



# SANCTUARY, INCORPORATED

"Helping Youth and Families Help Themselves" since 1971

Address: 406 Mai Mai Rd., Chalan Pago, Guam 96910

\* Tel: 475-7101 \* Fax: 477-3117 \* Crisis Hotline: 475-7100


Website: www.sanctuaryguam.org \* E-mail: inquiries@sanctuaryguam.org



## Transmittal Form

Date: October 15, 2013

To: Honorable Judith Won Pat  
Speaker  
32<sup>nd</sup> Guam Legislature

32-13-871  
C  
By:   
Date: 10.15.13  
Time: 2:10 PM  
Received by: 

Enclosed herewith are the following documents:

1. FY2013 4th quarter list of expenditures over \$5,000
2. FY2013 4th quarter list of appropriations/expenditure report
3. FY2013 4th quarter progress report

### Purpose/Action Needed:

- Needs your approval on the above
- Needs reply or comment
- To fulfill your requirement

Other: In compliance with Public Law 28-150 herein reports for all our programs which receive funding through a Government of Guam agency

2013 OCT 15 PM 2:36  


Cordially,

  
Mildred Q. Lujan  
Executive Director

### ACKNOWLEDGEMENT

Receipt of the above is hereby acknowledged:

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_



# SANCTUARY, INCORPORATED

*"Helping Youth and Families Help Themselves" since 1971*

Address: 406 Maimai Rd., Chalan Pago, Guam 96910

\* Tel: 475-7101 \* Fax: 477-3117 \* Crisis Hotline: 475-7100

Website: [www.sanctuaryguam.org](http://www.sanctuaryguam.org) \* E-mail: [inquiries@sanctuaryguam.org](mailto:inquiries@sanctuaryguam.org)



October 15, 2013

Honorable Judith Won Pat  
Speaker  
32<sup>nd</sup> Guam Legislature  
155 Hessler Place  
Hagatna, GU 96910

Hafa Adai Speaker Won Pat,

In compliance with Public Law 28-150, please find herein reports for all our programs which receive funding through a Government of Guam agency. Section 7 specifically states: All non-profit organizations funded by this Act shall maintain financial records that accurately account for appropriated funds and shall provide a budgetary breakdown by object category to the department or agency overseeing the appropriation. Sanctuary, Incorporated has existing contracts with the following Government of Guam agencies: Department of Labor, Department of Public Health and Social Services, Guam Behavioral Health and Wellness Center, Department of Youth Affairs, and the Office of the Attorney General. Submitted herewith are copies of the programmatic and financial reports that the agency submitted to the various entities for the period from July 1 through September 30, 2013.

Please note that the current law does not require non-profits to submit reports directly to the Legislature and Public Auditor. However, we are providing such for your information and records.

For additional information or further clarification, please do not hesitate to contact me via telephone at 475-7101.

Mås Rikuetdo,

Mildred Q. Lujan  
Executive Director

## Attachment 1

### *Sanctuary, Incorporated of Guam AmeriCorps Program*

#### Reporting Agency

Department of Labor

Serve Guam! Commission

#### Reports

1. Quarterly financial expenditures and obligation
2. Program progress report



# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101  
Crisis Hotline (671)475-7100 • Fax (671)477-3117 • Email: [inquiries@sanctuaryguam.org](mailto:inquiries@sanctuaryguam.org)  
[www.sanctuaryguam.org](http://www.sanctuaryguam.org)

CONF

October 9, 2013

RECEIVED  
10/10/13 2:25PM

Ms. Doris M. Aguon  
Executive Director  
Serve Guam! Commission  
Guam Capital Investment Corporation  
414 West Soledad Avenue  
Hagatña, Guam 96932

Dear Ms. Aguon:

Attached for your review is the 3<sup>rd</sup> Quarter Federal Financial Report for Sanctuary, Incorporated AmeriCorps Program for quarter ending September 30, 2013 for Grant Year 2012-2013.

Should you have any questions or comments, please feel free to contact me at 475-7101, fax me at 477-3117, or email at [millielujan@sanctuaryguam.org](mailto:millielujan@sanctuaryguam.org).

Sincerely,

Mildred Lujan  
Executive Director  
Sanctuary, Incorporated

**FEDERAL FINANCIAL REPORT**  
(Follow form instructions)

1. Federal Agency and Organizational Element to Which Report is Submitted  <b>Corporation for National and Community Service</b>	2. Federal Grant or Other Identifying Number Assigned by Federal Agency  <b>10AC120075</b>	Page <b>1</b>	of <b>1</b>
--	--	------------------	----------------

3. Recipient Organization (Name and complete address including Zip code)  
**SANCTUARY, INCORPORATED - AYUDA PARA I KOMUNIDAT**

4a. DUNS Number <b>855025284</b>	4b. EIN <b>96-0002543</b>	5. Recipient Account Number or Identifying Number <b>11AFHGU0010009</b>	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
-------------------------------------	------------------------------	--	--	---

8. Project/Grant Period From: (Month, Day, Year) <b>1-Oct-12</b>	To: (Month, Day, Year) <b>31-Dec-13</b>	9. Reporting Period End Date (Month, Day, Year) <b>JULY 1, 2013 - SEPTEMBER 30, 2013</b>
---	--	---

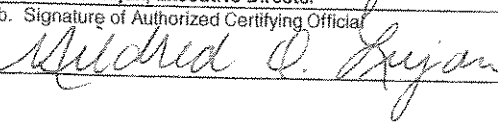
10. Transactions Cumulative  
(Use lines a-c for single or multiple grant reporting)

<b>Federal Cash</b>	
a. Cash Receipts	
b. Cash Disbursements	
c. Cash on Hand (line a minus b)	\$0.00
(Use lines d-o for single grant reporting)	
<b>Federal Expenditures and Unobligated Balance:</b>	
d. Total Federal funds authorized	
e. Federal share of expenditures	\$359,943.00
f. Federal share of unliquidated obligations	\$274,722.11
g. Total Federal share (sum of lines e and f)	\$0.00
h. Unobligated balance of Federal funds (line d minus g)	\$274,722.11
<b>Recipient Share:</b>	
i. Total recipient share required	
j. Recipient share of expenditures	\$170,478.00
k. Remaining recipient share to be provided (line i minus j)	\$43,614.22
<b>Program Income:</b>	
l. Total Federal program income earned	
m. Program income expended in accordance with the deduction alternative	\$0.00
n. Program income expended in accordance with the addition alternative	\$0.00
o. Unexpended program income (line l minus line m or line n)	\$0.00

11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
	N/A	N/A	N/A	N/A	N/A		0
g. Totals:							0

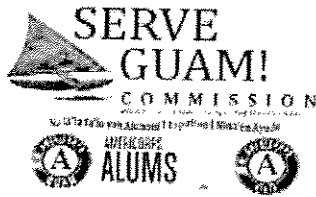
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official <b>Mildred Q. Lujan, Executive Director</b>	c. Telephone (Area code, number and extension) <b>(671) 475-7101</b>
b. Signature of Authorized Certifying Official 	d. Email address
	e. Date Report Submitted (Month, Day, Year) <b>9-Oct-13</b>
14. Agency use only:	

Standard Form 425  
OMB Approval Number: 0348-0061  
Expiration Date: 10/31/2011

**Paperwork Burden Statement**  
According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0060), Washington, DC 20503.



# REIMBURSEMENT REQUEST FORM

FORMULA GRANT

FROM: SANCTUARY, INCORPORATED  
 AC PROGRAM NAME: AYUDA PARA I KOMUNIDAT  
 ADDRESS: 406 MAI MAI ROAD  
 CHALAN PAGO, 96910

GRANT AWARD NUMBER: <b>11AFHGU0010009</b>	GRANT ID NUMBER: <b>12AC141703</b>	DOA VENDOR NUMBER: <b>S1456001</b>	DOA CONTRACT NUMBER: <b>C130600430</b>	EMPLOYER ID: <b>96-0002543</b>	DUNNS NUMBER: <b>855025284</b>
--	---------------------------------------	---------------------------------------	---	-----------------------------------	-----------------------------------

PROGRAM PERIOD: <b>2012-2013</b>	PERIOD CLAIMING FOR: <b>SEPTEMBER 2013</b>
-------------------------------------	---

REQUEST NUMBER: <b>2012-09</b>	FINAL CLAIM:	YES	NO
-----------------------------------	--------------	-----	----

FUNDS REQUESTED	\$ 23,783.08
GRANT AWARD	\$ 359,943.00
LESS: PREVIOUSLY REQUESTED:	\$ 250,939.03
SUB-TOTAL	\$ 109,003.97
LESS: AMOUNT OF THIS REPORT	\$( 23,783.08)
GRANT BALANCE:	\$ 85,220.89

*Certification: I certify to the best of my knowledge that this report is correct and that expenditures are approved and signed for purposes set forth and in the Grant award. I understand that failure to submit on time due to late and chronic reporting will result on one warning notice, suspension of contract and corrective actions to include possible withholding of payment.*

PROGRAM DIRECTOR: [Signature] DATE: 10/10/13  
 CERTIFYING OFFICER: [Signature] DATE: 10/10/2013

**SGC/ DOL USE ONLY – Reviewed against PERIODIC EXPENSE REPORT (PER):**

TIFFANY SAN NICOLAS SGC ADMINISTRATIVE AIDE (RECEIVING REPORTS: FISCAL & PROGRAM) HARD COPY/ ECOPY (DOL EMAIL)	DATE: 10/10/13 TIME: 2:25pm	CARMELITA O'BRIEN DOL ADMINISTRATIVE ASSISTANT (PER REIMBURSEMENT)	DATE: TIME:
DARREL WILKERSON SGC PROGRAM OFFICER (AC PROGRAM REPORTS) HARD COPY/ ECOPY (DOL EMAIL)	DATE: TIME:	DOA - HHS	DATE:

**SGC/ DOL – ASSURANCE & CERTIFICATION:**

DOL CERTIFYING OFFICER: \_\_\_\_\_ Date: \_\_\_\_\_  
 SGC EXECUTIVE DIRECTOR: Nellie Asanuma  
Doris Aguon Date: \_\_\_\_\_

NOS	CHECK MARK	REC'D BY	DESCRIPTION OF DOCUMENTS TO BE SUBMITTED
			SGC/ AC FISCAL & PROGRAM DOCUMENTS (ELECTONIC & HARD COPY) print & submit every 10 <sup>th</sup> of Month in program <i>dol email account</i> .
			<b>FISCAL GMR: MODULE C/ F/ H -</b> <input type="checkbox"/> Financial & Grants Management <input type="checkbox"/> Equipment Inventory – Close Out <input type="checkbox"/> Residual Supplies – Close Out
	✓	BA	<b>PERIODIC EXPENSE REPORT (PER):</b> CNCS: Due 10 <sup>th</sup> - Monthly & Supporting Documents; receipts, invoice, bank cancelled checks and/or bank stmts., (e.g. QuickBooks summary, EFT summary from bank)
	✓	BA	<b>PER MATCH: (MODULE J)</b> Due 10 <sup>th</sup> - Monthly & Supporting Documents; receipts, invoice, bank cancelled checks and/or bank stmts., (e.g. QuickBooks summary, EFT summary from bank)
			<b>BUDGET MODIFICATION</b> – 10% SGC approval
	✓	BA	<b>FFR (CNCs and GUAM LEGISLATURE</b> Submitted quarterly with attached organization letter)
			<b>A-133 (External Audit for all programs)</b> - submit eCopy
	✓	BA	<b>GUAM AMERICORPS PORTAL SYSTEM (GAPS) vs. eGRANTS</b> <input type="checkbox"/> Member Checklist (1 <sup>st</sup> Reimbursement) <input type="checkbox"/> Monthly Member Service Schedule (Satellites – Members site location) <input type="checkbox"/> Monthly Service Log (MSL's and 2 Volunteer Recruitment) <input type="checkbox"/> Member Time Log (w/member file) <input type="checkbox"/> Member Roster Summary <input type="checkbox"/> eGrants; within 3 days Enrollment/ Retention/ Exit Approval
<b>AMERICORPS PROGRAMS</b>			
			<input type="checkbox"/> Program No Cost Extension <input type="checkbox"/> Member Checklist <input type="checkbox"/> Program Management Checklist <input type="checkbox"/> Policies & Procedure <input type="checkbox"/> Provisions & CFR <input type="checkbox"/> Blue Print <input type="checkbox"/> Grants Management Review (GMR) <input type="checkbox"/> Financial & Grants Management <input type="checkbox"/> Impact & Accountability
<b>THEORY OF CHANGE (TOC) : PERFORMANCE MEASURES ( MONTHLY &amp; QUARTERLY ) –</b> Submit eCopy (Monthly & Quarterly) to program DOL acct			
	✓	BA	<input type="checkbox"/> (COMMUNITY NEED) <input type="checkbox"/> OUTPUT/ INTERVENTION <input type="checkbox"/> EVIDENCE (RESEARCH BASED) <input type="checkbox"/> INTERMEDIATE OUTCOME (MEETING GOALS & OBJECTIVES) <input type="checkbox"/> END OUTCOME (FINAL MEASUREMENT OF ATTITUDE, KNOWLEDGE, BEHAVIOR OR CONDITION – 12 MOS)
			<b>MONTHLY RISK ASSESSMENT: FISCAL &amp; PROGRAM</b> – (10 <sup>th</sup> of each month)
			<b>CLOSE OUT OF PROGRAMS</b> <input type="checkbox"/> Fiscal <input type="checkbox"/> Program
Comments/ Remarks:			



**SANCTUARY INCORPORATED - AYUDA PARA I KOMUNIDAT**

Section I	CNCS SHARE	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	PROGRAM TOTAL	CNCS BUDGET YTD BAL
<b>A Personnel</b>															
Program Director	23,223.00	2,858.24	3,036.88	3,215.52	2,411.64	2,411.64	1,607.76	1,607.76	1,607.76	1,607.76					
Program Coordinator	13,094.00	1,611.52	1,712.24	1,812.96	1,359.72	1,410.08	1,007.20	1,007.20	1,007.20	1,007.20				20,362.96	2,858.04
Accounting Asst II	14,248.00	1,972.80	2,192.00	2,192.00	1,644.00	1,644.00	1,096.00	1,096.00	1,096.00	1,096.00				11,435.32	1,158.08
Admin Asst	10,816.00	1,331.20	1,331.20	1,331.20	998.40	1,081.60	832.00	832.00	832.00	832.00				14,035.80	219.20
<b>Total - Personnel</b>	<b>61,381.00</b>	<b>7,773.76</b>	<b>8,272.32</b>	<b>8,551.68</b>	<b>6,413.76</b>	<b>6,547.32</b>	<b>4,542.96</b>	<b>4,542.96</b>	<b>4,542.96</b>	<b>4,542.96</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>55,730.68</b>	<b>5,650.32</b>
<b>B Fringe</b>															
FICA	4,696.00	594.69	632.83	654.20	490.65	500.87	347.54	347.54	347.54	347.54					
Health Insurance	2,700.00	474.40	0.00	355.80	355.80	355.80	366.00	366.00	91.50					4,261.40	432.00
Worker's Compensation	184.00	47.33	0.00	47.33	0.00	0.00	0.00	0.00	0.00					2,365.30	334.70
<b>Total - Fringe</b>	<b>7,580.00</b>	<b>1,116.42</b>	<b>632.83</b>	<b>1,057.33</b>	<b>846.45</b>	<b>856.67</b>	<b>713.54</b>	<b>713.54</b>	<b>439.04</b>	<b>347.54</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>9,116.66</b>	<b>89.34</b>
<b>S/Total (A/B)</b>	<b>68,961.00</b>	<b>8,890.18</b>	<b>8,905.15</b>	<b>9,609.01</b>	<b>7,260.21</b>	<b>7,403.99</b>	<b>5,256.50</b>	<b>5,256.50</b>	<b>4,982.00</b>	<b>4,890.50</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>6,723.36</b>	<b>856.64</b>
<b>C Staff Travel</b>															
National Volunteer Conf	3,950.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00					
MYSN	400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	3,550.00
Local Mileage	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	400.00
<b>S/Total - staff travel</b>	<b>4,350.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>4,350.00</b>
<b>C Member Travel</b>															
MYSN	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	4,350.00
Local Mileage	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
<b>S/Total - member travel</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>Total - travel</b>	<b>4,350.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>4,350.00</b>
<b>D Equipment</b>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
<b>E Supplies</b>															
Program Supplies / Materials	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
Office Supplies	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
Gasoline	1,050.00	0.00	106.99	111.92	69.00	191.21	138.21	110.94	148.65	0.00				0.00	0.00
Service Gears	3,520.00	0.00	0.00	0.00	0.00	2,353.00	0.00	0.00	49.90	0.00				875.92	173.08
<b>Total -Supplies</b>	<b>4,570.00</b>	<b>0.00</b>	<b>106.99</b>	<b>111.92</b>	<b>69.00</b>	<b>2,544.21</b>	<b>138.21</b>	<b>110.94</b>	<b>198.55</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,407.90</b>	<b>1,317.10</b>
<b>F Contractual</b>															
Xerox Copier	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
Internet Service	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
Vehicle Lease	4,700.00	0.00	0.00	625.00	625.00	625.00	625.00	437.00	0.00	0.00				0.00	0.00
Telephone	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				2,437.00	1,763.00
Cell Phone	2,300.00	0.00	0.00	159.27	398.56	186.00	185.70	75.00	221.43	0.00				0.00	0.00
<b>Total -Contractual</b>	<b>7,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>784.27</b>	<b>1,023.56</b>	<b>811.00</b>	<b>810.70</b>	<b>512.03</b>	<b>221.43</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>4,162.99</b>	<b>2,837.01</b>





