# every minute counts



Annual Report | Research & Review

# All we have to decide is what to do with the time that is given us.

J.R.R. TOLKIEN

After two years of uncertainty and disruption, the world is returning to its pre-Covid days. The world is returning to normal.

But, friends, there is nothing normal about a 10-year-old boy asking his camp counselor, "Will you be my dad?" There is nothing normal about a teen who stands in a doorway and says, "I know I have behaviors, but I hurt." And there is nothing normal about a mom who rejects her children, turning them out while she moves in with another man.

It's not normal, but it's real.

These are the children who are in our care. They are the reason we show up, the reason we are determined to redefine normal.



#### Welcome to our year in review

This was a year of many successes. We returned to full capacity following Covid restrictions. Our residential programs increased stabilization of youth in our care, measured through improvements in risk and protective factors and high percentages of well-being. We made great strides in education, from preschool through high school, and created opportunities for our young adults to attend trade school and college. Our in-home and family preservation teams maintained constant contact with their families. And our foster care team never wavered in their mission to provide safe homes, working tirelessly to recruit, train, and license new families.

#### But there's still much to do

We have not spent the past 12 months trying to get back to normal; we have spent it positioning for the future. New plans are already in motion – we have developed technology to provide individual progress reports in real time. In our residential programs, this will allow counselors to make data-driven decisions in the moment. Based on the strength of our family preservation program, we are expanding into Onslow County and next year we will report those results. Finally, we are preparing to launch an exciting new concept in transitional living. We call it "the farm" (pending its official naming ceremony) and it will provide youth a place to grow into independence – living and working and, yes, even farming. Ground has already been broken.

It's heartbreaking that we have to exist – that every day we meet children who have experienced more trauma than their lives can hold. But we are committed to serving them in the moment and giving them the chance to grow into their God-preferred future. The clock is ticking.

Every minute counts.

Buc E. Stanley

Bruce E. Stanley, President / CEO



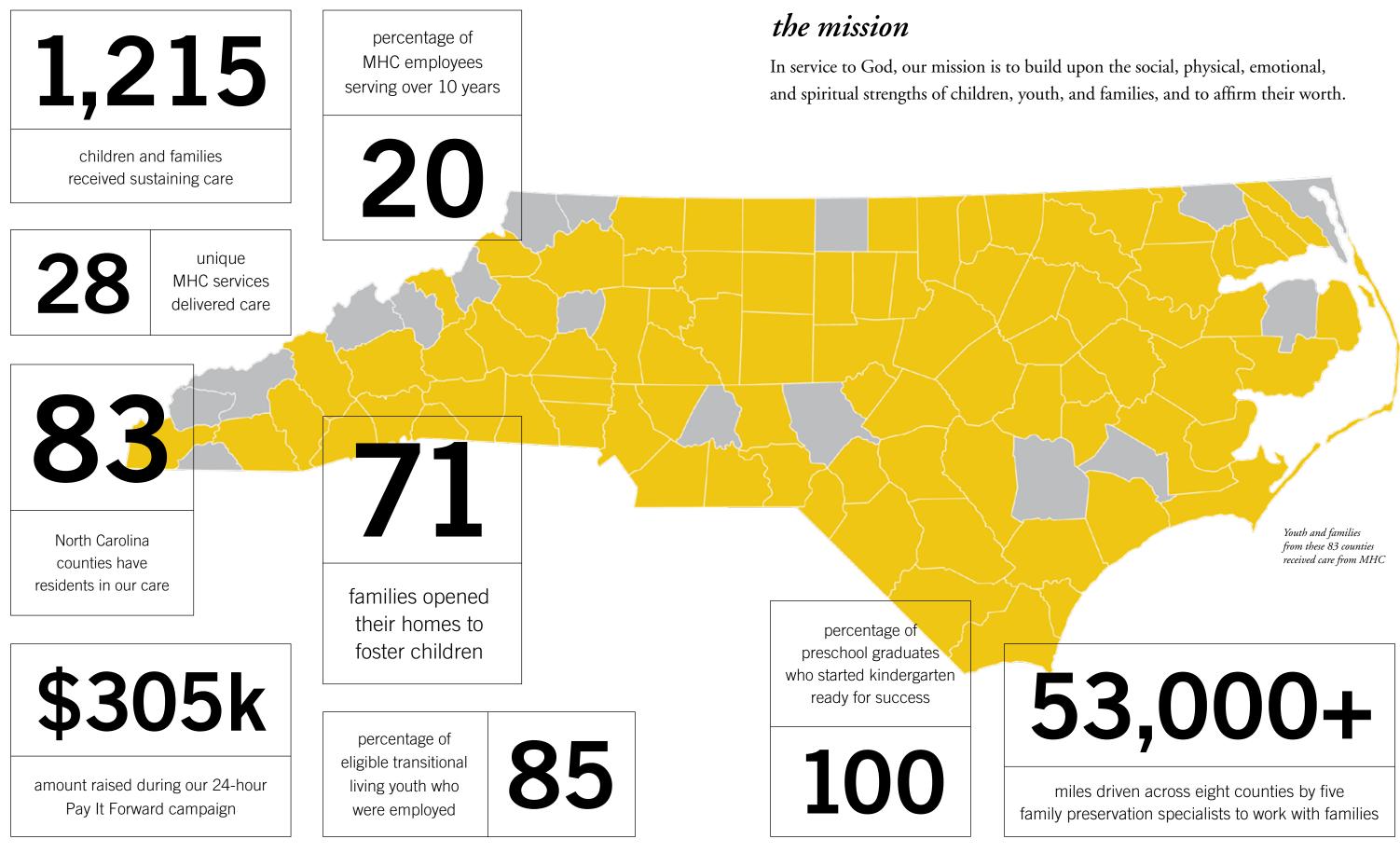




Family Focused Treatment Association



MHC is accredited or has membership with these organizations



### **OUR PROGRAMS AND SERVICES**

### foster care I adoption

#### (Traditional) Family Foster Care

Children who come into a traditional (or family) foster home need basic care until a permanent plan is ready. Most children in this program are 5 years or older and are part of a sibling group. (6-12 months)

