# PROGRAM INFORMATION If you have questions about this report, please contact: Brittany Brown at (859)-881-5010

All God's Children Supervised & Scattered Site ILP Parent Agency: All God"s Children, Inc.

**Phone:** (859) 881-5010 305 Lake Street #23,24,& 25 Nicholasville, KY 40356 Fax: (859) 305-1304

AgencyWebsite: www.kyallgodschildren.org

Years Operating: 22 Referral Contact: Brittany Brown General Referral Email: bbrown@kyagc.org

Referral Phone: (859) 881-5010 Child Caring License(s): None

Child Placing License(s): Independent Living;

Settina: Urban/Suburban On Site School: No

Male Operational Bed Capacity: 0 County(s) of Fayette; Jessamine;

o Program or Female Operational Bed Capacity: 12 Foster Homes: Either Sex Operational Bed Capacity:

Supplemental Information

Advantages of the AGC Independent Living Program: Located in downtown, Nicholasville, Kentucky, we take great pride in our beautiful two bedroom town homes that provide housing for mothers and babies, as they take advantage of Independent Living Skills provided by the agency. Although our program only accommodates 8 mothers and babies, we feel it is small enough to keep the "home like" feeling while being large enough to provide a broad range of services. We provide childcare in our childcare center to assist our residents while they continue their education and further develop their skills relating to Independence. AGC also provides prenatal classes, parenting classes, substance abuse education, mental health counseling, and Independent Living classes. AGC acknowledges that learning and growth are a continuum of formal and informal experiences found all throughout life. It is the goal of this program to equip the mothers/children with as many foundational skills as possible and to improve the total quality of life for each mother and child.

## Included/Excluded Populations

Gender Accepted: Female Age Range Accepted: 18 to 21 LOC Range Accepted: 1 to 3 Minumum IQ Accepted: 70

### Client History at Admission

Cuem History at Aun	<i>tission</i>					
Average Age at Date U	<b>Jpdated:</b> 19.0	O Average LOC at Intake	2.0		Number IQ 0 - 59:	0
Number of Residents:		1 LOC Unknown:	0		Number IQ 60 - 69:	0
Number of Males:		0 Number LOC 1:	0		Number IQ 70 and above:	0
Number of Females:		1 Number LOC 2:	1		Number IQ Unknown:	1
		Number LOC 3:	0			
		Number LOC 4:	0			
		Number LOC 5:	0			
Number of Current Res	sidents Inclu	ded in Risk Indicator Percen	tage	1		
Animal Abuse:	0%	Low Functioning:		0%	Substance Abuse:	0%
Aggressive Acts:	0%	Runaway:		0%	Suicidal Gestures:	0%
Destroys Property:	0%	Self Abusive:		0%		
Fire Setting:	0%	Sexual Perpetration:		0%		
Failure to Comply:	0%	Dangerous Impulsivity:		0%		
Homicidal Gestures:	0%	Sexual Acting Out:		0%		

#### STAFF INFORMATION

	<u>Number</u>	High School	Some College	<u>BA</u>	MA or Higher		
Administration:	4	0%	50%	0%	50%		
Case Management Staff:	5	0%	0%	60%	40%		
Clinical Staff:	. 0	0%	0%	0%	0%		
Direct Care Staff:	3	33%	0%	0%	67%		
Average Number of Mon	verage Number of Months Foster Parents have Fostered for the Agency: N/A						
Treatment Director: Kiml	berly Moyı	nahan LMFT					

### Psychiatric Services

We use United Behavior Health Associates for all psychiatric services and psychiatric medication management. We automatically refer our resident's for medication managements if they are currently on psychiatric medication. If a resident is not currently on psychiatric medications and our assessments indicate a need for a psychiatric evaluation we will immediately schedule an appointment. Requests for initial psychiatric appointments and medication management are typically scheduled within two to three weeks. However, we rely on our OB/GYN providers to determine the need and safety of psychiatric medications for our pregnant and nursing clients. Upon the OB's recommendation we will then refer our clients for psychiatric evaluation and possible medications.

