



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



January 15, 2014

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

32-14-1167
Office of the Speaker
Judith T. Won Pat, Ed. D.
Date: 1/15/2014
Time: 1:05 PM
Received by: [Signature]

2014 JAN 15 PM 1:31
[Signature]

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 October 1 through December 31, 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.

Mās Rikueto,

Mildred Q. Lujan
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
www.sanctuaryguam.org



January 10, 2014

RECEIVED

01/10/14 3:01pm
181

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 Final Quarter Federal Financial Report for Sanctuary, Incorporated AmeriCorps Program for quarter ending December 31, 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.

Sincerely,

Mildred Lujan
Executive Director
Sanctuary, Incorporated

FEDERAL FINANCIAL REPORT

(Follow form instructions)

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

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

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

8. Project/Grant Period From: (Month, Day, Year) 1-Oct-12	To: (Month, Day, Year) 31-Dec-13	9. Reporting Period End Date (Month, Day, Year) October 01, 2013 - December 31, 2013
---	--	--

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

Federal Cash	
a. Cash Receipts	
b. Cash Disbursements	
c. Cash on Hand (line a minus b)	\$0.00
(Use lines d-o for single grant reporting)	
Federal Expenditures and Unobligated Balance:	
d. Total Federal funds authorized	
e. Federal share of expenditures	\$359,943.00
f. Federal share of unliquidated obligations	\$359,943.00
g. Total Federal share (sum of lines e and f)	\$0.00
h. Unobligated balance of Federal funds (line d minus g)	\$359,943.00
Recipient Share:	
i. Total recipient share required	
j. Recipient share of expenditures	\$170,478.00
k. Remaining recipient share to be provided (line i minus j)	\$81,915.18
Program Income:	
l. Total Federal program income earned	\$88,562.82
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	0
g. Totals:							

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

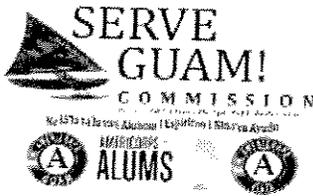
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official Mildred Lujan, Executive Director	c. Telephone (Area code, number and extension) (671) 475-7101
b. Signature of Authorized Certifying Official <i>Mildred Lujan</i>	d. Email address mgomez@sanctuaryppm.org
	e. Date Report Submitted (Month, Day, Year) 10-Jan-14
	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: 11AFHGU0010009	GRANT ID NUMBER: 12AC141703	DOA VENDOR NUMBER S1456001	DOA CONTRACT NUMBER C130600430	EMPLOYER ID: 96-0002543	DUNNS NUMBER: 855025284
--	---------------------------------------	--------------------------------------	--	-----------------------------------	-----------------------------------

PROGRAM PERIOD: **2012-2013** PERIOD CLAIMING FOR: **DECMEBER 2013**

REQUEST NUMBER: **2012-12** FINAL CLAIM: YES NO

FUNDS REQUESTED	\$ 15,873.79
GRANT AWARD	\$ 359,943.00
LESS: PREVIOUSLY REQUESTED:	\$ 344,069.21
SUB-TOTAL	\$ 15,873.79
LESS: AMOUNT OF THIS REPORT	\$(15,873.79)
GRANT BALANCE:	\$ -0-

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: 1-10-14

CERTIFYING OFFICER: [Signature] DATE: 01/10/2014

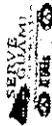
SGC/ DOL USE ONLY – Reviewed against PERIODIC EXPENSE REPORT (PER):

TIFFANY SAN NICOLAS SGC ADMINISTRATIVE AIDE (RECEIVING REPORTS: FISCAL & PROGRAM) HARD COPY/ ECOPY (DOL EMAIL)	DATE: <u>01/10/14</u> TIME: <u>3:01 pm</u>	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: TIME:

SGC/ DOL – ASSURANCE & CERTIFICATION:

DOL CERTIFYING OFFICER: _____ Date: _____
 SGC EXECUTIVE DIRECTOR: Nellie Asanuma Date: _____
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 th of Month in program <i>dol email account</i> .
			FISCAL GMR: MODULE C/ F/ H - <input type="checkbox"/> Financial & Grants Management <input type="checkbox"/> Equipment Inventory – Close Out <input type="checkbox"/> Residual Supplies – Close Out
	✓	TSM	PERIODIC EXPENSE REPORT (PER): CNCS: Due 10 th - Monthly & Supporting Documents; receipts, invoice, bank cancelled checks and/or bank stmts., (e.g. QuickBooks summary, EFT summary from bank)
			PER MATCH: (MODULE J) Due 10 th - Monthly & Supporting Documents; receipts, invoice, bank cancelled checks and/or bank stmts., (e.g. QuickBooks summary, EFT summary from bank)
	✓	TSM	BUDGET MODIFICATION – 10% SGC approval
	✓	TSM	FFR (CNCS and GUAM LEGISLATURE Submitted quarterly with attached organization letter)
			A-133 (External Audit for all programs) - submit eCopy
	✓	TSM	GUAM AMERICORPS PORTAL SYSTEM (GAPS) vs. eGRANTS <input type="checkbox"/> Member Checklist (1 st Reimbursement) <input type="checkbox"/> Monthly Member Service Schedule (Satellites – Members site location) <input type="checkbox"/> Monthly Service Log (MSL's and 2 <i>Volunteer Recruitment</i>) <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
AMERICORPS PROGRAMS			
			<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
THEORY OF CHANGE (TOC) : PERFORMANCE MEASURES (MONTHLY & QUARTERLY) – Submit eCopy (Monthly & Quarterly) to program DOL acct			
	✓	TSM	<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)
			MONTHLY RISK ASSESSMENT: FISCAL & PROGRAM – (10 th of each month)
			CLOSE OUT OF PROGRAMS <input type="checkbox"/> Fiscal <input type="checkbox"/> Program
Comments/ Remarks:			



