

# Annual Data Report Highlights

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“As 2012 moves forward we hope to continue to serve one of the most diverse and highest risk populations of girls in Colorado and around the country and to provide the highest quality of care,” says Jim Uhernik, Director of Business Development and Admissions.

This month Excelsior completed its 2011 Data Report which documents demographics and outcomes in a variety of areas and demonstrates progress toward several goals set by the Administration and Board of Directors.

As in previous years, Excelsior continued to work with some of the most troubled adolescent girls from Colorado and out-of-state. In 2011, Excelsior served a total of 395 clients; this was a **10% increase** over 2010 (361). Many girls use multiple services at Excelsior.

- **380** girls were served by the Residential Treatment Program
- **60** girls were served by the Short Term Intensive Program (Hospital Diversion)
- **88** were served by the Community Based Services Program which includes Day Treatment, Outpatient and Home-Based Services.

A major factor in the increase in girls served was due to Excelsior's expansion of our *Community Based Services Program* which promotes utilizing sustainable family supports and works to prevent the need for out-of-home placement. Excelsior has worked to provide a continuum of services to help girls, not only through residential services but non-residential as well.

Secondly, an important goal of Excelsior has been to provide services to a highly diverse population of girls from a wide range of referral sources including social services, mental health, probation, adoption assistance agencies, school districts and private insurance. In 2011, most girls came from Colorado and California. Continuing a trend towards more in-state referrals, **71% of the girls receiving services in 2011 came from Colorado**; this was up by 10% over the previous year and 32% over 2009. Of all the girls served at Excelsior in 2011, 53% of Excelsior's clients were court ordered.

State	2007	2008	2009	2010	2011
Colorado	47%	48%	48%	61%	71%
California	44%	44%	48%	39%	28%
Virginia	4%	4%	2%	<1%	1%
Nebraska	0%	0%	0%	0%	1%
Washington DC	2%	3%	<1%	0%	0%
Pennsylvania	1%	1%	<1%	0%	0%
Utah	2%	1%	<1%	0%	0%
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>101%</b>

Next, in 2011 Excelsior continued to treat girls with serious social and emotional issues. Below is a chart of the top 12 diagnoses treated at Excelsior:

Clinical – Axis I	2007	2008	2009	2010	2011
Mood Disorder*	34%	36%	42%	43%	46%
Post Traumatic Stress Disorder	42%	41%	40%	35%	36%
Conduct Disorder	58%	62%	57%	40%	40%
Oppositional Defiant Disorder	28%	26%	28%	34%	32%

ADHD	21%	20%	19%	23%	21%
Depressive Disorder	25%	31%	15%	15%	14%
Reactive Attachment Disorder	14%	16%	24%	14%	15%
Cannabis Abuse	28%	29%	24%	16%	19%
Polysubstance Abuse	19%	19%	20%	18%	16%
Major Depressive Disorder	11%	13%	11%	11%	11%
Alcohol Abuse	18%	16%	14%	10%	6%
Parent-Child Relational Problem	7%	8%	9%	10%	9%

\*Bipolar Disorder is included under the Mood Disorder Category.

Mood Disorder, again as in previous years, continued to be a major problem that girls had been struggling with. Excelsior's program specializes in providing counseling as well as psychiatric services to treat this problem effectively. Upon entry and discharge using the Reynolds Adolescent Depression Scale-2 (RAD-2), Excelsior measured each girl's level of depression. Our research shows a 31% decrease in girls reporting significant levels of depression.

Since many of our girls struggle with social and emotional problems this is often acted out as violence, aggression or self-harm. To address this Excelsior's goal has been to incorporate strength-based practices which can empower girls to communicate and use effective coping skills. The practice of strength based care has resulted in may fewer incidents of acting out among girls. According to data, the number of Colorado State Critical Incident Reports (CIR) decreased by 54%. Additionally, the number of Incident Reports (IR) decreased by 30%. As a final point, there was a **22% decrease** in Runs from 2010 to 2011. The majority, (82%) of the girls who ran in 2011 had returned by December 31st, 2011.

Lastly, Excelsior has worked hard to set treatment goals and objectives that can be attained in a time frame that is effective in treating and stabilizing girls. Of the girls in Excelsior's Residential Treatment Program in 2011, the average length of stay was 10.9 months and the median length of stay was 6 months. It was common for Colorado girls to stay shorter term (ie: 1-6 months) while out-of-state girls often stayed at least 1 year or more. We are proud to say that 94% of girls discharged in 2011 were discharged to a less restrictive setting. (This includes 4% that were discharged to other residential treatment centers. Most residential programs in Colorado are less restrictive than Excelsior Youth Center.)