#### Therapeutic Foster Care

While every child in foster care has special needs, those in therapeutic care have a specific and chronic mental health diagnosis that requires intensive, ongoing intervention. Foster families serving these children receive extensive and specialized training. (6-9 months)

#### Kinship Care

Sometimes the best care for a child can be provided by a family member – for example, an aunt or grandparent – or close family friend. This is kinship care. (up to 12 months)

#### **Rapid Response**

Emergency care homes offer immediate, short-term care for children in crisis as they move into or between foster homes, group homes, or even psychiatric treatment facilities. (up to 2 weeks)

#### **Respite Care**

This is care provided by one foster family to another family's foster children. Respite care is short – typically for a weekend – and it gives everyone, the foster children as well as their host family, time to rest and regroup.

#### Juvenile Justice Foster Care

These homes provide a family setting and services for runaways, gang-affiliated teens, or other court-involved youth. (90 days)

#### Adoption

Our foster to adopt program works with families wanting to adopt foster children who are unable to reunite with their biological families. (permanence)

### early childhood services

Our two childcare centers provide high-quality education and all-day care for children age 6 weeks up to 6 years old. Blended classrooms bring together children with typical development, special needs, and diverse family backgrounds. (up to 6 years)

#### specialized services

Our specialized services, known as FACT, help young people who are dually diagnosed with mental illness (or severe emotional disorders) and underlying developmental disabilities such as autism or intellectual disabilities. Our services are delivered in the following three ways:

#### **Day Treatment**

Children between the ages of 8 and 18 who need help learning to manage their behaviors benefit from this weekday program. An on-site school provides skillappropriate curricula. (ongoing)

#### **Group Homes**

This home is for youth who need out-of-home care but who do not meet the criteria for inpatient psychiatric services. It is a highly structured program where youth learn to live as productively and independently as possible. (6-9 months)

#### **Outpatient Therapy**

Working with our clinical mental health counselor, children and adults identify strengths, learn to use them to overcome daily struggles, and make empowering decisions about their lives. (ongoing)

### family preservation services

#### Family Preservation and Intensive Family Preservation

When parents are in crisis – struggling with addiction, mental illness, employment, or housing – the children often suffer the most. We work directly with parents, teaching social and parenting skills and connecting them to resources in their community. (FP: up to 6 months) (IFP: 4-6 weeks)

#### Family Reunification

Parents who have lost their children to foster care face insurmountable grief. We work to help them overcome problems and dependencies, ensuring their children have a safe home and successful transition. (6-20 weeks)

#### **Comprehensive Clinical Assessments**

Severe mental health issues, developmental disabilities, or substance abuse can rip families apart; often the parents don't know how or where to find help. We work face-to-face with families, assessing their needs and matching them with local community partners that can provide support. (30 days)

#### in-home services

#### **Alternatives to Commitment**

Kids make mistakes, but not every mistake deserves incarceration. By teaching these youth to respect authority and control impulses while encouraging them to finish school and find jobs, we can strengthen the community and save lives otherwise lost to incarceration or dependency. (6 months)

#### **Family Preservation**

Strong families can save children who are on a path leading to incarceration. Yet parents are often at a loss – not knowing what to say or do. We work with these families to end unproductive patterns of interaction and build skills that will keep the family together. (5 months)

#### **Transition and Reentry**

Going home can be difficult for teens who have been living in a Youth Development Center (or another residential court placement). Our staff helps ease the tensions of transitioning back into the home and community. (up to 6 months)

#### **Vocational Training**

Having a job can be a game-changer – providing purpose, skills, and hope for the future. This partnership program matches court-involved teens with jobs within the community. (4-6 months)

#### crisis & assessment centers

These residential centers serve juvenile court-involved youth between the ages of 10 and 17 and offer three levels of care: crisis, assessment, and secure. The primary goal is to complete a comprehensive juvenile assessment that will match the youth to the most appropriate diversion services in their community. The assessment process takes place under the supervision of a licensed psychologist and licensed clinical case managers. (14-30 days)

#### multipurpose group homes

Our co-ed group homes serve boys and girls whose repeat offenses are leading them toward more serious involvement in the juvenile justice or adult corrections system. We teach social skills to address the factors which led to their criminogenic behavior and make it possible for them to replace negative habits, catch up in school, and set positive goals for themselves. For youth completing the progam, we also offer aftercare services. (MPH: up to 8 months) (Aftercare: 6 months)

#### transitional living homes

Older teens (age 16-20) who are on probation but cannot safely return to their homes live here. While part of the home, the youth work to finish high school or earn their GED, identify career goals, get jobs, volunteer in the community, complete driver's education, and learn to budget, cook, and manage bills. Aftercare services are also offered. (TL: up to 12 months) (Aftercare: 6 months)

#### hackley education and learning program

HELP supports the higher-education goals of students who have been in our care. Many have overcome abuse, neglect, and other childhood obstacles to finish high school and now aspire to attend college or trade school. HELP provides mentoring and financial assistance to these students. (ongoing)



### foster care | adoption

# through no fault of their own, these children need homes; that's where we come in

Consider these two competing realities: The CDC reports that safe, stable, and nurturing relationships and environments are childhood essentials; and North Carolina describes its need for foster homes as immediate and pressing. At the intersection, lies our why.

MHC remains focused on recruiting, training, and licensing families willing to foster children of all ages, races, abilities, and talents. To meet the growing need for qualified homes, we recruit families using social media and radio ads, mobile geo-fencing, and billboards.

