, one client was adopted by her TFC family and two clients graduated from high school. One of these clients is now living successfully in her own apartment and attending the local community college. Each of these cases is viewed by the program as an indicator of success during the year.

3. The TFC Program will serve a daily average of 20 youth throughout the fiscal year (FY 08/09 – average daily census 15.4)

RESULT: The year-to-date average was 21.5. Currently, there are 21 clients in care.

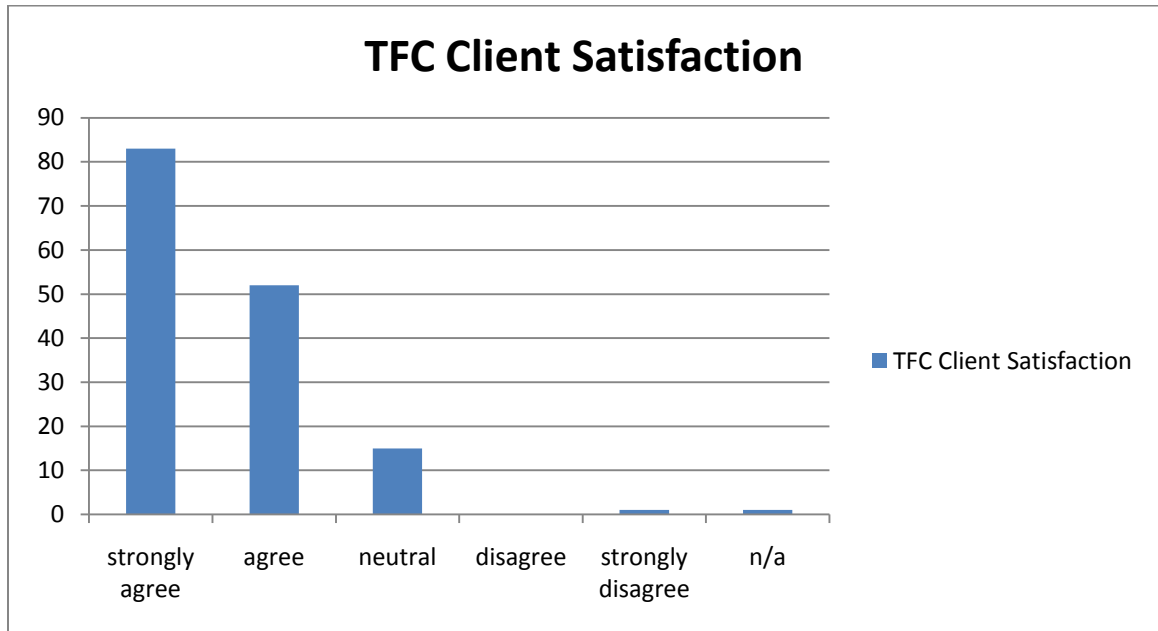
4. Guardian, resident, and TFC parent satisfaction surveys will indicate above average satisfaction with TFC services (FY 08/09 - surveys showed a high level of satisfaction).

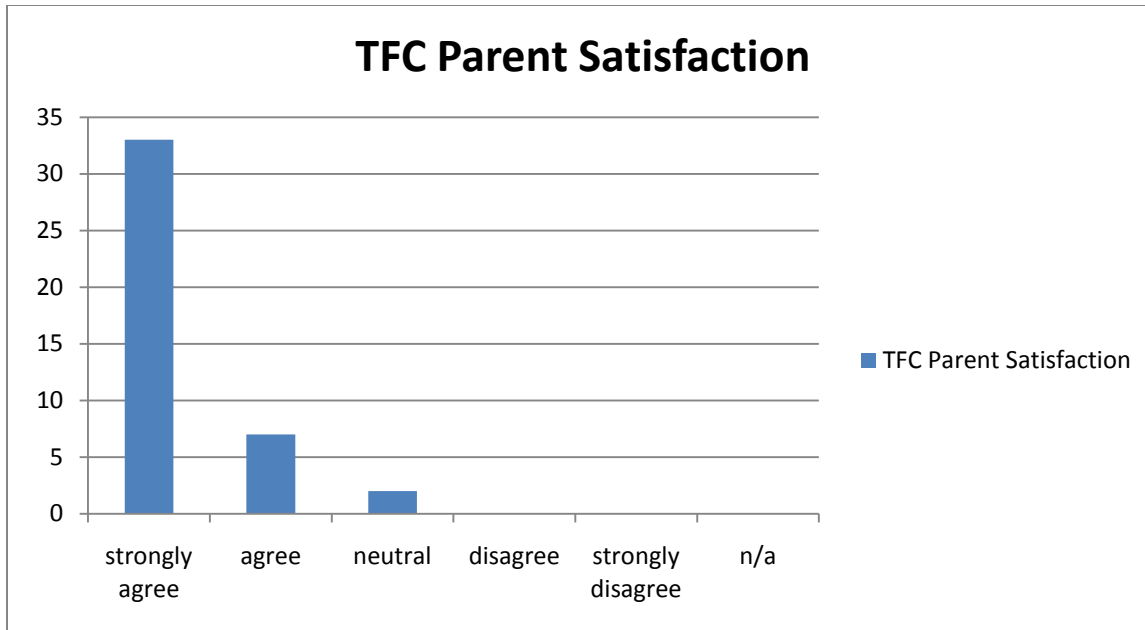
RESULT: Satisfaction surveys were distributed to referral sources 30 days post-discharge. The satisfaction surveys were designed to inquire about the level of satisfaction the referral sources have with the Therapeutic Foster Care Program. The surveys were rated on a continuum from “strongly agree” to “N/A” with four alternative choices: “agree”, “I am neutral”, “disagree”, and “strongly disagree”.

