

AGENCY GOAL ASSESSMENT REPORT - FY 10/11

I. Big Brothers /Big Sisters

1. To serve 500 children for some portion of the year. 225 new matches will be made. (FY 09/10 actual: 537 served; 224 new matches).
RESULT: The program had 268 active matches on July 1, 2010. Forty eight new matches were made this quarter (194 new matches YTD). Year to date 463 children have been served.
2. To achieve a high level of customer satisfaction as measured by a survey of parents and guardians of youth matched in the program (FY09/10 – The results were positive and were reported in more detail in the Annual Consumer Satisfaction Survey.)
RESULT: Annual results have been compiled. Overall the results indicate a high level of satisfaction. A full report is available.
3. To see that a sample of the youth who are administered the Youth Outcome Measure will show a significant improvement in their rating (FY09/10 actual: Clients in the program demonstrated improvement on many of the 21 key assets measured.)
RESULT: After being matched for up 12 months 66% of the youth in the one-on-one community based program have an improved sense of social acceptance by peers, 60% have improved confidence about their school abilities, 17% have improved educational expectations, 83% have improved grades and 50% have improved attitudes about risk (using drugs, skipping school, fighting, etc.). In the site based program, 50% of the youth have an improved sense of social acceptance by peers, 50% have improved confidence about their school abilities, 17% have improved educational expectations, 17% have improved grades and 0% have improved attitudes about risk (100% stayed the same). This new outcome measure was begun in the late spring of 2010. Data for a full year is limited to 12 returned surveys.
4. The average match length for community based matches will be 22 months or greater, the average match length for site based matches will be 12 months or greater (new).
RESULT: The average match length for community matches is 14.8 months. The average match length for site based matches is 12.2 months.
5. The volunteer retention rates will meet the following goals: 6 month community based: 85%, 6 month site based: 80%; 12 month community based 60%, 12 month site based: 35% (new).

RESULT:

Time Period/Program	Goal	Actual
6 month community based	85%	81%
6 month site based	80%	66%
12 month community based	60%	81%
12 month site based	35%	57%

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 09/10 actual: 756 new clients, 877 clients served).

RESULT: A total of 861 new clients were opened in the counseling program this year. Counseling services including individual group or family therapy were provided to a total of 1,017 clients in the Counseling Program during the 10/11 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 09/10 actual: 9%).

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 568 clients, 42 (or 7%) of whom have gotten back into trouble with the legal system. Six month follow-up data is available for 436 clients, 46 of whom (10.5%) have had further legal difficulties. A sample of 311 clients have been followed for a one year follow-up period. Twenty-seven clients had further legal difficulties resulting in a recidivism rate of 9%. 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 09/10 actual: 6933).

RESULT: Therapists and the MD in the counseling Program documented 7617 units of service provided to clients during the 10/11 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 09/10 actual: Average CAFAS scores showed a 29.15 point improvement.)

RESULT: During the 2010/2011 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 46 cases in the current random sample 38 cases showed improvement in CAFAS scores, seven showed no change, and one got worse. There was an average improvement in CAFAS scores of 26.83. 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 ($t = 7.17$; $df = 45$; $p < .01$).

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 09/10 actual: 75%).

RESULT: During the 2010/2011 fiscal year, 76% of parents surveyed indicated that their child's behavior improved as a result of their involvement with the Youth Focus Counseling Program.

III. Targeted Case Management Services

1. We expect to serve 20 clients with Targeted Case Management Services (FY 09/10: 32 clients served).

RESULT: The Targeted Case Management Program provided case management services to 53 new clients during the 10/11 fiscal year, thus meeting this goal.

2. **Targeted Case Management** clients will rate Targeted Case Management services as "better than average" on the program's consumer satisfaction survey. (FY 09/10: Participant satisfaction averaged 8.16 on a scale of 1 to 9 where 5 was average).

RESULT: Consumer satisfaction data was available for 25 TCM program participants this year who on average rated their satisfaction with Targeted Case Management Services 8.58 on a scale from one to nine, nine being "extremely pleased" and a rating of five labeled as "average".

IV. Family Preservation Program

1. The Family Preservation Program will serve 80 new families this fiscal year (FY 09/10 actual: 79 new families were served).
RESULT: This goal was not met. We served 67 new families with a total of 81 children this fiscal year. When the new fiscal year began a total of 14 cases were active and carried over from the 09-10 year, which resulted in a slower start toward the 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% of those clients will go to a state YDC during a one-year follow-up period (FY 09/10 actual: 15%).
RESULT: Reports from the Department of Juvenile Justice and Delinquency Prevention indicate that none of the 27 children followed for one year after completing services or 0% 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 09/10 actual: 98%).
Result: This goal was met for the 10/11 fiscal year. Year end data shows that 100% of children whose cases closed this fiscal year remained in their home at 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 09/10, on average, had shown improvement on at least three of the five scales of the NCFAS.)
RESULT: For the 10/11 fiscal year 95% 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 09/10 actual: 19%).
RESULT: This goal was met during the 10/11 fiscal year. Reports from the Department of Juvenile Justice and Delinquency Prevention indicate that 7 of the 27 children served or 26% had additional charges within one year of termination.