Once recruited, our foster parent candidates are trained to standards that exceed state requirements. By equipping parents in this way, we can reduce the likelihood of multiple placements.



children gained permanence through adoption

#### outcomes

- ► 112 individual youth received care
  - ► 75 received family (traditional) foster care
  - ► 35 received therapeutic care
  - ► 17 received court-referred care (DJJ)
  - ► 5 received respite care
  - ▶ 1 received kinship care
  - ► 1 received Wake County emergency care
  - ► 4 adopted (after being in foster care)

Total is greater than 112 because some youth received multiple services.

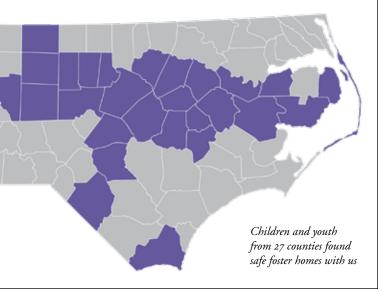
#### program overview

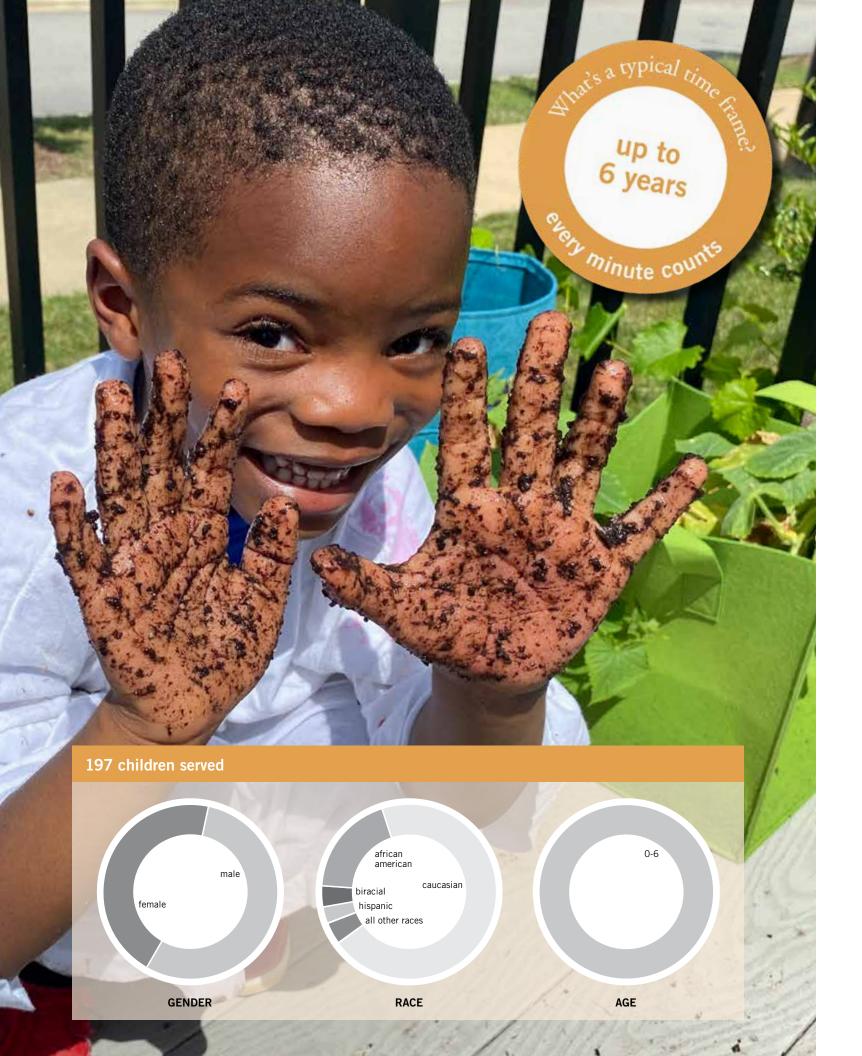
- ► 71 foster homes
  - ▶ 26 re-licensed
  - ► 10 changed from other agencies
  - ► 16 new foster homes

► 28 families completed MHC training ▶ 60 hours of classes (20 hours more than N.C. requirement) ► all classes conducted face to face (not virtual)

▶ highest number of children served in one day: 61 ► average number of children served per day: 56 youngest child in care: 9 months ► oldest child in care: 19 years old

average length of stay: 7.9 months





### early childhood services

# the lessons we teach make a profound and measurable difference

Two of the greatest indicators of future success are self-esteem and self-control. With an emphasis on social emotional learning (SEL), our goal is to build a strong foundation - teaching children to accept who they are and giving them the confidence that they can handle (age-appropriate) situations. Teaching basic skills - and reinforcing them using positive words - provides our youngest learners the framework for managing their behavior.

This year was defined by a nationwide staffing challenge that affected us in two important ways: increased demand lured some of our seasoned staff to other schools and greater competition has slowed our ability to hire qualified replacements. In spite of being understaffed, everyone worked together and continued to provide the highest possible care for our children.

of our rising 100% kindergarteners met their readiness goals

#### outcomes

- ▶ 197 children received care ► 40% received financial support ► 21% MHC scholarship ► 12% state subsidy ► 7% NC Pre-K ► 18% received therapeutic support (i.e., speech, occupational, and/or physical therapy; early childhood mental health services) ► 100% of kindergarteners achieved readiness goals (standardized assessment) program overview
- evidence-based Conscious Discipline model
- research-based curriculum
- ► 5-star license from N.C. Division of Child Development and Early Education
- ▶ 92% of lead teachers have an associate degree or higher in
- early childhood education (up from 75% last year)
- classrooms are open year round
- quality of life support for families
- (i.e., community resources for housing, food, clothing,
- Project Enlightenment parenting trainings, parent counselor
- services, referrals for services, early interventions, and preschool

special education services)

Preschoolers from five counties attended our two childcare centers in Raleigh



### specialized services

# these children have dreams and potential; we help them achieve both

When many people hear "dual diagnosis," they think of substance abuse and mental illness. Our program, however, serves young people with a developmental disorder and a mental health concern; a population that is historically underserved in our state.