CNCS: PY2012-2013

Section / Personnel	CNCS SHARE	3RD JAN BUDGET MODIFICATION	BUDGET TOTAL	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	PROGRAM TOTAL	CNCS BUDGET YTD BAL
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	2,411.64	1,607.76	1,607.76	16,077.60	75,942.72
Program Coordinator	13,094.00			1,511.52	1,712.24	1,812.96	1,359.72	1,410.08	1,007.20	1,007.20	1,007.20	1,007.20	1,510.80	1,007.20	1,007.20	13,094.00	5,450.52
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	1,644.00	1,096.00	1,096.00	14,248.00	0.00
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	1,248.00	832.00	832.00	10,816.00	0.00
Total - Personnel	61,381.00	0.00	0.00	7,773.76	8,272.32	8,551.68	6,413.76	6,547.32	4,542.96	4,542.96	4,542.96	4,542.96	6,814.44	4,542.96	4,542.96	71,631.04	0.00
Fringe																	
Health Insurance	4,696.00	-0.35	5,479.78	594.69	632.83	654.20	490.65	500.87	347.54	347.54	347.54	347.54	521.30	347.54	347.54	5,479.78	0.00
Worker's Compensation	2,700.00	-41.73	2,731.30	474.40	0.00	355.80	355.80	355.80	366.00	366.00	91.50	0.00	0.00	366.00	0.00	2,731.30	0.00
Total - Fringe	7,580.00	-41.73	8,211.08	1,069.09	632.83	1,009.99	846.45	856.67	713.54	713.54	439.04	347.54	521.30	713.54	347.54	8,211.08	0.00
S/Total (A/B)	68,961.00	-131.42	8,305.74	8,890.18	8,905.15	9,609.01	7,260.21	7,403.99	5,256.50	5,256.50	4,982.00	4,890.50	7,335.74	5,256.50	4,890.50	79,936.78	0.00
Staff Travel																	
National Volunteer Conf	3,950.00		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
MYSN	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
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	0.00	0.00	0.00	0.00
S/Total - staff travel	4,350.00		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
Member Travel																	
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	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	0.00	0.00	0.00	0.00
S/Total - member travel	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
Total - travel	4,350.00	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	0.00
Equipment	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
Supplies																	
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	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	0.00	0.00	0.00	0.00
Gasoline	1,050.00	1.08	1,051.08	0.00	106.99	111.92	69.00	191.21	138.21	110.94	148.65	0.00	0.00	0.00	0.00	1,051.08	0.00
Service Gears	3,520.00		0.00	0.00	0.00	0.00	0.00	2,353.00	0.00	0.00	49.90	0.00	0.00	0.00	0.00	3,520.00	0.00
Total - Supplies	4,570.00	1.08	3,453.98	0.00	106.99	111.92	69.00	2,544.21	138.21	110.94	198.55	0.00	0.00	0.00	0.00	3,453.98	0.00
Contractual																	
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	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	0.00	0.00	0.00	0.00
Vehicle Lease	4,700.00	-1,326.00	3,374.00	0.00	0.00	625.00	625.00	625.00	625.00	437.00	0.00	0.00	0.00	0.00	0.00	3,374.00	0.00
Telephone	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
Cell Phone	2,300.00	-852.58	1,447.42	0.00	0.00	159.27	398.56	186.00	185.70	75.03	221.43	0.00	0.00	0.00	0.00	1,447.42	0.00
Total - Contractual	7,000.00	-2,178.58	4,821.42	0.00	0.00	784.27	1,023.56	811.00	810.70	512.03	221.43	0.00	0.00	0.00	0.00	4,821.42	0.00
Total	80,000.00	-131.42	8,305.74	8,890.18	8,905.15	9,609.01	7,260.21	7,403.99	5,256.50	5,256.50	4,982.00	4,890.50	7,335.74	5,256.50	4,890.50	79,936.78	0.00



SANCTUARY INCORPORATED - AYUDA PARA I KOMUNITAS

Section / Personnel	PROGRAM SHARE	BUDGET MODIFICATION	BUDGET TOTAL	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	PROGRAM TOTAL	CYCS BUDGET YTD BAL
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	2,411.64	1,607.76	1,607.76		
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	1,510.80	1,007.20	1,007.20		
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	1,644.00	1,096.00	1,096.00		
Admin Asst	10,816.00			0.00	0.00	0.00	332.80	1,081.60	832.00	832.00	832.00	832.00	1,248.00	832.00	832.00		
Total - Personnel	61,380.00	0.00	0.00	0.00	0.00	0.00	2,137.92	6,547.32	4,542.96	4,542.96	4,542.96	4,542.96	6,814.44	4,542.96	4,542.96	42,757.44	18,622.56
Fringe																	
FICA	4,695.00			0.00	0.00	0.00	163.55	500.87	347.54	347.54	347.54	347.54	521.30	347.54	347.54		
Health Insurance	8,100.00			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Worker's Compensation	184.00			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Total - Fringe	12,979.00	0.00	0.00	0.00	0.00	0.00	163.55	500.87	347.54	347.54	347.54	347.54	521.30	347.54	347.54	3,545.45	9,433.55
S/Total (A/B)	74,359.00	0.00	0.00	0.00	0.00	0.00	2,301.47	7,048.19	4,890.50	4,890.50	5,165.00	4,890.50	7,335.74	4,890.50	4,890.50	46,302.89	28,056.11
Staff Travel																	
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	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	0.00	0.00		
Local Mileage	612.00		612.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
S/Total - staff travel	612.00		612.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Member Travel																	
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	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	0.00	0.00		
S/Total - member travel	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		
S/Total - travel	612.00	0.00	612.00	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
Equipment																	
Supplies																	
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	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	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	0.00	0.00	0.00		
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	0.00	0.00		
S/Total - Supplies	150.00		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		
Contractual																	
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	0.00	0.00	0.00		
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	0.00	0.00	0.00		
Vehicle Lease	3,100.00		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		
Telephone	840.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	188.00	0.00	0.00	0.00	188.00	0.00		
Cell Phone	4,900.00		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		
S/Total - Contractual	11,540.00	0.00	1,224.00	0.00	0.00	0.00	0.00	0.00	0.00	159.43	0.00	0.00	0.00	471.82	0.00	1,007.25	4,467.25

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

"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



January 14, 2014

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 October 1, 2013 through December 31, 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, Executive Director
Sanctuary Incorporated of Guam

RECEIVED 
Director's Office
Division Of General Administration

JAN 14 2014

DPH&SS

Time: 2:47 PM Locator#:



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



Foster Care Payments

Bureau of Social Service, Division of Public Health Welfare

Department of Public Health and Social Service

Report Period: October 1, 2013 – December 31, 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 **\$742.31 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
October 2013	1	1
November 2013	1	6
December 2013	2	6
Total:	4	13

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 •

www.sanctuaryguam.org

CONF

January 8, 2014

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 December 16, 2013 to December 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
1/8/14
Drug & Alcohol Branch,
DANSA

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo		Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 12/31/2013
TO: Mr. Ray Vega Acting Director Guam Behavioral Health & Wellness Center (DMHSA)		Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-006	
COSTS INCURRED BY CATEGORY		AMOUNT	
1. Personnel		\$ 20,086.00	
2. Fringe Benefits		\$ 2,400.00	
3. Contractual		\$ 400.00	
4. Other		\$ 350.00	
5. Supplies		\$ 1,000.00	
6. Utilities		\$ 2,180.00	

TOTAL PAYMENT REQUEST:

\$ 26,416.00

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 01/02/2014
 MILORED Q. LUJAN Date
 Sanctuary, Incorporated
 Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2014-006 to be true and correct; and that services for December 16-31, 2013 have been rendered; and payment for this period is due.

 Don Sabang
 D & A Supervisor

Bi-Weekly Reporting Period:

**Rehabilitation Services for Adolescents
December 16, 2013 to December 31, 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 sessions were conducted
- 2 participants in attendance [12/18 (2)]
- Group held on Wednesday & 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: 06 (waiting on orientation)

14 Active Clients NON-Duplicate

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

The Group lesson/activity was: Triggers of Tobacco & time management

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 identify the different triggers based on personal experiences and ways to overcome or substitute down time for positive/productive behaviors.

State any commendations to show the strengths of the Program.

The strength of the class was that each client was able to share their week experience if they encountered any triggers.

State any recommendations for the improvement of service delivery.

Continue networking with our community partners and provided referrals if needed based on progression of clients. The staff will continue to keep updated with articles, online news & information regarding substance abuse/addiction.

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."

During this bi-weekly reporting period:

- 4 sessions were conducted
- 22 participants in attendance [12/21/13 (12); 12/28/13 (10)]
- Groups are held on Saturday from 12-2 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: 5 pending PPD clearances.

6 Active Clients NON-Duplicate

Bi-Weekly Reporting Period:		Rehabilitation Services for Adolescents December 16, 2013 to December 31, 2013	
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?	The Group lesson/activity was: Holidays and Recovery; Life Satisfaction Scale; and Pros and Cons. Each client was provided the opportunity to discuss each topic. 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. 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 commendations to show the strengths of the Program:	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.		
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."	During this bi-weekly reporting period: <ul style="list-style-type: none"> 6 sessions were conducted 40 participants in attendance [12/20/13 (12); 12/21/13 (16); 12/28/13 (12)] 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: 3 Number of Clients Transferred to another level of Care: 3 (transitioned to level 0.7) Number of Clients on the Wait List: 0 		
II.3a Treatment capacity in ASAM Level 0.7 for all individuals who completed level II. 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: <ul style="list-style-type: none"> 3 Clients in Aftercare (Social Support) Level 0.7 Transfer to another level of Care: 0 3 Active Clients NON-Duplicate 		
In narrative form, briefly state how activities from II.3.a	The Group lesson/activity was: weekly check-in; review of group rules; Drug		

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
December 16, 2013 to December 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

to II.3.c were implemented and addressed?