SANCTUARY INCORPORATED - AYUDA PARA I KOMUNIDAT

Section I	PROGRAM SHARE	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	PROGRAM TOTAL	CNCS BUDGET YTD BAL
<b>A Personnel</b>															
Program Director	23,223.00	0.00	0.00	0.00	803.88	2,411.64	1,607.76	1,607.76	1,607.76	1,607.76				9,646.56	13,576.44
Program Coordinator	13,093.00	0.00	0.00	0.00	453.24	1,410.08	1,007.20	1,007.20	1,007.20	1,007.20				5,892.12	7,200.88
Accounting Asst II	14,248.00	0.00	0.00	0.00	548.00	1,644.00	1,096.00	1,096.00	1,096.00	1,096.00				6,576.00	7,672.00
Admin Asst	10,816.00	0.00	0.00	0.00	332.80	1,081.60	832.00	832.00	832.00	832.00				4,742.40	6,073.60
<b>Total - Personnel</b>	<b>61,380.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,137.92</b>	<b>6,547.32</b>	<b>4,542.96</b>	<b>4,542.96</b>	<b>4,542.96</b>	<b>4,542.96</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>26,857.08</b>	<b>34,522.92</b>
<b>B Fringe</b>															
FICA	4,695.00	0.00	0.00	0.00	163.55	500.87	347.54	347.54	347.54	347.54				2,054.57	2,640.43
Health Insurance	8,100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	274.50					274.50	7,825.50
Worker's Compensation	184.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00						0.00	184.00
<b>Total - Fringe</b>	<b>12,979.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>163.55</b>	<b>500.87</b>	<b>347.54</b>	<b>347.54</b>	<b>622.04</b>	<b>347.54</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,329.07</b>	<b>10,649.93</b>
<b>S/Total (A/B)</b>	<b>74,359.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,301.47</b>	<b>7,048.19</b>	<b>4,890.50</b>	<b>4,890.50</b>	<b>5,165.00</b>	<b>4,890.50</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>29,186.15</b>	<b>45,172.85</b>
<b>C Staff Travel</b>															
National Volunteer Conf	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
MYSN	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
Local Mileage	612.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	612.00
<b>S/Total - staff travel</b>	<b>612.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>612.00</b>
<b>C Member Travel</b>															
MYSN	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
Local Mileage	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
<b>S/Total - member travel</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>S/Total - travel</b>	<b>612.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>612.00</b>
<b>D Equipment</b>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	612.00
<b>E Supplies:</b>														0.00	0.00
Program Supplies / Materials	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
Office Supplies	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
Gasoline	150.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	150.00
Service Gears	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	0.00
<b>S/Total -Supplies</b>	<b>150.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>150.00</b>
<b>F Contractual:</b>														0.00	150.00
Xerox Copier	1,200.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	1,200.00
Internet Service	1,500.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	1,500.00
Vehicle Lease	3,100.00	0.00	0.00	0.00	0.00	0.00	0.00	188.00	0.00	0.00				188.00	2,912.00
Telephone	840.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				0.00	840.00
Cell Phone	4,900.00	0.00	0.00	0.00	0.00	0.00	0.00	159.43	0.00	0.00				159.43	4,740.57
<b>S/Total -Contractual</b>	<b>11,540.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>347.43</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>347.43</b>	<b>11,192.57</b>

<b>G Staff Training</b>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
<b>Member Training:</b>																0.00
C.E.R.T	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
What is National Service / Whos's Serve Guam! Commission	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Fraud, Waste and Abuse	400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Active Citizen 101	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	400.00
Life After AmeriCorps	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SGC/GDOL/AmeriCorps Alums Resume & Job Application	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Conflict Resolution	400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Anger Management	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	400.00
Team Building	1,200.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Communication	400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,200.00
<b>S/Total - Training</b>	<b>2,400.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>400.00</b>
<b>H Evaluation</b>	<b>600.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,400.00</b>
<b>I Other Program Operating Costs</b>																0.00
Police / Court Clearances	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
NSOPR	440.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FBI Check	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Drug Testing	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CPR / 1st Aid Training	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Crisis Prevention Intervention	600.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Building Rental	14,400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	600.00
Utilities (power/water/trash)	18,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,400.00
Newsletter/Publication Printing	250.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,000.00
Advertisement (banner)	825.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	250.00
<b>S/Total - OPOC</b>	<b>34,515.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>825.00</b>
<b>Section I - Total</b>	<b>124,176.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,301.47</b>	<b>7,048.19</b>	<b>4,890.50</b>	<b>5,237.93</b>	<b>5,165.00</b>	<b>4,890.50</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>34,515.00</b>
	<b>100.00%</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>23.78%</b>
<b>Section II</b>																<b>76.22%</b>
<b>A Living Allowance</b>																
Half Time	43,000.00	0.00	0.00	0.00	1,200.00	3,540.00	2,460.00	2,370.00	1,560.00	1,950.00	0.00	0.00	0.00	0.00	0.00	0.00
<b>S/Total</b>	<b>43,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1,200.00</b>	<b>3,540.00</b>	<b>2,460.00</b>	<b>2,370.00</b>	<b>1,560.00</b>	<b>1,950.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>13,080.00</b>
<b>B Member support Cost</b>																
FICA	3,290.00	0.00	0.00	0.00	91.80	270.81	188.19	181.31	119.34	149.18	0.00	0.00	0.00	0.00	0.00	0.00
Worker's Compensation	13.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,000.62
Health	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,289.38
<b>S/Total</b>	<b>3,303.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>91.80</b>	<b>270.81</b>	<b>188.19</b>	<b>181.31</b>	<b>119.34</b>	<b>149.18</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>13,080.62</b>
<b>Section II - Total</b>	<b>46,303.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1,291.80</b>	<b>3,810.81</b>	<b>2,648.19</b>	<b>2,551.31</b>	<b>1,679.34</b>	<b>2,099.18</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>27,302.38</b>
	<b>100.00%</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>30.41%</b>
<b>Section III</b>																<b>69.59%</b>
<b>A Corporation Fixed Percentage</b>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
<b>S/ Total</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>B Federally Approved Indirect Cost</b>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
<b>S/ Total</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>Section III - Total</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>
<b>BUDET TOTAL</b>	<b>170,478.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>3,593.27</b>	<b>10,859.00</b>	<b>7,538.69</b>	<b>7,789.24</b>	<b>6,844.34</b>	<b>6,989.68</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>43,614.22</b>
	<b>100.00%</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>25.58%</b>
<b>PER Total:</b>		<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>3,593.27</b>	<b>10,859.00</b>	<b>7,538.69</b>	<b>7,789.24</b>	<b>6,844.34</b>	<b>6,989.68</b>						<b>74.42%</b>

10/10/13 2:25pm  
RECEIVED *BA*

PY 2012-13 4th Quarter Report July - September 2013  
PROGRAM NAME: *Ayuda Para i Komunitad (Help for the Community)*  
GRANT NUMBER: 11AFHGU0010009  
PROGRAM DIRECTOR'S NAME: George L. Salas

# AmeriCorps Monthly Reporting System

Disaster Services | Economic Opportunity | Education | Environmental Stewardship  
| Healthy Futures | Veterans and Military Families | Capacity Building



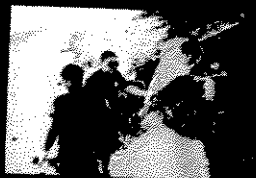
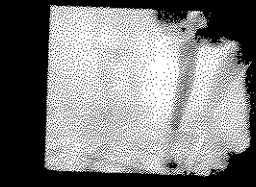
G  
E  
T



T  
I  
N  
G

T  
H  
I  
N  
G  
S

D  
O  
N  
E



10/10/13 2:25pm



Total number of member hours contributed to AmeriCorps projects

October	November	December	January	February	March	April	May
			0	3081	3783	3547.75	3940.25
June	July	Aug	September				
4217.5	4088.25	3875.5	2684.25				

29217.5

Total number of volunteer hours contributed to AmeriCorps projects

October	November	December	January	February	March	April	May
			45	40	282	168.5	64
June	July	Aug	September	October	Nov	December	
192	322	472	397				

Total number of Community Volunteers to Date:

449

Capacity Building Result Statement: Goal was to bring in 960 community volunteers for the program year.

1982.5

	Total Number of MY assigned to the project	Met	Unmet	Ongoing	Actual Number of MSY assigned to the project			
Education	5			X	5			
Healthy Futures	5			X	5			
Economic Opportunity	5			X	5			
Environmental Stewardship	5			X	5			
Total number of MSY	20	X			20			

This replaces module I/outputs/inputs/performance measurements/progress report

**Measure H4: Number of clients participating in health education programs.**

Sanctuary, Inc. AmeriCorps Program is facilitating / Co-facilitating the numerous Supportive Counseling Groups (SCG) that Sanctuary provides to youth and adults. These groups include Youth Anger Management, numerous Drug and Alcohol groups, Self-Esteem, and other deemed appropriate groups. For the adults groups Sanctuary provides Adult Anger Management, Parenting Skills class and Parents Support Group (PSG). Members also mentor/assist at the Sanctuary three residential shelters located with in Sanctuary grounds, the shelter include the Co-Ed Emergency shelter, Transitional Living Program (TLP), and Sagan Na' Homio (A place to heal). In addition the Sanctuary AmeriCorps Members mentor and assist at the three DYA Resource Centers in the North, Central, and South and soon to include the Youth Correctional Facility at DYA.

National Performance Measure: Healthy Futures:

Measure H4: Number of clients participating in health education programs.

Intervention: Members will mentor/assist with individuals or beneficiaries and co-facilitate supportive counseling groups (SGC) in health promotion measures, maintain healthy life style, and habits to improve health status, to exemplify a holistic lifestyle for positive health benefits.

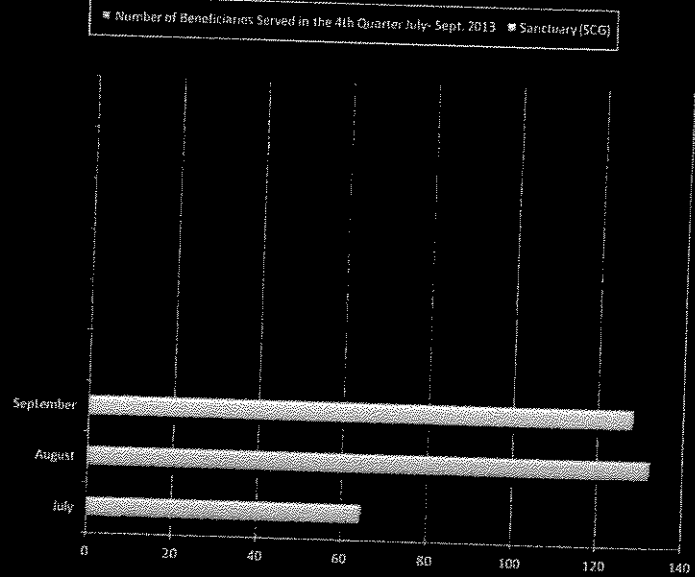
Describe how you collected and analyzed the data:

The Sanctuary AmeriCorps Program conducts and collects Registration forms, Pre and Post Questionnaire and Surveys, Session Evaluation, Satisfaction Surveys (Beginning, Mid, and End Point) to the participants in the various groups that Sanctuary provides. The pre-survey is given on the first day the participant(s) starts, then mid-survey is given on the fifth week, and lastly the post-survey is given on the tenth week the participant attended. Each participant has a file for record keeping. All documents are placed in the participants files and are reviewed to see if there was any changes or improvements during the ten week duration. All groups meet at a minimum of 1.5 hours per week. Mentoring and Assisting with homework at the residential services/ shelters takes place Monday through Saturday. Mentoring and Assisting with homework at the Resource Centers takes place Monday through Thursday.

Describe the level of success attained for this instrument:

Our goal for PY 12-13, is to have 800 beneficiaries benefit through the community based programs that Sanctuary Inc. provides to the community, by the end of the program year.

Sanctuary (SCG)	Number of Beneficiaries Served in the 4th Quarter July Sept. 2013
July	65
August	133
September	129
<b>Total</b>	<b>327</b>
<b>Target:</b>	<b>800</b>
<b>Intermediate Outcome</b>	<b>95.88%</b>



Actual to Date: Total number of Beneficiaries

767

October	November	December	January	February	March	April	May
			54	79	43	84	114
June	July	Aug	September				
	66	65	133	129			

**Result Statement:**

The Sanctuary AmeriCorps program for PY 12-13 has a targeted goal of 800 Beneficiaries. According to the data, results indicated that for the Fourth quarter from July - September 2013, the AmeriCorps Program is on track to meet the target goal of 800 Beneficiaries.



Total number of member hours contributed to AmeriCorps projects

October	November	December	January	February	March	April	May
			0	3081	3783	3547.8	3940.25
June	July	Aug	September				
4217.5	4088.25	3875.5	2684.25				

29217.5

Total number of volunteer hours contributed to AmeriCorps projects

October	November	December	January	February	March	April	May
			45	40	282	168.5	64
June	July	Aug	September	October	Nov	December	
192	322	472	397				

1982.5

Total number of Community Volunteers to Date: 449  
 Capacity Building Result Statement: Goal was to bring in 960 community volunteers for the program year.

	Total Number of MY assigned to the project	Met	Unmet	Ongoing	Actual Number of MSY assigned to the project			
Education	5			X	5			
Healthy Futures	5			X	5			
Economic Opportunity	5			X	5			
Environmental Stewardship	5			X	5			
Total number of MSY	20	X			20			

This replaces module L/outputs/inputs/performance measurements/progress report



**Measure O14: Number of National Service Participants who have their high school diploma or equivalent but have not completed a college degree prior to their term of service**

Sanctuary AmeriCorps Members will acquire knowledge, life skills, certifications, and attributes to employment skills, improve their social economic standing in the community through higher education.

National Performance Measure: Opportunity:

Measure O14: Number of National Service Participants who have their high school diploma or equivalent but have not completed a college degree prior to their term of service.  
 Measure O17: Number of members that complete a college course within one year after finishing a CNCS-supported program.  
 Intervention: Members help each other out via peer to peer with homework to achieve a post secondary higher education subject.

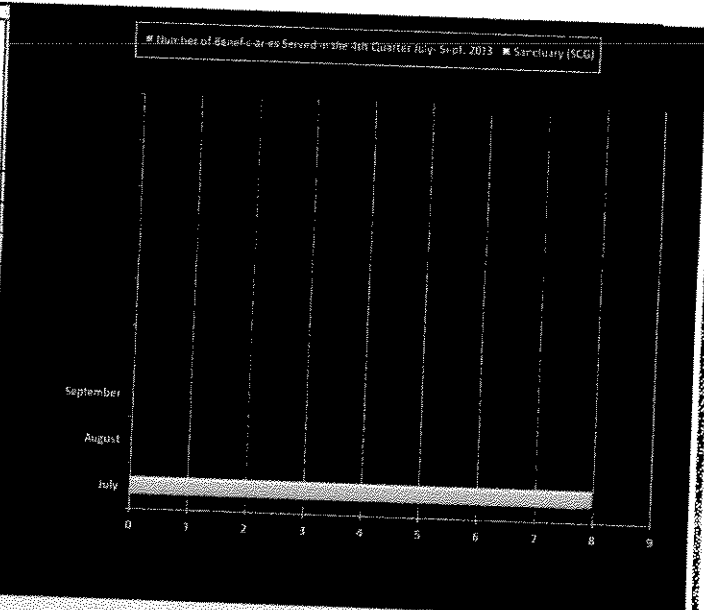
Describe how you collected and analyzed the data:

Sanctuary AmeriCorps Members who seek for higher education, turn in their school/class schedule. Members attend Monthly Section Meetings and Trainings. This is how we are able to collect data towards how the program is helping the members. Through Mid and Final Evaluation for the members. A Suggestion box is located at the AmeriCorps Office. The utilization of Supervision Feedback at every monthly Section Meetings. Members also Personal and Professional Plan, Personal and Professional Development.

Describe the level of success attained for this instrument:

80% of the total MSY will have completed a college course. The Sanctuary AmeriCorps Program will work towards meeting its ideal percentage of success rate of 80%

Sanctuary (SCG)	Number of Beneficiaries Served in the 4th Quarter July- Sept. 2013
July	8
August	0
September	0
Total	8
Target:	36
Intermediate Outcome	122.22%



Actual to Date: Total number of Beneficiaries

October	November	December	January	February	March	April	May
			0	0	0	0	28
June	July	Aug	September				
8	8	0					

Result Statement:  
 A total of eight Members have completed their school term or semester for the Fourth quarter from July - September 2013.

44

Total number of member hours contributed to AmeriCorps projects

October	November	December	January	February	March	April	May
			0	3081	3783	3547.8	3940.25
June	July	Aug	September				
4217.5	4088.25	3875.5	2684.25				

29217.5

Total number of volunteer hours contributed to AmeriCorps projects	October	November	December	January	February	March	April	May
	June	July	Aug	September	October	Nov	December	
	192	322	472	397				
	Total number of Community Volunteers to Date: 449							
	Capacity Building Result Statement: Goal was to bring in 960 community volunteers for the program year.							

1982.5

	Total Number of MY assigned to the project	Met	Unmet	Ongoing	Actual Number of MSY assigned to the project			
Education	5			X	5			
Healthy Futures	5			X	5			
Economic Opportunity	5			X	5			
Environmental Stewardship	5			X	5			
Total number of MSY	20	X			20			

This replaces module L/outputs/inputs/performance measurements/progress report

**Measure G3-3.1: Number of community volunteers recruited by CNCS-supported organizations or national service participants**

Due to financial and economic hardship, our organization relies on the volunteers to assist with community services offered by pro bono's and community volunteers in the implementation of organizational readiness; risk management, training of volunteers, support, supervise, retain, motivate and recognize volunteerism to achieve the outcomes of the organization.