We call this program "specialized services." Although to the uninitiated the title may sound vague, the strategies and model of care we teach are highly effective in helping the youth manage their behavior and trauma.

Our program – which typically lasts at least a year – is highly structured, designed to teach the youth to live as productively and independently as possible. By learning to manage their behaviors, the youth work toward the goal of returning to their home community and school. Our work often includes whole-family support: counseling and strategies for parents and siblings.



#### **Group Homes**

- ▶ all 16 youth in our care ► 32 youth and adults (Medicaid patients) ► average length of care: 12 months

- ► 36% Autism Spectrum Disorder

### experience

- ▶ 24/7 care
- ▶ phased return to the community with local support services in place

of our youth 81% receive all offered services

► 48 individual youth and adults received care

#### **Day Treatment**

- ▶ all 16 youth in our care
  - ▶ 10 currently progressing in the program
  - ► 6 completed the program
  - ▶ 83% went to a lower level of care
- ► average length of stay: 16 months
- ▶ 13 of the youth in our care ▶ 6 currently progressing in the program ▶ 7 completed the program ► average length of stay: 18 months

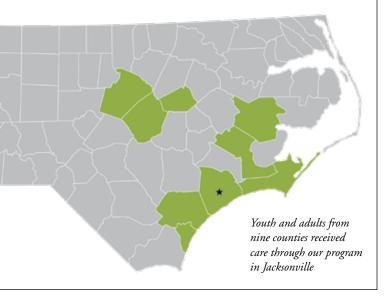
#### **Outpatient Therapy**

#### most common mental health diagnoses\*

- ► 55% Anxiety Disorder
- ► 42% Attention Deficit Hyperactivity Disorder (ADHD)
- 20% Major Depressive Disorder
- ► 20% Oppositional Defiant Disorder

- ► intensive therapies which may include individual and group
  - psychotherapy, psycho-educational groups, recreational therapy,
- and parent counseling

\* Total is greater than 100% because the youth in our care have multiple diagnoses.





### family preservation services

# the most important thing we teach is how to become a family (again)

The goal of this program is simple and clear: To strengthen and preserve families in crisis. Our services have short timelines and our work is intense.

Crisis situations arise when parents struggle with issues as diverse as addiction, mental illness, unemployment, or housing insecurity. And, without intervention, these parents are at risk of losing their children to foster care.

Our specialists meet families where they are – traveling to their homes and tailoring the approach to each situation. When community resources are scarce, we help navigate transportation; when houses are crumbling, we help repair and paint; when parents are absent because of jobs, we help find childcare; and when parents are battling addictions, coping with trauma or grief, or struggling with mental illness, we help them reassess and start again.

98% maintained custody of their children

of families

# outcomes

#### **Intensive Family Preservation**

### **Comprehensive Clinical Assessments**

### program overview

▶ 61 adults and their families (249 individuals) received care

#### **Family Reunification**

▶ 10 families (38 family members) ▶ 95% of the disrupted families were reunified

#### **Family Preservation**

► 29 families (143 family members) ▶ 100% maintained custody of their children

► 17 families (63 family members) ▶ 16 families completed the program ▶ 94% maintained custody of their children

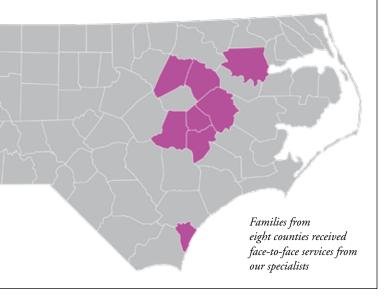
► 5 adults received comprehensive clinical assessments

► all services are in partnership with the N.C. Department of Social Services

• five dedicated family preservation specialists drove more than 53,000 miles to work with families

► our assistance extends to emergency help with rent and

utilities, crisis support, medical equipment, school supplies, food, and clothing





### in-home services

# we strengthen bonds between teens, parents, and community

There are many reasons adolescents and teens get in trouble: substance abuse, peer pressure, poverty, mental disorder, school problems, learning disabilities, trouble at home, no supervision, or boredom.

We work with kids who are on the line – helping them change their course either through a new job, community resources, or by strengthening the family. That's one half of what we do.

The other half focuses on the teens who have crossed the line; they have broken laws and been in a residential program – either a Youth Development Center (YDC) or a center such as our multipurpose group homes. When their residential time is complete, and courts release them to their communities, "re-entry" can be challenging. Working with both the teen and their family, we help ease them back into their homes, neighborhoods, schools, and communities. Our goal is always to keep them safe and equipped for life-long success.



▶ 83% showed improvement in their home environment\* ► 67% completed services successfully or satisfactorily\* ▶ 86% had no new adjudications 12 months after leaving\*

### Family Preservation

### Transition and Re-entry

### Vocational Education

### program overview

• all services are in partnership with Juvenile Crime Prevention Councils (JCPC), a division of the N.C. Department of Public Safety ► youth in our vocational education program held MHC-sponsored jobs at car repair shops, business centers, and a thrift store

\* Information provided by the N.C. Department of Public Safety for calendar year 2021.

of youth 100% in our job program succeed

► 121 individual youth received care ▶ 88 discharged ► 70% successfully completed the program

#### Alternatives to Commitment

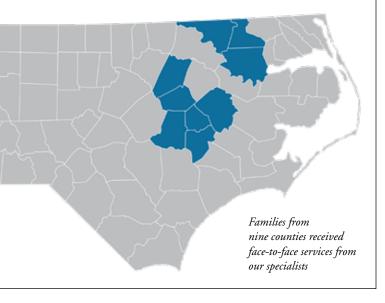
▶ 97% had no new adjudications after admission\*