Testing: Calendar, External Triggers, Trigger Chart; Today I Feel; Twelve Step Introduction; Graduation; Christmas in Recovery; Internal Trigger Questionnaire; What is Important: One Day at a Time; safety Plan; and Continuing Care Plan. 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.

MATRIX Model Parent Education / Support Group

During this bi-weekly reporting period:

- 2 sessions was conducted
- 27 participants [12/21 (14), 12/28 (13)]
- Group time identified for Saturdays from 12:00pm—1:00pm at the Sanctuary, Inc. Main Office.

20 Active Family Members NON-Duplicate

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

On 12/21 the topic was: "Family Christmas Party"

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
December 16, 2013 to December 31, 2013

Task / Activity

Sanctuary, Inc. Bi-Weekly Progress Report

addressed?

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

On 12/28 the topic was "Drug Information"

12/21/2013 Family Members enjoyed a combined group in which their children performed a Christmas Play, Participated in White Elephant Exchange Gift Game and Pot Luck Luncheon. Family members were able to celebrate with their children openly and without substances.

12/28/2013 Drug Information provided to Parents on Methamphetamine, Cannabis, and Alcohol. What it is, Short-Term Effects, Long-Term Effects, Signs of Usage, and Legal Status discussed. Parents were also educated on the Laws on Guam surrounding Underage Drinking and where they can find the law on Legal Age limit on Guam.

State any commendations to show the strengths of the Program:

Family Involvement in the Treatment process is the strength. Many loved ones come in to the groups feeling like they have failed as parents, this belief is quickly addressed with other family members who have been in group longer providing support and suggestions on how to deal with issues.

State any recommendations for the improvement of service delivery:

Additional Funding is HIGHLY Recommended in order that Motivational Incentives be provided in the Family Session. Many Family members struggle with Transportation issues and incentive like Gas Coupon would be very helpful for these family members.

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."

During this bi-weekly reporting period:

- 6 Clients were served with 1 Client Transferred to a higher level of care outside of Drug & Alcohol Residential Setting.
- 5 Active Clients ~~NON-DUPLICATE~~.

- Wait Listing: 6 (4 are scheduled for orientation/intake and 2 are pending medical clearance)

Phase Breakdown:

- Orientation: 1
- Awareness: 1
- Enhancement: 2
- Enlightenment: 1
- Empowerment: 0

In the Reporting period: 1 client progressed to Awareness, 2 clients

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
December 16, 2013 to December 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

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

progressed to Enhancement. 1 client progressed to Enlightenment, and 1 client graduated from Residential Treatment.
During this Bi-weekly reporting period:

- 2 Clients in Aftercare (Social Support) Level 0.7 from Residential
- Transfer to another level of Care: 0
- Successful Completion: 1 (Case Closed / Tx goals met)

2 Active Clients NON-Duplicate

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 using the Therapeutic Community Model. Clients participate in a regulated daily routine with a structured schedule. Activities included: morning physical exercises, weekly instructional classes, and weekly classroom work with a certified GPSS Teacher. Group sessions include: Early Recovery Skills, Relapse Prevention Group, Youth anger management, Decision making skills, life skills, team building skills, relationship intelligence, emotional wellness. Individualized care includes: Weekly Family Case Staffing, Weekly Individual counseling sessions, Weekly to Bi-Weekly individual case management sessions, Morning and Evening peer run "Family" (aka: Client Government). Residential Clients attend 12-step Support groups out in the community four (4) days weekly.

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. Sagan Na' Homlo offers the individual and their family the opportunity to restructure, refrain and to recover from the ills 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, adolescent education, family sessions, early recovery group, relapse prevention group, and highly recommends weekly 12-step participation.

State any recommendations for the improvement of

All efforts are channeled in enhancing our working relationship with our

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
December 16, 2013 to December 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

service delivery:

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

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.

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.

Effective 12/18/2013 all Referrals made for Drug & Alcohol Services have been routed through the GBHC-New Beginnings Program for Referrals as now required by funding source. Screening is conducted by staff at GBHC, and reviewed by Clinical Director from Sanctuary upon return with referral.

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 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:

DMHSA Representative:

Valerie Reyes 
Position Title: Clinical Director
Date: January 7, 2014

Received By: 
Position Title: WPS-A
Date of Submission: 1/8/14 4:18pm



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



December 23, 2013

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

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

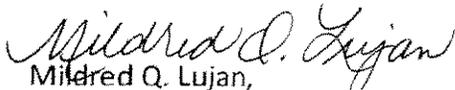
From: Mildred Q. Lujan
Executive Director
Sanctuary, Incorporated

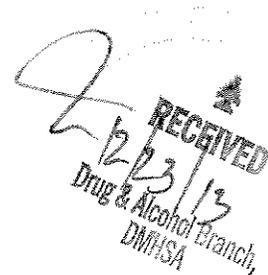
Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of December 1, 2013 to December 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



FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo		Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 12/15/2013
TO: Mr. Ray Vega Acting Director Guam Behavioral Health & Wellness Center (DMHSA)		Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-005	
COSTS INCURRED BY CATEGORY		AMOUNT	
1. Personnel		\$ 20,086.00	
2. Fringe Benefits		\$ 2,400.00	
3. Contractual		\$ 400.00	
4. Other		\$ 350.00	
5. Supplies		\$ 1,000.00	
6. Utilities		\$ 2,180.00	

TOTAL PAYMENT REQUEST: \$ 26,416.00

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-2014-005 to be true and correct, and that services for December 01-15, 2013 have been rendered, and payment for this period is due.

 Don Sabang
 D & A Supervisor

Rehabilitation Services for Adolescents	
Bi-Weekly Reporting Period:	December 1, 2013 to December 15, 2013
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report
<p>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."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 6 sessions were conducted • 9 participants in attendance [12/3 (2); 12/4 (2); 12/5 (1); 12/11 (4)] • Group held on Tuesday (2:00-3:00)/Wednesday/Thursday (4:30-5:30) at the Sanctuary, Inc. Main Office • Number of Successful Completions: 1 • Number of Clients Transferred to another level of Care: 2 – Level I • Number of Clients on the Wait List: 13 (waiting on orientation) • Active Clients: 13 NON-DUPLICATE
<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: Time Management & Triggers of Alcohol</p>
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>Clients benefited by openly discussing about time management and keeping themselves busy/occupied when tempted or triggered by their peers or significant events that happen around them.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>The strength of the classes was that the clients were able to create a weekly schedule as a tool to journalize if they have triggers and in what ways they able to deal with a trigger or triggers in a positive way. (This will be utilized in the next class discussion.)</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>Continue networking with our community partners and provided referrals if needed based on progression of clients. The staff will continue to keep updated with articles, online news & information regarding substance abuse/ addiction.</p>
<p>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."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 2 sessions were conducted • 11 participants in attendance [12/7/13 (5); 12/14/13 (6)] • Groups are held on Saturday from 12-2 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: 7 pending PPD clearances. • Active Clients: 8 NON-DUPLICATE

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
December 1, 2013 to December 15, 2013

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?

The Group lesson/activity was: Calendar and Stickers, Taking Care of yourself, and Family Group-Movie "My Name is Bill W" Each client was provided the opportunity to discuss each topic openly.