National Performance Measure:

**Capacity Building:**

Measure G3-3.1: Number of community volunteers recruited by CNCS-supported organizations or national service participants.  
Intervention: During Service Events and/or Environmental Stewardship members would bring in two community volunteers to assist with projects.

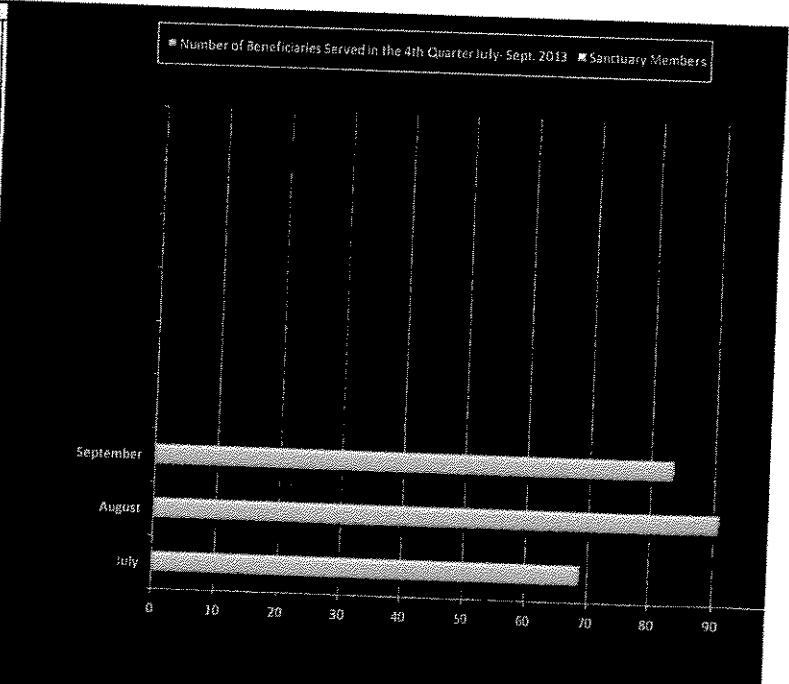
Describe how you collected and analyzed the data:

Members who bring their community volunteers would have them sign in into the community volunteer sign in sheet. The community members would then be put in the Community volunteers listing via electronically.

Describe the level of success attained for this instrument:

Our goal or target is to have a total of 960 community volunteers by the end of the PY 12-13.

Sanctuary Members	Number of Beneficiaries Served in the 4th Quarter July-Sept. 2013
July	69
August	91
September	84
<b>Total</b>	<b>244</b>
<b>Target:</b>	<b>960</b>
<b>Intermediate Outcome</b>	<b>46.77%</b>



Actual to Date: Total number of Volunteers who have engaged in Program Projects

449

October	November	December	January	February	March	April	May
			15	10	60	63	10
June	July	Aug	September				
47	69	91	84				

**Result Statement:**  
Members are mindful that they need to be engaging their Volunteers monthly with the AmeriCorps Program projects. As indicated above, for the Fourth quarter from July - September 2013, AmeriCorps Members engaged Volunteers in special projects. The Members will continue to make every effort to improving their Volunteer Recruitment/ Capacity Building engagement.

Total number of member hours contributed to AmeriCorps projects

October	November	December	January	February	March	April	May
			0	3081	3783	3547.75	3940.25
June	July	Aug	September				
4217.5	4088.25	3875.5	2684.25				

29217.5

Total number of volunteer hours contributed to AmeriCorps projects

October	November	December	January	February	March	April	May
			45	40	282	168.5	64
June	July	Aug	September	October	Nov	December	
192	322	472	397				

1982.5

Total number of Community Volunteers to Date: 449

Capacity Building Result Statement: Goal was to bring in 960 community volunteers for the program year.

	Total Number of MY assigned to the project	Met	Unmet	Ongoing	Actual Number of MSY assigned to the project			
Education	5			X	5			
Healthy Futures	5			X	5			
Economic Opportunity	5			X	5			
Environmental Stewardship	5			X	5			
Total number of MSY	20	X			20			

This replaces module L/output/inputs/performance measurements/progress report





# MEMBER DEMOGRAPHICS PY 12-13



MEMBER DEMOGRAPHICS		# of Active Members	# Members exited with full award	# Members exited with partial award	# Members exited with no award	# of individuals who applied to be AmeriCorps members:	# of volunteers recruited, coordinated, or supported by your programs:	Disadvantaged children and youth - # serving as leveraged volunteers:	College students - # of leveraged volunteers enrolled in a degree-seeking program:	Baby Boomers - # of individuals born between 1946 and 1964 who serve as volunteers:	AmeriCorps members - # who participated in disaster services projects:	AmeriCorps members - # who in disaster preparedness and response:
2013	January	0	0	0	0	8	15	0	0	0	0	0
2013	February	40	0	0	3	3	10	0	27	0	0	26
2013	March	40	0	0	0	1	60	0	27	0	0	26
2013	April	40	0	0	1	0	63	0	27	0	0	26
2013	May	40	0	0	1	0	10	0	30	0	0	26
2013	June	40	0	0	0	0	47	0	8	0	0	40
2013	July	40	0	0	0	0	69	0	8	0	0	40
2013	August	40	0	0	0	1	91	0	31	0	0	40
2013	September	39	0	0	1	1	84	0	31	0	0	40
2013	October											
2013	November											
2013	December											
<b>Total Number</b>			0	0	6	3	20	449				

..&K  
 .00 Capacity building measurement



# Program Training PY 12-13



Date of Training	Training Name	Member Recruitment	Member Development	Volunteer Development	Community Leveraging	Community Engagement	Resource Development	Performance Measurement	Evaluation	Financial Management	Grants/My AmeriCorps	Other training (if PD meeting list names)	Other Training: Please specify training organization and trainer
2-Feb	Pre-Service Training	x	x	x	x	x	x	x	x	x			
20-Feb	PD Meeting	x	x	x	x	x	x	x	x	x			
22-Feb	Pre-Service Training	x	x	x	x	x	x	x	x	x		PD/AC/PC	
22-Feb	Team Building	x	x	x	x	x	x	x	x	x			
1-Mar	Section Meeting	x	x	x	x	x	x	x	x	x			
1-Mar	Disability Inclusion Training	x	x	x	x	x	x	x	x	x			
8-Mar	PACLAS Training	x	x	x	x	x	x	x	x	x		Bernie Grajek	Guma Mami ED
9-Mar	Induction Ceremony	x	x	x	x	x	x	x	x	x			
9-Mar	Disaster Preparedness	x	x	x	x	x	x	x	x	x			
15-Mar	Crisis Prevention Intervention	x	x	x	x	x	x	x	x	x		David Paredo	American Red Cross
22-Mar	Team Building	x	x	x	x	x	x	x	x	x		Pete Cruz	Department of Mental Health
5-Apr	Section Meeting	x	x	x	x	x	x	x	x	x			
12-Apr	PACLAS Training	x	x	x	x	x	x	x	x	x			
16-Apr	RFP Training	x	x	x	x	x	x	x	x	x			
17-Apr	RFP Training	x	x	x	x	x	x	x	x	x			
18-Apr	PD Meeting	x	x	x	x	x	x	x	x	x			
10-May	Pre-Service Training	x	x	x	x	x	x	x	x	x			
10-May	Section Meeting	x	x	x	x	x	x	x	x	x			AmeriCorps Staff
	Effectice Communication Training	x	x	x	x	x	x	x	x	x			AmeriCorps Staff
10-May		x	x	x	x	x	x	x	x	x			AmeriCorps Members - Christian Camacho, Vince Carbuillo, Alexia Cruz
14-May	T/TA with Serve Guam Staff	x	x	x	x	x	x	x	x	x			Ms. Doris Aguon, Mr. Darrel Wilkerson
21-May	T/TA with Serve Guam Staff	x	x	x	x	x	x	x	x	x			Ms. Doris Aguon, Mr. Darrel Wilkerson
	I Am A Woman	x	x	x	x	x	x	x	x	x			Office of Minority Health/ Guam Department of Public Health & Social Service
24-May		x	x	x	x	x	x	x	x	x			Portia Dawn Cruz
29-May	1st Aid & CPR	x	x	x	x	x	x	x	x	x			AmeriCorps Members - Andria Cruz, Samuel Rayo, Kioni Ahegue and Rosannie Sablan.
	Team Building	x	x	x	x	x	x	x	x	x			Homeland Security
31-May		x	x	x	x	x	x	x	x	x			Homeland Security
1-Jun	CERT Training	x	x	x	x	x	x	x	x	x			AmeriCorps Staff
8-Jun	CERT Training	x	x	x	x	x	x	x	x	x			Mark Mesngon and Alex Cabrera
7-Jun	Section Meeting	x	x	x	x	x	x	x	x	x			
11-Jun	1st Aid & CPR	x	x	x	x	x	x	x	x	x			

14-Jun	Team Building	X	X	X	X	X	X	X	X	X	AmeriCorps Staff
19-Jun	PD Meeting / T/TA w/ Serve Guam	X	X	X	X	X	X	X	X	X	AmeriCorps Staff and Serve Guam
21-Jun	1st Aid & CPR	X	X	X	X	X	X	X	X	X	Mark Mesngon and Alex Cabrera
22-Jun	Mid-Year Retreat	X	X	X	X	X	X	X	X	X	AmeriCorps Programs
5-Jul	Section Meeting	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Staff
17-Jul	PD Meeting	X	X	X	X	X	X	X	X	X	Bernie Grajeck Program Director Guma'Mami
	Disability Website Training	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Staff
18-Jul	Breaking the Ice workshop	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Program Coordinator
23-Jul	Grants Mgmt. Workshop	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Program Director
25-Jul	2013 Govt. Compliance for Non-Profits	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Program Director
	Basic Live-Fire Course	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Staff
25-Jul	Team Building	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Staff
2-Aug	Section Meeting	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Staff
21-Aug	PD Meeting	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Staff
31-Aug	5th Annual Guam Volunteer Conference	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Staff
6-Sep	Section Meeting	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Staff
11-Sep	PD Meeting	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Staff
13-Sep	DPHSS: Healthy Fair	X	X	X	X	X	X	X	X	X	Program Director
16-Sep	Crisis Prevention Intervention	X	X	X	X	X	X	X	X	X	AmeriCorps Members (2)
21-Sep	17th Annual Too Cool To Do Drugs Conference	X	X	X	X	X	X	X	X	X	Sanctuary AmeriCorps Staff
25-Sep	PY13-14 Budget Training	X	X	X	X	X	X	X	X	X	Program Director





# PY 2012-2013 AC Member / Staff Training & Service Projects



ALUMNS



DATE	POC	AC Member/ Staff Training & Service Projects	# of Members Present	# of community Volunteers Present	# of Staff Present	SGC Staff Present
------	-----	--	----------------------	-----------------------------------	--------------------	-------------------

January						
16-Jan	Serve Guam	Program Director's Meeting	0	0	4	3
21-Jan	Serve Guam	Martin Luther King Day	0	15	4	4

February						
2-Feb	Sanctuary	Pre-Service Training @ GCIC 3rd Floor	38	0	4	0
7-Feb	Sanctuary	General Staff Meeting @ Sanctuary	0	0	4	0
9-Feb	Sanctuary	Environmental Stewardship @ Old Kaizer Park Dededo	24	10	2	4
20-Feb	Serve Guam	Program Director's Meeting @ GCIC	0	0	3	3
21-Feb	Sanctuary	General Staff Meeting @ Sanctuary	0	0	4	0
22-Feb	Sanctuary	Pre-Service Training @ Sanctuary CR1	6	0	3	0
22-Feb	Sanctuary	AmeriCorps Team Building @ Sanctuary	37	0	4	0

March						
1-Mar	Sanctuary	AmeriCorps Section Meeting @ Sanctuary	39	0	4	0
1-Mar	Sanctuary	Disability Inclusion Training @ Sanctuary	39	0	4	0
7-Mar	Sanctuary	General Staff Meeting @ Sanctuary	0	0	4	0
8-Mar	Sanctuary	Practical Applications of Culturally & Linguistically Appropriate Services	0	0	1	0
9-Mar	Serve Guam	Induction Ceremony @ U.O.G.	39	0	4	4
14-Mar	Serve Guam	Easter Egg Hunt "Children with Disabilities"	10	22	1	3
15-Mar	Sanctuary	Crisis Prevention Institute Training	13	0	0	0
16-Mar	Sanctuary	Payless "Kick the Fat 5k" @ Hagaha	13	10	2	2
20-Mar	Serve Guam	Program Director's Meeting	0	0	3	3
21-Mar	Sanctuary	General Staff Meeting @ Sanctuary	0	0	4	0
22-Mar	Sanctuary	AmeriCorps Team Building @ U.O.G.	38	0	4	0
23-Mar	Sanctuary	Guam Special Olympics @ Okkodo	35	27	3	3
27-Mar	Sanctuary	Tour the Youth Correctional Facility @ DYA	20	0	2	0
28-Mar	Sanctuary	Tour the Youth Correctional Facility @ DYA	20	0	3	0
March 1-31	Sanctuary	Volunteer for Supportive Counseling Groups	0	1	1	0

April						
5-Apr	Sanctuary	AmeriCorps Section Meeting @ Sanctuary	37	0	4	0
12-Apr	Sanctuary	Practical Applications of Culturally & Linguistically Appropriate Services @ The Marriot	0	0	2	0
12-Apr	Sanctuary	Youth Festival Wave @ Micronesian Mall	34	6	4	0
13-Apr	Serve Guam	Environmental Stewardship @ Yona	33	8	3	2
16-Apr	Serve Guam	RFP Training @ Serve Guam	0	0	2	3
17-Apr	Serve Guam	RFP Training @ Serve Guam	0	0	1	0
17-Apr	Sanctuary	Care Packaging for Guam Homeless Coalition Passport to Services	12	0	3	3
18-Apr	Sanctuary	General Staff Meeting @ Sanctuary	0	0	1	0
18-Apr	Serve Guam	Program Directors Meeting @ Serve Guam	0	0	3	0
19-Apr	Sanctuary	Passport to Services Homeless Coalition @ Agana Shopping Center	16	0	1	0
21-27 Apr	All Programs	Youth Festival Wave @ Bank of Hawaii	32	5	3	1
23-Apr	Sanctuary	National Volunteer Week	0	0	0	0
26-Apr	Sanctuary	AmeriCorps Cares @ Guam Memorial Hospital	13	0	2	0
27-Apr	Sanctuary	Youth Festival Wave @ Agat Inn on the Bay	37	2	4	0
27-Apr	Sanctuary	3rd Annual Youth Festival at Sagan Bislaia Agat	37	42	4	3

May						
10-May	Sanctuary	Pre-Service Training	2	0	3	0
10-May	Sanctuary	AmeriCorps Section Meeting @ Sanctuary	36	0	3	0
10-May	Sanctuary	Effective Communication Training	36	0	3	0
11-May	Sanctuary	Environmental Stewardship @ Old Kaizer Park Dededo	36	5	2	3
13-May	Sanctuary	Initial Dialogue for YCF (Program Coordinator)	0	0	1	0
14-May	Serve Guam	T/T/A with Serve Guam Staff	0	0	3	3
21-May	Serve Guam	T/T/A with Serve Guam Staff	0	0	3	3
24-May	Sanctuary	I Am A Woman (Accountant Assistant)	0	0	3	3
29-May	Sanctuary	1st Aid & CPR Refresher Course	0	0	1	0
31-May	Sanctuary	Team Building at the Park	8	0	1	0


June						
1-Jun	Sanctuary	CERT Training	15	0	2	1
7-Jun	Sanctuary	Section Meeting	39	0	3	0
8-Jun	Sanctuary	CERT Training	15	0	2	1
8-Jun	Sanctuary	Environmental Stewardship @ Old Kaizer Park Dededo	21	28	1	2





# GREAT STORY

GRANT YEAR: PY 2012-2013  
PROGRAM NAME: Sanctuary, Inc. Ayuda Para I Komunitad (Help For The Community)  
GRANT NUMBER: 11AFHGU0010009


GRANT YEAR:	2012 - 2013
PROGRAM NAME:	Sanctuary, Inc. Ayuda Para I Komunitad (Help For The Community)
ON LINE SUMMARY:	Parenting Skills Class / Parent Support Group (PSG)
WHEN IT HAPPENED:	4-Sep-13
WHAT HAPPENED:	<p>Sanctuary AmeriCorps Members and Volunteers Co-facilitating the Parenting Skills / Parent Support Group at Sanctuary. Facilitator is George L. Salas.</p> 

# GREAT STORY

GRANT YEAR: PY 2012-2013

PROGRAM NAME: Sanctuary, Inc. *Ayuda Para I Komunidad* (Help For The Community)

GRANT NUMBER: 11AFHG00010009


GRANT YEAR:	2012 - 2013
PROGRAM NAME:	Sanctuary, Inc. <i>Ayuda Para I Komunidad</i> (Help For The Community)
ON LINE SUMMARY:	17th Annual "Too Cool To Do Drugs" Conference
WHEN IT HAPPENED:	21-Sep-13
WHAT HAPPENED:	AmeriCorps Members present on Effective Communication with the Youth during the 17th Annual "Too Cool To Do Drugs" Conference at the Marriott Hotel.
	

# GREAT STORY

GRANT YEAR: PY 2012-2013

PROGRAM NAME: Sanctuary, Inc. Ayuda Para I Komunidad (Help For The Community)

GRANT NUMBER: 11AFHGU0010009

GRANT YEAR:	2012 - 2013
PROGRAM NAME:	Sanctuary, Inc. Ayuda Para I Komunidad (Help For The Community)
ON LINE SUMMARY:	9-11 National Preparedness Month (NPM) Grand Finale
WHEN IT HAPPENED:	29-Sep-13
WHAT HAPPENED:	AmeriCorps Members demonstrate to the general public on how to properly transport injured persons during a time of disaster.
	