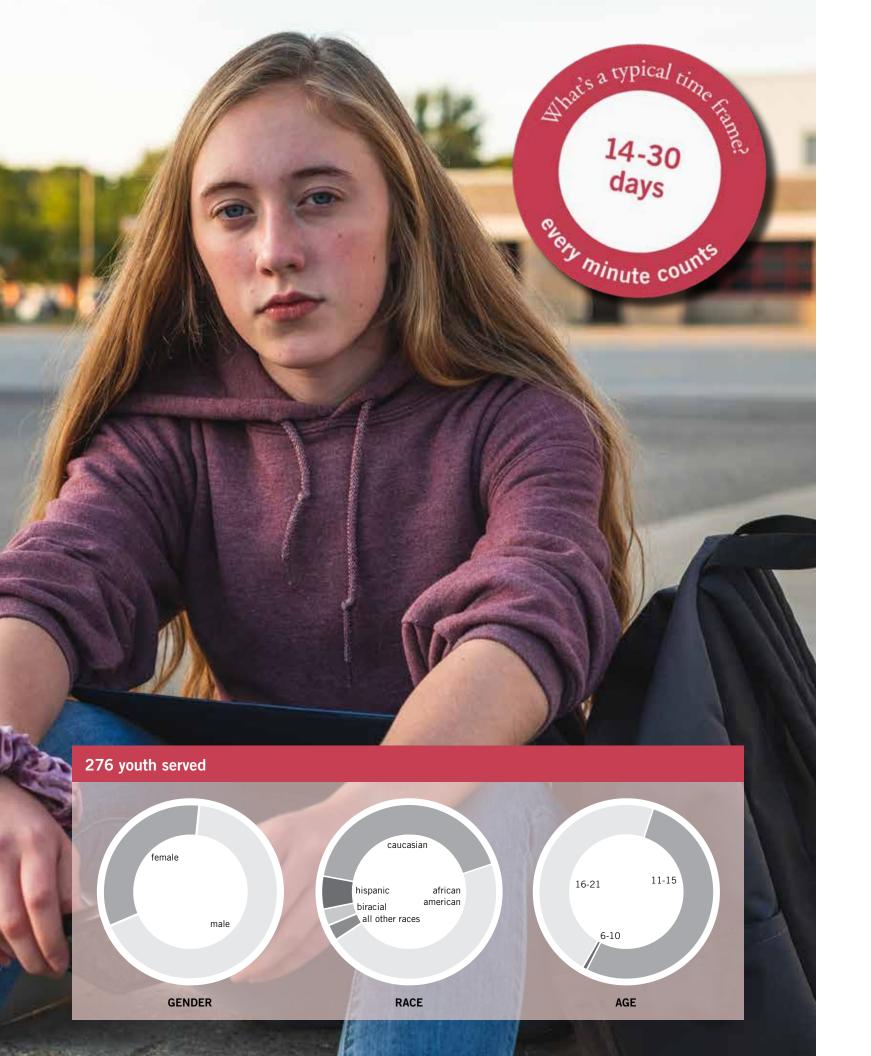
▶ 97% completed services successfully or satisfactorily\* ▶ 89% had no new adjudications 12 months after leaving\*

▶ 81% had no new adjudications after admission\* ▶ 86% completed services successfully or satisfactorily\*

▶ 84% had no new adjudications 12 months after leaving\*

100% had no new adjudications after admission\* ► 100% completed services successfully or satisfactorily\* ▶ 83% had no new adjudications 12 months after leaving\* ▶ upon completion of MHC program, one youth gained permanent employment at his work site (flower shop)





#### crisis & assessment centers

# these youth are in crisis; we uncover why

Our crisis & assessment centers (contracted through the N.C. Department of Public Safety) provide urgent care for youth who need a temporary out-of-home placement. Our goal is to identify behaviors, determine effective interventions, and recommend services that will decrease their criminogenic activities. We provide three distinct levels of care: crisis, assessment, and secure. MHC is the only provider of this service in North Carolina.

This year saw a significant change in one component of our assessment service: The average length of stay decreased by 17 days. Despite this shortened time in care, 97 percent successfully completed the program, leaving with full assessment reports. This evaluative report combines educational achievement, intelligence, personality, behavior, and recidivism risk with information gained through the daily living aspects of the program.

### outcomes

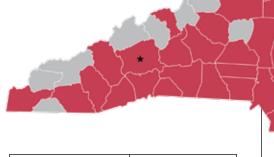
- Crisis

#### Assessment

- ▶ 97% completed the program with full assessment reports and recommendations

# Secure

### experience





pages of data and recommendations in each assessment report

► 276 individual youth received care

• all services are in partnership with the N.C. Department of Public Safety

► 137 crisis youth (average length of stay: 16 days) ► 18 moved from crisis to assessment

► 150 assessment youth (average length of stay: 26 days) ► 139 were discharged

- ► Top 3 recommendations:
- •Psychiatric Residential Treatment Facility (PRTF)
- •Level III Residential Placement
- •Level III Mental Health Residential Placement
- ▶ 27% had a change in diagnosis information

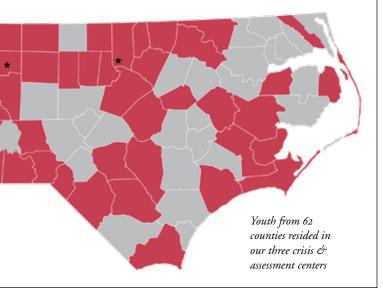
► 12 secure youth (average length of stay: 10 days) ► 3 moved from secure to assessment 2 moved from secure to crisis

Total is greater than 276 because some youth received multiple services.

