

The Bobby Benson Center



Annual Report

Fiscal Year 2003/2004

Board of Directors

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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

Report of the Chairman of the Board

Peter A. Lee

As I move into my second term as Chairman of the Board I would like to thank my supportive, hard working and committed Board colleagues who made it easy for me to remain as chairman for a second term. I am grateful to all of my fellow Board members for their selfless dedication to the best interests of the Center and its mission. I would also like to express my gratitude to the team of professionals at the Bobby Benson Center that have worked diligently to ensure the continued success of our program. We will continue to improve our program by implementing the newest cutting edge practices to increase the success rate of our service population.

We can all look back on the accomplishments of the past year with great pride. We have served 100 of Hawaii's youth suffering from chemical dependency by providing the necessary supports and services that will allow them to lead fulfilling and productive lives. Today, the Bobby Benson Center is the very model of a state-of-the-art teen drug rehabilitation center. It is staffed with top-notch professionals, and, as a result, its treatment program operates at the highest possible level. This past year we were again granted the highest possible recognition by CARF, the international accreditation body for rehabilitation facilities. Yes, there's a great deal to feel good about, but nothing more satisfying than the knowledge that, over the years, we have helped several hundred challenged youths fight their addictions and return to productive lives.

Report of the Executive Director

Jeffrie L. Wagner, MA, LMFT, CSAC

Fiscal year 2003/2004 continued to be a successful year for the Bobby Benson Center. For the entire year, BBC maintained an 86% average census. The treatment model used by the Center has proven to be an effective model for working with chemically dependent youth, but we are seeing more youth admitted with co-occurring disorders. Historically BBC has not provided any type of intervention for the co-occurring disorders of our clientele. Co-occurring mental health diagnoses have an impact on a client's ability to absorb, retain and use addiction treatment and relapse prevention skills. In FY 03/04 BBC hired a mental health specialist to help the youth deal with the many other problems that co-occur with substance abuse. We began to provide group and individual treatment for co-occurring disorders, such as depression, PTSD, AD(H)D, anxiety, etc., as an adjunct to the primary addiction treatment. The expectation is that this holistic treatment perspective will increase clients' success rate upon discharge. Our family program remains one of the best offered in the state and we plan to build on this success in the upcoming year by expanding the family program into our communities.

Throughout the year, our satisfaction surveys have shown a slight decrease in the level of satisfaction with BBC services. We are planning several community inclusive events and an open house at the Center to build community support between our agencies. Staff morale is slightly down and we are looking at our recruitment and retention policies to address this. I can say that without exception, BBC staff are committed to the safety, welfare and recovery of youth in treatment.

The Board of Directors at the Bobby Benson Center has supported the facility's needs, services, and staff unfliningly. The Center celebrated the completion of new interior and exterior paint on the administration buildings and in client cabins. Sunset Beach Plant Service has beautifully maintained the grounds during this past fiscal year and continues to replant and manicure our grounds.

We are looking toward a full and prosperous year for the Center in 04/05 with plans to connect to high speed internet services and upgrade our computer and technical equipment. We will begin to move our counselors and case managers' offices into closer proximity of the client cabins and reorganize our administrative and facilities managers' offices to provide better working space for the staff.

The website continues to receive positive responses and provides users with helpful prevention, assessment, and treatment information. In addition, brochures have been distributed to all referral sources on Oahu to better educate professionals and the community about the Bobby Benson Center.

Mission Statement

The mission of the Bobby Benson Center is to

“Free youth in Hawaii from chemical dependency and co-occurring disorders through residential treatment services employing best practices for the youth and their families.”

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

99 youth were served at the Bobby Benson Center during fiscal year 2003/2004. There were 78 admissions (38% female, 62% male) and 21 youth whose services carried over from fiscal year 2002/2003. The number of admissions for FY 03/04 was 3 more than the previous fiscal year and the average client census for FY 03/04 was 20.69.

