

**PROGRAM INFORMATION** If you have questions about this report, please contact: Lee Ann Spicer at (502)-690-3776

Abbey Hill Crosswinds Group Home

**Parent Agency:** Abbey Hill Group, LLC

535 Southwestern Parkway Louisville, KY 40211

**Phone:** (502) 254-7300**Fax:** (502) 342-4020**Agency Website:** www.abbeyhillgroup.com**Years Operating:** 3**Referral Contact:** Jill McKinney**General Referral Email:**

info@abbeyhillgroup.com

**Referral Phone:** (502) 690-3776**Child Caring License(s):** Group Home with Treatment;**Child Placing License(s):** None**Setting:** No Data**On Site School:** No**Male Operational Bed Capacity:**0 **County(s) of** Jefferson;**Female Operational Bed Capacity:**0 **Program or****Either Sex Operational Bed Capacity:**4 **Foster Homes:****Supplemental Information**

No Data

**Included/Excluded Populations****Gender Accepted:** Male**Age Range Accepted:** 12 to 19**LOC Range Accepted:** 3 to 3**Minumum IQ Accepted:**

40

**Client History at Admission****Average Age at Date Updated:** N/A**Average LOC at Intake** N/A**Number IQ 0 - 59:****Number of Residents:****LOC Unknown:****Number IQ 60 - 69:****Number of Males:****Number LOC 1:****Number IQ 70 and above:****Number of Females:****Number LOC 2:****Number IQ Unknown:****Number LOC 3:****Number LOC 4:****Number LOC 5:****Number of Current Residents Included in Risk Indicator Percentage****Animal Abuse:** N/A**Low Functioning:** N/A**Substance Abuse:** N/A**Aggressive Acts:** N/A**Runaway:** N/A**Suicidal Gestures:** N/A**Destroys Property:** N/A**Self Abusive:** N/A**Fire Setting:** N/A**Sexual Perpetration:** N/A**Failure to Comply:** N/A**Dangerous Impulsivity:** N/A**Homicidal Gestures:** N/A**Sexual Acting Out:** N/A**STAFF INFORMATION**

	<b><u>Number</u></b>	<b><u>High School</u></b>	<b><u>Some College</u></b>	<b><u>BA</u></b>	<b><u>MA or Higher</u></b>
<b>Administration:</b>	1	0%	0%	100%	0%
<b>Case Management Staff:</b>	1	0%	0%	100%	0%
<b>Clinical Staff:</b>	0	0%	0%	0%	0%
<b>Direct Care Staff:</b>	0	0%	0%	0%	0%

**Average Number of Months Foster Parents have Fostered for the Agency:** N/A**Treatment Director:** Lauren Muir LPCC**Psychiatric Services**

Contracted Psychiatrist, Community Mental Health Provider &amp; Community Providers.

SERVICES AND OUTCOMESSafety

<b>Number of Substantiated Abuse Allegations in the Past Year:</b> 0		
<b>Total # of Bedrooms:</b>	<b>Percentage of Direct Care Staff Trained in Physical Management</b>	0.0%
<b>Single Bedrooms:</b>		
<b>Double Bedrooms:</b>	<b>Percent of Foster Families with 2 or more Children:</b>	N/A
<b>3+ Bedrooms:</b>	<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 12/1/2022 through 11/30/2023</b>		
<b>Deadly Weapon Per 100 Resident Days</b>	N/A	Number of Months Data Received: of 12
<b>Serious Injury Per 100 Resident Days</b>	N/A	
<b>AWOL Per 100 Resident Days</b>	N/A	
<b>Suicide Attempt Per 100 Resident Days</b>	N/A	
<b>Criminal Activity Per 100 Resident Days:</b>	N/A	
<b>Injury to Other Per 100 Resident Days:</b>	N/A	
<b>Sexual Acting Out Per 100 Resident Day</b>	N/A	
<b>Total Critical Incidents Per 100 Resident Days:</b>	N/A	
<b>Physical Managements Per 100 Resident Days:</b>	N/A	

Permanency

<b>Length of stay and discharge data are calculated on discharges between 12/1/2022 through 11/30/2023</b>				
<b><u>Measure</u></b>	<b><u>Number</u></b>	<b><u>Percent</u></b>	<b><u>Length of Stay</u></b>	<b><u>Outlier</u></b>
<b>Child Progress toward Permanency Discharges</b>	N/A	N/A		N/A
<b>Progress Discharge to Home Like Placement</b>	N/A	N/A		N/A
<b>Progress Discharge to Less Restrictive Placement</b>	N/A	N/A		N/A
<b>Child Behavioral Difficulty Discharges</b>	N/A	N/A		N/A
<b>Runaway Discharges</b>	N/A	N/A		N/A
<b>Psychiatric Discharges</b>	N/A	N/A		N/A
<b>Agency/System Discharges</b>	N/A	N/A		N/A
<b>Caretaker Incapacity Discharges</b>	N/A	N/A		N/A
<b>Caretaker Failure Discharges</b>	N/A	N/A		N/A
<b>Caretaker Investigation Discharges</b>	N/A	N/A		N/A

Well Being

<b>Does this program have a PCC Foster to Adopt Agreement?:</b>	No	<b>Educational Disruptions in the Past Year:</b>
<b>Adoptions by the Program's Foster Homes in the Past Year:</b>	N/A	<b>School Changes in the Past Year:</b>

Describe How the Program Supports Family Connections

Special Interventions Available Internally