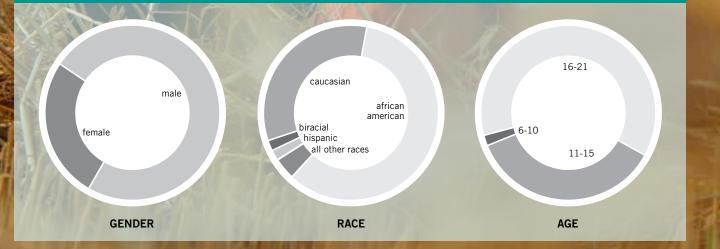
#### most common diagnoses

- ► 38% Conduct Disorder
- ▶ 10% Oppositional Defiant Disorder
- ► 7% Attention Deficit Disorder (ADD)
- ► 4% Cannabis Use Disorder
- ▶ 4% Disruptive Mood Dysregulation

► 24/7 monitored care ► highly structured, daily programming in a safe, predictable atmosphere







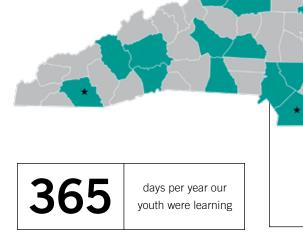
### multipurpose group homes

# youth success is based on classroom and life lessons

This program provides long-term residential services to adjudicated youth; it is a diversion placement that holds youth accountable without the threat of confinement in a Youth Development Center. The goal is to prevent them from moving deeper into the justice system. MHC is the only provider of this service in North Carolina.

Our program is highly structured and effective. By using the model of care, we can increase necessary social skills and protective factors while decreasing risks. Data from the N.C. Department of Public Safety show our youth continue to stay out of trouble – far exceeding the 12-month national average (45%).

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### outcomes

- ▶ 75% successfully completed the program
- ► average length of stay: 4 months

### Aftercare Services

### Crisis Care

### education

Youth come into our care two or three years below grade level. Abilities in a classroom can range from first grade to 13.1. Despite this broad disparity, and given the brief time with us, this chart demonstrates the successes our youth have achieved.

► 134 individual youth received care • all services are in partnership with the N.C. Department of Public Safety

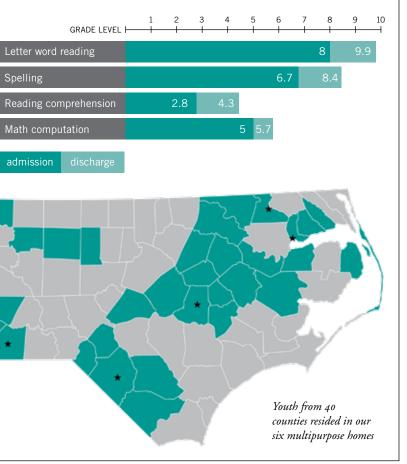
#### Multipurpose Services

► 109 youth received multipurpose services

- ► 102 youth were discharged
- ► 27 youth received care
- ▶ 16 youth started aftercare following discharge
- ▶ 11 youth completed aftercare which began during FY 20
- completely voluntary
- ► length of program: 6 months

▶ 14 youth received care (There is no reporting data for these youth.)

Total is greater than 134 because some youth received multiple services.





### transitional living

# when they leave us, our youth are prepared for life

Transitional living is a voluntary program for older youth who are on juvenile probation after being in a court-based residential program. Without intervention and guidance, this population is at high risk of failure. MHC is the only provider of this service in North Carolina.

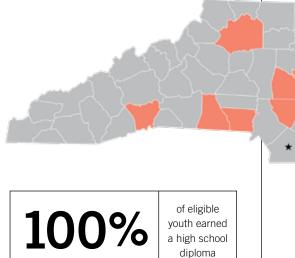
In this program, youth are required to continue their education and get a job. They are accountable for their time and self-define daily and weekly goals as they build skills necessary for independent living.

When youth leave our care, they are equipped to succeed. Through the youth outcome questionnaire (YOQ), we know their well-being has increased. Further, they self-report higher percentages of a positive self-image (85%), age-appropriate social behavior (79%) and positive involvement in either their school or community (44%).

- outcomes

- ► career

\* Information provided by the N.C. Department of Public Safety for calendar year 2021. The Union County home is not included in this analysis.



► 65 individual youth received care

- ► 46 pursued education (high school or higher)
- 100% of eligible youth earned high school diploma or equivalent
- 100% of eligible youth attended the VOLT Center
- 2 professional certifications earned
- Forklift certification from the VOLT Center
- Chef certification from Providence Culinary Training

► 37 youth discharged

- ► 70% successfully completed the program
- ► average length of stay: 3.28 months
- all services are in partnership with the N.C. Department of Public Safety
- ▶ 92% had no additional juvenile complaints 6 months after leaving\*
- ▶ 98% had no additional adult charges 6 months after leaving\*
- ▶ 94% had no additional juvenile complaints 12 months after leaving\*
- ▶ 97% had no additional adult charges 12 months after leaving\*

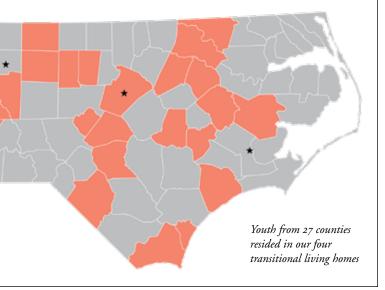
#### Aftercare Services

► 23 youth received care ▶ 15 youth started aftercare following discharge ▶ 8 youth completed aftercare that began during FY 20

Total is greater than 65 because some youth received multiple services.

#### experiences

► these service components prepare youth for independent living education skill building employment community service





### HELP

# when our youth are ready to advance their education, we make it happen

For more than 42 years we have supported the higher education ambitions of young adults who have been in our care. Many have overcome abuse, neglect, and other childhood obstacles to complete high school and now aspire to attend college or trade school. HELP makes that possible.