V. Adolescent Substance Abuse Program

RESIDENTIAL:

1. ASAP will average at a minimum 80% occupancy rate for the ten beds in the ASAP program. (FY 2009-2010 actual: 58% male ASAP beds; 61% female beds)
RESULT: The end of the year occupancy rate for the eight ASAP male beds during the 2010-2011 fiscal year was 75.7% and 64% for female beds. All 10 beds averaged 75%

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 2009-2010 actual: 100%)
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 2010-2011 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 2009-2010 actual: 71%, and
 - 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 2009-2010 actual: 71%).
RESULT: A). During FY 2010-2011 71% of ASAP clients demonstrated improvement on the CAFAS Substance Use scale.

RESULT: B). During FY 2010-2011 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 09-10 actual: 40%)
RESULT: The ASAP program successfully graduated 66.6 % of our clients in the FY 2010-2011. There were 4 clients who left the program unsuccessfully due to DJJDP court violations and who were placed in higher level of care facilities.

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 2009-2010: 82%)
RESULT: Eight-two percent of successful graduates of the ASAP program have maintained significantly reduced or eliminated drug usage during the year

following their discharge from the program. This information is based on ASAP staff contacting the family members of former clients.

OUTPATIENT (all goals are new):

1. The Outpatient Substance Abuse program will serve three hundred new clients during the 10 months this program will operate during the 2010 – 2011 fiscal year. (new service)

Result: The Outpatient Substance Abuse therapists provided services to 261 new clients in the 10 months of the program for fiscal year 2010-2011. This period included the start-up time for this new service.

2. Sixty per cent of clients will be abstinent from drugs and alcohol at discharge as evidenced by both testing negative for all substances using a drug screen and per client/guardian self-report.

Result: Of the clients discharged from the Outpatient Substance Abuse program, 69% were abstinent from substances at their time of discharge. Therefore, we exceeded our goal for the fiscal year 2010-2011.

3. Seventy-five percent of clients discharged from the program will have an improved CAFAS substance abuse subscale score when compared to their CAFAS score at admission.

Result: At discharge from the Outpatient Substance Abuse program, 81% of clients had an improved CAFAS score on the substance abuse subscale.

4. Seventy-five per cent of clients will have an improved GAF score at discharge as evidenced by an increased score from admission to discharge.

Result: 75% of clients had an improved GAF score at discharge from the Outpatient Substance Abuse program. Thus, our goal was achieved.

5. Seventy per cent of clients referred for services will be assessed.

Result: Of the clients referred and scheduled for services during the fiscal year 2010-2011, 72% were assessed.

6. Fifty percent of clients referred for services at Youth Focus will attend at least one treatment session.

Result: 85% of clients admitted to the Outpatient Substance Abuse program during fiscal year 2010-2011 attended at least one treatment session.

7. We anticipate that 50% of parents in outpatient services will participate in their child's treatment by attending parent education, collateral, or family therapy sessions while their child in the program.

Result: Of the clients admitted to the Outpatient Substance Abuse program, 85% had parental or family support involvement. Therefore, our goal was achieved.

VI. Transitional Living Program

1. Clients served will demonstrate improved self concept as measured by the Self Esteem Index. (FY 09/10 actual: average increase in self esteem was 2.83 points)
RESULT: Three pre-post tests were administered during the year. The average increase in self-esteem was .66 points.
2. Seventy-five percent of clients who meaningfully participate in TLP for a minimum of three months will be discharged into a stable, permanent and appropriate living placement (FY 09/10 actual: 100% of clients discharged went to live in stable, permanent housing).
RESULT: Eight clients were discharged from TLP during the 2010-2011 Fiscal Year. Of those, two were children of parenting teens. Of the clients discharged, 87.5%, went to live in permanent, stable, and appropriate housing. One client went to her parent's house briefly and then went to live at another transitional program.
3. Fourteen clients will be served in the TLP (FY 09/10 actual: 14).
RESULT: Twelve clients were served in the Transitional Living Program in 2010-2011.
4. Each client in placement at TLP for at least three months will accomplish three of the goals in her action plan by the time she leaves the program (FY09-10 actual: 90%)
RESULT: Of the twelve clients served at TLP, eight of them were in placement for three months or more. All of those eight, or 100% achieved at least three of the goals on their action plans.