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

- Calendar and Stickers – Clients were able to identify the importance of scheduling by structuring their time daily to help stay sober and meet goals.
- Taking Care of yourself – Clients were able to discuss ways they can take care of themselves. Client identified how taking care of themselves helps motivate them to continue working towards their goal and help reduce stress levels that can be a trigger to use substances.
- Family Group – Movie – My Name is Bill W. – Clients and their caregivers watched a movie that portrayed the struggles of alcoholics and their families. The movie depicts the different stages of recovery and how an individual was able to meet his goal of recovery with support from other alcoholics.

State any commendations to show the strengths of the Program:

The strengths of the program clients are able to get immediate feedback from their peers on how to handle situations sober, and to help provide motivation to keep trying until something works.

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.
During this bi-weekly reporting period:

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."

- 8 sessions were conducted
- 67 participants in attendance [12/6/13 (11); 12/07/13 (11); 12/13/13 (7); 12/14/13 (6)]
- 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: 1
- Number of Clients Transferred to another level of Care: 0
- Number of Clients on the Wait List: 0
- **Active Orders: 1 NON-DUPLICATION**

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

The Group lesson/activity was: weekly check-in; review of group rules; Calendar; Trigger-Thoughts-Craving-Use; Sex & Recovery; You're Decision to Use or Not Use; Thought-stopping Techniques; Repairing Relationships; Making New Friends; Eternal Triggers; Today I Feel; and "My Name is Bill

Rehabilitation Services for Adolescents	
Bi-Weekly Reporting Period:	December 1, 2013 to December 15, 2013
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report
In narrative form, briefly state how clients benefited from the core functions or services from this level?	<p>w. 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.</p> <p>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.</p>
State any commendations to show the strengths of the Program:	<p>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.</p> <p>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.</p>
State any recommendations for the improvement of service delivery:	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 2 sessions was conducted • 19 participants [12/7 (9); 12/14 (10)] • Group time identified for Saturdays from 12:00pm—2:00pm at the Sanctuary, Inc. Main Office. • FAMILY MEMBERS IS NON DUPLICATE
MATRIX Model Parent Education / Support Group	
In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?	<p>On 12/7 the topic was: "Creating Healthy Functional Families"</p> <p>On 12/14 Family Groups was combined with a movie "MY NAME IS BILL W"</p>
In narrative form, briefly state how Family benefited from the core functions or services from this level?	<p>12/7/2013: Group began with report on Homework of asking teens in treatment "What are your triggers" Parents reported having a better understanding of just how critical it is to know what triggers their children to use so they can play an active role in their child's recovery process.</p>

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
December 1, 2013 to December 15, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

State any commendations to show the strengths of the Program:

TODAY's group focused on Creating healthy functional families with the rules for communication and ways they can be consistent in being fair, respected, and firm when imposing and following through with Family Rules.
12/14/13: Many Family Members expressed being able to relate to the film as they saw the Founder of the 12-step group struggle with alcoholism. One parent shared how they

State any recommendations for the improvement of service delivery:

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. Additional Funding is HIGHLY Recommended in order that Motivational Incentives be provided in the Family Session. Many Family members struggle with Transportation issues and incentive like Gas Coupon would be very helpful for these family members.

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."

During this bi-weekly reporting period:

- 7 Clients were served with 1 Client Transferring to another level of Care due to successful completion of Treatment.
- 6 Clients remain in shelter as of this reporting period. **NON-DUPLICATE**
- Wait Listing: 3 (all pending medical clearances)

Phase Breakdown:

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

II.5a Treatment capacity in ASAM Level 0.7 for all individuals who completed level III.5. State the number of

In the Reporting period: 1 client progressed to Awareness, 1 client progressed to enlightenment, and 1 client graduated from Residential Treatment
During this Bi-weekly reporting period:

Bi-Weekly Reporting Period:		Rehabilitation Services for Adolescents	
		December 1, 2013 to December 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		<ul style="list-style-type: none"> • 3 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 0 • Successful Completion: 2 (1 client began working and 1 client successfully attending school.) 	
In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?		<p>Sagan Na' Homlo is a 24/7 structured program using the Therapeutic Community Model. Clients participate in a regulated daily routine with a structured schedule. Activities included: morning physical exercises, weekly instructional classes, weekly classroom work with a certified GPSS Teacher. Group sessions include: Early Recovery Skills, Relapse Prevention Group, Youth anger management, Decision making skills, life skills, team building skills, relationship intelligence; emotional wellness. Individualized care includes: Weekly Family Case Staffing, Weekly Individual counseling sessions, Weekly to Bi-Weekly individual case management sessions, Morning and Evening peer run "Family" (aka: Client Government). Residential Clients attend 12-step Support groups out in the community four (4) days weekly.</p>	
In narrative form, briefly state how clients benefited from the core functions or services from this level?		<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>	
State any commendations to show the strengths of the Program:		<p>Sagan Na' Homlo is the only Adolescent residential treatment on Guam. Sagan Na' Homlo offers the individual and their family the opportunity to restructure, refrain and to recover from the ills 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 weekly 12-step participation.</p>	
State any recommendations for the improvement of service delivery:		<p>All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.</p>	
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.		<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>	
II.7 Work with DMHSA and its partners to establish a system of care for substance abuse		<p>Program staff continues to work with Department of Youth Affairs, Guam Public School System (GPSS), Juvenile Drug Court (JDC), Community</p>	

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
December 1, 2013 to December 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 (AIMEFT) 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.
- I staff continues to work on her CEU's that apply towards the ICRC Certification.
- I 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:

DMHSA Representative:

Valerie Reyes
Position Title: Clinical Director
Date: December 20, 2013

Received By:

Position Title:

Date of Submission:

[Handwritten Signature]
NPS # *[Handwritten]*
12/23/13 - 4:45 pm



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



December 4, 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 November 16, 2013 through November 30, 2013.

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

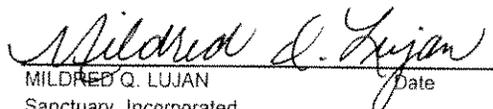
Sincerely,


Mildred Q. Lujan

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo	Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 11/30/2013
TO: Mr. Ray Vega Acting Director Guam Behavioral Health & Wellness Center (DMHSA)	Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-004	
COSTS INCURRED BY CATEGORY		AMOUNT
1. Personnel		\$ 20,086.00
2. Fringe Benefits		\$ 2,400.00
3. Contractual		\$ 400.00
4. Other		\$ 350.00
5. Supplies		\$ 1,000.00
6. Utilities		\$ 2,180.00

TOTAL PAYMENT REQUEST: \$ 26,416.00

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
 Sanctuary, Incorporated
 Executive Director

12/04/2013
Date

Recommended for payment: I certify Invoice No. DMHSA-2014-004 to be true and correct; and that services for November 16-30, 2013 have been rendered; and payment for this period is due.

Don Sabang
D & A Supervisor

Rehabilitation Services for Adolescents	
Bi-Weekly Reporting Period:	November 16, 2013 through November 30, 2013
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report
<p>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."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 2 sessions were conducted (11/14/13= 4; 11/21/13 = 3) • 7 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: 0
<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: What is the hype about drugs and alcohol? / Why am I here?</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: All clients engaged in an active discussion & hands on activity as to why peers their age experiment with drugs and alcohol; and a better understanding why are they receiving educational services in regards to drugs and alcohol.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>The strength of the classes was that the client were able to get a better understanding as to why teenagers follow trends of the drugs and alcohol world as a way to overcome certain emotions in life as well as a way to fit in.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>Continue networking with our community partners and provided referrals if needed based on progression of clients. The staff will continue to keep updated with articles, online news & information regarding substance abuse/ addiction.</p>
<p>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."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 5 sessions were conducted (11/16/13 = 1; 11/23/13 = 3; 11/30/13 = 6) • 20 participants in attendance • Groups are held on Saturday from 12-2 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: 6 pending PPD clearances.