Assistance is available to anyone who - as a youth - lived in one of our foster care, multipurpose, or transitional living homes.

This program provides not only financial assistance but also valuable face-to-face mentoring. Mentoring relationships often extend beyond the traditional college years, extending to conversations about jobs, careers, and families.

\$72,533

awarded to our college students

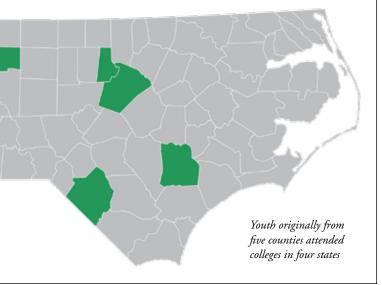
- outcomes
- ► M.Ed. from Johns Hopkins University ► 10 continuing studies
- ▶ 13 young adults served ▶ 1 graduate

- 9 academic institutions ► Ball State University

#### service overview

- Craven Community College
- ► Fayetteville Technical Community College
- Johns Hopkins University
- Norfolk State University
- North Carolina Central University
- North Carolina State University
- UNC Pembroke
- ► Wake Technical Community College

► MHC board members and employees serve as mentors to program participants





### staff development

# continuous training provides support and growth for all

MHC believes high-quality, continuous employee training is essential if we are to provide the best possible care for our children and families; our investment in staff development ensures full and consistent implementation of our model of care.

Staff development begins at recruitment and this year had its challenges. Most notably there is a nationwide labor and talent shortage. And although vital and rewarding, the work we do is difficult. To fortify recruitment, we raised our minimum pay, expanded the use of targeted recruitment ads, and created hiring bonuses for teachers.

Once hired, training and development is ongoing. Our team conducts monthly workshops that teach new skills, build community across programs, and provide a clear career path. While typically held at our Raleigh headquarters, some trainings are now conducted in our remote locations or are available online.

hours of pre-employment

CORE training available

to each new employee

outcomes

- Recruitment

#### Training

- ► 5 workshops and in-service programs ► 388 training participants ▶ 1,138 training hours (by staff)

### Development

- ▶ 97 employees eligible for MHC Lighthouse certification

### program overview



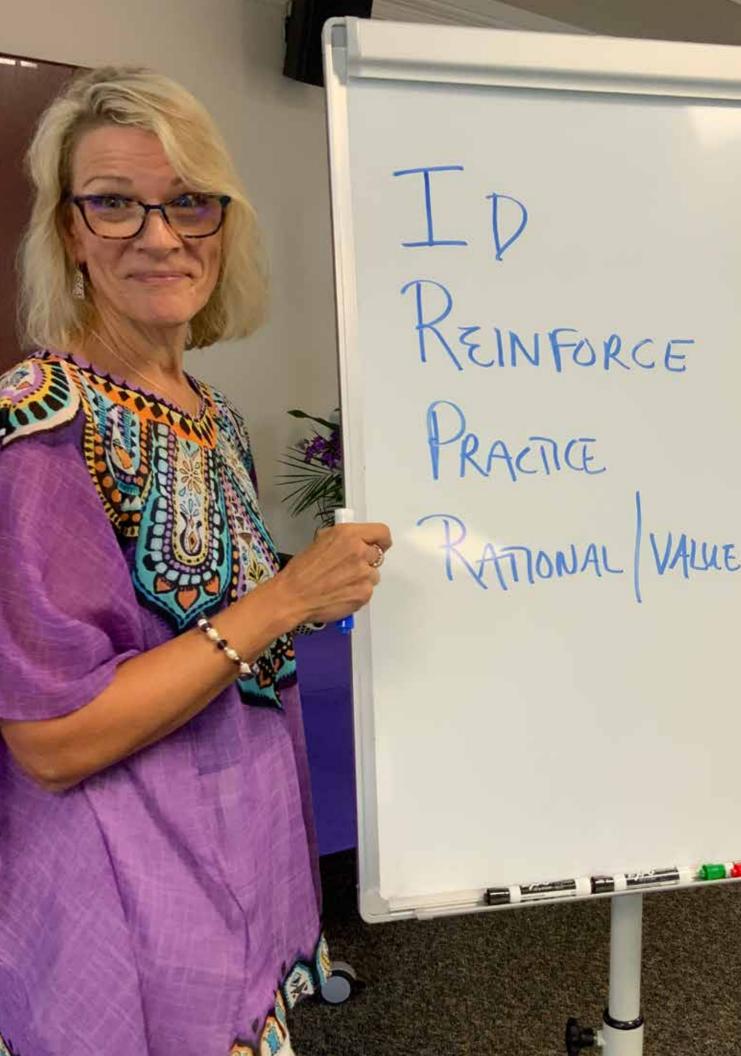
► 358 MHC agency positions

- ► 22 college and recruiting fairs attended
- ▶ 1,099 applications submitted
- ▶ 162 new hires

- 8 staff promotions
- ► 6 staff members qualified as new trainers
- ▶ 85% earned certification
- ▶ 89% certified on first attempt
- ► all new employees attend CORE training
  - full day of orientation to MHC, our mission, values, and policies
  - direct care staff attend 6 additional days of intense training and
  - evaluation for our model of care
- workshops and in-service programs offered year round
  - Model Booster
  - Consultation Workshop
  - Evaluation Workshop
- Supervision Workshop
- ► Elevate Leadership Cohort
- ▶ 6-month program
- develops leadership skills
- provides career path for MHC employees
- Lighthouse certification
- required annual evaluation of all direct care staff and foster parents
- ▶ 3 levels certified, premier, and elite
- recognized internationally through TFA



employees earned Lighthouse certification for their expertise in implementing the model of care



#### consultation and program development

# our work extends across the country and families are stronger

MHC was first accredited in 1986 by the Teaching-Family Association (TFA), one of only two associations approved in 2021 for accrediting by the Family First Prevention Services Act (FFPSA). As a TFA Sponsor Site, we train other agencies to use the model of care and guide them through the accreditation process.