VII. My Sister Susan's House

1. Twelve clients will be served in the MSSH program during the 2010 – 2011 fiscal year (new).
Result: During the 2010 – 2011 fiscal year MSSH served 9 individual women and 11 children. One woman and her child were served by MSSH twice.
2. Each of the clients who meaningfully participated in the MSSH program (minimum three months) will accomplish three of the goals in her Action Plan by discharge from the program (new).
Result: During the 2010 – 2011 fiscal year six clients meaningfully participated in the MSSH program (minimum of 3 months) at the time of discharge. Of those 6 women, 4 of them or 66% completed 3 or more goals from their actions plans by discharge from the program.
3. Seventy-five percent of clients who meaningfully participated in the MSSH program (minimum three months) will be discharged into a stable, permanent and appropriate living placement (new).

Result: 83% of those who participating meaningfully in the MSSH program during the 2010 – 2011 fiscal year were discharged into stable, permanent, and appropriate living placements.

4. Clients served in MSSH during the 2010 – 2011 fiscal year will demonstrate improved life skills, as measured by the Life Skills Inventory, which is measured at intake, and every 3 month and at discharge (new).

Result: 100% of the women who have meaningfully participated in the program this fiscal year have demonstrated improved life skills as measured by the Life Skills Inventory.

5. Sixty percent of clients who meaningfully participated in the MSSH program (minimum three months) will report having a lower perception of their risk of violence at discharge from the program (new).

Result: 50% of those who meaningfully participated in the program report a lower perception of their risk of violence. 33% report an equal perception of risk. 1 woman (17%) reported being unsure of her perception of risk of violence. No women reported a higher perception of risk.

VIII. Mell Burton School

1. A total of 35 students will be served in the two classrooms (FY 09/10 - 34 students served).

RESULT: Thirty four students have been served YTD.

2. A total of 2000 Medicaid billable days will be obtained (FY 09/10 – 1975 Medicaid billable days).

RESULT: For the year a total of 2620 Medicaid billable days were billed which is 131% of the goal

3. Students will show improvement in academic functioning as measured by pre and post WRAT test scores (FY 09/10 – 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 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. During the 2010-2011 fiscal year improvements were made in all areas but below average improvement was made in word reading.

Results from previous years have consistently shown exceptionally good progress in all academic areas assessed.

<u>Domain/Subtest</u>	<u>Score Change(Standard Score)</u>	<u>Score Change(Grade Equivalent)</u>
Math Computation	3.5	0.5
Word Reading	2.8	0.5
Spelling	3.8	0.6

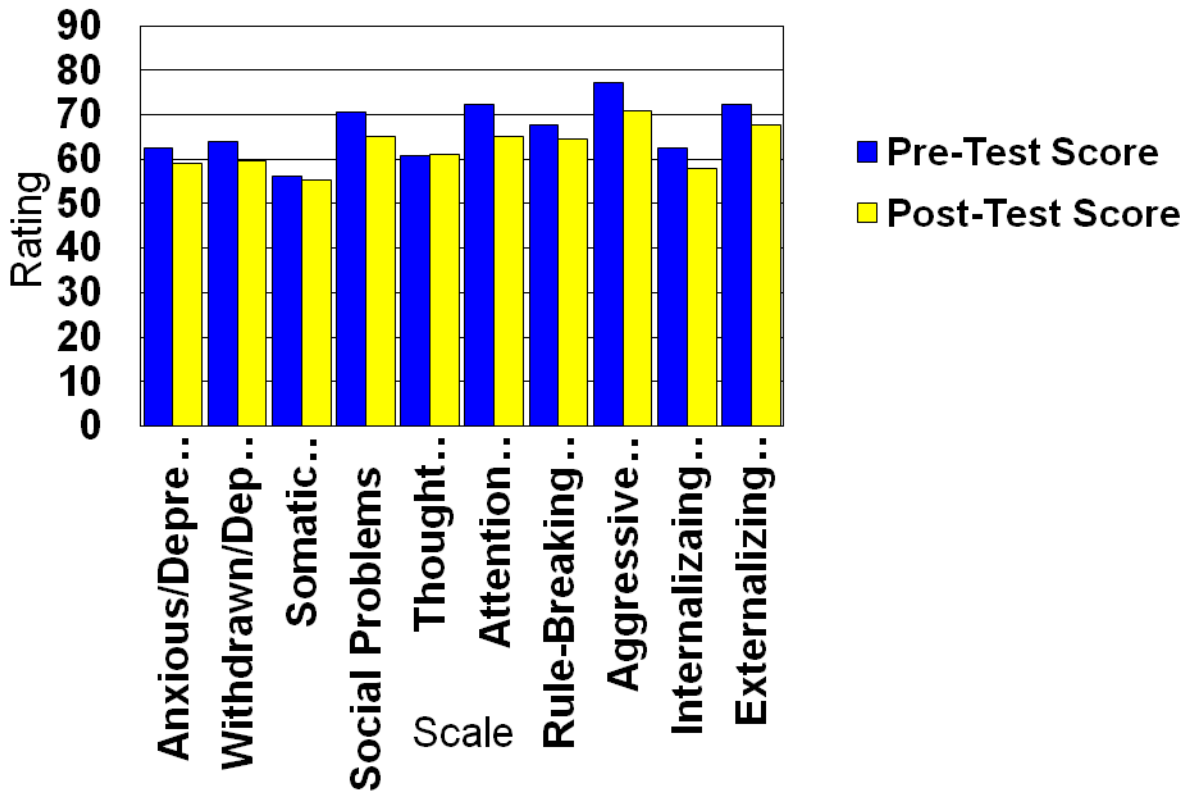
- Students will show an improvement in their behavioral/emotional development as measured by pre and post scores on the Child Behavior Checklist (FY 09/10 – overall improvement noted with significant change in depression, anxiety, hostility, and obsessive compulsive behaviors on the B-DPRS).