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 (33% of clients) who require alcohol/drug addiction residential treatment services. The majority of clients identify themselves as “Mixed – Part Hawaiian” (65%) and they come from Oahu (77%), Big Island (15%), Maui (4%), and Kauai (4%). Most clients were referred and funded by CAMHD (61%) over the past fiscal year. ADAD referred

and funded 12% of clients, Judiciary referred and funded 11% of clients, Kaiser referred and funded 4% of clients, HMSA referred and funded 8% of clients, and 4% 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, life-skills 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 2003/2004 was 87 days, which is a decrease of 24 days from FY 02/03. During the fiscal year, 42% 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 two 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 03/04, had 47 employees. Throughout fiscal year 03/04, a total of 43 employees were hired at BBC with 35 terminations occurring. The average number of employees through the year was 47 which results in an overall 74% turnover rate. In the April 2001 report from Hawaii Employers Council, the average turnover rate for Social Service companies in Hawaii was 32.3% in calendar year 2003. BBC is higher than the average in its sector.

Reasons for employee separation included: not completing 3-month probation period (26%), moved off island (20%), terminated involuntarily due to inability to follow BBC policy and procedures (20%), and other reasons including location of other employment (31%). Without including those employees who failed to complete the probationary period the BBC turnover rate was 55%.

BBC is proud to maintain a highly qualified, professional staff. The average length of service for BBC employees is 22 months (1.85 years). Staff service ranges from one month to 13 years. The breakdown includes: 16 employees who have worked at BBC for less than one year, 6 employees who have worked one to two years, 2 employees have worked between two and three years, 2 employee has worked three to four years, 1 employees have worked four to five years, 3 employees have worked five to eight years, 2 employees have worked ten to twelve years, and 1 employee has worked twelve to thirteen years.

Program Strengths

The mission of the Bobby Benson Center is to *“free youth in Hawaii from chemical dependency and co-occurring disorders through residential treatment services employing best practices for the youth and their families.”* 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

Areas Needing Improvement

The following areas are being addressed in the coming fiscal year:

1. Provision of service for clients with co-occurring disorders
2. Improvement in technology capabilities and security
3. Improvement in client follow-up process
4. Reduction of staff turnover

Annual Statistics

Admissions

78 admissions occurred at the Center between July 1, 2003 and June 30, 2004.

Females = 30 (38%) Males = 48 (62%)

Discharges

77 youth were discharged from the Center between July 1, 2003 and June 30, 2004

Females = 28 (36%) Males = 48 (62%)

Geographic Data

Youth admitted to the Center came from the following statewide locations:

<u>Oahu</u>	Total = 60
77% of youth admitted	
Honolulu	20
Central	13
Windward	10
Leeward	17

<u>Big Island</u>	Total = 12
15% of youth admitted	

<u>Maui</u>	Total = 3
4% of youth admitted	

<u>Kauai</u>	Total = 3
4% of youth admitted	

Ethnicity Data

Youth admitted to the Center during fiscal year 2003/2004 represented the cultural diversity of the state of Hawaii.

Caucasian	9%
Japanese	3%
Filipino	5%
Hawaiian	1%
Mixed - Part Hawaiian	65%
Mixed - Not Hawaiian	13%
Korean	1%
Samoaan	1%
Other	2%

Age

The average age of a client at the Bobby Benson Center remains at 16 years old, the same as in the last four fiscal years. The majority of clients fall between the ages of 15 and 17 years old, also the same as in previous years.

13 Years Old =	1 youth (1%)
14 Years Old =	9 youth (12%)
15 Years Old =	18 youth (23%)
16 Years Old =	26 youth (33%)
17 Years Old =	24 youth (31%)

Outcome Measures

- 56% of clients successfully completed the program
- 89% of clients who responded to the 6-month follow-up survey were in school, employed or attending a vocational program
- 75% of respondents were in stable living conditions
- 72% of respondents have received additional substance abuse treatment since discharge
- 91% of respondents had no new arrests at six-month follow-up

- 83% of clients who were discharged from BBC reported no substance use in the past thirty days prior to follow-up
- 32% of respondents reported being clean and sober since discharge

Staffing

As of June 30, 2004, the Center had 47 employees.

- 32 employees working 40 hours each week
- 6 employees working between 32 and 40 hours each week
- 7 employee working between 20 and 24 hours each week.
- 2 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.

