

**The Bobby Benson Center**

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# **ANNUAL REPORT**

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**Fiscal Year 2008-2009**

## Board of Directors

<u>NAME</u>	<u>BOARD POSITION</u>
Mr. William E. Aull	Director
Mrs. Joan S. Bellinger	Director
Mr. Robert Bunda	Legislative Committee
Morris Graham, Ph.D	Strategic Planning Committee
Ms. Harriet C. Haneberg	Secretary
Mr. Fritz Johnson	Facilities Committee
Mr. Kevin Katayama	Director
Mr. Peter A. Lee	Chairman Bobby Benson Center
Mrs. Sharon McPhee	Capital Improvement Committee
Ms. Judith Moeai	Director
Mr. Michael W. Perry	Marketing Committee
Marc Shlachter, MD	Director
Mr. Richard C. Sutton, Jr.	Vice-Chair/Treasurer
Mr. Laurence Vogel	Chairman Bobby Benson Foundation
Mr. Jeffrie L. Wagner	President
Mr. Robert C. W o, Jr.	Investment Committee

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## Director Emeritus

Major David C. Benson

Merry Lee Corwin

William Stryker

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# Report of the Chairman of the Board

Morris A. Graham

This year past has been one of challenge and change to sustain our high ideals, integrity, and professional standards/practices that were imbedded from the inception of the Bobby Benson Center some twenty years ago. The Center clearly remains at the forefront of the adolescent residential addiction recovery community with a highly qualified and committed staff of professionals and talented Board of Director's. During these past months, the focus has been on performance accountability, a culture of professionalism, state-of-the-art information technology, and an economically sustainable organization in the current state of the economy.

We were recently commended by the Hawaii Judiciary and cited through the Meth Hawaii Project for one of our recent adolescent graduates who sustained extraordinary success with our program. In support and behind the scenes was his very competent therapist – BBC's Acting Clinical Director. The client's personal presentation before T.V. cameras at the Kalihi YMCA was covered by local news and national footage. Whether before cameras or in the steady workings of a great team of professionals, BBC continues to enjoy a reputation of excellence.

In this current economy with massive budget cuts in State funding, we will need the best creativity, faith, and wisdom of many to pull through profitably. The Center has reduced costs through lay-offs in personnel and operations needed to "trim our sails" and be readied to weather any storm ahead. I am especially grateful to all my fellow Board members for their wisdom, friendship, their selfless dedication towards the best interests of the Center. We have rallied and pulled together to tackle the challenges and determine the best working for the Center. It has been an extraordinary experience for me to sit in as acting executive director and take the helm for now. I see and understand so much more than I did as a Board member and now pledge my continued support towards the success of the operation – whether in the Center or on the Board.

Early November welcomes our three year on-site review with the Commission on Accreditation of Rehabilitation Facilities (CARF). I participated in their week long regional workshop in Nevada this past June and learned much as to improvements yet to be realized. Also, this month the Center was examined by the Office of Health Care Assurance and the Alcohol and Drug Abuse Division to reassure our excellence in operation. With all the comings and goings, nothing renews my spirit more than visiting our clients and witnessing their progress, improvements, and their clean-and-sober happiness. This truly is a great investment, a great place, but more importantly, a great work in the lives of struggling youth that are truly blessed by the Bobby Benson Center experience.

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# Report of the Executive Director

Morris A. Graham, Acting Executive Director

In July 2008, the Board of Directors and staff of the Bobby Benson Center participated in a strategic planning process that led to the Bobby Benson Center Strategic Plan 2009-2011. This plan marked an important step in the evolution of the way that the Center treats Hawaii's youth. With input from funding agencies, community organizations, private consultants, families, and substance abuse and mental health experts we are revising our vision to fill in the professional and economic gaps and improve the services to our youth.

With the recent downturn in Hawaii's economy, our number of beds was directly impacted, beginning in May 2009 by the reduction of committed funds/beds from the Department of Health and the Hawaii Judiciary. Our response has been to expand and increase our marketing efforts to attract private insurance agencies from our community at large. As a result, we reinvigorated our reduced bed capacity with private insurance companies and continued to sustain close partnering ties with the Judiciary and the Department of Health through innovative practices.

We reduced our own operating budget in excess of two hundred thousand dollars through layoffs, eliminated employee meals, and put a freeze on annual increases and bonuses. We continue to strive to meet 100% of the measures for adherence to quality assurance, evidence-based best practices, and prepare to pass our three year accreditation review/renewal in November this year. We continue to professionalize our staff by utilizing the skills of each employee in their particular area of expertise.

