

The Bobby Benson Center



Annual Report

Fiscal Year 2002/2003

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Joan S. Bellinger	<i>Investment Committee</i>
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Director Emeritus

Major David C. Benson
Merry Lee Corwin
William Stryker

Mission Statement

The mission of the Bobby Benson Center is to

“Free the youth of Hawaii from the disease of chemical dependency through development and implementation of state-of-the-art residential treatment programs.”

Strategic Plan

To meet this mission, the Center has developed a Board-approved short-term strategic plan. The current strategic plan was revised in 2003 and extends through 2006. A long term plan will be created at the end of 2004 based upon the short term strategic plan as follows:

- 1. Advance the Center’s abilities to use technology effectively in day to day operations*
 - 2. Create and distribute a Bobby Benson Center newsletter*
 - 3. Evaluate the need for additional youth addiction treatment services on the island of Oahu*
 - 4. Develop a stable base of donors*
 - 5. Create a client scholarship program to be funded by donor contributions*
 - 6. Evaluate the addition of informational and educational material to the BBC website*
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Overview of Delivery of Services

98 youth were served at the Bobby Benson Center during fiscal year 2002/2003. There were 75 admissions (40% female, 60% male) and 23 youth whose services carried over from fiscal year 2001/2002. The number of admissions for FY 02/03 was 2 less than the previous fiscal year and the average client census for FY 02/03 was 21.45 (4.8 more than previous fiscal year). FY 01/02, for a number of reasons, was anomalous in relation to client census. FY 02/03 returned to the averages of the years previous.

The general profile of the client population at the Bobby Benson Center includes adolescents between the ages of 13 and 17 with an average age of 16 (38% of clients) who require alcohol/drug addiction residential treatment services. The majority of clients identify themselves as “Mixed – Part Hawaiian” (45%) and they come from Oahu (69%), Big Island (16%), Maui (10%), Kauai (3%) and Molokai (1%). Most clients were referred and funded by CAMHD (65%) over the past fiscal year. ADAD referred and funded 21% of clients, Judiciary referred and funded 8% of clients, Kaiser referred and funded 1% of clients, HMSA referred and funded 4% of clients, and 1% of clients were referred and funded by other private insurance.

The range of services provided at the Bobby Benson Center include individual therapy, cognitive-behavioral group therapy, chemical dependency education, lifeskills education, continued school program, work-study, recreational activities, psychological and psychiatric monitoring, medical services, family therapy, parent education, physical education, relapse-prevention education, and after-care groups. The environment is highly structured and staffed with experienced, caring professionals.

The average length of stay at BBC for most clients during fiscal year 2002/2003 was 111 days, which is an increase of 46.3 days from FY 01/02. During the past fiscal year, 59% of those clients discharged completed treatment. It is found, at six-month follow-up that clients who complete treatment are more apt to attend after-care services and maintain sobriety. It was also found that those clients whose length of stay was 120 days or more were more apt to be successful at time of six-month follow up. BBC strictly complies with CAMHD’s and ADAD’s clinical standards, CARF requirements, and ASAM criteria for admission, treatment and discharge.

Unique Qualities of Program

The Bobby Benson Center is located on Oahu’s North Shore in a beautiful residential campus setting. Up to 24 youth can be treated simultaneously. In addition, a family cabin is able to accommodate up to four families, free of charge, who are visiting and participating in their son or daughter’s care.

The Bobby Benson Center is fully accredited by CARF, The Rehabilitation Accreditation Commission, and is licensed by the State Health Department.

The program emphasis is on a holistic, team approach to therapy in a non-restrictive treatment environment. This ‘community of recovery’ includes a dedicated staff of trained professionals; a medical director, psychiatrist, clinical psychologist, certified chemical dependency counselors, family therapist, youth counselors, activities coordinator, credentialed teacher, and educational assistants.

The BBC, at the end of fiscal year 02/03, had 43 employees. Throughout fiscal year 02/03, a total of 27 employees were hired at BBC with 23 terminations occurring.