# SERVICES AND OUTCOMES

### Safety

Number of Substantiate	d Abus	e Allegations in the Past Year: 0				
Total # of Bedrooms:	4	Percentage of Direct Care Staff Trained in Physical Management	N/A			
Single Bedrooms:	0					
Double Bedrooms:	4	Percent of Foster Families with 2 or more Children:	N/A			
3+ Bedrooms:	0	Percent of Families with 2 or more Children and a Sibling Group:	N/A			
Critical Incident and Physical Management ratios are compiled for the period 12/1/2022 through 11/30/2023						
Deadly Weapon Per 100	) Resid	lent Days N/A		Number of Months		
Serious Injury Per 100	Reside	nt Days N/A		Data Received:		
AWOL Per 100 Residen	t Days	N/A		9 of 12		
Suicide Attempt Per 100	Resid	lent Days N/A				
Criminal Activity Per 10	O Resid	lent Days: N/A				
Injury to Other Per 100	Reside	nt Days: N/A				
Sexual Acting Out Per 1	00 Res	sident Day N/A				
Total Critical Incidents I	Per 100	Resident Days: N/A				
Physical Managements	Per 10	O Resident Days: N/A				

#### **Permanency**

Length of stay and discharge data are calculated on discharges between 12/1/2022 through 11/30/2023						
<u>Measure</u>	<u>Number</u>	<u>Percent</u>	Length of Stay	<u>Outlier</u>		
Child Progress toward Permanency Discharges	2	100.0%	285.0	BETTER THAN AVERAGE RANGE		
Progress Discharge to Home Like Placement	2	100.0%	285.0	BETTER THAN AVERAGE RANGE		
Progress Discharge to Less Restrictive Placement	2	100.0%	285.0	BETTER THAN AVERAGE RANGE		
Child Behavioral Difficulty Discharges	0	0.0%		BETTER THAN AVERAGE RANGE		
Runaway Discharges	0	0.0%		WITHIN AVERAGE RANGE		
Psychiatric Discharges	0	0.0%		WITHIN AVERAGE RANGE		
Agency/System Discharges	0	0.0%		WITHIN AVERAGE RANGE		
Caretaker Incapacity Discharges	0	0.0%		WITHIN AVERAGE RANGE		
Caretaker Failure Discharges	0	0.0%		WITHIN AVERAGE RANGE		
Caretaker Investigation Discharges	0	0.0%		WITHIN AVERAGE RANGE		

### Well Being

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

# Describe How the Program Supports Family Connections

AGC attempts to assist significant persons and families in fully participating in the delivery of services and are informed about service options, setting and modifying service goals, and making decisions about the services they receive. Ongoing family participation is expected, unless contraindicated, and the organization communicates this expectation at the initial consultation or at intake. In cases of reunification, a family-centered service plan that identifies the family's unmet service needs; plans for maintaining or strengthening the relationship between the person served and her family, and addresses the person's need for the support of her family and informal social network is implemented. We work with the Social Worker for guidelines regarding family reunification and preservation.

#### Special Interventions Available Internally

Counseling: Individual, Group and Family counseling provided by AGC board certified therapists with oversight by an LMFT. Treatment Coordination; assists the resident, family and social worker in developing goals that promote healthy social, emotional, physical, educational, mental and spiritual development in the teen mothers and their children. On site, developmentally appropriate childcare center provides activities that promote the healthy development of the infant and assist the mother's in learning appropriate skills. Special classes on site: Independent Living Skills, Parent Education, Substance Abuse Education, Child Development, and Childbirth Education. Educational opportunities; pre and post secondary educational opportunities with the local school system and community colleges. Medical Services: AGC arranges for the services and sees that follow up services are addressed in a timely manner.