

## Agency Overview

### Agency History

Founded in 1851, Edgewood is the oldest children's charity in the western United States. Founded as a refuge for orphans of the California Gold Rush, Edgewood has provided a loving home for thousands of children since that time. We opened our campus in the Sunset District in the early 1920's, serving up to 250 youth at a time until the early 1950's, when we shifted to the residential care model that is more familiar today, including the Non-Public School, family treatment, and mental health services. In the 1970's, we began providing services in the community, with the intent of preventing the need for residential treatment and to support youth's transition home. In the early 1980's we developed the first Kinship Support Services in the country, advocated for state funding, and provided technical assistance to other providers and counties. 15 years ago, we founded a Kinship program in San Mateo County and are now the largest children's mental health provider in the county. About a decade ago, we expanded our age range to serve Transition Age Youth through a Full Service Partnership in San Mateo County.

Today, we serve thousands of children, youth, and families that have experienced traumatic stress leading to mental illness and debilitating behavioral issues. **Our mission is to promote the behavioral health of children, youth, and families and support a positive transition to adulthood.** Our full continuum of behavioral health services focuses on issues such as mental health, family relationships and life skills. Our programs range from prevention and early intervention to community-based treatment, day and after school programs, residential treatment, and crisis stabilization. Edgewood strives to continuously improve outcomes through research, training, and consultation - both in our own programs and for other youth-serving organizations. We draw on our years of experience and the latest research to create innovative training opportunities for staff, caregivers, teachers, and child welfare professionals.

## Edgewood Approach

At Edgewood, youth often succeed for the first time because our holistic approach allows us to identify and build upon the unique strengths of each client we serve. We take a family-centered and integrated approach to our work and focus on mental and physical health, as well as relationships, school success, work satisfaction, and life skills. We recognize that kids do better when action is taken before behavior issues escalate, so our preventive and early intervention programs reach youth where they are - in schools, neighborhoods, and communities.

## Edgewood's Core Values: Family, Community, Hope, Diversity

- E. We Engage Families, as they are the foundation of a child's life and our essential partners in achieving our vision and mission.
- D. We Develop Community through a web of relationships that promote love, friendship, resilience, and support.
- G. We Generate Hope because hope provides a belief in a positive future and the energy to achieve our goals and dreams.
- E. We Embrace Diversity by appreciating our uniqueness and interdependence in order to learn and to strengthen our community.

## **Service Data Overview**

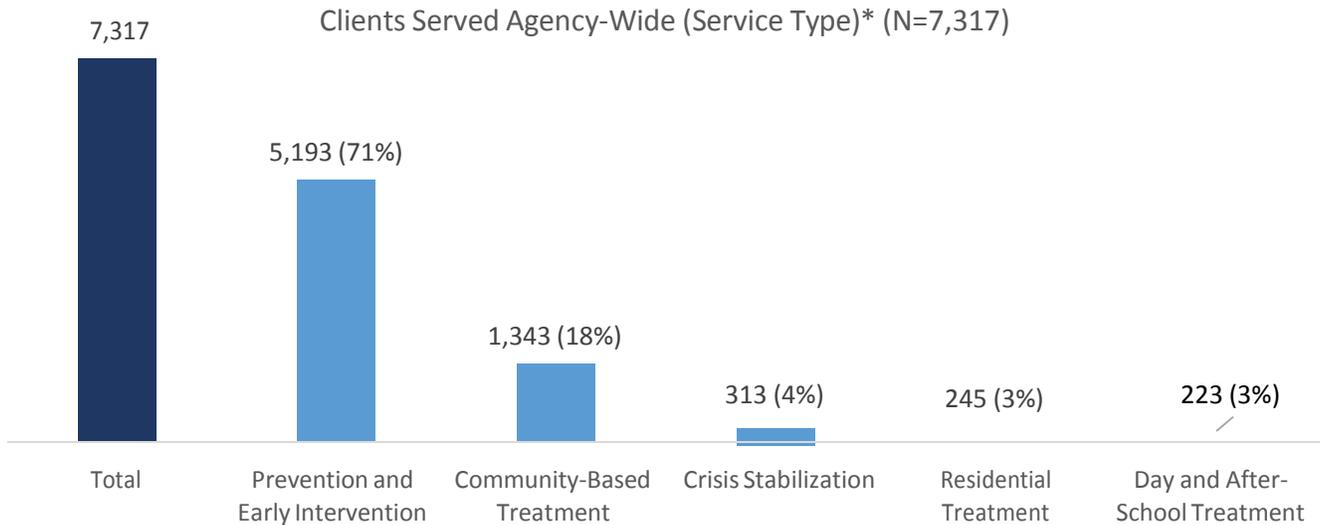
Edgewood has grown significantly over the past several years and now touches the lives of thousands of youth and families, which is clear from the data sets that follow this section. Our Fiscal Year 2016 budget is approximately \$35,000,000, with about 550 staff. The largest percentage of our staff - about 250- serve youth with most acute needs, through our RCL 14, Crisis Residential Treatment, Non-Public School, and Crisis Stabilization programs. The smallest percentage of staff - about 50 - impact the largest number of youth and families, through our prevention services.