The average number of employees through the year was 43 which results in an overall 53% turnover rate. In the April 2001 report from Hawaii Employers Council, the average turnover rate for Human Service companies in Hawaii was 33% in calendar year 2000. BBC is higher than the average in its sector.

Reasons for employee separation included: not completing 3-month probation period (3%), moved off island (47%), terminated involuntarily due to inability to follow BBC policy and procedures (17%), and other reasons including location of other employment (30%). Without including those employees who failed to complete the probationary period the BBC turnover rate was 44%.

BBC is proud to maintain a highly qualified, professional staff. The average length of service for BBC employees is 30 months (2.5 years). Staff service ranges from one month to 12 years. The breakdown includes: 21 employees who have worked at BBC for less than one year, 6 employees who have worked one to two years, 4 employees have worked between two and three years, 1 employee has worked three to four years, 3 employees have worked four to five years, 5 employees have worked five to seven years, 2 employees have worked ten to eleven years, and 1 employee has worked eleven to twelve years.

Program Strengths

The mission of the Bobby Benson Center is to “free the youth of Hawaii from the disease of chemical dependency through development and implementation of state-of-the-art residential treatment programs.” The dedication to this mission by staff, the Board of Directors, the community, and Hawaii’s families dealing with chemical dependency is our biggest area of strength. The treatment model has been enhanced with additional clinical staffing, training and supervision. Throughout the year, satisfaction surveys have shown a high level of satisfaction with the Center’s services. Staff morale is high and without exception the staff is all committed to the safety, welfare and recovery of the youth in treatment. Overall, quality assurance indicators throughout the year indicated that BBC consistently meets the vast majority of indicators.

Areas of accomplishment or improvement over the past fiscal year have been:

1. Excellent relationships with all referral sources and a variety of community resources
2. Increased revenue resulting in a healthy fiscal situation through the entire year.
3. Management of leadership transition with hiring of new executive director
4. Implementation of leadership training for clinical and shift leading staff
5. Program success indicated through follow-up reports as 71% of clients who completed a six-month follow-up survey reported being clean and sober at the time of the survey.
6. Stable client census; average of 21 per day

Outcome Measures

- 60% of clients successfully completed the program
- 71% of clients who responded to the 6-month follow-up survey were in school, employed or attending a vocational program
- 95% of respondents were in stable living conditions
- 32% of respondents have received additional substance abuse treatment since discharge
- 76% of respondents had no new arrests at six-month follow-up
- 71% of clients who were discharged from BBC reported no substance use in the past thirty days prior to follow-up
- 43% of respondents reported being clean and sober since discharge

Staffing

As of June 30, 2003, the Center had 43 employees.

29 employees working 40 hours each week
5 employees working between 32 and 40 hours each week
6 employee working between 20 and 24 hours each week.
3 employees contracted on a per-diem basis