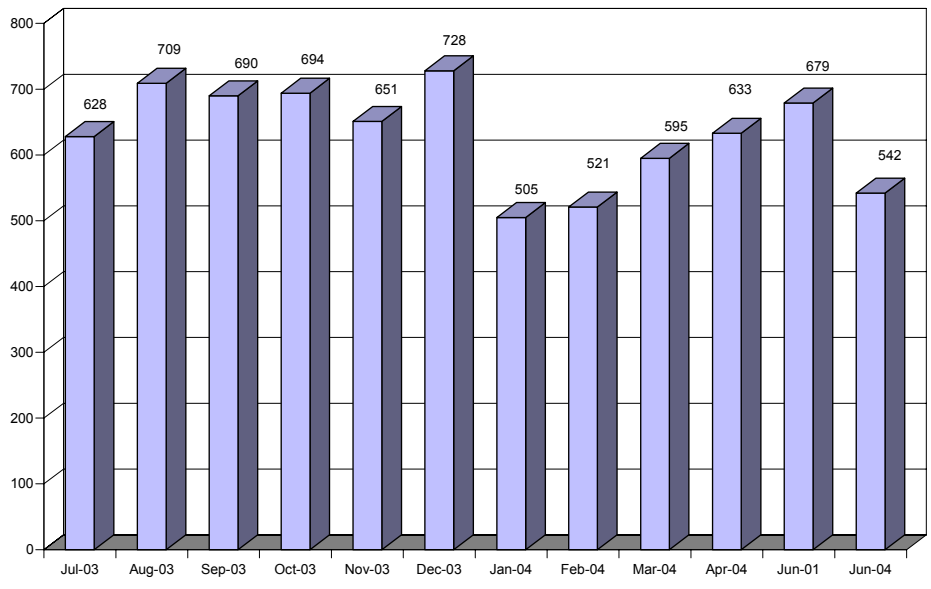
Payroll

The Center's payroll has remained steady this fiscal year at 55,000-60,000/payroll. This is an increase of 5,000-10,000/payroll as compared to fiscal year 2002/2003. The increase is due to the increased ratio (as per CAMHD standards) of staff to clients.

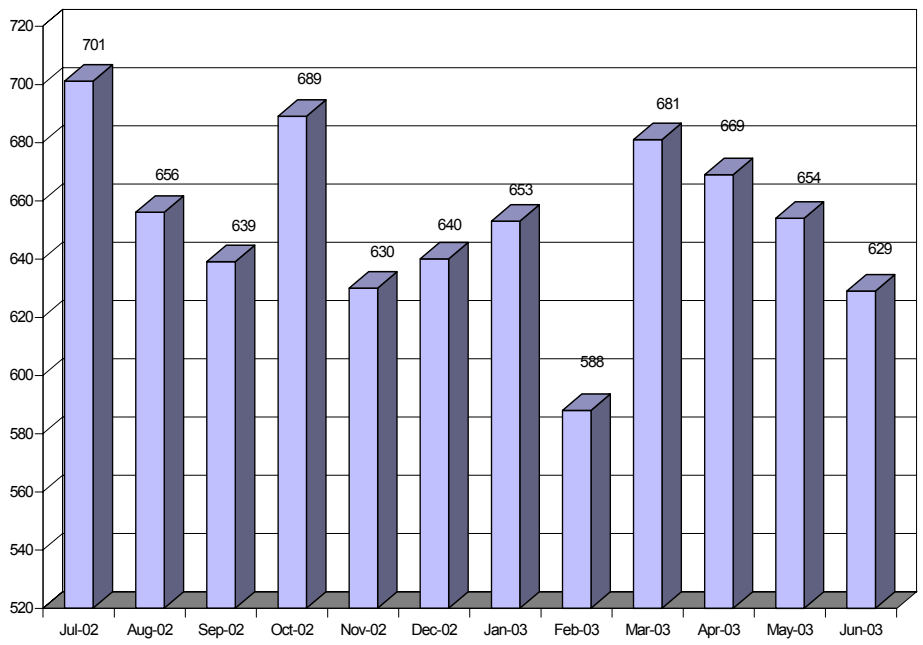
Total Bed Days

Total bed days in fiscal year 2003/2004 was 7575 (86% capacity) of a possible 8,760. The bed day count in the previous fiscal year, 2002/2003, was 7829 (89% capacity) of a possible 8,760 bed days. Fiscal year 2001/2002 totaled 6277 bed days (72% capacity).