**Attachment 2**

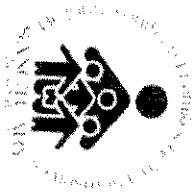
***Sanctuary, Incorporated of Guam  
Foster Care Program***

Reporting Agency

Department of Public Health and Social Services

Reports

1. List of expenditures for services and equipment \$5,000 or greater
2. Quarterly financial expenditures and obligation
3. Program progress report



# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 Main/Mai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101  
Crisis Hotline (671)475-7100 • Fax (671)477-3117 • Email: [sanctuar@iic.net](mailto:sanctuar@iic.net)  
[www.sanctuaryguam.org](http://www.sanctuaryguam.org)

CGI

October 14, 2013

Mr. James Gillian  
Director

Department of Public Health and Social Services  
123 Chalan Kareta Route 10  
Mangilao, Guam 96913

Dear Mr. Gillian:

The information listed below is for the Foster Care Program for the 4th quarter of Fiscal Year 2013 from July 1, 2013 – September 30, 2013.

We have listed all expenditures for services and equipment that were \$5,000 or greater.

Services	-0-
Equipment	-0-
Inventory Property	-0-

Please let us know if you have any questions.

Sincerely,

  
Michael D. Lujan  
Executive Director

Executive Director



**Non Profit Organization Receiving Appropriations from Government of Guam**  
**Pursuant to P.L. 31-77 (Sanctuary, Incorporated)**  
**FY 2013 (July 1, 2013 - September 30, 2013)**  
**4th Quarter Expenditure Report**  
**Department of Public Health and Social Services**  
**Foster Care**

Fund	Contract	Object Classification	Expenditure
General	Amount		
	\$ 30,000	Salary	\$ 1,427
		Benefits	719
		Travel	-
		Contractual	250
		Supplies & Materials	-
		Equipment	-
		Utilities	468
		Miscellaneous	-
		<b>Grand Total</b>	<b>\$ 2,865</b>

I CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF THE  
 EXPENDITURES FOR FISCAL YEAR 2013 FOR THE PROJECT ABOVE.

SIGNATURE OF AUTHORIZED OFFICIAL:

  
 MILDRED Q. LUJAN  
 EXECUTIVE DIRECTOR

DATE: 10/14/2013



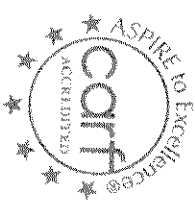
# SANCTUARY, INCORPORATED

*"Helping Youth and Families Help Themselves" since 1971*

Address: 406 Mai Mai Rd., Chalan Pago, Guam 96910

\* Tel: 475-7101 \* Fax: 477-3117 \* Crisis Hotline: 475-7100

Website: [www.sanctuaryguam.org](http://www.sanctuaryguam.org) \* E-mail: [inquiries@sanctuaryguam.org](mailto:inquiries@sanctuaryguam.org)



October 15, 2013

To: James Gillan  
Director  
Bureau of Social Service, Division of Public Health Welfare  
Department of Public Health and Social Service


From: Mildred Q. Lujan  
Executive Director  
Sanctuary, Incorporated of Guam

Re: Program Report

Attached is the quarterly program status report for July 1, 2013 through September 30, 2013.

Should you have any questions, please feel free to contact myself at 475-7101 ext. 101 or OJ Taitano at 475-7101 ext. 119.

Sincerely,

  
Mildred Q. Lujan

**RECEIVED**  
HR / Personnel Office  
Division Of General Administration

OCT 15 2013

DPH&SS / DGA

Time: 1:31 pm Location#:





# SANCTUARY, INCORPORATED

*"Helping Youth and Families Help Themselves" since 1971*

Address: 406 Maimai Rd., Chalan Pago, Guam 96910

Tel: 475-7101 \* Fax: 477-3117 \* Crisis Hotline: 475-7100

Website: [www.sanctuaryguam.org](http://www.sanctuaryguam.org) \* E-mail: [inquiries@sanctuaryguam.org](mailto:inquiries@sanctuaryguam.org)



## Foster Care Payments

Bureau of Social Service, Division of Public Health Welfare

Department of Public Health and Social Service

### Report Period: July 1, 2013 – September 30, 2013

Sanctuary, Incorporated receives foster care payments from DPHSS for those children/youth that are referred by Child Protective Services (CPS).

No reports are required although every year Sanctuary reapplies for Licensure that includes site visits to ensure the health and safety of the clients. Periodic visits by DPHSS staff also occur to monitor the shelters for compliance and to meet with the clients.

The amount of reimbursement varies from month to month depending on the number of clients who are in residence for that period. In addition, a monthly clothing allowance may be added.

The current reimbursement rate per month is **\$706.96 per child** for a full month or a pro-rated amount thereof.

The clients referred to Sanctuary for foster care from DPHSS for this period were:

Month	Full	Partial
July 2013	1	0
August 2013	1	0
September 2013	1	0
<b>Total:</b>	<b>3</b>	<b>0</b>

### Attachment 3

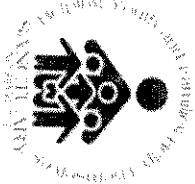
#### *Sanctuary, Incorporated of Guam Rehabilitation Services for Adolescents*

##### Reporting Agency

Guam Behavioral Health and Wellness Center

##### Reports

1. List of expenditures for services and equipment \$5,000 or greater
2. Quarterly financial expenditures and obligation
3. Program progress report



# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101  
Crisis Hotline (671)475-7100 • Fax (671)477-3117 • Email: [sanctuar@ite.net](mailto:sanctuar@ite.net)  
[www.sanctuaryguam.org](http://www.sanctuaryguam.org)



October 14, 2013

Mr. Ray Vega  
Acting Director  
Guam Behavioral Health & Wellness Center  
790 Governor Carlos Camacho Road  
Tamuning, Guam 96913

Dear Mr. Vega:

The information listed below is for the Drug and Alcohol Program 4th quarter of Fiscal Year 2013 from July 1, 2013 – September 30, 2013.

We have listed all expenditures for services and equipment that were \$5,000 or greater.

Services	-0-
Equipment	-0-
Inventory Property	-0-

Please let us know if you have any questions.

Sincerely,

Mildred Q. Lujan  
Executive Director

**Non Profit Organization Receiving Appropriations from Government of Guam**  
**Pursuant to P.L. 31-77 (Sanctuary, Incorporated)**  
**FY 2013 (July 1, 2013 - September 30, 2013)**  
**3rd Quarter Expenditure Report**  
**Guam Behavioral Health & Wellness Center**  
**Drug and Alcohol Program**

Fund	Contract Amount	Object Classification	Expenditure	Expenditure
General/Federal	\$ 320,000			
		Salary		\$ 106,215
		Benefits		13,458
		Travel		-
		Contractual		10
		Supplies & Materials		970
		Equipment		-
		Utilities		3,666
		Miscellaneous		1,077
		Equipment Lease		853
		Grand Total		<u>\$ 126,248</u>

I CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF THE  
 EXPENDITURES FOR FISCAL YEAR 2013 FOR THE PROJECT ABOVE.

SIGNATURE OF AUTHORIZED OFFICIAL:

  
 MILDRED Q. LUJAN  
 EXECUTIVE DIRECTOR

DATE: 10/14/2013



# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MainMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101  
Crisis Hotline (671)475-7100 • Fax (671)477-3117 •  
[www.sanctuaryguam.org](http://www.sanctuaryguam.org)



October 7, 2013

To: Ray Vega  
Acting Director  
Guam Behavioral Health & Wellness Center

Attn: Don P. Sabang  
Drug and Alcohol Supervisor  
Guam Behavioral Health & Wellness Center

From: Mildred Q. Lujan  
Executive Director  
Sanctuary, Incorporated

Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of September 16, 2013 to September 30, 2013.

If you should have any questions, please feel free to contact myself or Valerie Reyes at 475-7101.

Sincerely,

  
Mildred Q. Lujan  
Executive Director



<b>Rehabilitation Services for Adolescents</b>	
Bi-Weekly Reporting Period:	<b>September 16, 2013 – September 30, 2013</b>
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report

<b>II.1 Increase treatment capacity in ASAM Level 0.5 Education, known as the “Na’ Homlo” program, and serve up to thirty (30) adolescents per treatment cycle and perform the following tasks:</b> State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those who were on a “wait-list.”	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 2 sessions were conducted</li> <li>• 4 participants in attendance</li> <li>• Group held on Thursday from 4:30 – 5:30 pm at the Sanctuary, Inc. Main Office and at the 17<sup>th</sup> Annual Too Cool To Do Drugs Conference</li> <li>• Number of Successful Completions: 0</li> <li>• Number of Clients Transferred to another level of Care: 0</li> <li>• Number of Clients on the Wait List: 0</li> </ul>
In narrative form, state how activities from II.1.a to II.1.d were implemented and addressed?	The Group lesson/activity was: weekly check-in, HIV/AIDS, and Underage Drinking & Healthy Alternatives.
In narrative form, briefly state how clients benefited from the core functions or services from this level?	Participants benefited from the last sessions by: Clients were able to participate in Sanctuary, Inc.’s Annual Parent & Youth Conference gaining knowledge and skills on prevention education about HIV/AIDS and Drug/Alcohol use and abuse.
State any commendations to show the strengths of the Program:	The strength of the classes was that each client was provided the opportunity to learn in a safe environment and ways to become comfortable to share their thoughts and process about the topic of discussion.
State any recommendations for the improvement of service delivery:	Continue networking with our community partners. Staff to continue our networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates. Staff monitors needs based on group work and activities throughout the group session.
<b>II.2 Increase treatment capacity in ASAM Level I Outpatient, known as the “Pathways” program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks:</b> State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a “wait-list.”	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 2 sessions were conducted</li> <li>• 3 participants in attendance</li> <li>• Groups are held on Saturday from 12-2 pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: 0</li> <li>• Number of Clients Transferred to another level of Care: 1</li> <li>• Number of Clients on the Wait List: 6 pending PPD clearances.</li> </ul>



**Rehabilitation Services for Adolescents**

Bi-Weekly Reporting Period:

**September 16, 2013 – September 30, 2013**

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

of each topic in recovery. Role-play, rehearsal, repetition, and practice in session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills.

State any commendations to show the strengths of the Program:

The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment.

State any recommendations for the improvement of service delivery:

Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.

**MATRIX Model Parent Education / Support Group**

During this bi-weekly reporting period:

- 2 sessions was conducted
- Group time identified for Saturdays from 12:00pm—2:00pm at the Sanctuary, Inc. Main Office.
- Number of Successful Completions: N/A
- Number of Clients Transferred to another level of Care: N/A

Number of Clients on the Wait List: N/A

In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?

9-21-2013 - In lieu of groups, parents joined the Annual Too Cool to do Drugs Conference held at the Marriott Hotel.

9-28-2013 - In lieu of groups, parents enjoyed the Annual Recovery Month Family Picnic held at the Ypao Beach in Tamuning.

In narrative form, briefly state how Family benefited from the core functions or services from this level?

Family members were able to attend a parent/child conference to learn more about drugs and the harmful effects it has on the individual, the family and the community.

Family members were able to spend the day enjoying recovery month activities and those in recovery were capable to have fun without using.

State any commendations to show the strengths of the Program:

Due to the census of the Family Members wanting to have group on a weekend, accommodations were made moving the group to Saturdays. Each Family member who is not able to attend the groups on Saturdays is still

**Rehabilitation Services for Adolescents**  
**September 16, 2013 – September 30, 2013**

Bi-Weekly Reporting Period:

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

<p>Program:</p>	<p>addition, Sagan Na' Homlo offers the individual and family the opportunity to restructure, refrain and to recover with the challenges of drug and alcohol addiction and eventually re-integrate back into the community as a productive member of society. Sanctuary, Incorporated has implemented Evidence Based Matrix Model incorporating individual sessions, family sessions, early recovery group, relapse prevention group, and 12 step participation.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.</p>
<p><b>II.6 Implement evidence-based models and practices in all levels of care and shall demonstrate the following:</b> In narrative form, state how the activities from II.6.a to II.6.d were implemented and addressed.</p>	<p>Multi-level Interventions are still considered the best practice. It provides and allows insight, growth, emotional well-being, recognition of strengths, ability to communicate, group and family counseling and the opportunity to share openly, express them-selves and work on problems.</p>
<p><b>II.7 Work with DMHSA and its partners to establish a system of care for substance abuse treatment for Asian/Pacific Islanders:</b> Give a brief summary of activities that occurred with DMHSA and its partners during the reporting period.</p>	<p>Program staff continues to work with Department of Youth Affair, Guam Public School System (GPSS), Juvenile Drug Court (JDC), Community Substance Abuse Planning &amp; Development (CSAPD) Committee, National Association of Social Workers (NASW) and Association of Individual, Marriage, and Family Therapist (AIMFT) monthly.</p>
<p><b>II.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0.5, I, II, III.5, and 0.7:</b> Briefly state how sections II.7.a to II.7.e are being addressed.</p>	<p>The Drug and Alcohol screening/assessments are processed with the Clinical Supervisor and staffing is conducted throughout the week during weekly case staffing or on a case by case need using the American Society of Addiction Medicine Patient Placement Criteria (ASAM-PPC).</p>
<p><b>II.9 Provide its staff with opportunities for staff development by performing the following tasks:</b> Briefly state the status of staff members seeking certification with IC &amp; RC and what trainings they attended during the reporting period.</p>	<ul style="list-style-type: none"> <li>• Sagan Na' Homlo currently has 3 certified ICRC Counselor working with the youth in the inpatient / outpatient programs.</li> <li>• One counselor is a licensed IMFT Therapist.</li> <li>• 1 staff continues to work on her CEU's that apply towards the ICRC Certification.</li> <li>• 1 staff is currently working on becoming a Recovery Coach by attending training and meeting with Clinical Supervisor for supervision to prepare for ICRC Certification.</li> <li>• Case Manager is working toward IC&amp;RC Certification.</li> </ul>



# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101

Crisis Hotline (671)475-7100 • Fax (671)477-3117 •

[www.sanctuaryguam.org](http://www.sanctuaryguam.org)



September 24, 2013

To: Ray Vega  
Director  
Guam Behavioral Health  
And Wellness Center

Attn: Don P. Sabang  
Drug and Alcohol Supervisor  
Guam Behavioral Health  
And Wellness Center

From: Mildred Q. Lujan  
Executive Director  
Sanctuary, Incorporated

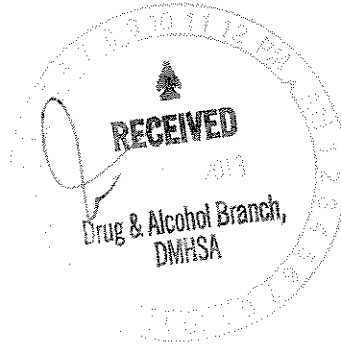
Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of September 1, 2013 through September 15, 2013.

If you should have any questions, please feel free to contact myself or Valerie Reyes at 475-7101.

Sincerely,

  
Mildred Q. Lujan



<b>FROM:</b> SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo		<b>Address:</b> 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	<b>DATE:</b> 9/15/2013
<b>TO:</b> Mr. Ray Vega Acting Director Guam Behavioral Health & Wellness Center (DMHSA)		<b>Vendor Acct. No.</b> S1456001 <b>Document No.</b> <b>Contract No.</b> <b>Job Order No.</b> <b>Purchase Order No.</b> <b>Invoice No.</b> DMHSA-2013-023	
<b>COSTS INCURRED BY CATEGORY</b>		<b>AMOUNT</b>	
1. Personnel		\$	13,355.00
2. Fringe Benefits		\$	1,516.00
3. Contractual		\$	487.00
4. Other		\$	794.00
5. Utilities		\$	1,599.00

TOTAL PAYMENT REQUEST:

\$ 17,751.00

I CERTIFY that the costs in this Request for Payment are accurate and eligible under the provisions of the Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo and that this is a true and certified original.

*Mildred Q. Lujan* 09/25/2013  
 MILDRED Q. LUJAN Date  
 Sanctuary, Incorporated  
 Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2013-023 to be true and correct; and that services for September 1-15, 2013 have been rendered; and payment for this period is due.

\_\_\_\_\_  
 Don Sabang  
 D & A Supervisor

Rehabilitation Services for Adolescents

September 1, 2013 through September 15, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

**II.1 Increase treatment capacity in ASAM Level 0.5 Education, known as the "Na' Homlo" program, and serve up to thirty (30) adolescents per treatment cycle and perform the following tasks:** State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those who were on a "wait-list."

During this bi-weekly reporting period:

- 2 sessions were conducted
- 9 participants in attendance
- Group held on Thursday from 4:30 – 5:30 pm at the Sanctuary, Inc. Main Office.
- Number of Successful Completions: 1
- Number of Clients Transferred to another level of Care: 0
- Number of Clients on the Wait List: 0

In narrative form, state how activities from II.1.a to II.1.d were implemented and addressed?

The Group lesson/activity was: weekly check-in, review of group rules, Marijuana and Alcohol "Truth" presentation, and what to do in dangerous situations. Each client was provided the opportunity to discuss and process the topic.

In narrative form, briefly state how clients benefited from the core functions or services from this level?

Participants benefited from the last sessions by: Clients were able to gain sufficient information about the effects of alcohol and marijuana use. Clients were given the opportunity to practice role playing with each other on how to prevent any further substance use.

State any commendations to show the strengths of the Program:

The strength of the classes was that each client was provided the opportunity to learn in a safe environment ways to prevent relapse and to determine if they have a problem with drugs/alcohol in a small group setting.

State any recommendations for the improvement of service delivery:

Continue networking with our community partners. Staff to continue our networking efforts with community partners as well as be open to input and feedback Staff continues to research the latest information through articles, journals, and on-line updates. Staff monitors needs based on group work and activities throughout the group session.