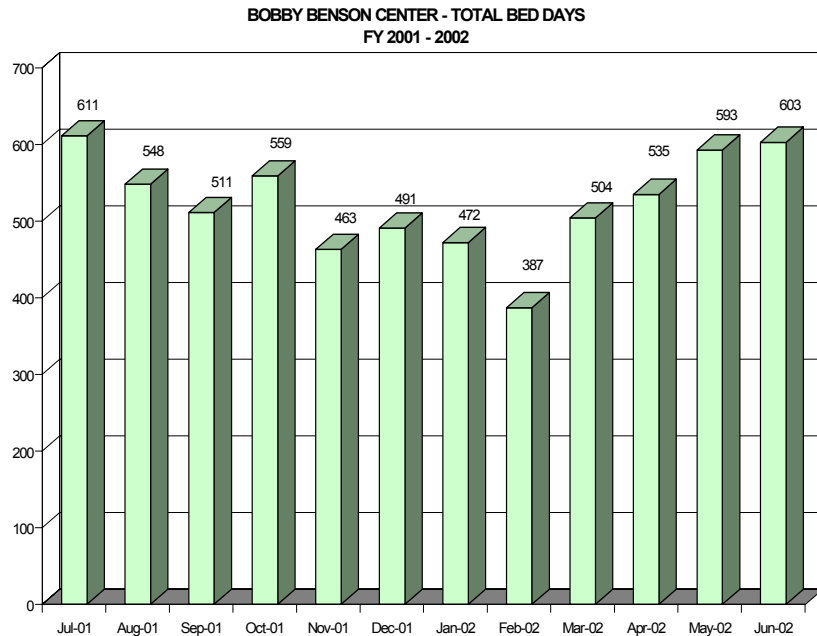
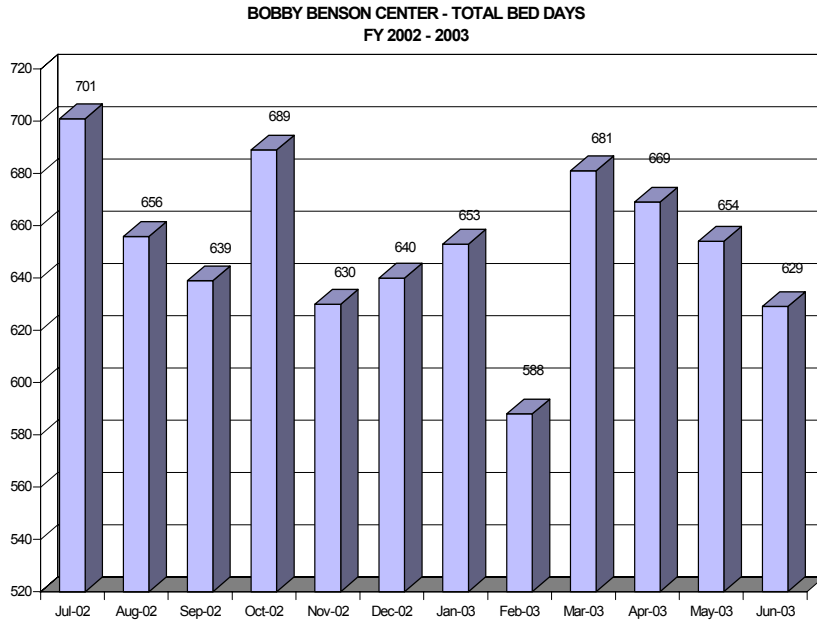
Our current Staff-to-Client ratio is dictated by both clinical needs and contract requirements. As a Special Treatment Facility, CAMHD standards require a Staff-to-Client ratio of one staff to four clients (1:4) at all times. This is a change from a ratio of one staff to five clients (1:5) during day and evening shifts and one staff to six clients (1:6) for overnight shift from the previous fiscal year. CAMHD changed the standards beginning July 1, 2002.

Payroll

The Center's payroll has remained steady this fiscal year at 50,000-55,000/payroll. This is an increase of 5,000-10,000/payroll as compared to fiscal year 2001/2002, but about the same as fiscal year 2000/2001. The increase is due to the increased ratio (as per CAMHD standards) of staff to clients.