RESULT: This fiscal year we began administering a new behavior rating scale, Child Behavior Checklist, which provides more detailed information about the student’s overall functioning than the Brief Derogatis Psychiatric Rating Scale as used in previous years. Below is a summary of the scores obtained in all subcategories.

Average scores were obtained in the subcategories of Anxious/Depressed, Withdrawn/Depressed, and Rule Breaking Behaviors (3.6, 3.6, and 3.0 respectively). Significant above average scores were obtained in the areas of Social Problems, Attention Problems and Aggressive Behaviors (5.8, 7.0 and 6.1, respectively). Below Average scores were obtained in the areas of Somatic Complaints and Thought Problems (1.3 and 0.1, respectively). Above average scores (4.5) were obtained in the overall Internalizing and Externalizing categories. At the end of the 2010-2011 fiscal year, improvements were made in all areas assessed by the Child Behavior Checklist.

Child Behavior Checklist Rating Scale

Range from 0 (symptoms absent) to 2 (severe symptoms present)



5. A favorable response will be obtained from the parent/guardian satisfaction surveys (FY 09/10 – overall satisfaction with a high score noted in communications and staff interactions with clients).

RESULT: Parent/guardian surveys are sent out in November. A parent/guardian survey was distributed to parents/guardians of current and past students of the Mell-Burton School. Over a four week period, thirteen 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 (questions# 1, 2, 3 and 8 with scores of 4.5, 4.17, 4 and 4 respectively). Average scores were obtained in the areas of clients' progress towards IEP goals, interactions with

peers, and ability to function in public school (questions # 4, 5, 6, and 7 with scores of 3.80, 3.83, 3.83 and 3.67 respectively).

1. Staff is responsive to inquires about program and students. 4.5
2. Staff is appropriate in their interactions with children. 4.17
3. Staff uses appropriate interventions with children. 4
4. My child's progress towards IEP goals has improved since admission into MBS. 3.8
5. My child's ability to engage in appropriate problem solving has improved since admission. 3.83
6. My child's ability to interact with others has improved since admission. 3.83
7. My child's ability to function in public school after attending MBS has increased. 3.67
8. There is adequate communication between myself and staff regarding my child's progress in the program. 4

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

I think my child has showed great progress since he has been enrolled at MBS. I think it should be more communication if parent request it from staff and administrators. I'm all about wanting to know how my child is doing rather it be good or bad.

My child has not been here for long. Progress may still continue and improve.

IX. Structured Day Program

1. A total of 50 students will be served. (FY 09/10 - 52 students served)
RESULT: A total of 74 students have been served year-to-date at the Mell-Burton School Structured Day program since the start of the 2010-2011 fiscal year.
2. A total of 2500 Medicaid billable days will be obtained. (FY 09/10 2821 Medicaid billable days)
RESULT: For the fiscal year, a total of 3,130 billable days were obtained.
3. Less than 15% of the clients served will enter a Youth Development Center within a one year follow-up period. (FY 09/10 – 8 percent entered a YDC)
RESULT: According to the data that was received, there were twenty clients discharged within the fourth quarter from last year; none of those clients served entered a Youth Development Center one year following discharge. Year-to-date aggregate data indicate that 2 of the 40 youth discharged (5%) was admitted to a Youth Development Center.