**BOBBY BENSON CENTER - TOTAL BED DAYS
FY 2003 - 2004**

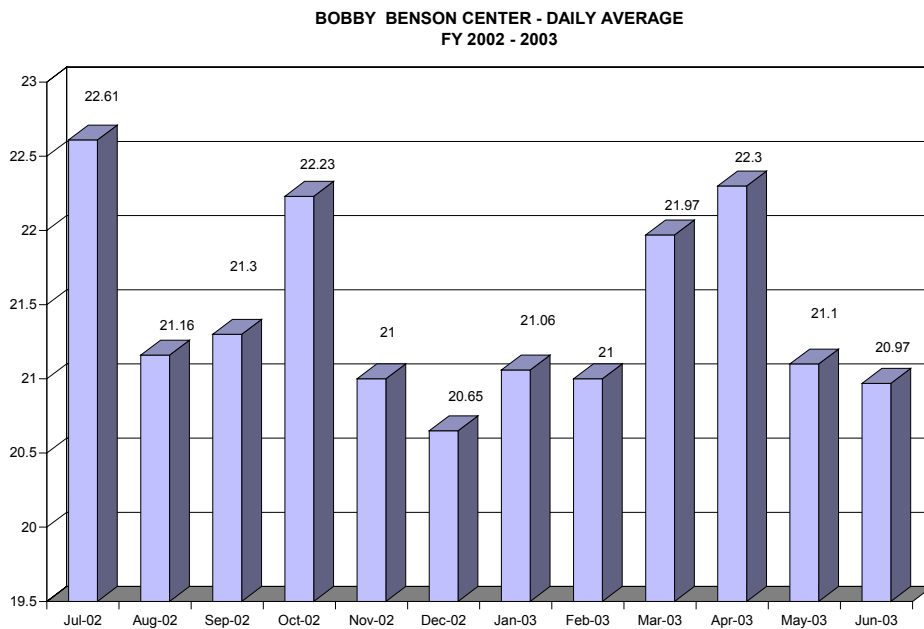
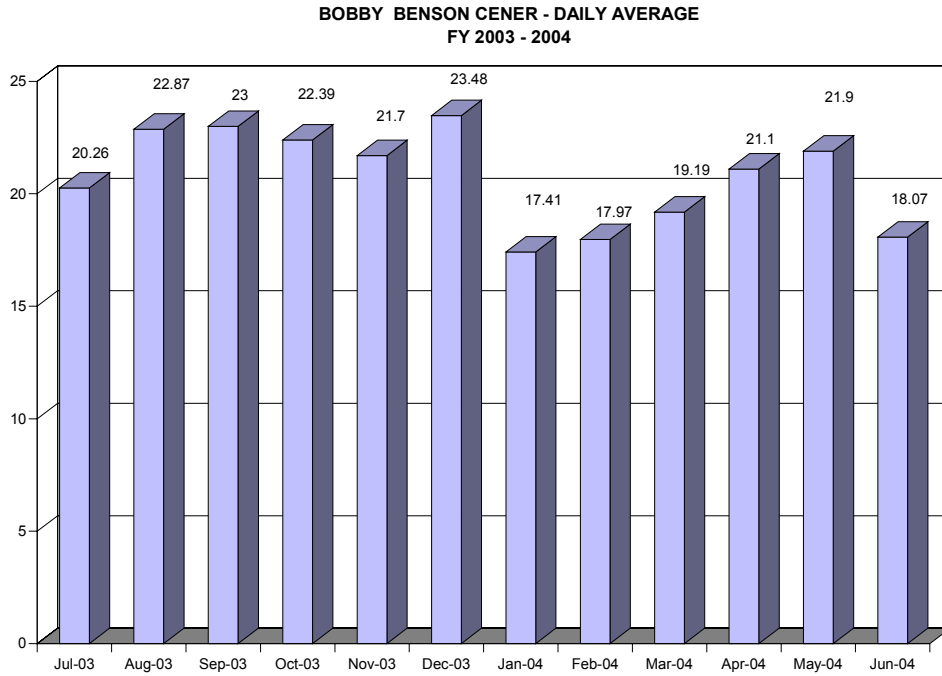


**BOBBY BENSON CENTER - TOTAL BED DAYS
FY 2002 - 2003**



Daily Average Census

Average daily census for fiscal year 2003/2004 was 20.69.