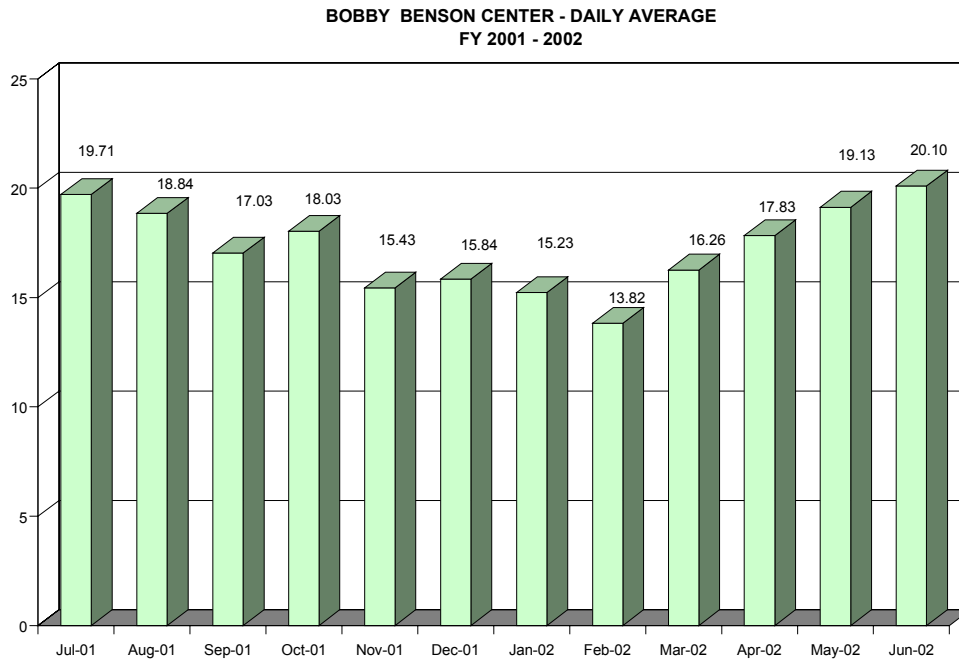
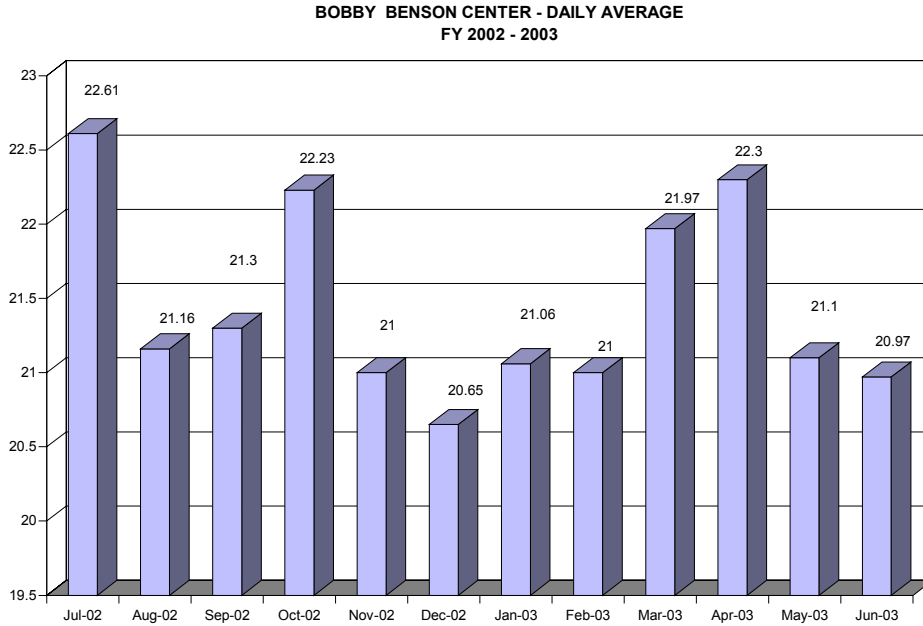
Total Bed Days

Total bed days in fiscal year 2002/2003 was 7829 (89% capacity) of a possible 8,760. The bed day count in the previous fiscal year, 2001/2002, was 6,277 (71.7% capacity) of a possible 8,760 bed days. Fiscal year 2000/2001 totaled 8,025 bed days (91.6% capacity). Total bed days in fiscal year 1999/2000 equaled 8,354.



Daily Average Census

Average daily census for fiscal year 2002/2003 was 21.45. This is 4.18% more than the previous fiscal year.



Funding Sources

The primary funding sources for youth receiving services at BBC are:

1. Department of Health – Child and Adolescent Mental Health Division {CAMHD}
65% of funding - a 5% decrease since last fiscal year
2. Department of Health – Alcohol and Drug Abuse Division {ADAD}
21% of funding - a 4% increase since last fiscal year
3. Judiciary
8% of funding – a 1% increase since last fiscal year
4. HMSA {Non-Quest}
4% of funding - an 3% increase since last fiscal year
5. Other Insurance, including Kaiser
2% of funding - a 3% decrease since last fiscal year