**II.2 Increase treatment capacity in ASAM Level I Outpatient, known as the "Pathways" program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks:** State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to

During this bi-weekly reporting period:

- 2 sessions were conducted
- 2 participants in attendance
- Groups are held on Saturday from 12-2 pm at the Sanctuary, Inc. Main Office.
- Number of Successful Completions: 0

## Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:	September 1, 2013 through September 15, 2013
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report
another level of care and those on a "wait-list."	<ul style="list-style-type: none"> <li>• Number of Clients Transferred to another level of Care: 0</li> <li>• Number of Clients on the Wait List: 6 pending PPD clearances.</li> </ul>
In narrative form, state how activities from II.2.a to II.2.c were implemented and addressed?	The Group lesson/activity was: weekly check-in, Sex and Recovery ; and scheduling. Each client was provided the opportunity to discuss and process the topic.
In narrative form, briefly state how clients benefited from the core functions or services from this level?	Clients are taught to analyze events and change their thoughts and behaviors that lead to substance use and change the results to a more positive behavior that meets their goals. Clients are taught skills to prevent substance use and relapse; are guided in recognizing and planning events that are not associated with substance use; and rewarded for meeting their goals with incentives.
State any commendations to show the strengths of the Program:	The strength of the class based on staff observation, was that each client was able to share in a small group setting and get feedback from peers that support their efforts towards recovery.
State any recommendations for the improvement of service delivery:	Staff to continue our networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.
<b>II.3 Establish an ASAM Level II Intensive Outpatient treatment program with a treatment capacity of ten (10) adolescents per treatment cycle and shall perform the following tasks:</b> State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 8 sessions were conducted</li> <li>• 67 participants in attendance</li> <li>• Group time identified for Fridays from 3:30 – 4:30pm &amp; 4:30-5:30pm and Saturdays from 12:00pm—2:00pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: 0</li> <li>• Number of Clients Transferred to another level of Care: 0</li> <li>• Number of Clients on the Wait List: 0</li> </ul>
In narrative form, briefly state how activities from II.3.a to II.3.e were implemented and addressed?	The Group lesson/activity was: weekly check-in; review of group rules; Scheduling; Calendar; Stages of Recovery; Destructive Behaviors; Scheduling: Why is it Important?; School and Future Goals; Pros and Cons;

**Rehabilitation Services for Adolescents**

Bi-Weekly Reporting Period:

September 1, 2013 through September 15, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

	Abusing Prescription Drugs; and Marijuana. Clients were provided with psycho-education for each topic. They were also given the opportunity to share real-life experiences related to each topic and offer feedback to peers for support and process.
In narrative form, briefly state how clients benefited from the core functions or services from this level?	Participants continue to explore pros and cons for use or staying clean and sober to help them to make informed and well thought out decisions about their use. Small group discussions facilitate understanding of the importance of each topic in recovery. Role-play, rehearsal, repetition, and practice in session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills.
State any commendations to show the strengths of the Program:	The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment.
State any recommendations for the improvement of service delivery:	Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.
<b>MATRIX Model Parent Education / Support Group</b>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 2 sessions were conducted</li> <li>• Family Members in attendance (9/7 = 7 ,9/14 = 7)</li> <li>• Group time identified for Saturdays from 12:00pm—2:00pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: N/A</li> <li>• Number of Clients Transferred to another level of Care: N/A</li> <li>• Number of Clients on the Wait List: N/A</li> </ul>
In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?	On 09-07-2013, Families in recovery video. Families were able to review the basic information regarding the development of the craving process. Parents were able to discuss how they were affected by their child's drug and

**Rehabilitation Services for Adolescents**

Bi-Weekly Reporting Period:	September 1, 2013 through September 15, 2013
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report

	alcohol use. 09-14-2013, Marijuana: the escape to nowhere video. Parents were able to view the message of recovering addicts share their accomplishments since they broke the chains of marijuana dependence.
In narrative form, briefly state how Family benefited from the core functions or services from this level?	September 7, 2013 Families were able to learn specific ways that they can best assist the recovery process of their child. September 14, 2013 Parents were able to hear from recovering addicts the devastating effects of long term marijuana use on the body, mind and spirit.
State any commendations to show the strengths of the Program:	Due to the census of the Family Members wanting to have group on a weekend, accommodations were made moving the group to Saturdays. Each Family member who is not able to attend the groups on Saturdays are still considered and accommodations continue to be made on a case by case basis.
State any recommendations for the improvement of service delivery:	Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.
<b>II.5 Maintain treatment capacity in ASAM Level III.5 to serve 6 to 8 adolescents (male or female) at any given time.</b> State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."	During this bi-weekly reporting period: <ul style="list-style-type: none"> <li>• 9 Clients were served.</li> <li>• Transfer to another level of Care: 2 (Aftercare)</li> <li>• Wait Listing: 4</li> </ul> Phase Breakdown: <ul style="list-style-type: none"> <li>• Orientation: 2</li> <li>• Awareness: 3</li> <li>• Enhancement: 1</li> <li>• Enlightenment: 1</li> <li>• Empowerment: 2</li> </ul>
<b>II.5a</b> Treatment capacity in ASAM Level 0.7 for all individuals who completed level III.5. State the number of	During this Bi-weekly reporting period:



Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

September 1, 2013 through September 15, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients

- 4 Clients in Aftercare (Social Support) Level 0.7
- Transfer to another level of Care: 0

In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?

Sagan Na' Homlo is a 24/7 structured program where clients participate in a regulated daily routine schedule from morning physical exercises to classroom work, group sessions (i.e. substance abuse, anger management, decision making, relapse prevention, life skills, team building, relationship intelligence; emotional wellness; big book and 12-step education), individual counseling sessions, individual case management sessions, meditation and evening recreation. Sanctuary continues to host 12-Step Meetings: Adolescent AA and NA at our Main Facility and is available to all clients based on desire and appropriateness.

In narrative form, briefly state how clients benefited from the core functions or services from this level?

The continuity of treatment in this level of care provides the clients consistent contact with residential staff and the opportunity for support when the need arises.

State any commendations to show the strengths of the Program:

Sagan Na' Homlo is the only Adolescent residential treatment on Guam. In addition, Sagan Na' Homlo offers the individual and family the opportunity to restructure, refrain and to recover with the challenges of drug and alcohol addiction and eventually re-integrate back into the community as a productive member of society. Sanctuary, Incorporated has implemented Evidence Based Matrix Model incorporating individual sessions, family sessions, early recovery group, relapse prevention group, and 12 step participation.

State any recommendations for the improvement of service delivery:

All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.

**II.6 Implement evidence-based models and practices in all levels of care and shall demonstrate the following:** In narrative form, state how the activities from II.6.a to II.6.d were implemented and addressed.

Multi-level Interventions are still considered the best practice. It provides and allows insight, growth, emotional well-being, recognition of strengths, ability to communicate, group and family counseling and the opportunity to share openly, express them-selves and work on problems.

**II.7 Work with DMHSA and its partners to establish a system of care for substance abuse**

Program staff continues to work with Department of Youth Affair, Guam Public School System (GPSS), Juvenile Drug Court (JDC), Community

**Rehabilitation Services for Adolescents**

Bi-Weekly Reporting Period:

September 1, 2013 through September 15, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

**treatment for Asian/Pacific Islanders:** Give a brief summary of activities that occurred with DMHSA and its partners during the reporting period.

Substance Abuse Planning & Development (CSAPD) Committee, National Association of Social Workers (NASW) and Association of Individual, Marriage, and Family Therapist (AIMFT) monthly.


**II.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0.5, I, II, III.5, and 0.7:** Briefly state how sections II.7.a to II.7.e are being addressed.

The Drug and Alcohol screening/assessments are processed with the Clinical Supervisor and staffing is conducted throughout the week during weekly case staffing or on a case by case need using the American Society of Addiction Medicine Patient Placement Criteria (ASAM-PPC).


**II.9 Provide its staff with opportunities for staff development by performing the following tasks:** Briefly state the status of staff members seeking certification with IC & RC and what trainings they attended during the reporting period.

- Sagan Na' Homlo currently has 3 certified ICRC Counselor working with the youth in the inpatient / outpatient programs.
- One counselor is a licensed IMFT Therapist.
- 1 staff continues to work on her CEU's that apply towards the ICRC Certification.
- 1 staff is currently working on becoming a Recovery Coach by attending training and meeting with Clinical Supervisor for supervision to prepare for ICRC Certification.
- Case Manager is working toward IC&RC Certification.

**Sanctuary Representative:**

Submitted By: Katrina Tajjeron  
 Position Title: Case Manager  
 Reviewed By: Valerie Reyes   
 Position Title: Program Director  
 Date: September 24, 2013

**DMHSA Representative:**

Received By:   
 Jennifer J. T. Faasumalie  
 Position Title: WPS II Drug & Alcohol Branch. DMHSA  
 Date of Submission: 9/25/13 10:10am



# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101

Crisis Hotline (671)475-7100 • Fax (671)477-3117 •

[www.sanctuaryguam.org](http://www.sanctuaryguam.org)



September 5, 2013

To: Ray Vega  
Acting Director  
Guam Behavioral Health & Wellness Center

Attn: Don P. Sabang  
Drug and Alcohol Supervisor  
Guam Behavioral Health & Wellness Center

From: Mildred Q. Lujan  
Executive Director  
Sanctuary, Incorporated

Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of August 15, 2013 to August 31, 2013.

If you should have any questions, please feel free to contact myself or Valerie Reyes at 475-7101.

Sincerely,

  
Mildred Q. Lujan  
Executive Director

Received  
Tracy  
9/5/13

**Rehabilitation Services for Adolescents**

Bi-Weekly Reporting Period:	August 16, 2013 – August 31, 2013
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report

<p><b>II.1 Increase treatment capacity in ASAM Level 0.5 Education, known as the “Na’ Homlo” program, and serve up to thirty (30) adolescents per treatment cycle and perform the following tasks:</b> State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those who were on a “wait-list.”</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 2 sessions were conducted</li> <li>• 9 participants in attendance</li> <li>• Group held on Thursday from 4:30 – 5:30 pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: 0</li> <li>• Number of Clients Transferred to another level of Care: 0</li> <li>• Number of Clients on the Wait List: 0</li> </ul>
<p>In narrative form, state how activities from II.1.a to II.1.d were implemented and addressed?</p>	<p>The Group lesson/activity was: weekly check-in, review of group rules, SMART Goals, Trigger, Thoughts, Craving, &amp; Use.</p>
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>Participants benefited from the last sessions by: Clients were able to identify/list specific goals related to their use of drugs &amp; alcohol as well as gaining skills on how to overcome cravings.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>The strength of the classes was that each client was provided the opportunity to learn in a safe environment and ways become comfortable to share their thoughts and process about the topic of discussion.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>Continue networking with our community partners. Staff to continue our networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates. Staff monitors needs based on group work and activities throughout the group session.</p>
<p><b>II.2 Increase treatment capacity in ASAM Level I Outpatient, known as the “Pathways” program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks:</b> State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a “wait-list.”</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 6 sessions were conducted</li> <li>• 14 participants in attendance</li> <li>• Groups are held on Saturday from 12-2 pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: 1</li> <li>• Number of Clients Transferred to another level of Care: 1</li> </ul>

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

August 16, 2013 - August 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

	education for each topic. They were also given the opportunity to share real-life experiences related to each topic and offer feedback to peers for support and process.
In narrative form, briefly state how clients benefited from the core functions or services from this level?	Participants continue to explore pros and cons for use or staying clean and sober to help them to make informed and well thought out decisions about their use. Small group discussions facilitate understanding of the importance of each topic in recovery. Role-play, rehearsal, repetition, and practice in session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills.
State any commendations to show the strengths of the Program:	The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment.
State any recommendations for the improvement of service delivery:	Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.
<b>MATRIX Model Parent Education / Support Group</b>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 3 sessions was conducted</li> <li>• 22 Family Members in attendance (8/17 = 5 ; 8/24 = 7; 8/31 = 10 )</li> <li>• Group time identified for Saturdays from 12:00pm—2:00pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: N/A</li> <li>• Number of Clients Transferred to another level of Care: N/A</li> <li>• Number of Clients on the Wait List: N/A</li> </ul>
In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?	On 8-17, parents reviewed the Matrix Model topic "creating health functional families". Translation was done throughout group as every participant was of Chuukese ethnicity. Questions were asked in "Chuukese" and family members answered in English. Family members were able to determine that

**Rehabilitation Services for Adolescents**

Bi-Weekly Reporting Period:

August 16, 2013 – August 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

**III.5 to serve 6 to 8 adolescents (male or female) at any given time.** State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a “wait-list.”

- 8 Clients were served.
- Transfer to another level of Care: 0
- Wait Listing: 6

Phase Breakdown:

- Orientation: 1
- Awareness: 3
- Enhancement: 1
- Enlightenment: 1
- Empowerment: 2

**II.5a** Treatment capacity in ASAM Level 0.7 for all individuals who completed level III.5. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients

During this Bi-weekly reporting period:

- 2 Clients in Aftercare (Social Support) Level 0.7
- Transfer to another level of Care: 0

In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?

Sagan Na’ Homlo is a 24/7 structured program where clients participate in a regulated daily routine schedule from morning physical exercises to classroom work, group sessions (i.e. substance abuse, anger management, decision making, relapse prevention, life skills, team building, relationship intelligence; emotional wellness; big book and 12-step education), individual counseling sessions, individual case management sessions, meditation and evening recreation. Sanctuary continues to host 12-Step Meetings: Adolescent AA and NA at our Main Facility and is available to all clients based on desire and appropriateness.

In narrative form, briefly state how clients benefited from the core functions or services from this level?

The continuity of treatment in this level of care provides the clients consistent contact with residential staff and the opportunity for support when the need arises.

State any commendations to show the strengths of the Program:

Sagan Na’ Homlo is the only Adolescent residential treatment on Guam. In addition, Sagan Na’ Homlo offers the individual and family the opportunity to restructure, refrain and to recover with the challenges of drug and alcohol

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

August 16, 2013 - August 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

**Sanctuary Representative:**

Submitted By: Katrina Taijeron  
Position Title: Case Manager  
Reviewed By: Valerie Reyes  
Position Title: Program Director  
Date: September 5, 2013

**DMHSA Representative:**

Received By: \_\_\_\_\_

Position Title: \_\_\_\_\_

Date of Submission: \_\_\_\_\_



# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101

Crisis Hotline (671)475-7100 • Fax (671)477-3117 •

www.sanctuaryguam.org

CONFIDENTIAL

August 20, 2013

To: Ray Vega  
Acting Director  
Guam Behavioral Health & Wellness Center

Attn: Don P. Sabang  
Drug and Alcohol Supervisor  
Guam Behavioral Health & Wellness Center


From: Mildred Q. Lujan  
Executive Director  
Sanctuary, Incorporated

Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of August 01, 2013 to August 15, 2013.

If you should have any questions, please feel free to contact myself or Valerie Reyes at 475-7101.

Sincerely,

  
Mildred Q. Lujan  
Executive Director

  
RECEIVED  
Drug & Alcohol Branch  
DMMSA



**Rehabilitation Services for Adolescents**

**August 1, 2013 – August 15, 2013**

Bi-Weekly Reporting Period:	
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report

<p><b>II.1 Increase treatment capacity in ASAM Level 0.5 Education, known as the “Na’ Homlo” program, and serve up to thirty (30) adolescents per treatment cycle and perform the following tasks:</b> State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those who were on a “wait-list.”</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 4 sessions were conducted</li> <li>• 19 participants in attendance</li> <li>• Group held on Thursday from 4:30 – 5:30 pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: 3</li> <li>• Number of Clients Transferred to another level of Care: 0</li> <li>• Number of Clients on the Wait List: 0</li> </ul>
<p>In narrative form, state how activities from II.1.a to II.1.d were implemented and addressed?</p>	<p>The Group lesson/activity was: weekly check-in, review of group rules, motivation &amp; setting goals (treatment plan), Consequences of Drugs &amp; Alcohol, Communication &amp; Listening Skills, and My Relationship with Alcohol and Other Drugs.</p>
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>Participants benefited from the last sessions by: Clients were able to identify ways to communicate with others and understand the different consequences of drugs &amp; alcohol based on their own experiences.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>The strength of the classes was that each client was provided the opportunity to learn in a safe environment and ways to communicate presenting problems/issues that deal with any type of drug.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>Continue networking with our community partners. Staff to continue our networking efforts with community partners as well as be open to input and feedback Staff continues to research the latest information through articles, journals, and on-line updates. Staff monitors needs based on group work and activities throughout the group session.</p>
<p><b>II.2 Increase treatment capacity in ASAM Level I Outpatient, known as the “Pathways” program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks:</b> State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a “wait-list.”</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 3 sessions were conducted</li> <li>• 12 participants in attendance</li> <li>• Groups are held on Saturday from 12-2 pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: 4</li> <li>• Number of Clients Transferred to another level of Care: 0</li> <li>• Number of Clients on the Wait List: 0</li> </ul>
	<p>The Group lesson/activity was: weekly check-in, participated in Recovery month fundraising event,</p>

**Rehabilitation Services for Adolescents**

**August 1, 2013 – August 15, 2013**

Bi-Weekly Reporting Period:	<b>Rehabilitation Services for Adolescents</b> <b>August 1, 2013 – August 15, 2013</b>
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report

	of each topic in recovery. Role-play, rehearsal, repetition, and practice in session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills.
State any commendations to show the strengths of the Program:	The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment.
State any recommendations for the improvement of service delivery:	Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.
<b>MATRIX Model Parent Education / Support Group</b>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 2 sessions was conducted</li> <li>• Approximately 15 Family Members in attendance (8/3 = 5 ; 8/10 = approximately 10 )</li> <li>• Group time identified for Saturdays from 12:00pm—2:00pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: N/A</li> <li>• Number of Clients Transferred to another level of Care: N/A</li> <li>• Number of Clients on the Wait List: N/A</li> </ul>
In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?	<p>On 8-3-2013, Matrix Model Topic, "Road Map for Recovery", introduced family members to the process of recovery. Family members were provided the information on the different stages of recovery. Discussion on behavior changes that may be observed in the different stages was followed by the video.</p> <p>On 8-10-13, in lieu of groups, family members participated in the recovery month fundraising.</p>
In narrative form, briefly state how Family benefited from the core functions or services from this level?	Family members were able to identify behaviors displayed. Family members were able to do well in this setting by relating to the topics being addressed and were able to provide their own family's personal experience. Family members were also able to participate and support the efforts for recovery month.