### **FY 2015 Client Service Data:**

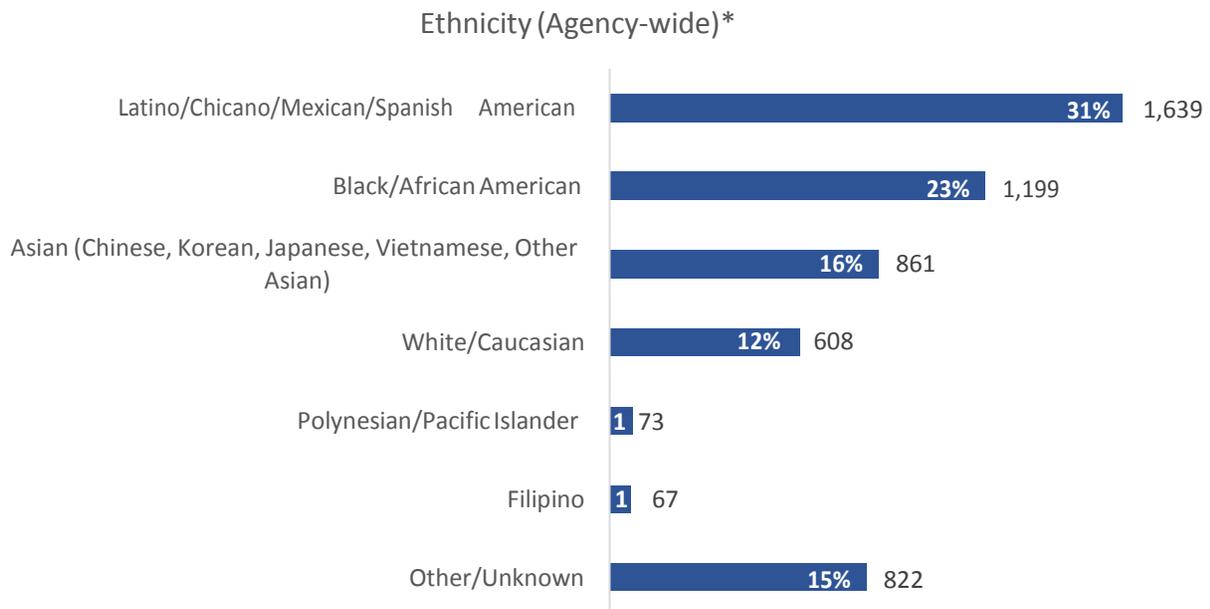
# Clients Served

## Agency-wide

### Total Served (Unduplicated)



## Ethnicity



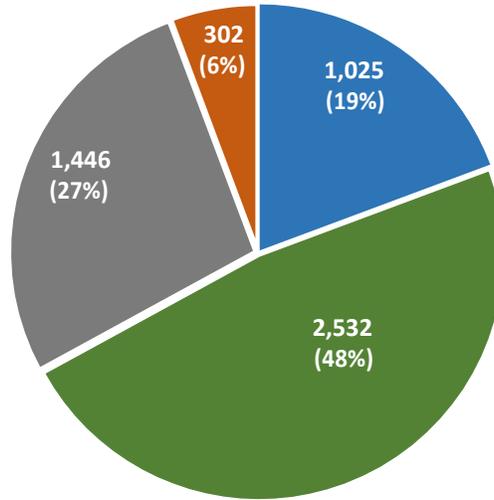
\*Ethnicity counts for this report do not include P & EI programs.