Rehabilitation Services for Adolescents	
Bi-Weekly Reporting Period:	November 16, 2013 through November 30, 2013
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?	<ul style="list-style-type: none"> Active Clients: 8 <p>The Group lesson/activity was: Guilt & Shame; Scheduling; I'm not cool if I don't use; treatment planning; family session – what is important. Each client was provided the opportunity to discuss each topic.</p> <p>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.</p> <p>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.</p>
In narrative form, briefly state how clients benefited from the core functions or services from this level?	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.
State any commendations to show the strengths of the Program:	During this bi-weekly reporting period: <ul style="list-style-type: none"> 10 sessions were conducted 96 participants in attendance [11/16/13 (10); 11/22/13 (10); 11/23/13 (9); 11/29/13 (10); 11/30/13 (9)] 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: 1 Number of Clients Transferred to another level of Care: 1 Number of Clients on the Wait List: 0 Active Clients: 13
State any recommendations for the improvement of service delivery:	
<p>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.”</p>	
In narrative form, briefly state how activities from II.3.a to II.3.c were implemented and addressed?	The Group lesson/activity was: weekly check-in; review of group rules; Drug Testing; Calendar; “Once Were Warriors” Treatment Planning Review; What

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

November 16, 2013 through November 30, 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>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.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>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.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>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.</p>
<p>MATRIX Model Parent Education / Support Group</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 3 sessions were conducted • Family Members in attendance (11/16 = 9, 11/23 = 4, 11/30 = 12) • 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
<p>In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and</p>	<p>On 11/16/13 My Strengths. Parents talked about the social work profession and strengths of parents. Reviewed drug and alcohol information.</p>

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

November 16, 2013 through November 30, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

addressed?

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

11/23/13 What is important discussion with video Radio. Caregivers and adolescents watched a movie that showed the different family values, the discrepancies of their beliefs and their actions. Group discussed what they are thankful for and their appreciations for one another. Group identified a word they use in their language that had the closest meaning to "Thankful".
11/30/13 Road map for recovery. Family members were introduced to the process of "Recovery" and what to expect within the first six months.

November 16, 2013
Members discussed what they are good at and hopes for their children.
November 23, 2013
Parents and adolescents were able to share how much they appreciate each other and their continued support.
November 30, 2013
Parents were able to gain knowledge about what their child may be going through in the first six months of treatment.

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. 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.

State any recommendations for the improvement of service delivery:

During this bi-weekly reporting period:

- 7 Clients were served.
- Transfer to another level of Care: 1 (Aftercare)
- Wait Listing: 4

Phase Breakdown:

- Orientation: 2
- Awareness: 2
- Enhancement: 1

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."

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

November 16, 2013 through November 30, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

<p>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</p>	<ul style="list-style-type: none"> • Enlightenment: 0 • Empowerment: 2 <p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 6 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 0
<p>In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?</p>	<p>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.</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>In narrative form, briefly state how clients benefited from the core functions or services from this level?</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 commendations to show the strengths of the Program:</p>	<p>All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>Multi-level Interventions are still considered the best practice. It provides</p>

II.6 Implement evidence-based models and practices

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
November 16, 2013 through November 30, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

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.

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

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.

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 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.

DMHSA Representative:

Received By: _____

Position Title: _____

Date of Submission: _____

Submitted By: Valerie Reyes
Position Title: Program Director
Reviewed By: Mildred Q. Lujan
Position Title: Executive Director
Date: December 4, 2013



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



December 4, 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 November 16, 2013 through November 30, 2013.

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

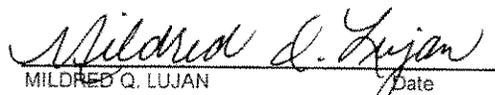
Sincerely,


Mildred Q. Lujan

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo	Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 11/30/2013
TO: Mr. Ray Vega Acting Director Guam Behavioral Health & Wellness Center (DMHSA)	Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-004	
COSTS INCURRED BY CATEGORY		AMOUNT
1. Personnel		\$ 20,086.00
2. Fringe Benefits		\$ 2,400.00
3. Contractual		\$ 400.00
4. Other		\$ 350.00
5. Supplies		\$ 1,000.00
6. Utilities		\$ 2,180.00

TOTAL PAYMENT REQUEST: \$ 26,416.00

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.

 12/04/2013
 MILDRED Q. LUJAN Date
 Sanctuary, Incorporated
 Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2014-004 to be true and correct; and that services for November 16-30, 2013 have been rendered; and payment for this period is due.

 Don Sabang
 D & A Supervisor

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

November 16, 2013 through November 30, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

<p>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."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 2 sessions were conducted (11/14/13 = 4; 11/21/13 = 3) • 7 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: 0
<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: What is the hype about drugs and alcohol? / Why am I here?</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: All clients engaged in an active discussion & hands on activity as to why peers their age experiment with drugs and alcohol; and a better understanding why are they receiving educational services in regards to drugs and alcohol.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>The strength of the classes was that the client were able to get a better understanding as to why teenagers follow trends of the drugs and alcohol world as a way to overcome certain emotions in life as well as a way to fit in.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>Continue networking with our community partners and provided referrals if needed based on progression of clients. The staff will continue to keep updated with articles, online news & information regarding substance abuse/ addiction.</p>
<p>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."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 5 sessions were conducted (11/16/13 = 1; 11/23/13 = 3; 11/30/13 = 6) • 20 participants in attendance • Groups are held on Saturday from 12-2 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: 6 pending PPD clearances.

Rehabilitation Services for Adolescents	
Bi-Weekly Reporting Period:	November 16, 2013 through November 30, 2013
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?	<ul style="list-style-type: none"> Active Clients: 8 <p>The Group lesson/activity was: Guilt & Shame; Scheduling; I'm not cool if I don't use; treatment planning; family session – what is important. Each client was provided the opportunity to discuss each topic.</p> <p>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.</p> <p>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.</p>
In narrative form, briefly state how clients benefited from the core functions or services from this level?	<p>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.</p> <p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> 10 sessions were conducted 96 participants in attendance [11/16/13 (10); 11/22/13 (10); 11/23/13 (9); 11/29/13 (10); 11/30/13 (9)] 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: 1 Number of Clients Transferred to another level of Care: 1 Number of Clients on the Wait List: 0 Active Clients: 13
State any commendations to show the strengths of the Program:	
State any recommendations for the improvement of service delivery:	
<p>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.”</p>	
In narrative form, briefly state how activities from II.3.a to II.3.e were implemented and addressed?	<p>The Group lesson/activity was: weekly check-in; review of group rules; Drug Testing; Calendar; “Once Were Warriors” Treatment Planning Review; What</p>

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

November 16, 2013 through November 30, 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>is Important, Relapse Justification II; Pros and Cons; Triggers; What Do You Want To Do With Your Substance Use; and Life Satisfaction Scale. 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.</p> <p>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.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>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.</p> <p>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.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 3 sessions were conducted • Family Members in attendance (11/16 = 9, 11/23 = 4, 11/30 = 12) • 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
<p>MATRIX Model Parent Education / Support Group</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 3 sessions were conducted • Family Members in attendance (11/16 = 9, 11/23 = 4, 11/30 = 12) • 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
<p>In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and</p>	<p>On 11/16/13 My Strengths. Parents talked about the social work profession and strengths of parents. Reviewed drug and alcohol information.</p>

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

November 16, 2013 through November 30, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

addressed?