**Rehabilitation Services for Adolescents**

Bi-Weekly Reporting Period:

**August 1, 2013 – August 15, 2013**

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>The continuity of treatment in this level of care provides the clients consistent contact with residential staff and the opportunity for support when the need arises.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>Sagan Na' Homlo is the only Adolescent residential treatment on Guam. In addition, Sagan Na' Homlo offers the individual and family the opportunity to restructure, refrain and to recover with the challenges of drug and alcohol addiction and eventually re-integrate back into the community as a productive member of society. Sanctuary, Incorporated has implemented Evidence Based Matrix Model incorporating individual sessions, family sessions, early recovery group, relapse prevention group, and 12 step participation.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.</p>
<p><b>II.6 Implement evidence-based models and practices in all levels of care and shall demonstrate the following:</b> In narrative form, state how the activities from II.6.a to II.6.d were implemented and addressed.</p>	<p>Multi-level Interventions are still considered the best practice. It provides and allows insight, growth, emotional well-being, recognition of strengths, ability to communicate, group and family counseling and the opportunity to share openly, express them-selves and work on problems.</p>
<p><b>II.7 Work with DMHSA and its partners to establish a system of care for substance abuse treatment for Asian/Pacific Islanders:</b> Give a brief summary of activities that occurred with DMHSA and its partners during the reporting period.</p>	<p>Program staff continues to work with Department of Youth Affair, Guam Public School System (GPSS), Juvenile Drug Court (JDC), Community Substance Abuse Planning &amp; Development (CSAPD) Committee, National Association of Social Workers (NASW) and Association of Individual, Marriage, and Family Therapist (AIMFT) monthly.</p>
<p><b>II.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0.5, I, II, III.5, and 0.7:</b> Briefly state how sections II.7.a to II.7.e are being addressed.</p>	<p>The Drug and Alcohol screening/assessments are processed with the Clinical Supervisor and staffing is conducted throughout the week during weekly case staffing or on a case by case need using the American Society of Addiction Medicine Patient Placement Criteria (ASAM-PPC).</p>
<p><b>II.9 Provide its staff with opportunities for staff development by performing the following tasks:</b> Briefly state the status of staff members seeking certification with IC &amp; RC and what trainings they attended during the reporting period.</p>	<ul style="list-style-type: none"> <li>• Sagan Na' Homlo currently has 3 certified ICRC Counselor working with the youth in the inpatient / outpatient programs.</li> <li>• One counselor is a licensed IMFT Therapist.</li> <li>• 1 staff continues to work on her CEU's that apply towards the ICRC Certification.</li> <li>• 1 staff is currently working on becoming a Recovery Coach by attending training and meeting with Clinical Supervisor for supervision to prepare for ICRC Certification.</li> <li>• Case Manager is working toward IC&amp;RC Certification.</li> </ul>



# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101

Crisis Hotline (671)475-7100 • Fax (671)477-3117 •

www.sanctuaryguam.org



August 5, 2013

To: Rob Vega  
Director  
Guam Behavioral Health  
And Wellness Center

Attn: Don P. Sabang  
Drug and Alcohol Supervisor  
Guam Behavioral Health  
And Wellness Center

From: Mildred Q. Lujan  
Executive Director  
Sanctuary, Incorporated

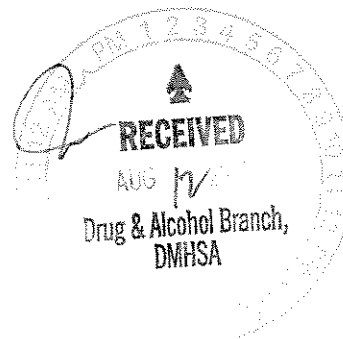
Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of July 16, 2013 through July 31, 2013.

If you should have any questions, please feel free to contact myself or Valerie Reyes at 475-7101.

Sincerely,

  
Mildred Q. Lujan



Rehabilitation Services for Adolescents	
Bi-Weekly Reporting Period:	July 16, 2013 through July 31, 2013
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report

<p><b>II.1 Increase treatment capacity in ASAM Level 0.5 Education, known as the "Na' Homlo" program, and serve up to thirty (30) adolescents per treatment cycle and perform the following tasks:</b> State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those who were on a "wait-list."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 2 sessions were conducted</li> <li>• 15 participants in attendance</li> <li>• Group held on Thursday from 4:30 – 5:30 pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: 2</li> <li>• Number of Clients Transferred to another level of Care: 0</li> <li>• Number of Clients on the Wait List: 8</li> </ul>
<p>In narrative form, state how activities from II.1.a to II.1.d were implemented and addressed?</p>	<p>The Group lesson/activity was: weekly check-in, review of group rules, how the world views us and truths and facts of alcohol. Each client was provided the opportunity to discuss and process the topic.</p>
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>Participants benefited from the last sessions by: Clients displayed full comprehension of the topic and self-awareness; and through an activity that they enjoy, be able to recognize that there are fun options that they can benefit from besides doing drugs.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>The strength of the classes was that each client was provided the opportunity to learn in a safe environment ways to prevent relapse and to determine if they have a problem with drugs/alcohol in a small group setting.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>Continue networking with our community partners. Staff to continue our networking efforts with community partners as well as be open to input and feedback Staff continues to research the latest information through articles, journals, and on-line updates. Staff monitors needs based on group work and activities throughout the group session.</p>
<p><b>II.2 Increase treatment capacity in ASAM Level I Outpatient, known as the "Pathways" program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks:</b> State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 4 sessions were conducted</li> <li>• 10 participants in attendance</li> <li>• Groups are held on Saturday from 12-2 pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: 0</li> <li>• Number of Clients Transferred to another level of Care: 0</li> </ul>

<b>Rehabilitation Services for Adolescents</b>	
Bi-Weekly Reporting Period:	July 16, 2013 through July 31, 2013
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report

	the opportunity to share real-life experiences related to each topic and offer feedback to peers for support and process.
In narrative form, briefly state how clients benefited from the core functions or services from this level?	Participants continue to explore pros and cons for use or staying clean and sober to help them to make informed and well thought out decisions about their use. Small group discussions facilitate understanding of the importance of each topic in recovery. Role-play, rehearsal, repetition, and practice in session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills.
State any commendations to show the strengths of the Program:	The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment.
State any recommendations for the improvement of service delivery:	Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.
<b>MATRIX Model Parent Education / Support Group</b>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 2 sessions were conducted</li> <li>• 13 Family Members in attendance (7/20 = 7, 7/27 = 6)</li> <li>• Group time identified for Saturdays from 12:00pm—2:00pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: N/A</li> <li>• Number of Clients Transferred to another level of Care: N/A</li> <li>• Number of Clients on the Wait List: N/A</li> </ul>
In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?	On 07-20-2013, Family and child commencement. The family and group was combined for a pro-social activity – Baseball. The session provided the parent/caregiver the opportunity to motivate their child in a positive environment to continue practicing positive behavior and meeting their goals. The session also provided the opportunity for parents/caregiver to practice

**Rehabilitation Services for Adolescents**

Bi-Weekly Reporting Period:

July 16, 2013 through July 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

	<ul style="list-style-type: none"> <li>• Enlightenment: 0</li> <li>• Empowerment: 3</li> </ul>
<b>II.5a</b> Treatment capacity in ASAM Level 0.7 for all individuals who completed level III.5. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients	<p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none"> <li>• 2 Clients in Aftercare (Social Support) Level 0.7</li> <li>• Transfer to another level of Care: 0</li> </ul>
In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?	Sagan Na' Homlo is a 24/7 structured program where clients participate in a regulated daily routine schedule from morning physical exercises to classroom work, group sessions (i.e. substance abuse, anger management, self-esteem, decision making, relapse prevention, relationship intelligence, life skills, team building, emotional wellness, and 12-step education), meditation and evening recreation. Sanctuary continues to host 12-Step Meetings: Ala-teen and Adolescent AA and NA at our Main Facility and is available to all clients based on desire and appropriateness.
In narrative form, briefly state how clients benefited from the core functions or services from this level?	The continuity of treatment in this level of care provides the clients consistent contact with residential staff and the opportunity for support when the need arises allowing Client a safe and nurturing environment in which they are provided the opportunity to learn drug & alcohol relapse prevention skills.
State any commendations to show the strengths of the Program:	Sagan Na' Homlo is the only Adolescent residential treatment on Guam. In addition, Sagan Na' Homlo offers the individual and family the opportunity to restructure, refrain and to recover with the challenges of drug and alcohol addiction and eventually re-integrate back into the community a productive member of society giving back rather than taking.
State any recommendations for the improvement of service delivery:	All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.
<b>II.6 Implement evidence-based models and practices in all levels of care and shall demonstrate the following:</b> In narrative form, state how the activities from	Multi-level Interventions are still considered the best practice. It provides and allows insight, growth, emotional well-being, recognition of strengths, ability to communicate, group and family counseling and the opportunity to



# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101

Crisis Hotline (671)475-7100 • Fax (671)477-3117 •

[www.sanctuaryguam.org](http://www.sanctuaryguam.org)

CONFIDENTIAL

July 18, 2013

To: Ray Vega  
Acting Director  
Guam Behavioral Health & Wellness Center

Attn: Don P. Sabang  
Drug and Alcohol Supervisor  
Guam Behavioral Health & Wellness Center

From: Mildred Q. Lujan  
Executive Director  
Sanctuary, Incorporated

Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of July 01, 2013 to July 15, 2013.

If you should have any questions, please feel free to contact myself or Valerie Reyes at 475-7101.

Sincerely,

  
Mildred Q. Lujan  
Executive Director






<b>FROM:</b> SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo	<b>Address:</b> 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	<b>DATE:</b> 7/15/2013
<b>TO:</b> Rey Vega, Acting Director Dept. of Mental Health & Substance Abuse (DHMSA)	<b>Vendor Acct. No.</b> S1456001 <b>Document No.</b> <b>Contract No.</b> <b>Job Order No.</b> <b>Purchase Order No.</b> <b>Invoice No.</b> DMHSA-2013-019	
<b>COSTS INCURRED BY CATEGORY</b>		<b>AMOUNT</b>
1. Personnel	\$ 13,355.00	
2. Fringe Benefits	\$ 1,516.00	
3. Contractual	\$ 487.00	
4. Other	\$ 794.00	
5. Utilities	\$ 1,599.00	

**TOTAL PAYMENT REQUEST:** \$ 17,751.00

I CERTIFY that the costs in this Request for Payment are accurate and eligible under the provisions of the Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo and that this is a true and certified original.

  
MILDRED Q. LUJAN Date  
Sanctuary, Incorporated  
Executive Director

Recommended for payment; I certify Invoice No. DMHSA-2013-019 to be true and correct; and that services for July 1-15, 2013 have been rendered; and payment for this period is due.

\_\_\_\_\_  
Don Sabang  
D&A Supervisor

Bi-Weekly Reporting Period:

**Rehabilitation Services for Adolescents**

**July 1, 2013 – July 15, 2013**

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

**II.1 Increase treatment capacity in ASAM Level 0.5 Education, known as the "Na' Homlo" program, and serve up to thirty (30) adolescents per treatment cycle and perform the following tasks:** State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those who were on a "wait-list."

During this bi-weekly reporting period:

- 1 session was conducted
- 6 participants in attendance
- Group held on Thursday from 4:30 – 5:30 pm at the Sanctuary, Inc. Main Office.
- Number of Successful Completions: 0
- Number of Clients Transferred to another level of Care: 0
- Number of Clients on the Wait List: 8

In narrative form, state how activities from II.1.a to II.1.d were implemented and addressed?

The Group lesson/activity was: Functional Analysis of Pro-social activities

In narrative form, briefly state how clients benefited from the core functions or services from this level?

Clients were able to identify long term positive consequences by practicing activities that promote healthy relationships and not against the law

State any commendations to show the strengths of the Program:

The strength of the class based on staff observation, is how clients feel comfortable in sharing their experiences and having a peer mentor to help facilitate group process. The clients have also reported they enjoy practicing pro-social activities with peers.

State any recommendations for the improvement of service delivery:

Continue networking with our community partners. Staff to continue our networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates. Staff monitors needs based on group work and activities throughout the group session.

During this bi-weekly reporting period:

- 4 sessions were conducted
- 19 participants in attendance
- Groups are held on Saturday from 12:00 – 2:00 pm at the Sanctuary, Inc. Main Office
- Number of Successful Completions: 0
- Number of Clients Transferred to another level of Care: 0

**II.2 Increase treatment capacity in ASAM Level I Outpatient, known as the "Pathways" program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks:** State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."

Number of Clients on the Wait List: 0

The Group lesson/activity was: Matrix Model: Taking care of yourself; Thought stopping techniques.

Rehabilitation Services for Adolescents

July 1, 2013 – July 15, 2013

Bi-Weekly Reporting Period:

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

In narrative form, state how activities from II.2.a to II.2.c were implemented and addressed?

In narrative form, briefly state how clients benefited from the core functions or services from this level?

State any commendations to show the strengths of the Program:

State any recommendations for the improvement of service delivery:

**II.3 Establish an ASAM Level II Intensive Outpatient treatment program with a treatment capacity of ten (10) adolescents per treatment cycle and shall perform the following tasks:** State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."

In narrative form, briefly state how activities from II.3.a to II.3.c were implemented and addressed?

In narrative form, briefly state how clients benefited from the core functions or services from this level?

External triggers; and Life satisfaction scale.

Clients were able to explore what self-care practices are and how self-care can improve image, identify activities they can practice to address cravings, and evaluate different categories in their lives if they are satisfied or areas they would like to strengthen. The clients were also able to identify external triggers to use substances and behavior changes to prevent relapse.

The strength of the class based on staff observation, was that clients were able to openly discuss their experiences about triggers to use substances and how behaviors have changed since they started treatment. The groups provide an opportunity to stay focused on their treatment and goals.

Staff to continue our networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.

During this bi-weekly reporting period:

- 8 sessions were conducted
- 31 participants in attendance
- Group time identified for Fridays from 3:30 – 4:30pm & 4:30-5:30pm and Saturdays from 12:00pm – 2:00pm at the Sanctuary, Inc. Main Office
- Number of Successful Completions: 0
- Number of Clients Transferred to another level of Care: 0
- Number of Clients on the Wait List: 0

The Group lesson/activity was: weekly check-in; review of group rules, Scheduling; Calendar; Thought Stopping Techniques; Repairing Relationships; One Day at a Time; External triggers; My Circle of Support; Today I Feel; Twelve-Step Education, and Internal Triggers. Clients were provided with psycho-education for each topic. They were also given the opportunity to share real-life experiences related to each topic and offer feedback to peers for support and process.

Participants continue to explore pros and cons for use or staying clean and sober to help them to make informed and well thought out decisions about their use. Small group discussions facilitate understanding of the importance of each topic in recovery. Role-play, rehearsal, repetition, and practice in

Rehabilitation Services for Adolescents	
Bi-Weekly Reporting Period:	July 1, 2013 – July 15, 2013
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report
State any commendations to show the strengths of the Program:	session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills.
State any recommendations for the improvement of service delivery:	The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment. Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.
<b>MATRIX Model Parent Education / Support Group</b>	During this bi-weekly reporting period <ul style="list-style-type: none"> <li>• 2 sessions was conducted</li> <li>• 6 Family Members in attendance (7/6 - 3 ; 7/13 - 3)</li> <li>• Group time identified for Saturdays from 12:00pm - 2:00pm at the Sanctuary, Inc. Main Office.</li> <li>• Number of Successful Completions: N/A</li> <li>• Number of Clients Transferred to another level of Care: N/A</li> <li>• Number of Clients on the Wait List: N/A</li> </ul>
In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?	On 7-6-2013, Matrix Model Topic was "Setting Appropriate Boundaries." 7-6-13-2013 Matrix Model Topic was a continuation of Setting Appropriate Boundaries focusing on Rules Both Groups addressed the family dynamics of spoken vs. unspoken rules and ways in which to communicate the expected family rules.
In narrative form, briefly state how Family benefited from the core functions or services from this level?	
State any commendations to show the strengths of the Program:	Due to the census of the Family Members wanting to have group on a weekend, accommodations were made moving the group to Saturdays. Each Family member who is not able to attend the groups on Saturdays is still considered and accommodations continue to be made on a case by case basis.
State any recommendations for the improvement of	Staff to continue networking efforts with community partners as well as be

**Rehabilitation Services for Adolescents**

**July 1, 2013 – July 15, 2013**

Bi-Weekly Reporting Period:

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

service delivery:

**II.5 Maintain treatment capacity in ASAM Level III.5 to serve 6 to 8 adolescents (male or female) at any given time.** State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."

open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.

During this bi-weekly reporting period

- 8 Clients were served.
- Transfer to another level of Care: 0
- Wait Listing: 8 (Out of the 8, 2 entered residential treatment services, 1 declined services)

Phase Breakdown:

- Orientation: 4
- Awareness: 1
- Enhancement: 0
- Enlightenment: 3
- Empowerment: 0

**II.5a** Treatment capacity in ASAM Level 0.7 for all individuals who completed level III.5. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients

During this Bi-weekly reporting period:

- 2 Clients in Aftercare (Social Support) Level 0.7
- Transfer to another level of Care: 0

In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?