# Agency-wide

## Age Distribution

Age Distribution (Agency-wide)\*

■ Age 0-5 ■ Age 6-17 ■ Age 18-25 ■ Caregivers



\*Age distribution counts for this report do not include P & EI programs.

## Totals by County

County	#
San Francisco	3,610
San Mateo	3,174
Sacramento	8
Alameda	7
Santa Clara	6
Other (2 or less per county) (Napa, Monterey, San Joaquin, San Luis Obispo, Madera, Contra Costa, Sonoma, Kings, Placer, no county)	13

## Funding

We leverage an array of funding sources to provide services and also generate private funding to support innovation and service enhancements. Our funding breakdown is as follows:

- **Public Funding:** 82%
- **Commercial Health Insurance and Private Pay:** 12%
- **Donations:** 5%
- **Other** (e.g., lease of our Electronic Health Record): 1%

The largest percentage of public funding comes from EPSDT, followed by Foster Care, MHSA, and Special Education (including ERMHS) funding.

## Challenges

### 1. **Funding Challenges:**

- a) Funding does not cover the full costs of service delivery, including start-up, evaluation, and training costs, and Bay Area workforce demands;
- b) Funding is typically cost reimbursement and does not allow any reserves or infrastructure investments, leading to agency risk if there are unusual expenses or down years;
- c) Documentation and fiscal reporting requirements are often onerous and are not accounted for in rate setting.

### 2. **Workforce:** The most significant challenge Edgewood faces is workforce-related.

Recruitment and retention of direct care staff has been increasingly difficult as the economy has improved. The funding simply does not allow for the compensation necessary for staff to live in the Bay Area.

### 3. **Stigma:** Another challenge we have experienced is the significant stigma associated with mental health. While we have a wide range of highly effective services, with public and private funding available, many families are reluctant to access services due to myths and misperceptions about mental illness.

4. **Placements:** The reduction in hospital beds, CTF facilities, RCL 14 beds, and foster homes in the Bay Area has had a negative impact on discharge planning in our intensive services. In San Francisco, 60% of the foster youth are placed out of county due to the limited number of foster homes. We often have youth who are stabilized and ready for transfer to a bridge foster home or a treatment facility, but they must wait for weeks or months until the resource is available.

## Stories of Hope

### Edgewood Wraparound: Turning Point

April, Age 16

*Identifying information has been removed to protect client confidentiality.*

When April entered Edgewood's Turning Point Program, she appeared disheveled and was not taking care of her hygiene or appearance; her mental illness symptoms were severe. April was living in her parent's home - no job, no activities, no friends, and she was not safe traveling in the community on her own. Her parents were physically afraid of her during her frequent rages, and their marriage was strained because of the chaos and continual need for vigilance at home. Mom was extremely frazzled - April called her at work literally every 10 minutes, and Mom was scared for April's safety while Mom was at work.

This was my very first family when I joined Edgewood a year ago. Mom appeared on the verge of a breakdown, Dad was ready to seriously consider leaving the home, and both were feeling very isolated, exhausted and scared - for their safety and sanity, and for April's future.

A year later: April has made an incredible journey, working with her parents and her Edgewood team. She is a beautiful young woman who takes pride in her appearance, she is an



expert in makeup and hair, and is always well-dressed. April learned to use the public bus system safely through her work with her Edgewood Behavior Coach and now travels independently to the Edgewood Drop-in Center, the mall, and to visit friends. April is working on artwork to sell at the first Drop-in Center art sale in May, and she has buyers lined up already!