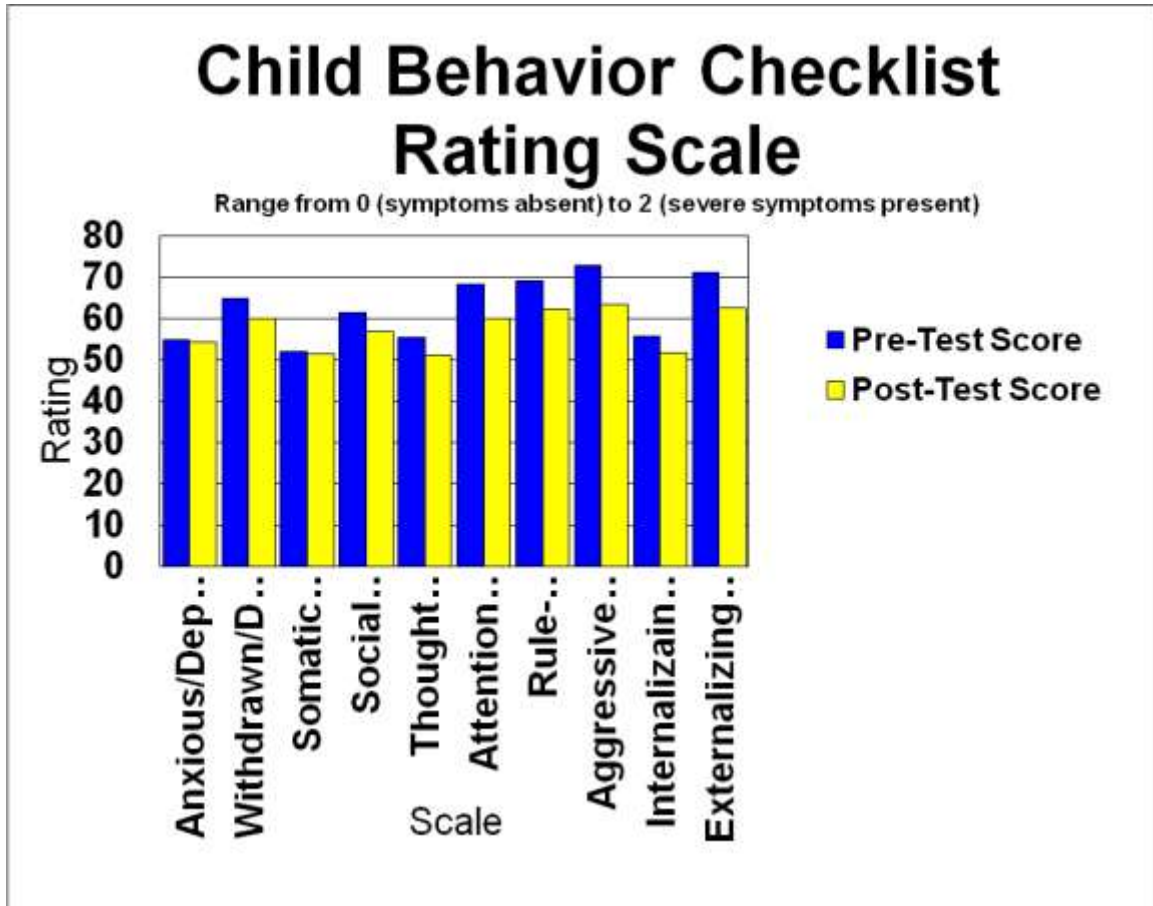
4. No more than 30% of clients served will have additional trouble with the law during a one year follow up period. (FY 09/10 – recidivism 29 percent)
RESULT: According to the data that was received, there were twenty clients discharged within the fourth quarter from last year; seven of these clients had additional trouble with the law following discharge from the program. Thus, during this quarter 35% of the youth included in the study group had additional trouble with the law. Year-to-date aggregate data indicates that 10 out of 40 youth (25%) served had additional trouble with the law.
5. 80% of the clients served will be successfully maintained in the Structured Day program that facilitates mental health services designed to address the clients’ specific needs. (New goal)
RESULT: Year-to-date there have been 70 students out of 74 served (95%) who were maintained in the program.
6. Students will show improvement in academic functioning as measured by pre and post WRAT test scores. (FY 09/10 – 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 and grade equivalents. There was positive growth in all tested subject areas. As can be seen from the table, improvements above the expected level of academic functioning were noted in all areas assessed.

<u>Domain/Subtest</u>	<u>Score Change (Standard Score)</u>	<u>Score Change (Grade Equivalent)</u>
Word Computation	14.1	0.5
Spelling	9.1	0.6
Math	8.6	0.6

7. Students will show an improvement in their behavioral/emotional development as measured by pre and post scores on the Child Behavior Checklist. (FY 09/10 – overall improvement with significant improvement noted in somatization, interpersonal sensitivity, depression, anxiety and hostility on the B-DBRS)
RESULT: This fiscal year we began administering the Child Behavior Checklist (CBCL), which provides more detailed information about the student’s overall functioning than the Brief Derogatis Psychiatric Rating Scale as used in previous years. Below is a summary of the data obtained from the testing administered last

fiscal year. CBCL was administered at the time of admission and at the time of discharge.