Our strategic plan will pursue; (1) improving evidence-based best practices in all operations; (2) sustaining a most capable and talented staff of professions through skillful hiring and human resource development/training practices; and (3) identifying opportunities for future growth and expansion (i.e., Intensive Out-Patient (I.O.P)) care in the Central/Leeward Oahu area.

I would like to personally thank the dedicated members of the Board of Directors during this interim period of change for their dedication to a noble cause, their wisdom, and support needed to sustain our position as Hawaii's best-practice for adolescent substance abuse/addiction residential treatment center.

Morris A. Graham  
Acting Executive Director

## 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.”*

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## Strategic Plan

To meet this mission, the Center continues to focus on the January 2008 Strategic Plan. This plan continues to be revised and extends through 2011.

The plan goals:

1. improving evidence-based best practices in all operations
  2. sustaining a most capable and talented staff of professions through skillful hiring and human resources development/training practices
  3. identifying opportunities for future growth and expansion i.e. IOP
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## Overview of Delivery of Services

85 youth were served at the Bobby Benson Center during fiscal year 08/09. There were 52 admissions (42% female, 58% male). The average client census for FY 08/09 was 24.05.

The general profile of the client population at the Bobby Benson Center includes adolescents between the ages of 13 and 18 with an average age of 16 who require alcohol/drug addiction residential treatment services. The majority of clients identify themselves as “Mixed – Part Hawaiian” and they come from Oahu, Big Island, Maui, and Kauai. Most clients were referred and funded by CAMHD (76%) over the past fiscal year. ADAD referred and funded 13% of clients, Judiciary referred and funded 8% of clients, HMSA referred and funded 1% of clients, Kaiser referred and funded 2% of clients, and other insurances referred and funded 1 client.

The range of services provided at the Bobby Benson Center include individual therapy, cultural awareness, cognitive-behavioral group therapy, chemical dependency education, life-skills education, continued school program, work-study, recreational activities, psychiatric monitoring, pottery, Hawaiiana, 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 2008/2009 was 104 days. 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 28 youth can be treated simultaneously. In addition, families from neighbor islands stay at the nearby Laie Inn, Shradder's on the Windward side, or on the beautiful North Shore, free of charge, when 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: medical director, psychiatrist, certified chemical dependency counselor, masters level therapist, licensed clinical social worker, licensed marriage and family therapist, college educated youth counselors, teacher, and educational assistant

At the end of the fiscal year, BBC had 58 employees. Throughout fiscal year 08/09, a total of 35 employees were hired at BBC with 31 terminations occurring. The average number of employees through the year was 61, which results in an overall 51% turnover rate.

Reasons for employee separation included: moved off island (6%), terminated involuntarily due to inability to follow BBC policy and procedures (17%), other employment (28%), return to school (11%), medical—voluntary (38%).

BBC is proud to maintain a highly qualified, professional staff. The average length of service for BBC employees is 2.5 years. Staff service ranges from one month to 17 years:

- 19 employees have worked at BBC for less than one year,
- 19 employees have worked 1-2 years,
- 12 employees have worked 2-3 years,
- 2 employees has worked 3-4 years,
- 3 employees have worked 4-5 years,
- 3 employees have worked 5-8 years,
- 0 employees have worked 9-12 years,
- 0 employees have worked 13-15 years.
- 2 employees have worked 16-18 years

## **Program Strengths**

The Bobby Benson Center provides best practice methods that are culturally sensitive and client-centered to support clients in their recovery process. Emphasis is placed on family participation, aftercare, and transition into the community. The treatment model has been enhanced with additional clinical staffing, training, and supervision. Starting May 1, 2009, all CAMHD credentialed employees receive at least 1 hour of monthly individual supervision with a master's level therapist and 1-3 hours of monthly group supervision depending on job duties. Therapists meet for weekly clinical case reviews led by the Clinical Director and Clinical Supervisor, averaging 10 hours a month.

In the fall, satisfaction surveys assessed staff morale as low due to leadership. However, staff remained committed to the safety, welfare, and recovery of our clients and families. Since new leadership has been instated, staff morale has improved. The annual employee leadership survey and community satisfaction surveys are expected to yield an 85% or higher satisfaction rate. (Results to be tallied).