Edgewood has also helped her learn to keep appointments, talk through her concerns with others, start anger management counseling, and learn independent living skills (cooking, shopping, using public transportation, getting along with others). Though we'd love her to be in a more supportive, structured environment (none exists in the county beyond 90-day programs), April is now in a board-and-care facility. Her Edgewood team supported her and her parents through the transition period, providing daily check-ins, encouragement, and behavior coaching. Mom and Dad have participated in every family conference, and have expressed their real appreciation for Edgewood's support for the entire family.

### Turning Point and Hospital Diversion

Kaitlyn, Age: 10

When nine-year-old Kaitlyn came to Edgewood, she already had a history of on-going behavioral health complications. Kaitlyn's behavior was extremely volatile and often consisted of verbal and physically abusive outbursts which often resulted in her frequent stays in and out of the hospital. In June, Kaitlyn's mother, enrolled her daughter in Turning Point, a program here at Edgewood, which provides an alternative to hospitalization and enables troubled youth to remain in their communities.

During the summer of 2011, Kaitlyn stayed at Edgewood as a resident in our Hospital Diversion program. At Edgewood, Kaitlyn received the 24 hour care and support she needed. During her stay, Kaitlyn often found comfort in taking time away from her peers, as well as by expressing herself through her art and musical talents. Kaitlyn's family also received extensive emotional, therapeutic, and psychiatric support through

Edgewood's case management services. Kaitlyn's mom depended on Edgewood's therapeutic and psychiatric support, as well as through the family partner program to better understand and cope with her daughter's anxieties.

After a summer spent in and out of Edgewood, Kaitlyn had progressed to a point where she was now able to return home just in time for the start of a new school year.

Although in her home environment, Kaitlyn was still showing some difficulty with managing her anger, Kaitlyn and her mother continued receiving services through Turning Point.

Through the support of her mother and family, the continued support of her individual therapy and behavioral coaching support system, Kaitlyn has been able to further develop her talents for art and music, providing her with sufficient coping skills to maintain excellent behavior and stay out of hospitals. Today, Kaitlyn no longer depends on Edgewood's behavior coaching services. Continuing to work on her goals and talents, Kaitlyn has recently helped write a play script and landed a leading role in an Edgewood student video production entitled *Bully*.



### San Mateo Child and Family Treatment Collaborative

Sean, Age 8

Sean was eight years old when his aunt started bringing him for treatment to Edgewood San Mateo Child and Family Treatment Collaborative, a program that provides mental health services aimed at helping children and families develop the skills necessary to have a healthy home environment. A slight African-American boy with sparkling brown eyes, Sean was bounced from relative to relative around the Bay Area while his mother battled a dependency on crack cocaine. His assigned

Collaborative clinician took note of Sean's difficulty sitting still and listening to authority figures, all expressions of his turbulent life.

Sean had already attended three different schools by his second year of elementary school. Most school days ended with Sean running away or getting so frustrated he had to be restrained or taken home by the police. Meeting with a therapeutic behavior coach at Edgewood provided him with one-on-one guidance on how to manage his feelings at school. As Sean improved, it was clear that it would be helpful to have his mother involved in his treatment. Through the coach's connections at San Mateo County Human Services Agency, Sean's mother was able to enroll in an outpatient drug rehabilitation program and begin planning her future with Sean in Edgewood family conferencing sessions.

With the clarity that sobriety brought, Sean's mother had a new drive to reunite her family. She found a job at a nearby fast food restaurant and the family's case manager helped her secure low-income housing. Edgewood furnished the house, including a set of prized dishes on which Sean's mother served the family's first and subsequent dinners together.

Sean was able to take the tools he learned from his coach and clinician to succeed in his community. He joined the East Palo Alto Boys and Girls Club and started playing group sports at the YMCA. Because Sean's behavior was so changed, Edgewood services were no longer needed and Child Protective Services restored Sean to his mother's custody. Edgewood transformed Sean's life by giving him back the family he deserved.