Sagan Na' Homlo is a 24/7 structured program where clients participate in a regulated daily routine schedule from morning physical exercises to classroom work, group sessions (i.e. substance abuse, anger management, decision making, relapse prevention, life skills, team building, relationship intelligence, emotional wellness, big book and 12-step education), individual counseling sessions, individual case management sessions, meditation and evening recreation. Sanctuary continues to host 12-Step Meetings, Adolescent AA and NA at our Main Facility and is available to all clients based on desire and appropriateness.

In narrative form, briefly state how clients benefited from the core functions or services from this level?

The continuity of treatment in this level of care provides the clients consistent contact with residential staff and the opportunity for support when the need arises.

State any commendations to show the strengths of the Program:

Sagan Na' Homlo is the only Adolescent residential treatment on Guam. In addition, Sagan Na' Homlo offers the individual and family the opportunity

Rehabilitation Services for Adolescents

July 1, 2013 – July 15, 2013

Bi-Weekly Reporting Period:

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

State any recommendations for the improvement of service delivery:

**II.6 Implement evidence-based models and practices in all levels of care and shall demonstrate the following:** In narrative form, state how the activities from II.6.a to II.6.d were implemented and addressed.

**II.7 Work with DMHSA and its partners to establish a system of care for substance abuse treatment for Asian/Pacific Islanders:** Give a brief summary of activities that occurred with DMHSA and its partners during the reporting period.

**II.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0.5, I, II, III.5, and 0.7:** Briefly state how sections II.7.a to II.7.c are being addressed.

**II.9 Provide its staff with opportunities for staff development by performing the following tasks:** Briefly state the status of staff members seeking certification with IC & RC and what trainings they attended during the reporting period.

to restructure, refrain and to recover with the challenges of drug and alcohol addiction and eventually re-integrate back into the community as a productive member of society. Sanctuary, Incorporated has implemented Evidence Based Matrix Model incorporating individual sessions, family sessions, early recovery group, relapse prevention group, and 12 step participation

All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.

Multi-level Interventions are still considered the best practice. It provides and allows insight, growth, emotional well-being, recognition of strengths, ability to communicate, group and family counseling and the opportunity to share openly, express them-selves and work on problems.

Program staff continues to work with Department of Youth Affairs, Guam Public School System (GPSS), Juvenile Drug Court (JDC), Community Substance Abuse Planning & Development (CSAPD) Committee, National Association of Social Workers (NASW) and Association of Individual Marriage, and Family Therapist (AIMFT) monthly.

The Drug and Alcohol screening/assessments are processed with the Clinical Supervisor and staffing is conducted throughout the week during weekly case staffing or on a case by case need using the American Society of Addiction Medicine Patient Placement Criteria (ASAM-PPC)

- Sagan Na Homlo currently has 3 certified ICRC Counselor working with the youth in the inpatient / outpatient programs.
- One counselor is a licensed IMFT Therapist.
- 1 staff continues to work on her CEU's that apply towards the ICRC Certification
- 1 staff is currently working on becoming a Recovery Coach by attending training and meeting with Clinical Supervisor for supervision to prepare for ICRC Certification.
- Case Manager is working toward IC&RC Certification.
- Two counselors, the case manager, the residential supervisor, and three residential assistants attended a Disability Awareness Workshop.

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

July 1, 2013 – July 15, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

Sanctuary Representative:

Submitted By: Katrina Tajjeron

Position Title: Case Manager

Reviewed By: Valerie Reyes

Position Title: Program Director

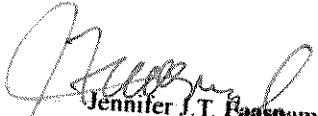
Date: July 18, 2013

DMHSA Representative:

Received By

Position Title:

Date of Submission:

  
Jennifer J. T. Paasomäe  
WPS II Drug & Alcohol Branch, DMHSA

7/19/13 12:30pm

## Attachment 4

*Sanctuary, Incorporated of Guam*

*Runaway and Homeless Youth Basic Center*

Reporting Agency

Department of Youth Affairs

Reports

1. Quarterly financial expenditures and obligation
2. Program progress report





# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101

Crisis Hotline (671)475-7100 • Fax (671)477-3117 • Email: [sanctuar@ite.net](mailto:sanctuar@ite.net)

[www.sanctuaryguam.org](http://www.sanctuaryguam.org)



October 14, 2013

Mr. Adonis Mendiola  
Director of Youth Affairs  
P.O. Box 236371 GMF  
Barrigada, Guam 96921

Dear Mr. Mendiola:

The information listed below is for the Runaway Homeless and Abused Program 4<sup>th</sup> quarter of Fiscal Year 2013 from July 1, 2013 – September 30, 2013.

We have listed all expenditures for services and equipment that were \$5,000 or greater.

Services	-0-
Equipment	-0-
Inventory Property	-0-

Please let us know if you have any questions.

Sincerely,

Mildred Q. Lujan  
Executive Director

**Non Profit Organization Receiving Appropriations from Government of Guam**  
**Pursuant to P.L. 31-77 (Sanctuary, Incorporated)**  
**FY 2013 - (July 1, 2013 - September 30, 2013)**  
**4th Quarter Expenditure Report**  
**Department of Youth Affairs**  
**Runaway Homeless Program**

Fund	Contract Amount	Object Classification	Expenditure
General	\$311,086		
		Salary	-
		Benefits	1,258
		Travel (Mileage)	-
		Contractual	-
		Supplies & Materials	-
		Equipment	-
		Utilities	2,254
		Miscellaneous	-
		Vehicle Lease	-
		Grand Total	<u><u>3,512</u></u>

I CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF THE EXPENDITURES FOR FISCAL YEAR 2013 FOR THE PROJECT ABOVE.

SIGNATURE OF AUTHORIZED OFFICIAL:

  
 \_\_\_\_\_  
 MILDRED Q. LUJAN  
 EXECUTIVE DIRECTOR

DATE: 10/14/2013



# SANCTUARY, INCORPORATED

*"Helping Youth and Families Help Themselves" since 1971*

Address: 406 Mai Mai Rd., Chalan Pago, Guam 96910

\* Tel: 475-7101 \* Fax: 477-3117 \* Crisis Hotline: 475-7100

Website: [www.sanctuaryguam.org](http://www.sanctuaryguam.org) \* E-mail: [inquiries@sanctuaryguam.org](mailto:inquiries@sanctuaryguam.org)



October 15, 2013

To: Adonis Mendiola  
Director  
Department of Youth Affairs

From: Mildred Q. Lujan  
Executive Director  
Sanctuary, Incorporated of Guam

Re: Program Report

Attached is the quarterly program status report for July 1, 2013 to September 30, 2013.

Should you have any questions, please feel free to contact myself at 475-7101 ext. 101 or OJ Taitano at 475-7101 ext. 119.

Sincerely,

  
Mildred Q. Lujan



Department of Youth Affairs

OCT 15 2013

Administrative Services Unit

**FY 2013 RUNAWAY HOMELESS YOUTH (RHY) BASIC CENTER**

**Department of Youth Affairs**

**QUARTERLY PERFORMANCE REPORT FORM**

<b>ORGANIZATION/AGENCY:</b> Sanctuary Incorporated of Guam	
<b>VENDOR NUMBER:</b> S1456001	
<b>PERSON COMPLETING REPORT:</b> Crystal J. Flores	
<b>TELEPHONE:</b> 475-7113	<b>FAX:</b> 477-3117
<b>REPORT PERIOD:</b> July 1, 2013 to September 30, 2013	<b>DATE OF REPORT:</b> October 15, 2013

**Project Description:**

The Runaway Homeless Youth (RHY) Basic Center is a community based program specifically designed to assist runaway, homeless, victims of abuse and other similarly troubled youth and their families. The program provides a 24-hour shelter and care as a safe home for runaway, homeless and victims of abuse for up to 30 days during which case management services are provided in resolving their issues of conflict in times of crisis at the same time keeping focus on strengthening the family as a collective unit. The case management unit includes crisis intervention, individual program planning, group and family counseling, aftercare, outreach and referrals. The primary purpose of the program is to 1) provide a viable temporary safe alternative to the natural home, detention center or the streets; and 2) to facilitate the problem solving process of case management by lowering the level of tension in the family to a point in which constructive dialog may begin.

**Project Goals and Objectives; Project Activities; Project Performance Measures; Project Outcomes:**

<p><b>Goal:</b> The overall goal of the Basic Center is to provide a safe and stable Emergency Shelter for run away and troubled youth and assist them in resolving crisis and conflicts by keeping focus on promoting family unity and improving quality of life for Guam's youth.</p> <p><b>Objective 1.</b> To increase the awareness of available services and issues related to Runaway and Homeless youth and victims of abuse by conducting outreach efforts directed at youth, parents, and community agencies through a 24-hour crisis hotline, presenting information through the local media (newspapers, television &amp; radio), public presentations, bus stop murals, school presentations, door-to-door street outreach, and informational displays at shopping centers throughout the island.</p> <p><b>Indicator/Outcomes/Periodicity:</b> <i>Awareness of available services for run away and troubled youth for the community of Guam as a whole.</i></p>	
---	--

<p><b>Activity A:</b> The Emergency Shelter program will provide individual supportive counseling at least twice a week for each youth residing in the shelter.</p> <p><b>Time Line:</b> Daily; ongoing daily sessions</p> <p><b>Responsible Parties:</b> Case Manager and/or Program Director, and Residential Assistants</p>	<p><b>Results:</b></p> <ul style="list-style-type: none"> <li>• During, this reporting period, Nine (9) youth resided in the shelter during the month of July. Six (6) youth resided in the shelter during the month of August. Ten (10) youth resided in the month of September. At least One Hundred and Sixty (160) individual supportive counseling sessions were conducted that included educational, health and personal growth.</li> </ul>
<p><b>Activity B:</b> To provide therapeutic and recreational activities for youth to promote personal well being.</p> <p><b>Timeline:</b> Daily</p> <p><b>Responsible Parties:</b> Case Manager and/or Program Director, and Residential Assistants</p>	<p><b>Results:</b></p> <ul style="list-style-type: none"> <li>• On a weekly basis, the program facilitates various support activities for therapeutic and recreational purpose such as life skills to include money management, cooking skills, home management, mentoring, and exercise to promote social skills and personal growth.</li> </ul>
<p><b>Objective II.</b> To increase crisis intervention services to runaway and homeless youth and their families by providing 24 hours services to 200 youth parent and/or community members.</p> <p><b>Indicators/Outcomes/Periodicity:</b> <i>Accessibility of children and their families in crisis situations who use Emergency Shelter services.</i></p> <p><b>Activity A:</b> 24-hour crisis hotline is open to the general public to provide immediate feedback, assessments and referrals to appropriate agencies.</p> <p><b>Time line:</b> on-going,</p> <p><b>Responsible Parties:</b> Crisis Intervention Worker, Case Manager, and Program Director</p>	<p><b>Results:</b></p> <ul style="list-style-type: none"> <li>• Two Hundred and Eighty Eight (288) contacts were made via 24-hour crisis hotline.</li> <li>• Household and family dynamics, runaway/throwaways, beyond control, physical abuse and sexual abuse were the top issues of concern for youth who accessed the crisis hotline.</li> </ul>
<p><b>Activity B:</b> Provide referral services for all youth and their family members assessed for services needed from other agencies.</p> <p><b>Timeline:</b> ongoing</p>	<p><b>Results:</b></p> <ul style="list-style-type: none"> <li>• Eighty Seven (87) referrals were made to other agencies, organizations, such as Department of Mental Health and Substance Abuse, Guam Police Department, or to Doris Tolentino, MSW, a licensed Individual Marriage and Family Therapist. The counseling services are provided either individually</li> </ul>

<p><b>Responsible Parties:</b> Crisis Intervention Worker, Case Manager and Program Director.</p>	<p>or by groups. The group counseling is conducted in-house and allows youth to give their feedback and suggestions regarding their experiences of abuse and/or domestic violence. The group also serves as an outlet for youth to share their experiences of separation from family as well as shelter issues that relate to their experiences.</p>
<p><b>Objective III:</b> To reduce the problems of youth 12-17 who are runaway, homeless and victims of abuse by providing temporary shelter and aftercare services for up to 10 youth at any given time while they resolve problematic issues.</p> <p><b>Indicators/Outcomes/Periodicity:</b> <i>Accessibility of emergency 24hr placement for runaway and homeless youth needing assistance/guidance to begin the reunification process.</i></p> <p><b>Activity A:</b> The project will provide temporary shelter and aftercare service for 10 youth 12-17 years of age for up to 30 days while providing the youth with supportive counseling and connecting youth and families with other agencies.</p> <p><b>Activity B:</b> The project will provide basic necessities such as food, clothing, shelter, and transportation services to and from school and appointments while also providing supportive counseling and guidance to promote reunification and reconciliation.</p> <p><b>Timeline:</b> ongoing</p> <p><b>Responsible Parties:</b> Program Director and Case Manager.</p>	<p><b>Results:</b> During this quarter a total of Seventeen (17) youth received shelter services. There were Eleven (11) new intakes admitted to shelter, One (1) youth reentered shelter services two times, Six (6) youth continued to receive shelter services in the month of July, and Eight (8) continue in aftercare services once reunified with their parent or legal guardian.</p> <p>During this Reporting quarter there were no youth terminated from the program.</p> <p><b>Results:</b> During this quarter all youth who were admitted into shelter met their basic needs, reunified with familial placement or was referred to appropriate agencies or organizations to further meet the youth and family's needs. The Case Manager and Program Director worked with other agencies and organizations to help work towards promoting reunification and reconciliation between the youth and family.</p>

<p><b>Objective IV</b> To strengthen family relationships of 120 youth and their families through individual family and group counseling to resolve conflicts that will lead to familial reconciliation and reunification.</p> <p><b>Indicators/Outcomes/Periodicity:</b> <i>Conflict Mediation skills of children and their families</i></p> <p><b>Activity A:</b> Provide 120 family skills training sessions for youth and their families experiencing crisis situations through Sanctuary's 24-hour crisis hotline or Emergency Shelter Program.</p> <p><b>Time line:</b> ongoing</p> <p><b>Responsible Parties:</b> Crisis Intervention Worker, Case Manager and Program Director.</p>	<p><b>Results:</b> Twenty six (26) family skills training sessions were provided this reporting period to youth and their families experiencing crisis. Family sessions were conducted as well to develop a reunification plan. During this quarter all other youth transitioned back home to a parent/legal guardian, alternate familial placement or a foster care home.</p>
<p><b>Activity B:</b> The Project will conduct 45 Anger Management groups for children in crisis situations to learn assertive, non-violent ways of channeling their anger.</p> <p><b>Timeline:</b> ongoing</p> <p><b>Responsible Parties:</b> Program Directors, Case Manager, and AmeriCorps volunteers.</p>	<p><b>Results:</b></p> <ul style="list-style-type: none"> <li>• Thirteen (13) High School YAM classes were conducted this reporting period with an average of Two (2) youth in attendance and were mentored by Sanctuary's AmeriCorps Volunteers during the group session.</li> <li>• Thirteen (13) Middle School YAM classes were conducted during this reporting period with an average of Two (2) youth in attendance and were mentored by Sanctuary's AmeriCorps Volunteers during the group session. The group's participants consisted of youth in Sanctuary's Emergency Shelter program, as well as outside referrals from other agencies such as GDOE, I Famagu'on-ta and Probation.</li> </ul>
<p><b>Objective V:</b> To decrease recidivism and problems of runaway and homeless youth and their families to assist with their transition back home and meet their long-term needs.</p> <p><b>Indicators/Outcomes/Periodicity:</b> <i>Availability of supportive services to children and their families in crisis situations.</i></p> <p><b>Activity A:</b></p>	<p><b>Results:</b> Individual supportive counseling sessions were provided this reporting period to assist youth and their parent/legal guardians to make appropriate decisions relative to their family dynamics. The breakdown of the sessions are as follow: - One hundred and sixty (160) youth individual supportive counseling sessions</p>

<p>The project will provide individual supportive counseling for 120 youth and their parent/legal guardians assisting them in making appropriate decisions relative to their family dynamics.</p> <p><b>Timeline:</b> ongoing</p> <p><b>Responsible Parties:</b> Program Directors and Case-Manager</p>	<ul style="list-style-type: none"> <li>- Twenty six (26) parent individual supportive counseling sessions</li> <li>- IPP completion rate for this quarter is at 90%</li> </ul>
<p><b>Activity B:</b> The project will provide case management services for 200 youth and their families that will enhance stabilize and strengthen their relationships.</p> <p><b>Timeline:</b> ongoing</p> <p><b>Responsible Parties:</b> Program Director and Case Manager</p>	<p><b>Results:</b> Seventeen (17) youth received case management services via the Co-Ed Shelter, Eight (8) Aftercare services.</p>

**Problems Encountered:**

A challenge encountered is identifying placement in a timely manner for youth who are wards of the state due to exhaustion of alternate familial placement and limited foster care placement. Once a youth exits from shelter services, one of the vital parts in maintaining reunification is to sign up for aftercare services to help reduce the recidivism rate. The youth and parent are always encouraged to sign up for aftercare services to help with the transition back home easier when problems arise. The youth and parent are always given a transitional plan to follow in the event they opt to not seek aftercare services. Further, parent involvement in programs (groups and supportive counseling) is limited; parents do not participate in all the services we recommend despite agreeing to participate and access other service upon intake of client.

**Future Plans:**

The Case Management and Counseling Section have developed corrective action plans to address several deficiency areas such as improving data collections, monitoring of case management activities and case updates. This improvement is making significant progress on a daily basis. Sanctuary continues to partner with agencies such as Child Protective Services by a holding monthly meeting to discuss ways to better serve clientele.