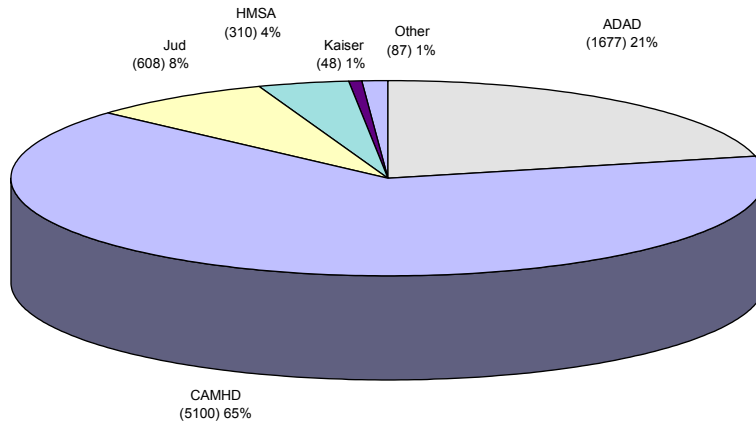
There continues, this fiscal year, to be the majority of referrals coming from CAMHD. For Felix-class youth, which CAMHD is mandated to service, this funding source is allocated before any other state or private insurance. On the occasion that CAMHD does not pay the total cost of treatment, families then access alternate forms of insurance pay.

The Center does not make selections for treatment based on funding source. Once deemed eligible and appropriate for BBC services, youth are placed on the wait list in the order they were referred. The only exceptions are the Alcohol and Drug Abuse Division requirements that pregnant teens and intravenous drug using teens be placed at the top of the wait list.

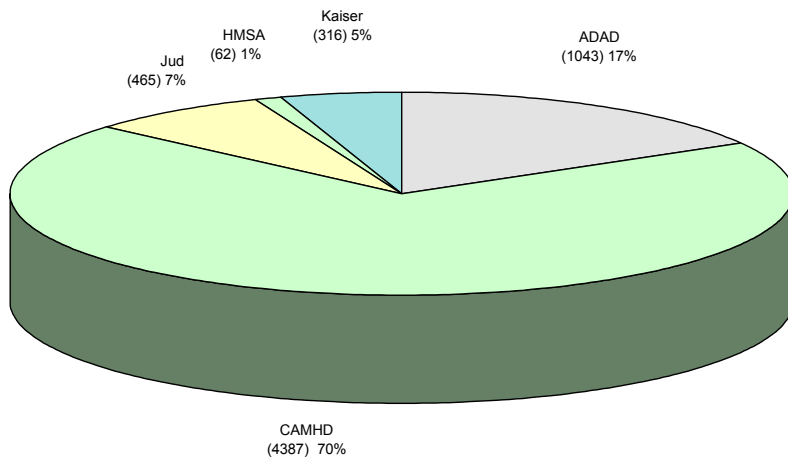
In total, over the past fiscal year, 94% of youth receiving treatment at BBC were funded through state money. This remains steady from last fiscal year. Currently, the State of Hawaii continues to place high budget priority on addressing the special needs of its youth. The Center is committed to keeping abreast of state policies to continually assess the availability of funds for treatment services.

Funding Sources

**BREAKDOWN OF BED DAYS BY INSURANCE TYPE
FY 2002 - 2003**



**BREAKDOWN OF BED DAYS BY INSURANCE TYPE
FY 2000 - 2001**



Budget

The Executive Summary of the Actual Budget vs. Operating Budget for fiscal year 2002/2003

	<u>BUDGETED</u>	<u>ACTUAL</u>
Income	\$2,316,110	\$2,386,079
Expenses		
Payroll/Tax/Benefits	1,499,366	1,510,090
Occupancy Expenses	384,042	374,368
Other Expenses	<u>475,032</u>	<u>490,022</u>
Total Operating Expenses	<u>2,358,400</u>	<u>2,374,480</u>
NET OPERATING INCOME	(42,330)	11,599
Other Income & Donations	<u>46,615</u>	<u>50,690</u>
Total Net Income	4,285	62,289

Operating expenses per bed per day = \$271.06

Operating income per bed per day = \$272.38