

**PROGRAM INFORMATION** If you have questions about this report, please contact: Jennifer Minton at (606) 679-6251

Adanta HDS Alternative

**Parent Agency:** Adanta (Community Options)

259 Parkers Mill Road Somerset, KY 42501

**Phone:** (606) 679-4782 **Fax:** (606) 451-4294**AgencyWebsite:** www.adanta.org**Years Operating:** 14**Referral Contact:** Jennifer Minton**Email:** jminton@adanta.org**Referral Phone:** (606) 679-6251**Referral Fax:** (606) 679-4156**Child Caring License(s):** Residential Treatment Group Home; Emergency Shelter with Treatment;**Child Placing License(s):** None**Setting:** Rural**On Site School:** No**Male Operational Bed Capacity:** 8 **County(s) of** Pulaski; Russell;**Female Operational Bed Capacity:** 6 **Program or****Either Sex Operational Bed Capacity:** 0 **Foster Homes:****Supplemental Information**

This division provides Support/Services to children and adolescents, age ranges from 8-21 years old who have Mental Retardation/Development Disabilities.

**Included/Excluded Populations****Gender Accepted:** Both **Age Range Accepted:** 8 to 18 **LOC Range Accepted:** 3 to 5 **Mininum IQ Accepted:** 0**Client Populations that are Absolutely Excluded**

Chemically Dependent; Substance Use; Mental Illness/Chemically Dependent; Recent Homicidal Gestures/Attempts; Recent Suicidal Gestures/Attempts; Sexual Perpetrator; Infectious Diseases; Medically Fragile; Life Support Needed; Eating Disorders; Pregnant Youth; Youth with Child;

**Client History at Admission**

|  |      |                                      |     |                                     |    |
|--|------|--------------------------------------|-----|-------------------------------------|----|
| <b>Average Age at Date Updated:</b>                                      | 18.6 | <b>Average LOC at Intake</b>         | 4.6 | <b>Number IQ 0 - 59:</b>            | 4  |
| <b>Number of Residents:</b>  | 5    | <b>LOC Unknown:</b>                  | 0   | <b>Number IQ 60 - 69:</b>           | 1  |
| <b>Number of Males:</b>  | 2    | <b>Number LOC 1:</b>                 | 0   | <b>Number IQ 70 and above:</b>      | 0  |
| <b>Number of Females:</b>  | 3    | <b>Number LOC 2:</b>                 | 0   | <b>Number IQ Unknown:</b>           | 0  |
|  |      | <b>Number LOC 3:</b>                 | 0   |                                     |    |
|  |      | <b>Number LOC 4:</b>                 | 2   |                                     |    |
|  |      | <b>Number LOC 5:</b>                 | 3   |                                     |    |
| <b>Number of Current Residents Included in Risk Indicator Percentage</b> |      |                                      | 5   |                                     |    |
| <b>Destroys Property:</b>  | 0%   | <b>Homicidal Threats:</b>            | 0%  | <b>Sexual Acting Out:</b>           | 0% |
| <b>Assaults Peers:</b>   | 0%   | <b>Homicidal Gestures/Attempts</b>   | 0%  | <b>Sexual Aggression</b>            |    |
| <b>Assaults Care Givers</b>  | 0%   | <b>Suicidal Threats:</b>             | 0%  | <b>With Younger Youth:</b>          | 0% |
| <b>Moderate AWOL Risk:</b>   | 40%  | <b>Suicidal Gestures/Attempts</b>    | 0%  | <b>Using Force:</b>                 | 0% |
| <b>Chronic AWOL Risk:</b>  | 0%   | <b>Substance Use Monthly or More</b> | 0%  | <b>With those Unable to Consent</b> | 0% |
| <b>Self Abuse:</b>   | 0%   | <b>Fire Setting:</b>                 | 0%  | <b>Adjudicated Sexual Offender</b>  | 0% |

**STAFF INFORMATION**

|  | <b>Number</b>          | <b>High School</b> | <b>Some College</b> | <b>BA</b> | <b>MA or Higher</b> |
|--|------------------------|--------------------|---------------------|-----------|---------------------|
| <b>Administration:</b>   | 3                      | 0%                 | 0%                  | 33%       | 67%                 |
| <b>Case Management Staff:</b>  | 4                      | 0%                 | 0%                  | 75%       | 25%                 |
| <b>Clinical Staff:</b>   | 0                      | 0%                 | 0%                  | 0%        | 0%                  |
| <b>Direct Care Staff:</b>  | 17                     | 59%                | 29%                 | 12%       | 0%                  |
| <b>Average Number of Months Foster Parents have Fostered for the Agency:</b> |                        |                    |                     |           | N/A                 |
| <b>Treatment Director:</b>   | Ms. Dorothy Smith LCSW |                    |                     |           |                     |

Psychiatric Consultation and Internal Medical Staff

Upon Admission psychiatric Evaluation is scheduled and monthly follow up on medication. Psychiatrist is available at all times.