**Performance Measures:**

<p>Social Competence</p>	<p>Case Manager and shelter staff have reported observed improvement in social interactions and , defined as maintaining a positive relationships with others in 12 of the 17 (70.5%) clients served within this reporting period. Observations are based on demeanor and nature of client interactions as documented using daily client progress reports.</p>
<p>Family Relationships</p>	<p>Noted improvements in family relationships, defined as willingness to address family issues, and improved styles of communication, has been reported by case manger for 11 of the 17 (64.7%)</p>



	<p>of the clients served this reporting period. Future increase in improved family relationships are expected for the clients who were accessing shelter services during the end of the reporting cycle; more time needed to work with youth and families.</p>
Families Satisfied with Program	<p>Of the total number of family members who have completed the satisfaction survey 100% have reported to be satisfied with all aspects of the program including a 100% of families stating that they will access Sanctuary services for future familial issues. Areas surveyed include:</p> <ol style="list-style-type: none"> <li>1) Noted quality in family relationships</li> <li>2) Future access of services</li> <li>3) Accessibility and response time</li> <li>4) Overall rating of services</li> <li>5) Recommending services to others</li> </ol>
Client Satisfaction	<p>Of all clients who have completed satisfaction survey, 80% have reported an increase quality in familial relationships. 50% have stated that they had good or very good access to services with prompt response time. 80% have rated overall services as good or very good and 100% of clients surveyed have indicated that they would very likely refer others to Sanctuary for services needed.</p>

## Attachment 5

*Sanctuary, Incorporated of Guam*

*Victims of Crime Act*

Reporting Agency

Office of the Attorney General

Reports

1. List of expenditures for services and equipment \$5,000 or greater
2. Quarterly financial expenditures and obligation
3. Program Progress Report



# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101  
Crisis Hotline (671)475-7100 • Fax (671)477-3117 • Email: [sanctuar@ite.net](mailto:sanctuar@ite.net)  
[www.sanctuaryguam.org](http://www.sanctuaryguam.org)



October 7, 2013

Mr. Leonardo M. Rapadas  
Attorney General  
Office of the Attorney General  
287 West O'Brien Drive  
Hagatna, Guam 96932

Dear Mr. Rapadas:

The information listed below is for the VOCA Program 4th quarter of Fiscal Year 2013 from July 1, 2013 – September 30, 2013.

We have listed all expenditures for services and equipment that were \$5,000 or greater.

Services	-0-
Equipment	-0-
Inventory Property	-0-

Please let us know if you have any questions.

Sincerely,

  
Mildred Q. Lujan  
Executive Director

**Non Profit Organization Receiving Appropriations from Government of Guam**  
**Pursuant to P.L. 31-77 (Sanctuary, Incorporated)**  
**FY 2013 (July 1, 2013 - September 30, 2013)**  
**4th Quarter Expenditure Report**  
**Office of the Attorney General**  
**VOCA**

Fund	Contract Amount	Object Classification	Expenditure
Federal	\$ 35,668		
		Salary	\$ 7,621
		Benefits	974
		Travel	-
		Contractual	-
		Supplies & Materials	-
		Equipment	-
		Utilities	-
		Miscellaneous	-
		Grand Total	<u>\$ 8,595</u>

I CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF THE EXPENDITURES FOR FISCAL YEAR 2013 FOR THE PROJECT ABOVE.

SIGNATURE OF AUTHORIZED OFFICIAL:

  
 \_\_\_\_\_  
 MILDRED Q. LUJAN  
 EXECUTIVE DIRECTOR

DATE: 10/09/2013



# SANCTUARY, INCORPORATED

"Helping Youth and Families Help Themselves" since 1971

Address: 406 Maimai Rd., Chalan Pago, Guam 96910

\* Tel: 475-7101 \* Fax: 477-3117 \* Crisis Hotline: 475-7100

Website: www.sanctuaryguam.org \* E-mail: inquiries@sanctuaryguam.org



## Transmittal Form

**Date:** October 4, 2013

**To:** Office of the Attorney General  
Attn: Franklin P. Artero

**Enclosed herewith is the following document:**

1. 4<sup>th</sup> Quarter Report (July 1, 2013 - September 30, 2013)

**Purpose/Action Needed:**

Needs your approval on the above

Needs reply or comment

To fulfill your requirement

Other: \_\_\_\_\_

Cordially,

*Mildred Q. Lujan*

Mildred Q. Lujan  
Executive Director  
Sanctuary, Incorporated of Guam

**ACKNOWLEDGEMENT**

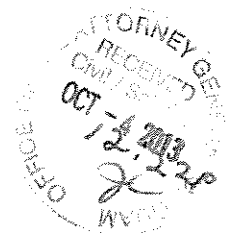
Receipt of the above is hereby acknowledged:

**Print Name:** Josefina Camacho

**Signature:** Josefina Camacho

**Date:** 10-4-13

**Time:** 12:22 PM





# SANCTUARY, INCORPORATED

*"Helping Youth and Families Help Themselves" since 1971*

Address: 406 Maimai Rd., Chalan Pago, Guam 96910

Tel: 475-7101 \* Fax: 477-3117 \* Crisis Hotline: 475-7100

Website: [www.sanctuaryguam.org](http://www.sanctuaryguam.org) E-mail: [inquiries@sanctuaryguam.org](mailto:inquiries@sanctuaryguam.org)



October 4, 2013

To: Franklin P. Artero  
Office of the Attorney General

From: Mildred Q. Lujan  
Executive Director  
Sanctuary, Incorporated of Guam

Re: Program and Financial Report

Attached is the quarterly program status report for July 1, 2013 through September 30, 2013.

Should you have any questions, please feel free to contact myself or George Salas at 475-7101 ext. 102.

Sincerely,

  
Mildred Q. Lujan, Executive Director

# **SANCTUARY, INCORPORATED OF GUAM**

## **VICTIM OF CRIME ACT GRANT**

Quarterly Progress Program Report  
For 4<sup>th</sup> Quarter Ending 9/30/13

- A) **PROJECT GRANT NO.:** 2011-VA-GX-0065
- B) **CONTRACT NO.:** C130600470
- C) **FEDERAL FY OF FUNDING:** 2013
- D) **PROJECT TITLE:** Sanctuary, Incorporated Victim Assistance Program
- E) **REPORTING PERIOD:** July 1, 2013 – September 30, 2013
- F) **SUBGRANTEE NAME AND ADDRESS:** Sanctuary, Incorporated  
#406 Maimai Road  
Chalan Pago, Guam 96910
- G) **REPORT CONTACT:** Mildred Q. Lujan, Executive Director
- H) **ACCOUNT NO.:** 5101H101120SE113-280

### **I. EXECUTIVE SUMMARY**

For this fiscal year, Sanctuary was awarded the sum of \$35,668 under Victims of Crime Act (VOCA) grant as indicated above. The funding is made available through the Office of the Attorney General, Government of Guam which is supported through funding from the Victims of Crime Act Grant, Office for Victims of Crime, Office of Justice programs, and is administered by U.S. Department of Justice. The primary purpose of funding is to provide supportive services in psychological counseling to youth between ages of 12 and 21 who seek services through Sanctuary as a result of being affected by domestic violence, child abuse (physical, mental, emotional, and verbal), sexual assault, or other crimes.

In meeting the contract requirements, Sanctuary provides counseling and intervention services through Valerie Reyes, MA, IMFT, CSACIII, ICADC employed with Sanctuary Incorporated of Guam, Doris Tolentino, MSW, a licensed Individual Marriage and Family Therapist, Helen Onedera, University of Guam (UOG) Masters of Clinical Psychology student intern, and Mike Gombar and Isabella Fagota UOG Undergraduate Social Work student interns who receives clinical supervision by Valerie Reyes. The counseling services are provided either individually or in groups. The group counseling is conducted in-house and allows youth to give their feedback and suggestions regarding their experiences of abuse and/or domestic violence. The group also serves as an outlet for youth to share their experiences of separation from family as well as shelter issues that relate to their experiences.

## **II. PROGRAM ACTIVITIES**

During this reporting period nine (9) staff completed training and received certification in Crisis Prevention Intervention. In addition, Sanctuary continues to participate in the Guam Coalition Against Sexual Assault and Family Violence monthly meetings (GCASAFV) increasing its awareness in prevention of sexual assault and family violence. Sanctuary also continues to meet with Child Protective Services (CPS) to conduct monthly case staffing. Sanctuary offers a twenty-four (24) hour telephone crisis hotline to assist youth who are runaway, homeless, victims' of abuse (physical, emotional, verbal, neglect, etc.) or who are experiencing problems in their family and other relationships (beyond control, drug and alcohol, truancy, etc.). Sanctuary receives calls from all parties regarding youth (self-referral, CPS, Guam Police Department (GPD) etc.). Sanctuary's crisis intervention service is a short-term helping process that focuses on the resolution of immediate problems through the use of personal, social and environmental resources. These services may include, but are not limited to, crisis "hotline", face-to-face emergency interventions (meeting with the youth and/or family in the community or at Sanctuary facilities), outreach, referral services and intake into shelter. The crisis hotline also serves as a resource for referrals to other agencies or nonprofits, requesting information about other agencies in the community that provide services to youth and families. The crisis hotline is overseen by a Crisis Intervention Worker (CIW) who is trained in Applied Suicide Intervention Skills Training (ASIST), Crisis Prevention Intervention (CPI), First Aid/CPR and has received an orientation on Sanctuary's Uniformed Standard Operation and Procedures (USOP). The CIW serves as an advocate for youth and their families and works diligently to provide or connect them with needed services.

## **III. CONCERNS/PROBLEMS AND PROPOSED SOLUTIONS**

An analysis of data for this quarter indicated that the majority of youth entered into emergency shelter were referred through a parent/legal guardian, Child Protective Services (CPS), Guam Police Department (GPD), U.S. Attorney's Office, and Department of Youth Affairs (DYA). There were also several referrals to Sanctuary Groups through Guam Department of Education (GDOE). Majority of the referrals and placements into Emergency Shelter by these agencies were related to victims of educational neglect, emotional abuse, physical abuse, and sexual abuse.

A major concern that the program continues to experience is the increase of victims of sexual and physical abuse. Extra sensitivity is required for these youth when they are in shelter. Sanctuary proposes to accommodate these youth that are in need of this type of assistance by providing groups in shelter that are geared toward specifically helping youth cope with these issues. The island community looks to Sanctuary, Incorporated for help and assistance in their time of crisis. By providing for this particular group Sanctuary services greatly benefit victims of this abuse.



#### **IV. PLANS FOR THE NEXT QUARTER**

Sanctuary will continue its efforts in providing services to young people who are victims of family violence, child/sexual abuse and will conduct numerous outreach activities (night outreach, mall displays and school presentations) to increase awareness of all Sanctuary services. Counseling and needed support services are essential and mandatory services to our clientele. There are limited services available on the island for children between the ages of 12 and 21 in dealing with their issues relating to domestic violence, child abuse, and sexual assault. Staff will continue to participate in various training activities such as Crisis Prevention and Intervention, ASIST (Applied Suicide Intervention Skills Training), First Aid and CPR training; and Case Management as it relates to residents in shelter, aftercare and outreach.

**VICTIMS OF CRIME ACT  
VICTIM STATISTICS WORKSHEET**

FOR THE PERIOD OF:	July 1, 2013-September 30, 2013
Organization:	SANCTUARY, INC
<b>TYPE OF VICTIMIZATION</b>	<b>TOTAL</b>
<i>1. Child Victims of Physical Abuse (0-17)</i>	3
<i>2. Child Victims of Sexual Abuse (0-17)</i>	7
<i>3. Victims of DUI/DWI</i>	
<i>4. Victims of Family Violence</i>	
<i>5. Adult Victims of Sexual Abuse</i>	
<i>6. Elder Abuse</i>	
<i>7. Adults Molested as Children</i>	
<i>8. Survivors of Homicide Victims</i>	
<i>9. Assault</i>	
<i>10. Robbery</i>	
<b>11. Other (TOTAL A-K)</b>	<b>4</b>
<i>A. Arson</i>	
<i>B. Burglary</i>	
<i>C. Child Neglect (Endangerment)</i>	4
<i>D. Fraud</i>	0
1. Forgery	
2. Fraud	
3. Identity Theft	
<i>E. Harassment</i>	0
1. Criminal Mischief	
2. Criminal Trespass	
3. Disorderly Conduct	
4. Harassment	
5. Terrorizing	
<i>F. Kidnapping</i>	
<i>G. Stalking (DV and NON-DV)</i>	
<i>H. Theft</i>	0
1. Theft by Deception	
2. Theft of a Motor Vehicle	
3. Theft of Intellectual Property	
4. Theft of Property	
5. Theft of Services	
<i>I. Vehicular Crimes (Non DUI/DWI)</i>	0
1. Leaving the scene of an accident	
2. Leaving the scene of an accident w/ Injuries	
3. Reckless Driving w/ Injuries	
<i>J. Other: Specify</i>	
<i>K. Other: Specify</i>	
<b>GRAND TOTAL</b>	<b>14</b>
<b>Victims with Disabilities:</b>	

**VICTIMS OF CRIME ACT  
VICTIM STATISTICS WORKSHEET**

## Attachment 6

*Sanctuary, Incorporated of Guam*  
*Energy Efficient and Conservation Project*

Reporting Agency

Guam Environmental Protection Agency/Guam Energy Office

Reports

1. Quarterly financial expenditures and obligation



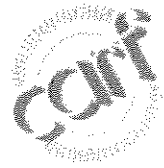
# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101

Crisis Hotline (671)475-7100 • Fax (671)477-3117 • Email: [sanctuar@ite.net](mailto:sanctuar@ite.net)

[www.sanctuaryguam.org](http://www.sanctuaryguam.org)



October 14, 2013

Mr. Peter Calvo  
Director  
Guam Environmental Protection Agency/Guam Energy Office  
548 North Marine Drive  
Tamuning, Guam 96913

Dear Mr. Calvo:

The information listed below is for the Energy Efficiency & Conservation Project 4th quarter of Fiscal Year 2013 from July 1, 2013 – September 30, 2013.

We have listed all expenditures for services and equipment that were \$5,000 or greater.

Services	-0-
Equipment	-0-
Inventory Property	-0-

Please let us know if you have any questions.

Sincerely,

  
Mildred Q. Lujan  
Executive Director

**Non Profit Organization Receiving Appropriations from Government of Guam**  
**Pursuant to P.L. 31-77 (Sanctuary, Incorporated)**  
**FY 2013 (July 1, 2013 - September 30, 2013)**  
**4th Quarter Expenditure Report**  
**Guam Energy Office**  
**Energy Efficiency & Conservation Project**

Fund	Contract Amount	Object Classification	Expenditure
General	\$ 200,000		
		Salary	\$ -
		Benefits	-
		Travel	-
		Contractual	-
		Supplies & Materials	-
		Equipment	-
		Utilities	-
		Miscellaneous	-
		Grand Total	<u>\$ -</u>

I CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF THE EXPENDITURES FOR FISCAL YEAR 2013 FOR THE PROJECT ABOVE.

SIGNATURE OF AUTHORIZED OFFICIAL:

  
 MILDRED Q. LUJAN  
 EXECUTIVE DIRECTOR

DATE: 10/14/2013

## Attachment 7

*Sanctuary, Incorporated of Guam*

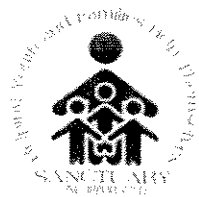
*Forrester's Refuge – Permanent Housing Program*

Reporting Agency

Guam Housing and Urban Renewal Authority (GHURA)

Reports

1. Quarterly financial expenditures and obligation



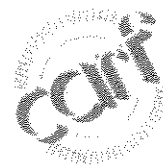
# Sanctuary, Incorporated of Guam

*A Non-profit Organization Established in 1971*

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101

Crisis Hotline (671)475-7100 • Fax (671)477-3117 • Email: [sanctuar@ite.net](mailto:sanctuar@ite.net)

[www.sanctuaryguam.org](http://www.sanctuaryguam.org)



October 14, 2013

Mr. Mike Duenas  
Director  
Guam Housing and Urban Renewal Authority (GHURA)  
117 Bien Venida Avenue  
Sinajana, GU 96910

Dear Mr. Duenas:

The information listed below is for the Forrester's Refuge (GHURA PHP) 4th quarter of Fiscal Year 2013 from July 1, 2013 – September 30, 2013.

We have listed all expenditures for services and equipment that were \$5,000 or greater.

Services	-0-
Equipment	-0-
Inventory Property	-0-

Please let us know if you have any questions.

Sincerely,

Mildred Q. Lujan  
Executive Director

**Non Profit Organization Receiving Appropriations from Government of Guam**  
**Pursuant to P.L. 31-77 (Sanctuary, Incorporated)**  
**FY 2013 (July 1, 2013 - September 30, 2013)**  
**4th Quarter Expenditure Report**  
**Guam Housing and Urban Renewal Authority (GHURA)**  
**Permanent Housing Program**

Fund	Contract Amount	Object Classification	Expenditure	Expenditure
General/Federal	\$123,000/\$36,640			
		Salary		\$ 13,693
		Benefits		1,248
		Travel		-
		Contractual		-
		Supplies & Materials		347
		Equipment		736
		Utilities		3,382
		Miscellaneous		-
		Vehicle Lease		-
		Grand Total		\$ 19,406

I CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF THE  
 EXPENDITURES FOR FISCAL YEAR 2013 FOR THE PROJECT ABOVE.

SIGNATURE OF AUTHORIZED OFFICIAL:

  
 MILDRED Q. LUJAN  
 EXECUTIVE DIRECTOR