Agencies seek our help because of our strong reputation for program fidelity and the support we offer to all levels of programs for youth and families.

Because of the work we do teaching others to implement the model of care and gaining accreditation, we offer agencies five distinct benefits.

- ► We help reduce the financial liabilities associated with unsafe practices.
- We help agencies create programs and services that add value to their communities.
- We help implement training that is consistent; direct care staff are trained before working with youth.
- ► We help create professional staff positions.
- And we help shift practices away from monitoring youth to teaching and restoring youth.



years we have served as a TFA Sponsor Site

- outcomes

- ► 225 people trained

- ► 2 dedicated staff members
- Childhelp (Beaumont, California)

- 3 successful accreditations
- Gift of Hope Homes (Boones Mill, Virginia)
- Onion River Crossroads (Montpelier, Vermont)
- White's Residential and Family Services (Wabash, Indiana)
- ► 428 youth and families supported

#### program overview

- ▶ 36 weeks of travel
- ongoing client
- ▶ 2 new clients
  - ► Hope Ranch (Sullivan, Missouri)
  - Eliada Family Services (Asheville, North Carolina)
- consulting topics
- Teaching-Family model consultation and development
- Comprehensive best practices
- ► Foster care
- Residential treatment
- Juvenile delinquency
- In-home services
- Early childhood development
- Adoption
- Facility management
- Administrative processes and practices
- Community integration
- Supervision and management
- Quality assurance and improvement



"Thanks to MHC and the TFA model, we have improved our overall professionalism and services to the young people in our care." – White's Residential and Family Services

### financials

### CONSOLIDATED STATEMENT OF FINANCIAL POSITION

June 30, 2022 (with Comparative Totals for 2021)

	2022	2021
ASSETS		
Cash and cash equivalents	\$ 2,383,058	\$ 2,598,390
Common investment fund	20,928,065	23,333,170
Accounts receivable	1,859,882	1,127,622
Pledges receivable	4,050	34,545
Prepaid expenses	208,442	205,246
Annuities contract	956,989	1,065,235
Beneficial interests in trusts and perpetual trusts	810,579	975,556
Property and equipment, net	3,176,513	3,335,619
Total assets	\$30,327,578	\$32,675,383

#### LIABILITIES AND NET ASSETS

#### LIABILITIES

Accounts payable	\$ 467,297	\$ 417,140
Accrued pension liability	736,018	734,135
Accrued salaries & vacation	763,366	711,521
Deferred compensation	956,989	1,065,235
Deferred rent	23,180	34,240
Capital leases	601,276	551,292
Total liabilities	3,548,126	3,513,563

#### NET ASSETS

5,040,808	4,883,680
17,620,242	19,967,557
22,661,050	24,851,237
2,812,435	2,854,091
1,305,967	1,456,492
4,118,402	4,310,583
26,779,452	29,161,820
\$30,327,578	\$32,675,383
	17,620,242 22,661,050 2,812,435 1,305,967 4,118,402 26,779,452

#### 2022 REVENUES TOTAL: **\$19,645,499**



96% Fees for service \$18,787,912

18% Donations and grants \$3,525,436

-14% Other income (loss) \$(2,667,849)

#### 2022 EXPENSES TOTAL: **\$22,324,635**



#### 87% program services \$19,340,129

5% fundraising \$1,249,717

8% general and administrative \$1,734,789

### CONSOLIDATED STATEMENT OF ACTIVITIES

For the Year Ended June 30, 2022 (with Comparative Totals for 2021)

	2022			2021	
	Without Donor Restrictions	With Donor Restrictions	Total	Total	
SUPPORT AND REVENUE					
Fees for service	\$18,787,912	\$ -	\$18,787,912	\$18,114,877	
Donations and grants	3,503,309	22,127	3,525,436	4,707,084	
Investment income (loss)	(2,287,566)	(323,515)	(2,611,081)	4,964,752	
Change in value of annuities and trusts	(108,246)	(164,977)	(273,223)	508,620	
Other income	216,455	-	216,455	56,498	
Total support and revenue	20,111,864	(466,365)	19,645,499	28,351,831	
RECLASSIFICATIONS					
Net assets released from restrictions	106,482	(106,482)	-	-	
Transfers	(380,666)	380,666	-	-	
Total reclassifications	(274,184)	274,184	-		
EXPENSES					
Program service expenses					
Foster care and adoptions	2,192,391	-	2,192,391	2,279,992	
Early childhood	3,603,310	-	3,603,310	3,773,648	
Family preservation and in-home	1,338,927	-	1,338,927	1,235,797	
Mental health	1,339,068	-	1,339,068	1,147,537	
Assessment centers	4,270,261	-	4,270,261	4,164,936	
Juvenile homes	6,223,266	-	6,223,266	5,562,348	
Scholarships	72,660	-	72,660	54,776	
Consultation and program development	300,246	-	300,246	201,485	
Total program service expenses	19,340,129	-	19,340,129	18,420,519	
Supporting activities					
Fundraising	1,249,717	-	1,249,717	1,311,639	
General and administrative	1,734,789	-	1,734,789	1,889,263	
Total expenses	22,324,635		22,324,635	21,621,421	
Change in net assets	(2,486,955)	(192,181)	(2,679,136)	6,730,410	
Other pension-related changes	296,768	-	296,768	(121,573)	
Net assets at beginning of year	24,851,237	4,310,583	29,161,820	22,552,983	
Net assets at end of year	\$22,661,050	\$4,118,402	\$26,779,452	\$29,161,820	

# Methodist Home for Children was founded as a campus-based orphanage in 1899. Our commitment to North Carolina families is as strong today as when we began, yet our services far exceed that original vision.

Find out more about us at **mhfc.org**.