The average scores of the 10 dimensions measured by the CBCL showed a decrease in clients' symptomatology. Particularly significant average decreases were noted in the symptom dimensions of Aggressive Behaviors (9.60), Externalizing Problems (8.60), Attention Problems (8.20), and Rule Breaking Behaviors (6.80).



8. A favorable response will be obtained from the parent/guardian satisfaction surveys. (FY 09/10 – overall satisfaction with services)
RESULT: Parent/guardian surveys are sent out in November. The data below reflects the information gathered from November 2010. A parent/guardian survey was distributed to sixteen students' families participating in the Mell-Burton Structured Day program. 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. 4.31

2. Staff is appropriate in their interactions with children. 4.13
3. Staff utilizes appropriate interventions with children. 4.06
4. My child's progress towards IEP goals has improved since admission into Structured Day. 3.44
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. 4.00
7. My child's ability to function in public school after attending Structured Day has increased. 2.69

Above average scores were obtained pertaining to questions regarding staff responsiveness and interactions with clients. Average scores were obtained regarding the client's progress towards behavior and school goals. One area of concern is the below average score obtained pertaining to the clients' ability to function in public school after discharge from the program. The two "strongly disagrees" scores were obtained from the guardians of clients who failed to attend the program regularly. As a result of their irregular attendance the clients were unable to fully benefit from the interventions provided at the Structured Day program which would affect their overall performance upon return to public school. Surveys were sent out to guardians of previous clients who have returned to public school but none responded.

X. Emergency Shelter – Act Together Crisis Care

1. To provide residential services to 200 youth in the Act Together Shelter (FY 09/10 – 193 youth served).
RESULT: The total clients served in FY 2010-2011 was 213, exceeding the annual goal by 6.5%.
2. To provide 2500 days of client care (FY 09/10 – 2338 days of client care).
RESULT: A total of 2505 days of client care have been provided in FY 2010-2011 for 100.2% of the annual goal.
3. To have 20 youth access Act Together via the Safe Place Program (FY 09/10 - 17 youth accessed the shelter through Safe Place)
RESULT: A total of 33 clients were admitted via Safe Place in FY 2010-2011, exceeding the annual goal by 65%. 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 09/10 - Survey findings indicated continued overall satisfaction with the shelter's services).

RESULT: The overall Parent/Guardian satisfaction response for FY 2010-2011 was 4.36 out of 5.

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 09/10 – 10,550 youth made aware of the shelter)

RESULT: A total of 10,100 youth, parents and community partners were successfully contacted and educated about Safe Place and emergency services available at Act Together Crisis Care in FY 2010-2011 which exceeds the annual goal by 1%.

6. To secure and maintain 125 Safe Place sites. (FY 09/10 – 120 sites)

RESULT: 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. The shelter currently has 123 Safe Place sites in the community and surrounding areas, which represents 98.4% of the stated annual goal.

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 09/10 – 20 percent participation in family counseling)

RESULT: A total of 68 of the 183 (37 percent) residents eligible for family crisis counseling participated in this service during FY 2010-2011.

***Please note these figures are based only on clients eligible for family crisis counseling services during the reporting period not total clients served.

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 09/10 – 79.7 percent transitioned to safe living arrangement)

RESULT: A total of 162 of the 205 discharged clients (79 percent) were transitioned to safe permanent placements during FY 2010-2011. Those runaway and homeless youth that were not permanently placed either eloped, were hospitalized, or incarcerated. Six clients remained in emergency crisis care at the shelter during the reporting period and will be discharged in July 2011.

XI. Therapeutic Foster Care

1. An average of 50 licensed families will be maintained throughout the fiscal year (FY 09/10 actual: 46 families licensed).

RESULT: As previously reported, the active family count was revised to more accurately reflect 26 active foster homes as of July 2010. During the previous three quarters, various family issues reduced the available families roster to 21 by the end of

March 2011. Although 7 families are in the process of seeking licensure following the spring 2011 MAPP training, the number of currently licensed available TFC families remains stable at 21. No families have been successfully licensed this quarter; one family became licensed this year.

2. Youth will show improvement in their emotional/behavioral development as measured by scores on the Child Behavior Checklist (FY 09/10 - Clients showed significant improvement in several domains with the Brief Derogatis Psychiatric Rating Scale).

RESULT: During the 1st Q, the TFC program began administering the Child Behavior Checklist (CBCL) to assess client overall functioning as a replacement for the former tool utilized, the Brief Derogatis Psychiatric Rating Scale. Clients were assessed at the time of admission and at 6-month intervals and/or at discharge during their stay within the foster home. Average scores of the 10 dimensions measured by the CBCL demonstrate an overall decrease of 4.8 in TFC client symptoms in post-test vs. pre-test outcomes.