Funding Sources

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

1. Department of Health – Child and Adolescent Mental Health Division {CAMHD}
67% of funding
2. Department of Health – Alcohol and Drug Abuse Division {ADAD}
11% of funding
3. Judiciary
14% of funding
4. Kaiser
2% of funding
5. HMSA {Non-Quest}
4% of funding -
6. Other Insurance
2% of funding

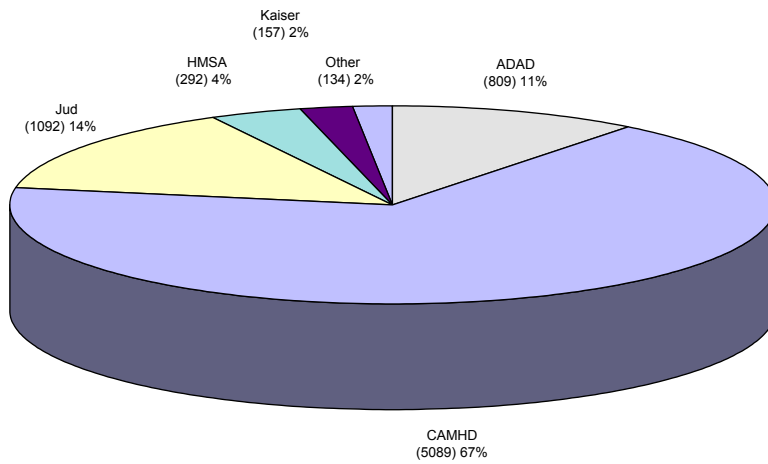
There continues, this fiscal year, to be the majority of referrals coming from CAMHD. For Felix-class youth, which CAMHD is mandated to service, this funding source is allocated before any other state or private insurance. On the occasion that CAMHD does not pay the total cost of treatment, families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

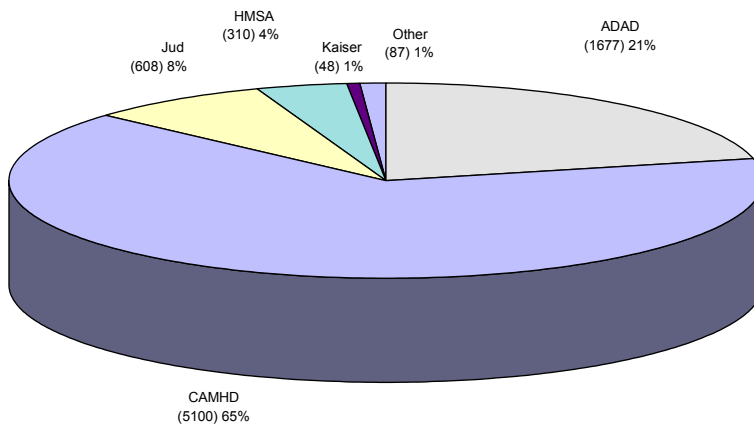
In total, over the past fiscal year, 94% of youth receiving treatment at BBC were funded through state money. This remains steady from last fiscal year. Currently, the State of Hawaii continues to place high budget priority on addressing the special needs of its youth. The Center is committed to keeping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

Funding Sources

**BREAKDOWN OF BED DAYS BY INSURANCE TYPE
FY 2003 - 2004**



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



Budget

The Executive Summary of the Actual Budget vs. Operating Budget for fiscal year 2003/2004

	<u>BUDGETED</u>	<u>ACTUAL</u>
Income	\$2,665,200	\$2,591,699
Expenses		
Payroll/Tax/Benefits	1,899,096	1,696,225
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>54,000</u>	<u>62,733</u>
Total Net Income	4,285	62,289

Operating expenses per bed per day = \$271.06

Operating income per bed per day = \$272.38