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

11/23/13 What is important discussion with video Radio. Caregivers and adolescents watched a movie that showed the different family values, the discrepancies of their beliefs and their actions. Group discussed what they are thankful for and their appreciations for one another. Group identified a word they use in their language that had the closest meaning to "Thankful". 11/30/13 Road map for recovery. Family members were introduced to the process of "Recovery" and what to expect within the first six months.

November 16, 2013
Members discussed what they are good at and hopes for their children.
November 23, 2013
Parents and adolescents were able to share how much they appreciate each other and their continued support.
November 30, 2013
Parents were able to gain knowledge about what their child may be going through in the first six months of treatment.

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. 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.

State any recommendations for the improvement of service delivery:

During this bi-weekly reporting period:

- 7 Clients were served.
- Transfer to another level of Care: 1 (Aftercare)
- Wait Listing: 4

Phase Breakdown:

- Orientation: 2
- Awareness: 2
- Enhancement: 1

III.5 Maintain treatment capacity in ASAM Level 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."

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

November 16, 2013 through November 30, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

<p>II.5a Treatment capacity in ASSAM 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>	<p>Enlightenment: 0 Empowerment: 2</p> <p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 6 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 0
<p>In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?</p>	<p>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.</p>
<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>II.6 Implement evidence-based models and practices</p>	<p>Multi-level Interventions are still considered the best practice. It provides</p>

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
November 16, 2013 through November 30, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

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.

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

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 (AIMEFT) monthly.

II.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0,5,1, 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.
- I staff is currently working on becoming a Recovery Coach by attending training and meeting with Clinical Supervisor for supervision to prepare for ICRC Certification.

Sanctuary Representative:

DMHSA Representative:

Submitted By: Valerie Reyes
Position Title: Program Director
Reviewed By: Mildred Q. Lujan
Position Title: Executive Director
Date: December 4, 2013

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

November 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

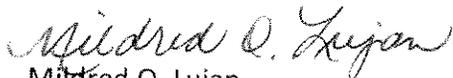
From: Mildred Q. Lujan
Executive Director
Sanctuary, Incorporated

Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of November 1, 2013 to November 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

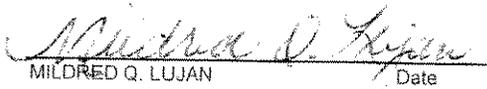
RECEIVED
Nov. 20, 2013
Drug & Alcohol Branch,
DMHSA

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo		Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 11/15/2013
TO: Mr. Ray Vega Acting Director Guam Behavioral Health & Wellness Center (DMHSA)		Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-003	
COSTS INCURRED BY CATEGORY		AMOUNT	
1. Personnel		\$ 20,086.00	
2. Fringe Benefits		\$ 2,400.00	
3. Contractual		\$ 400.00	
4. Other		\$ 350.00	
5. Supplies		\$ 1,000.00	
6. Utilities		\$ 2,180.00	

TOTAL PAYMENT REQUEST:

\$ 26,416.00

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.

 11/18/2013
MILDRED Q. LUJAN Date
Sanctuary, Incorporated
Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2014-002 to be true and correct; and that services for November 1-15, 2013 have been rendered; and payment for this period is due.

Don Sabang
D & A Supervisor

Rehabilitation Services for Adolescents

November 1, 2013 – November 15, 2013

Sanctuary, Inc. Bi-Weekly Progress Report

Bi-Weekly Reporting Period:

Task/Activity

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
- 7 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: 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, Alcohol, The Hype about Drug and Alcohol. 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 another level of care and those on a "wait-list."

During this bi-weekly reporting period:

- 4 sessions were conducted
- 12 participants in attendance
- Groups are held on Saturday from 12-2 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: 9 pending PPD clearances.

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

The Group lesson/activity was: Internal and External Triggers; Taking care of yourself; Staying busy; and Thought stopping techniques. Each client was provided the opportunity to

Rehabilitation Services for Adolescents November 1, 2013 – November 15, 2013	
Sanctuary, Inc. Bi-Weekly Progress Report	
Bi-Weekly Reporting Period:	
Task/Activity	
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>discuss each topic.</p> <p>Clients continue 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 develop skills to prevent substance use and relapse; role play skills learned; are guided in recognizing and planning events that are not associated with substance use; and rewarded for meeting their goals with incentives.</p> <p>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.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>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.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 10 sessions were conducted • 77 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: 1 • Number of Clients Transferred to another level of Care: 1 • Number of Clients on the Wait List: 0
<p>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.”</p>	<p>The Group lesson/activity was: weekly check-in; review of group rules; Drug Testing; Having A Good Time Without Being High; Taking Care of Yourself; Internal Triggers; External Triggers; Dealing with Feelings and Depression; Stages of Recovery; Staying Busy; Scheduling; and Guilt and Shame. 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.</p>
<p>In narrative form, briefly state how activities from II.3.a to II.3.e were implemented and addressed?</p>	<p>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</p>
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	

Rehabilitation Services for Adolescents November 1, 2013 – November 15, 2013	
Bi-Weekly Reporting Period:	Sanctuary, Inc. Bi-Weekly Progress Report
Task/Activity	
session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills. 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. During this bi-weekly reporting period: <ul style="list-style-type: none"> • 2 sessions was conducted • 13 participants (11/2 = 6 in attendance & 11/9 = 7 in attendance) • 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 	
MATRIX Model Parent Education / Support Group In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed? 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	On 11/2 the topic was: What do you do when you notice changes in your adolescent's behavior. Suggestions and resources were provided to family members to be able to use as a reference should there be any new behaviors that need to be addressed. On 11/9 the topic was: Drug Information. Commonly abused drugs like alcohol, marijuana, and inhalants were discussed today. Family members had the chance to discuss openly the ways they have tried to deal with the changes in their adolescents. Family members learned the street names, commonly used names, the side effects, how a person would behave while on the substances as well as the health consequences of using the substances. Due to the census of the Family Members wanting to have group on a

Rehabilitation Services for Adolescents

November 1, 2013 – November 15, 2013

Sanctuary, Inc. Bi-Weekly Progress Report

Bi-Weekly Reporting Period:

Task/Activity

<p>Program:</p>	<p>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. 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.</p>
<p>State any recommendations for the improvement of service delivery:</p> <p>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."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 7 Clients were served. • Transfer to another level of Care: 0 • Wait Listing: 5 (1 entered residential and 4 are pending clearances) <p>Phase Breakdown:</p> <ul style="list-style-type: none"> • Orientation: 3 • Awareness: 2 • Enhancement: 0 • Enlightenment: 0 • Empowerment: 2
<p>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</p>	<p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 5 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 0
<p>In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?</p> <p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>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.</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</p>

**Rehabilitation Services for Adolescents
November 1, 2013 – November 15, 2013**

Sanctuary, Inc. Bi-Weekly Progress Report

Bi-Weekly Reporting Period:

Task/Activity

State any commendations to show the strengths of the Program:

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.e 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.

the need arises.

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.

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.

Rehabilitation Services for Adolescents
November 1, 2013 – November 15, 2013

Bi-Weekly Reporting Period:

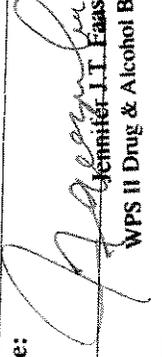
Task/Activity

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: November 20, 2013

DMHSA Representative:

Received By:  Jennifer J. Faasuumalie
Position Title: WPS II Drug & Alcohol Branch, DMHSA
Date of Submission: 11/20/13 3:29pm



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



November 5, 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 October 16, 2013 through October 31, 2013.