One dimension that remained stable without change was Rule Breaking Behavior. Two areas showed a slight increase from pre-test to post-test: Anxious/Depressed (.1) and Thought Problems (.4), which may be attributable to the increased stressors some clients face in out-of-home placements especially in cases in which family custody hearings and uncertain reunification plans are involved.

The most significant decreases were in Aggressive Behaviors (-2) and Externalizing Behaviors (-2). Outcomes across five other dimensions also decreased slightly over the initial testing period:

Withdrawn/Depressed	(-.1)
Somatic Complaints	(-.3)
Social Problems	(-.1)
Attention Problems	(-.5)
Internalizing Problems	(-.3)

3. The TFC Program will serve a daily average of 25 youth throughout the fiscal year (FY 09/10 – average daily census 21.5)

RESULT: The fiscal year-to-date average daily census was 17.6. The year to date daily average per category of placement was as follows:

Therapeutic Foster Care:	14.6
Traditional Foster Care:	1.1
Room & Board Only/CARS:	1.9

4. Guardian, resident, and TFC parent satisfaction surveys will indicate above average satisfaction with TFC services (FY 09/10 - surveys showed a high level of satisfaction).

RESULT: Satisfaction surveys were sent to all legal guardians 30 days post discharge from the TFC program. Historically getting surveys returned from these individuals has proven challenging. Two surveys were returned this year. Those who did respond expressed predominantly positive responses. Survey items included inquiries as to guardian satisfaction with availability and responsiveness of TFC staff, respectful treatment of clients, involvement of the guardian in treatment planning and implementation, client responsiveness, and overall satisfaction with TFC services.

Of 24 total item responses received on the two returned surveys, 19 were marked ‘Strongly Agree’ or ‘Agree’. Only one of the responses was ‘Disagree’ to the item “My child functions better in social situations following TFC treatment”. There were no ‘Strongly Disagree’ responses. The lowest ranked responses were related to client ability to relate better with family members and in social situations following treatment.

Satisfaction surveys for TFC parents are distributed twice per year. Results of the TFC parent satisfaction surveys this year were predominantly positive in terms of satisfaction with issues including appropriateness of client matches to foster family skills, staff responsiveness, foster parent perception of support, and quality of services, communication, and training offered by TFC. Satisfaction surveys were distributed to TFC parents again in the 1st and 3rd quarters. Details of the survey are detailed more thoroughly in previous 2010-11 reports; items are ranked by degree of agreement or disagreement to the topics on a 5 point Likert-type scale. The overall average across all items was 4.7 out of 5, indicating a high degree of foster parent satisfaction with the TFC program. The highest ranked item was related to appropriateness of match of client needs to foster parent skills. The lowest ranked item was related to satisfaction with the on-call

1.) The TFC Staff are available to answer questions & address concerns. <i>(Staff includes office staff and part-time case managers.)</i>	4.75
2.) The TFC Staff helps me in my efforts to parent clients effectively.	4.5
3.) I feel that my TFC case manager equally supports me & the children in my care.	4.75
4.) The TFC staff advocates for me with the birth family/legal guardian and other professionals on the client’s treatment team.	4.5
5.) The TFC staff takes care to match a therapeutic foster child’s needs with what best fits my family and skills.	5
6.) The TFC after-hours on-call system adequately serves my after-hours needs.	4.3
7.) TFC offers training that is informative and relevant to the job of foster parents.	4.75
8.) I am satisfied with the level of professionalism displayed by the TFC staff.	4.75
9.) I am satisfied with the overall quality of the services, communication and feedback provided by the TFC staff.	4.75
10.) I would recommend Youth Focus to a friend or co-worker who is interested in becoming a therapeutic foster parent.	4.75

system due to one of the four respondents replying “Neutral” and one “N/A”.

The following ten items comprised the TFC Foster Parent Satisfaction Survey. In the column next to each item is the average response given by TFC clients.

Satisfaction surveys for TFC clients are distributed twice per year, also in the 1st and 3rd quarters. The satisfaction surveys are designed to inquire as to the level of client satisfaction with the Therapeutic Foster Care Program. The surveys are rated on a continuum of six response choices ranking degree of agreement 1-5 on a Likert-type scale; ‘N/A’ responses were not assigned a value.

Client responses showed that the majority of clients feel safe and that their needs are being met in the TFC home. Most clients who received services during the 2010-11 calendar year also expressed feeling comfortable talking with the foster parents and TFC staff and cited that their needs were being met in the program. The few questions that received any negative responses were related to the comfort level clients have sharing personal information with TFC parents and staff, their enjoyment of the community school setting, and their ability to disclose to TFC staff and foster parents when their feelings are hurt. The overall average across all items was 4.4 out of 5, indicating a high degree of client satisfaction with the TFC program.