Two surveys were completed by clients’ legal guardians (referral sources) during this quarter. Out of the 24 questions asked of the guardian/referral sources, the results were primarily positive. Six responses were marked as “strongly agree”; 13 were marked as “agree”, one as “Disagree” and one as “Neutral”. There was also one “N/A” response. The one “Disagree” response was in reference to the child functioning better in social situations.

One of the two surveys had a written comment that stated that the Youth Focus case manager involved with the case “was a pleasure to work with and was always quick to respond to phone calls and emails!”

Surveys were also distributed to clients and foster parents during the month of June. Satisfaction survey results for the 2009-2010 end of fiscal year yielded almost all positive results. See below for details regarding those surveys.





XI. Youth Focus Residential Treatment Center

1. Average daily census is 10.0 or greater (FY 08/09 actual: 11.02).

RESULT: The RTC average daily census for this fiscal year (11.34) significantly exceeded this year's target.

2. Resident satisfaction surveys indicate above average satisfaction with RTC services (FY 08/09 actual: Resident satisfaction surveys were conducted monthly to assess the resident's satisfaction with a broad range of RTC components and services. During the course of this past fiscal year, the highest scored items on the survey involved residents feeling encouraged to be responsible and that residents have access to staff to discuss their problems. The lowest rated item addressed the degree to which the education program prepares residents for re-entering their education program upon discharge.)

RESULT: Resident satisfaction surveys are conducted monthly to assess the resident's satisfaction with a broad range of RTC components and services. During the course of this fiscal year, the highest scored items on the survey involved residents feeling encouraged to be responsible, that residents have access to staff when they feel distressed, and that staff understands them. The lowest rated item addressed the degree to which the education program prepares residents for re-entering their education program upon discharge.

3. Continued evidence of significant behavioral improvement using pre- and post-testing with an assessment instrument (FY 08/09 actual – Nineteen clients were discharged from the

facility this past fiscal year upon completion of the program. Among these residents, notable improvement was seen in the measure of Global Functioning, as well as significant improvement in Depression, Self-Esteem, Conduct, and Interpersonal Adjustment.)

RESULT: For the fiscal year, thirty-five clients were discharged from the facility upon completion of the program (twelve other discharges represented clients transitioning from the Level IV program to the PRTF program). Six of these thirty-five clients were discharged unsuccessfully from treatment due to imprisonment, hospitalization or discharge against medical advice. Twenty-nine clients successfully completed the program. Among these clients, notable improvement was seen in the measure of Global Functioning, as well as significant improvement in Affect, Self-Esteem, Anxiety, Conduct, and Interpersonal Adjustment.

XII. Human Resource Goals

1. Recruit and train RNs by 10/01/2009 for the PRTF licensure change at the RTC.
RESULT: All new nurses were hired and trained by 9/1/09.
2. Review and assess the type and number of personnel required to accomplish goals and objectives for the remainder of fiscal year by 01/01/2010.

RESULT: A review of staff in December, 2009 indicated only one outstanding vacancy for the agency. A live-in Program Coach hired for MSSH on 01/27/2010.

An unanticipated termination at the RTC (Recreational Therapist) occurred on 01/12/2010 however, a replacement was hired by 03/01/2010.

A new Training and QM Director was recently hired to meet CABHA requirements.

Overall staffing patterns continue to meet the goals and objectives with no outstanding vacancies. The agency will experience staffing adjustments with potential RIFs in April/May.

3. Review all EEO standards and assure compliance with applicable laws and regulations governing fair employment practices by 07/01/2010.
RESULT: All EEO requirements are up-to-date. An AAP was updated in October, 2009. We are underutilized in the “professionals” and service worker” job groups with female staff. There is no under representation with minorities.
4. Training department will ensure all employees are adequately trained with state mandated requirements. No employee will have a lapse in training by 07/01/2010.
RESULT: Two staff members at the Structured Day program allowed their Medication administration certification to lapse for 6 days. Both employees were given verbal warnings.

XIII. Administrative Goals

1. To see that revenue for the entire agency meets or exceeds expenses.
RESULT: Preliminary audit reports indicate that the agency had revenue in excess of expenses in the amount of \$221,731. However, this was primarily due to the fact that revenue for My Sister Susan's House construction exceeded our debt obligation by a significant amount (\$449,669). Most of that excess was the value of student and faculty donated labor. Excluding that revenue the agency would have lost \$227,938.

2. To expand Youth Focus services in areas in keeping with our mission and Strategic Plan as opportunities present themselves.
RESULT: Youth Focus expanded in many ways this past year. The most notable was the addition of My Sister Susan's House. This was made possible by the construction of a new facility by UNCG and a federal stimulus grant to provide operating funds for the program. In addition, a grant was received to expand our array of services in the counseling program to include clients with Asperger's syndrome. A grant was obtained from the Community Foundation to buy furniture for My Sister Susan's House. An additional grant was obtained to provide a new server for the Eastside campus programs. We received two additional federal stimulus grants this year, one for Big Brothers Big Sisters and one for the Counseling program (two gang prevention grants through state DJJDP) which will help support program operations. A new teacher was hired for the Structured Day program and a new ninth grade classroom was added.

3. By 1/15/10 to license and open My Sister's House.
RESULT: My Sister Susan's House opened March 26 and the first client was admitted March 31. The home is not yet licensed and so cannot yet serve clients under 18. The facility is awaiting final approval by the state before licensing can be completed.

4. By 3/1/10 implement the new data base from Echo – Clinician's Desktop and Revenue Manager.
RESULT: The new data base was implemented January 4, 2010 although we continue to phase in new functions of the database.