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

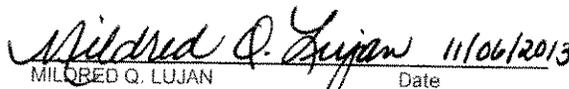
Sincerely,


Mildred Q. Lujan

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo	Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 10/31/2013
TO: Mr. Ray Vega Acting Director Guam Behavioral Health & Wellness Center (DMHSA)	Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-002	
COSTS INCURRED BY CATEGORY		AMOUNT
1. Personnel		\$ 20,086.00
2. Fringe Benefits		\$ 2,400.00
3. Contractual		\$ 400.00
4. Other		\$ 350.00
5. Supplies		\$ 1,000.00
6. Utilities		\$ 2,180.00

TOTAL PAYMENT REQUEST: \$ 26,416.00

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 11/06/2013
 Sanctuary, Incorporated
 Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2014-002 to be true and correct; and that services for October 16-31, 2013 have been rendered; and payment for this period is due.

 Don Sabang
 D & A Supervisor

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
October 16, 2013 through October 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

<p>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."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none">• 2 sessions were conducted• 12 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
<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, positive and healthy decision making, and health effects from alcohol</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: engaging in an active discussion by providing their personal opinions on decision making as an individual and long term/ short term effects from the use of alcohol.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>The strength of the classes was that the participants were able to identify positive decision making and making choices to live a healthy lifestyle.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>Continue networking with our community partners and provided referrals if needed based on progression of clients. The staff will continue to keep updated with articles, online news & information regarding substance abuse/ addiction.</p>
<p>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."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none">• 4 sessions were conducted• 11 participants in attendance• Groups are held on Saturday from 12-2 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: 6 pending PPD clearances.

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

October 16, 2013 through October 31, 2013

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?

The Group lesson/activity was: Internal Triggers; Dealing with feeling of depression; truthfulness; alcohol arguments. Each client was provided the opportunity to discuss each topic.

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

Clients continue 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 develop skills to prevent substance use and relapse; role play skills learned; 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.

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."

During this bi-weekly reporting period:

- 6 sessions were conducted
- 56 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: 1
- Number of Clients Transferred to another level of Care: 1
- Number of Clients on the Wait List: 0

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; Alcohol Arguments; Truthfulness; I'm Not Cool If I Don't Use; External Triggers; Trigger Chart; Internal Triggers; and Dealing with Feelings and Depression. 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.

Rehabilitation Services for Adolescents	
Bi-Weekly Reporting Period:	October 16, 2013 through October 31, 2013
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report
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.
MATRIX Model Parent Education / Support Group	During this bi-weekly reporting period: <ul style="list-style-type: none"> • 2 sessions were conducted • Family Members in attendance (10/19 = 7, 10/26 = 6) • 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?	10-19-13: 7 individuals in attendance Topic: Soft is the heart of a child = family members watched a film which depicted the effects of alcoholism in the family. 10-26-13: 6 individuals in attendance Topic: Setting Health Boundaries = Family members viewed and discussed how they view themselves in the support of their teen.

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

October 16, 2013 through October 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

<p>In narrative form, briefly state how Family benefited from the core functions or services from this level?</p>	<p>10/19/13 Family members were provided the opportunity to discuss how the family could have gotten more help, where to get help on Guam was also discussed allowing family members the information to access services / agencies outside of Sanctuary. 10/26/13 It was determined that family members have a hard time saying "no" and sticking to it. Also discussed was the comfort levels of family members and challenges in setting appropriate boundaries.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>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. 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.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>During this bi-weekly reporting period: • 6 Clients were served. • Transfer to another level of Care: 0 (Aftercare) • Wait Listing: 4</p>
<p>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."</p>	<p>Phase Breakdown: • Orientation: 4 • Awareness: 0 • Enhancement: 0 • Enlightenment: 2 • Empowerment: 0</p>
<p>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,</p>	<p>During this Bi-weekly reporting period: • 4 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 0</p>

Rehabilitation Services for Adolescents

Bi-Weekly Reporting Period:

October 16, 2013 through October 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

state the number of clients	
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 treatment for Asian/Pacific Islanders: Give a brief summary of activities that occurred with DMHSA and its	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,

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
October 16, 2013 through October 31, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

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.e are being addressed.

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).

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.
- I staff continues to work on her CEU's that apply towards the ICRC Certification.
- I 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:

DMHSA Representative:

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

Received By: J. Stover
Position Title: ERTS III
Date of Submission: 11/8/13



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

November 7, 2013

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

Dear Mr. Vega,

Attached with this letter is revised invoice number 2014-001R. This reflects the cost for the provision of drug and alcohol outpatient and residential treatment for adolescents for the period October 1, 2013 to October 15, 2013.

We apologize for any inconvenience and if you have any questions please contact me at 475-7110.

Thank you.

Mas Rikuetdo,

Mildred Q. Lujan
Mildred Q. Lujan
Executive Director

Attachment

*Rec'd
J. Fran -
11/8/13*

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo	Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 10/15/2013
TO: Mr. Ray Vega Acting Director Guam Behavioral Health & Wellness Center (DMHSA)	Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. DMHSA-2014-001R Invoice No.	
COSTS INCURRED BY CATEGORY		AMOUNT
1. Personnel	\$ 20,087.00	
2. Fringe Benefits	\$ 2,400.00	
3. Contractual	\$ 400.00	
4. Other	\$ 350.00	
5. Supplies	\$ 1,000.00	
6. Utilities	\$ 2,180.00	
Revised 11/06/2013		
TOTAL PAYMENT REQUEST:		\$ 26,417.00

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 11/06/2013
MILDRED Q. LUJAN Date
Sanctuary, Incorporated
Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2014-001R to be true and correct; and that services for October 1-15, 2013 have been rendered; and payment for this period is due.

Don Sabang
D & A Supervisor



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

October 17, 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 October 1, 2013 to October 15, 2013.

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

Sincerely,

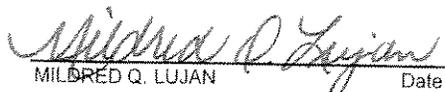
Mildred Q. Lujan
Executive Director

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo	Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 10/15/2013
TO: Mr. Ray Vega Acting Director Guam Behavioral Health & Wellness Center (DMHSA)	Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-001	
COSTS INCURRED BY CATEGORY		AMOUNT
1. Personnel		\$ 20,230.00
2. Fringe Benefits		\$ 1,631.00
3. Contractual		\$ 200.00
4. Other		\$ 146.00
5. Utilities		\$ 1,750.00

TOTAL PAYMENT REQUEST:

\$ 23,957.00

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 10/25/2013
Sanctuary, Incorporated
Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2014-001 to be true and correct; and that services for October 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
October 1, 2013 – October 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
 - 8 participants in attendance
 - Group held on Thursday from 4:30 -- 5:30 pm at the Sanctuary, Inc. Main Office
 - Number of Successful Completions: 2
 - 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, consequences/Guam Law on underage drinking & treatment & goal plan

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

Participants benefited from the last sessions by: All clients engaged in an active discussion by providing their personal opinions on the Underage Guam Drinking Law; and following up with their treatment plans.

State any commendations to show the strengths of the Program:

The strength of the classes was that each client provided their personal opinions without being criticized about wrong or right answers.

State any recommendations for the improvement of service delivery:

Continue networking with our community partners and provided referrals if needed based on progression of clients. The staff will continue to keep updated with articles, online news & information regarding substance abuse/addiction.

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."

- During this bi-weekly reporting period:
- 2 sessions were conducted
 - 6 participants in attendance
 - Groups are held on Saturday from 12-2 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: 6 pending PPD clearances.

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

The Group lesson/activity was: Managing Anger; You are here because why; Repairing relationships: Pros and Cons. Each client was provided the opportunity to discuss each topic.