SERVICES AND OUTCOMESSafety

|   |      |   |                                 |
|---|------|---|---------------------------------|
| <b>Number of Substantiated Abuse Allegations in the Past Year:</b> 0                                      |      |   |                                 |
| <b>Total # of Bedrooms:</b>   | 9    | <b>Percentage of Direct Care Staff Trained in Physical Management</b>   | 94.1%                           |
| <b>Single Bedrooms:</b>   | 4    | <b>Percentage of Foster Parents Trained in Physical Management:</b>     | N/A                             |
| <b>Double Bedrooms:</b>   | 5    | <b>Percent of Foster Families with 2 or more Children:</b>              | N/A                             |
| <b>3+ Bedrooms:</b>   | 0    | <b>Percent of Families with 2 or more Children and a Sibling Group:</b> | N/A                             |
| <b>Critical Incident and Physical Management ratios are compiled for the period 5/1/2010 to 4/30/2011</b> |      |   |                                 |
| <b>Deadly Weapon Per 100 Resident Days</b>  | 0.00 | NO INCIDENTS DURING REPORTING PERIOD                                    | Number of Months Data Received: |
| <b>Serious Injury Per 100 Resident Days</b>   | 0.69 | WORSE THAN AVERAGE RANGE  | 12 of 12                        |
| <b>AWOL Per 100 Resident Days</b>   | 0.31 | WITHIN AVERAGE RANGE  |                                 |
| <b>Suicide Attempt Per 100 Resident Days</b>  | 0.04 | WITHIN AVERAGE RANGE  |                                 |
| <b>Criminal Activity Per 100 Resident Days:</b>   | 0.08 | WORSE THAN AVERAGE RANGE  |                                 |
| <b>Injury to Other Per 100 Resident Days:</b>   | 0.46 | WORSE THAN AVERAGE RANGE  |                                 |
| <b>Sexual Acting Out Per 100 Resident Day</b>   | 0.08 | WITHIN AVERAGE RANGE  |                                 |
| <b>Total Critical Incidents Per 100 Resident Days:</b>  | 1.64 | WORSE THAN AVERAGE RANGE  |                                 |
| <b>Physical Managements Per 100 Resident Days:</b>  | 3.36 | WORSE THAN AVERAGE RANGE  |                                 |

Permanency

|  |               |                |                       |                           |
|--|---------------|----------------|-----------------------|---------------------------|
| <b>Length of stay and discharge data are calculated on discharges between 5/1/2010 through 4/30/2011</b> |               |                |                       |                           |
| <b>Measure</b>   | <b>Number</b> | <b>Percent</b> | <b>Length of Stay</b> | <b>Outlier</b>            |
| <b>Child Progress toward Permanency Discharges</b>   | 6             | 54.5%          | 266.7                 | WITHIN AVERAGE RANGE      |
| <b>Progress Discharge to Home Like Placement</b>   | 6             | 54.5%          | 266.7                 | WITHIN AVERAGE RANGE      |
| <b>Progress Discharge to Less Restrictive Placement</b>  | 6             | 54.5%          | 266.7                 | WITHIN AVERAGE RANGE      |
| <b>Child Behavioral Difficulty Discharges</b>  | 5             | 45.5%          | 183.4                 | WORSE THAN AVERAGE RANGE  |
| <b>Runaway Discharges</b>  | 0             | 0.0%           |                       | BETTER THAN AVERAGE RANGE |
| <b>Psychiatric Discharges</b>  | 4             | 36.4%          | 168.5                 | WORSE THAN AVERAGE RANGE  |
| <b>Agency/System Discharges</b>  | 0             | 0.0%           |                       | WITHIN AVERAGE RANGE      |
| <b>Caretaker Incapacity Discharges</b>   | 0             | 0.0%           |                       | WITHIN AVERAGE RANGE      |
| <b>Caretaker Failure Discharges</b>  | 0             | 0.0%           |                       | WITHIN AVERAGE RANGE      |
| <b>Caretaker Investigation Discharges</b>  | 0             | 0.0%           |                       | WITHIN AVERAGE RANGE      |

Well Being

|                              |               |                         |                         |  |           |
|------------------------------|---------------|-------------------------|-------------------------|--|-----------|
|                              | <b>Number</b> | <b>Percent Internal</b> | <b>Percent External</b> | <b>Does this program have a PCC Foster to Adopt Agreement?.</b>  | <b>No</b> |
| <b>Individual Counseling</b> | 7             | 100.0%                  | 0.0%                    | <b>Adoptions by the Program's Foster Homes in the Past Year:</b> | N/A       |
| <b>Group Counseling:</b>     | 7             | 100.0%                  | 0.0%                    | <b>Educational Disruptions in the Past Year:</b>                 | 7         |
| <b>Family Counseling:</b>    | 0             | N/A                     | N/A                     | <b>School Changes in the Past Year:</b>                          | 11        |

## Describe How the Program Supports Family Connections

Family is a vital part of the treatment team and is actively involved in all meetings.

## Special Interventions Available Internally

Structured and nurturing residential environments are developed to meet each individuals specific needs in the least restrictive placement. A multidisciplinary approach ensures each client with a treatment team working together to develop a plan working toward meeting both short and long term goals.

Description of how the program exceeds licensure ratios

Program follows agencies guidelines as established in Policies and procedures.