The Bobby Benson Center made many facility improvements this past fiscal year. New cabin curtains were ordered for all cabins, new staff laptops were purchased, and the agency server was replaced. The schoolroom is now connected to the internet and phone system.

During the FY 2008-2009, the Center saw an increase in dual diagnosis clients with complex trauma histories. Areas affecting client services are as follows:

### ***Areas of Accomplishments:***

- 2 psychologists hired as acting executive director and acting clinical director
- Masters level therapists staffed on Sunday for family day program
- New HR Manager hired
- 2 full-time nurses hired
- Licensed teacher hired
- New server installed
- Increase in privately funded clients
- Successful client luau
- Client participation in Crystal Meth Project Public Service Campaign
- Weekly client community meeting
- Monthly individual and group clinical supervisions for all CAMHD credentialed staff
- Psychiatric consultant hired
- More communication with board members
- Reorganizing staff structure to meet budgetary limits
- Hire nurse consultant to help with medical portion of P&P
- Over 90% decrease in medication errors since new nursing staff and protocol
- Improved PE program with varying activities
- Wellness Committee in compliance with DOE standards

- Received grant for new kitchen equipment
- Elimination of employee meals

**Some of the client recommendations that were approved included:**

- Bulletin board in rooms
- Photo albums
- Dryer sheets
- Project Leimamo count towards community service
- All staff to carry notepads to remember client concerns
- Paddling and pool outings
- 16 article of clothing upon admission
- BBC to provide beach towels
- Increase personal picture by 3
- New snorkel gear
- Allow ukulele use outside of leisure time
- Cabin craft box
- New curtains in girls cabins
- Graduate certificate
- New board games for boys cabins pending cabin inspection
- More food servings

***Areas Needing Improvement***

- Need all pertinent health information and assessments upon admission (vision, dental, psychological, etc)
- BBC website
- Bed expansion
- Transition planning
- Increase training for all staff to better serve higher need clients
- New roof for administration building
- Decrease contracted maintenance

**Annual Statistics**

***Admissions***

52 admissions occurred at the Center between July 1, 2008 and June 30, 2009.

Female = 22 (42%)      Male = 30 (58%)

## ***Discharges***

60 youth were discharged from the Center between July 1, 2008 and June 30, 2009

Female = 26 (43%)      Male = 34 (57%)

## ***Geographic Data***

Youth admitted to the Center came from O'ahu, Big Island, Maui/Moloka'i, and Kaua'i.

## ***Ethnicity Data***

Youth admitted to the Center during fiscal year 2008-2009 represented the cultural diversity of the state of Hawaii. Youth came from different ethnic background such as:

- Caucasian
- Filipino
- Mixed - Part Hawaiian
- Mixed - Not Hawaiian
- Hispanic-Mexican
- Korean
- Other

## ***Age***

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

## ***Outcome Measures***

### **Staffing**

As of June 30, 2009, the Center had 58 employees:

- 40 employees working 40 hours each week (full-time)
- 3 employees working between 32 and 40 hours each week (part-time A).
- 2 employees working between 8 and 24 hours each week (part-time B).
- 13 employees contracted on a per-diem basis