The following ten items comprised the winter 2010 TFC Client Satisfaction Survey. In the column next to each item is the average response given by TFC clients.

1.) I am comfortable sharing personal information about my life with the Youth Focus TFC staff and case manager.	3.9
2.) I believe that the TFC staff and case manager listen to me and my opinions.	4.6
3.) I am comfortable talking to my foster parents about my problems.	4.5
4.) I can tell my foster parents when my feelings are hurt.	4.4
5.) I enjoy living in the TFC home.	4.6
6.) I like the school I am attending.	3.5
7.) I feel safe in my foster home.	4.5
8.) My basic needs (care, clothing, regular meals, a place to sleep & bathe) are taken care of in my foster home.	4.8
9.) I am in better control of my behavior and feelings since I’ve been living with my foster family.	4.4
10.) I know I can ask an adult on my team if I need help.	4.5

Overall, based on responses to the most recent satisfaction surveys, levels of client and foster parent satisfaction with the TFC Program are high and indicate general satisfaction with the services provided by the therapeutic parents and staff.

XII. Youth Focus Residential Treatment Center

1. Average daily census is 10.0 or greater (FY 09/10 actual: 11.34).
RESULT: During this fiscal year, the average daily census for was 11.83.
2. Resident satisfaction surveys indicate above average satisfaction with RTC services (FY 09/10 actual: 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.)
RESULT: During this fiscal year, the highest scoring items on the survey involved residents feeling the classroom helps prepare them for school, recreation therapy helps their development, that staff discourages unhealthy behaviors, and that staff encourages them to be responsible, while the lowest rated item addressed the sense that staff understands them, and that they got along well with their peers.
3. Continued evidence of significant behavioral improvement using pre- and post-testing with an assessment instrument (FY 09/10 actual – notable improvement was seen in the measure of Global Functioning, as well as significant improvement in Affect, Self-Esteem, Anxiety, Conduct, and Interpersonal Adjustment.)
RESULT: During the fiscal year, fifteen clients were discharged from the facility upon completion of the program (three other discharges represented clients incarcerated or hospitalized). Among the clients who successfully completed the program, notable improvement was seen in the measure of Global Functioning, as well as significant improvement in Affect, Anxiety, Conduct, Self Esteem and Interpersonal Adjustment.

XIII. Human Resource Goals

1. All staff (including Day Treatment, Intensive In-Home, Community Support) will be trained in relevant training requirements by December 31 (as directed by NC DHHS and CABHA requirements). Training includes Person Centered Thinking (PCT), Person Centered Planning (PCP), System of Care (SOC), etc.
RESULT: Complete. All current employees in need of PCP & SOC were trained by 12/31.
2. Conduct follow up Employee Opinion Survey (EOS) addressing issues from the 2010 EOS by 07/01/2011.

RESULT: An action plan was developed by the Management Team and a survey was completed in March. A review of employee feedback indicated no significant change. The majority of employees continue to express favorable comments with regard to recognition. They also believe they have opportunity to participate in decisions for their department or the agency.

3. Provide EEO-1 reporting by 09/30/2010 to the Federal Government.

RESULT: Completed on 08/26/10.

4. Review and assess the processes for compliance when utilizing independent contractors, including education, training, relevant experience, competence in the required role, and verification of licensure for the required role. Any deficiencies will be completed by 07/01/2011.

RESULT: Internal audits revealed a lack of appropriate documentation in the contractor files with regard to various training. The new Training and QA Director has developed systems to address lapses in training. She is currently communicating with the contractors and maintaining open dialogue with relevant staff.

5. Review and assess training and development programs which promote awareness, appreciation, and sensitivity to the cultural background and needs of Youth Focus consumers. Any deficiencies will be completed by 07/01/2011.

RESULT: Annual training addressed cultural competence in an in-service in November, 2010. Pre-service orientation will provide training regarding cultural diversity during the next fiscal year.

XIV. Administrative Goals

1. To see that revenue for the entire agency meets or exceeds expenses.

RESULT: Expenses YTD were \$7,894,991 with revenue of 8,056,341 for a net profit of \$161,348.

2. To expand Youth Focus services in areas in keeping with our mission and Strategic Plan as opportunities present themselves.

RESULT: Services have been expanded this fiscal year by the addition of our substance abuse contract and the hiring of two new substance abuse counselors and an outreach worker.

3. By 11/1/10 hire and train a new data base manager to manage our data base from Echo – Clinician’s Desktop and Revenue Manager.

RESULT: The new data base manager was hired in September and his training completed on 10/8/10.

4. By 12/1/10 to fully implement the expansion of our adolescent substance abuse services.

RESULT: The program was partially implemented by 12/1/10. Two full time substance abuse counselors have been hired and one full time outreach worker. For budgetary reasons the hiring of the remaining two staff had to be delayed until January of 2011.