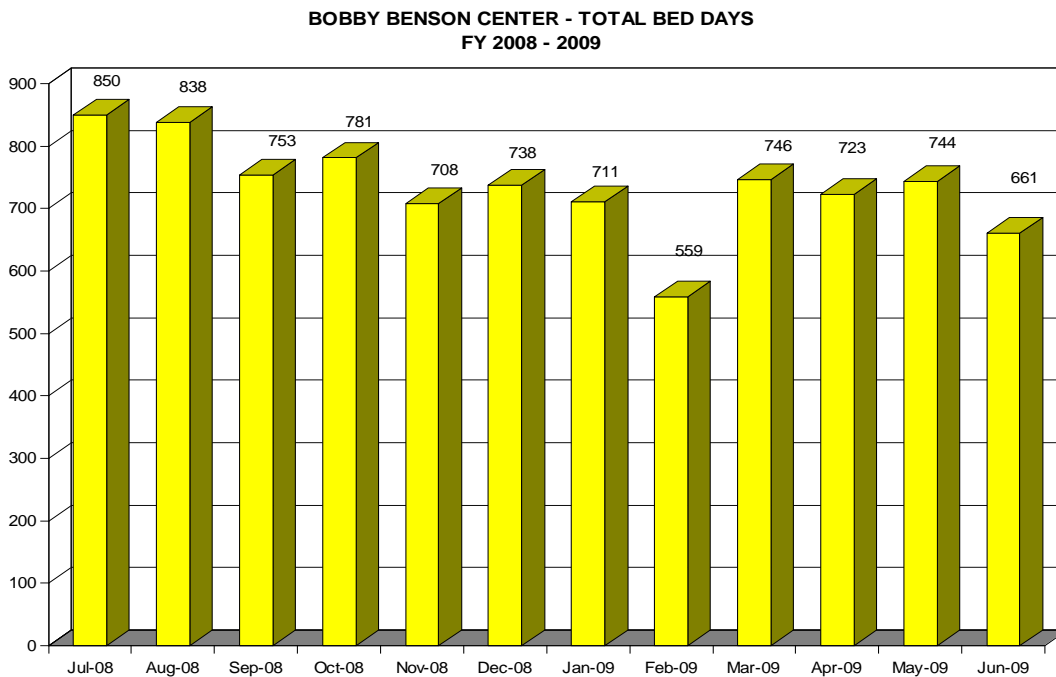
Our current Staff-to-Client ratio is dictated by both clinical needs and contract requirements. As a Special Treatment Facility, CAMHD standards require a Staff-to-Client ratio of one staff to four clients (1:4) at all times.

### **Payroll**

The Center's average payroll for this fiscal year is \$86,267.53 as compared to \$88,178.60 average during fiscal year 2007/2008.

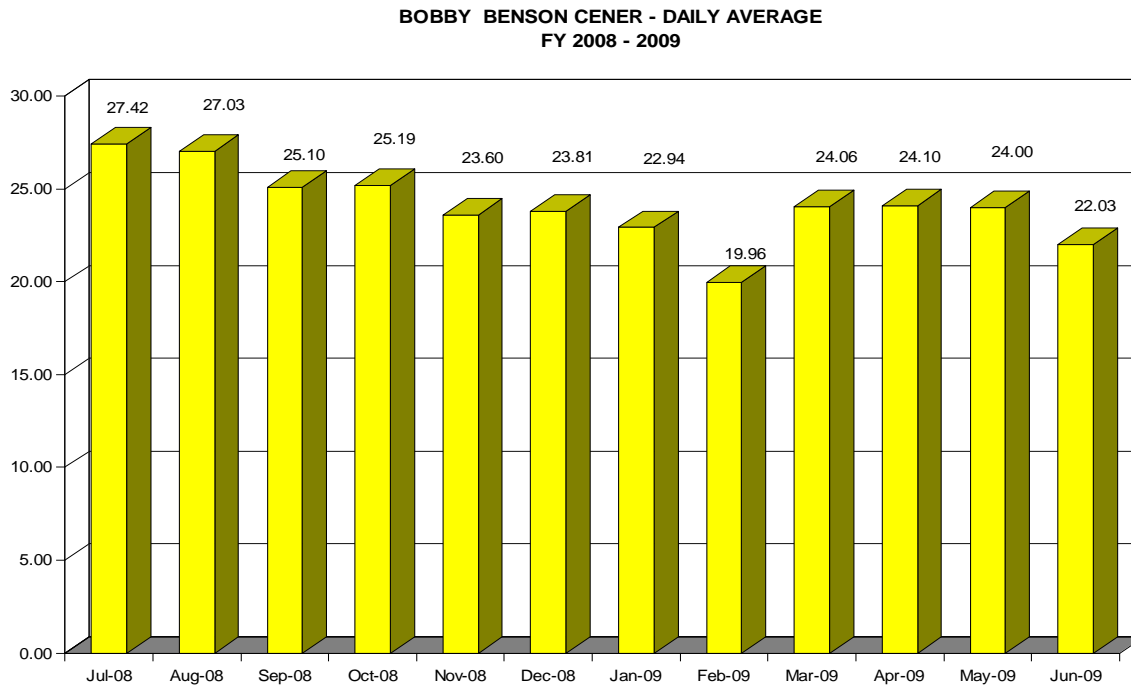
## ***Total Bed Days***

Total bed days in fiscal year 2008/2009 was 8812 (86% capacity) of a possible 10,220.



# Daily Average Census

Average daily census for fiscal year 2008/2009 was 24.05.



## Funding Sources

The funding sources for youth receiving services at BBC are:

- Department of Health – Child and Adolescent Mental Health Division (CAMHD) 76% of funding
- Department of Health – Alcohol and Drug Abuse Division (ADAD) 13% of funding
- Judiciary 8% of funding
- Insurance/Other 3% of funding

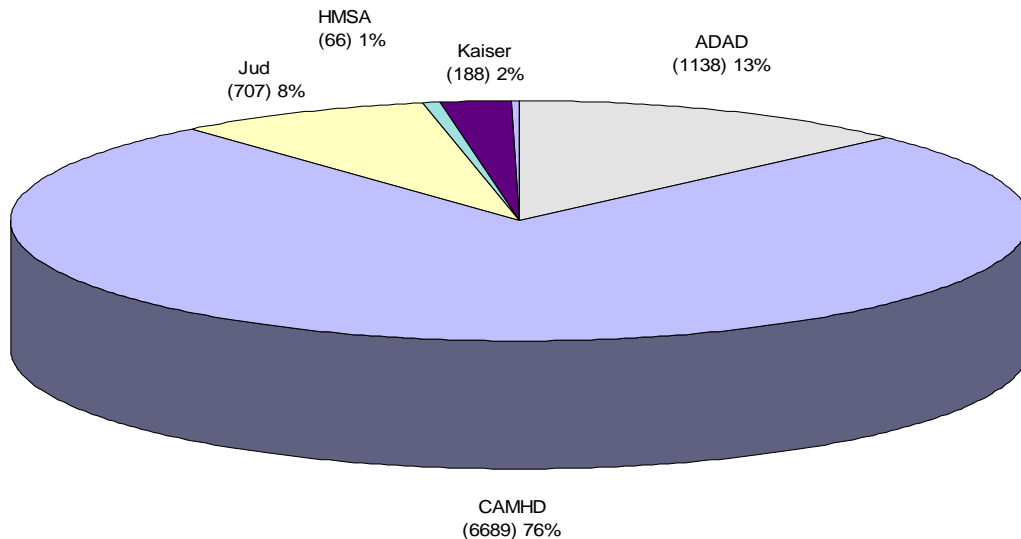
There continues, this fiscal year, to be the majority of referrals coming from CAMHD. For Felix-class youth, which CAMHD is mandated to service, this funding source is allocated before any other state and/or private insurance. On the occasion that CAMHD does not pay the total cost of treatment, families 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, 93% of youth receiving treatment at BBC were funded through state money. This remains comparable with last fiscal year (96%). 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 2008 - 2009**



# Budget

## Bobby Benson Center

	Actual Jul '07 - Jun 08	Budget Jul '08 - Jun 09
<b>Ordinary Income/Expense</b>		
<b>Income</b>		
DOE (Salary Reimbursement)	130,000.00	170000
Program Fees	3,333,204.03	3337160
<b>Total Income</b>	<b>3,463,204.03</b>	<b>3,507,160.00</b>
<b>Gross Profit</b>	<b>3,463,204.03</b>	<b>3,507,160.00</b>
<b>Expense</b>		
Advertising	9,504.55	6,000.00
Training	20,058.77	19,000.00
Depreciation Expense	57,444.00	60,000.00
Insurance	86,415.75	80,375.00
Interest Expense	110.66	0.00
Kitchen	72,034.51	66,500.00
Miscellaneous	16,414.12	17,800.00
Payroll Benefits	198,716.46	235,580.00
Payroll Expenses	2,188,321.37	2,161,906.00
Payroll Taxes	230,230.08	230,931.00
Professional Fees	116,469.70	90,050.00
Program Expense	108,854.30	57,800.00
Rent	226,330.92	226,000.00
Repairs & Maintenance	74,135.36	71,200.00
Supplies	61,019.90	52,720.00
Telephone	25,198.49	27,000.00
Travel	7,147.27	6,500.00
Utilities	83,917.14	90,000.00
<b>Total Expense</b>	<b>3,582,323.35</b>	<b>3,499,362.00</b>
<b>Net Ordinary Income</b>	<b>-119,119.32</b>	<b>7,798.00</b>
<b>Other Income/Expense</b>		
<b>Other Income</b>		
Grants	-165.59	
Donation	41,104.72	
Interest Income	71.80	
<b>Total Other Income</b>	<b>41,010.93</b>	<b>0.00</b>
<b>Net Other Income</b>	<b>41,010.93</b>	
<b>Net Income</b>	<b>-78,108.39</b>	<b>7,798.00</b>