Bi-Weekly Reporting Period:		Rehabilitation Services for Adolescents October 1, 2013 – October 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>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. Clients and families were able to practice pro-social activities together and celebrate all the work they have put into the recovery of the loved one.</p> <p>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.</p>		
<p>State any commendations to show the strengths of the Program:</p>	<p>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.</p>		
<p>State any recommendations for the improvement of service delivery:</p>	<p>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.</p>		
<p>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."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 8 sessions were conducted • 58 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 		
<p>In narrative form, briefly state how activities from II.3.a to II.3.e were implemented and addressed?</p>	<p>The Group lesson/activity was: weekly check-in; review of group rules; Thought stopping techniques; setting goals; treatment planning; you are here because why; managing anger. 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.</p>		
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>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</p>		

Bi-Weekly Reporting Period:		Rehabilitation Services for Adolescents October 1, 2013 – October 15, 2013
Task/Activity		Sanctuary, Inc. Bi-Weekly Progress Report
State any commendations to show the strengths of the Program:	participation teaches empathy and helps to develop effective communication skills.	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	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 2 sessions was conducted • 20 participants (10/5 = 11 in attendance & 10/12 = 9 in attendance) • 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 	
In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?	Number of Clients on the Wait List: N/A	On 10/5 the topic was: Avoiding / Coping with Relapse and the 11 warning signs to a relapse. Family members learned about the 11 warning signs to a relapse based on the research by Gorski and Miller and the importance of understanding how a possible relapse may have "warning signs". Also presented was the Matrix Model Topic: Avoiding / Coping with Relapse.
In narrative form, briefly state how Family benefited from the core functions or services from this level?		On 10/12 the topic was: I respectfully Disagree with you. Family members were educated on the importance of communication, fighting fair, and setting appropriate boundaries when dealing with teens. Family members were asked to take the work sheet home, use it as a guideline to dialogue with their teen reviewing the list and soliciting from their teen how they are doing in each area. Family members will return to group next week and will provide feedback on their experience. Family members were provided the opportunity to explore their understanding of what a relapse is, how they will handle it, and what to do in

Bi-Weekly Reporting Period:		Rehabilitation Services for Adolescents October 1, 2013 – October 15, 2013	
Task/Activity		Sanctuary, Inc. Bi-Weekly Progress Report	
State any commendations to show the strengths of the Program:		the event of a possible relapse. Family members who had experience in conflict with their adolescent provided appropriate suggestions on what worked for them and what did not. 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. 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.	
State any recommendations for the improvement of service delivery:		<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 7 Clients were served. • Transfer to another level of Care: 3 (1 to Aftercare; 1 to outpatient services; 1 declined outpatient services) • Wait Listing: 7 (2 entered residential and 5 are pending clearances) <p>Phase Breakdown:</p> <ul style="list-style-type: none"> • Orientation: 3 • Awareness: 1 • Enhancement: 0 • Enlightenment: 2 • Empowerment: 1 	
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."		<p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 5 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 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		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	
In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?			

Bi-Weekly Reporting Period:		Rehabilitation Services for Adolescents October 1, 2013 – October 15, 2013	
Task / Activity		Sanctuary, Inc. Bi-Weekly Progress Report	
In narrative form, briefly state how clients benefited from the core functions or services from this level?		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.	
State any commendations to show the strengths of the Program:		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 recommendations for the improvement of service delivery:		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.	
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.		All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.	
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.		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.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0,5,1, II, III,5, and 0,7: Briefly state how sections II.7.a to II.7.e are being addressed.		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.	
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		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).	
		<ul style="list-style-type: none"> • 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. 	

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
October 1, 2013 – October 15, 2013

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

attended during the reporting period.

Sanctuary Representative:

Submitted By: Katrina Tajeron
Position Title: Case Manager
Reviewed By: Valerie Reyes
Position Title: Program Director
Date: October 17, 2013

- 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.

DMHSA Representative:

Received By:

Position Title:

Date of Submission:

[Signature]
[Signature]

Tajeron

10/25/13

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

"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



Department of Youth Affairs

JAN 15 2014 12:22pm

Director's Office

January 15, 2014

To: Adonis Mendiola
Director
Department of Youth Affairs

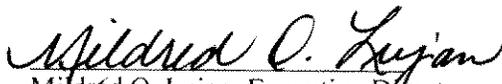
From: Mildred Q. Lujan
Executive Director
Sanctuary, Incorporated of Guam

Re: Program Report

Attached is the quarterly program status report for October 1, 2013 to December 31, 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, Executive Director
Sanctuary Incorporated of Guam

FY 2014 RUNAWAY HOMELESS YOUTH (RHY) BASIC CENTER

Department of Youth Affairs

QUARTERLY PERFORMANCE REPORT FORM

ORGANIZATION/AGENCY: Sanctuary Incorporated of Guam	
VENDOR NUMBER: S1456001	
PERSON COMPLETING REPORT: Crystal J. Flores	
TELEPHONE: 475-7113	FAX: 477-3117
REPORT PERIOD: October 1, 2013 to December 31, 2013	DATE OF REPORT: January 14, 2014

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>Goal: 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>Objective 1. 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 & radio), public presentations, bus stop murals, school presentations, door-to-door street outreach, and informational displays at shopping centers throughout the island.</p> <p>Indicator/Outcomes/Periodicity: <i>Awareness of available services for run away and troubled youth for the community of Guam as a whole.</i></p>	
---	--

<p>Activity A: The Emergency Shelter program will provide individual supportive counseling at least twice a week for each youth residing in the shelter.</p> <p>Time Line: Daily; ongoing daily sessions</p> <p>Responsible Parties: Case Manager and/or Program Director, and Residential Assistants</p>	<p>Results:</p> <ul style="list-style-type: none"> • During, this reporting period, Eleven (11) youth resided in the shelter during the month of October. Thirteen (13) youth resided in the shelter during the month of November. Twelve (12) youth resided in the month of December. At least One Hundred and Ninety (190) individual supportive counseling sessions were conducted that included educational, health and personal growth.
<p>Activity B: To provide therapeutic and recreational activities for youth to promote personal well being.</p> <p>Timeline: Daily</p> <p>Responsible Parties: Case Manager and/or Program Director, and Residential Assistants</p>	<p>Results:</p> <ul style="list-style-type: none"> • 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.
<p>Objective II. 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>Indicators/Outcomes/Periodicity: <i>Accessibility of children and their families in crisis situations who use Emergency Shelter services.</i></p> <p>Activity A: 24-hour crisis hotline is open to the general public to provide immediate feedback, assessments and referrals to appropriate agencies.</p> <p>Time line: on-going,</p> <p>Responsible Parties: Crisis Intervention Worker, Case Manager, and Program Director</p>	<p>Results:</p> <ul style="list-style-type: none"> • Three Hundred and Twenty Five (325) contacts were made via 24-hour crisis hotline. • 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.
<p>Activity B: Provide referral services for all youth and their family members assessed for services needed from other agencies.</p> <p>Timeline: ongoing</p>	<p>Results:</p> <ul style="list-style-type: none"> • An estimation of Thirty Five (35) referrals was made to other agencies, organizations, such as Guam Behavioral Health and Wellness Center (GBHWC), Guam Police Department (GPD) Catholic Social Services, Guma San Jose, Department of Labor or Veteran Services.

<p>Responsible Parties: Crisis Intervention Worker, Case Manager and Program Director.</p>	
<p>Objective III: 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>Indicators/Outcomes/Periodicity: <i>Accessibility of emergency 24hr placement for runaway and homeless youth needing assistance/guidance to begin the reunification process.</i></p> <p>Activity A: 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>Activity 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>Timeline: ongoing</p> <p>Responsible Parties: Program Director and Case Manager.</p>	<p>Results: 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 September. Eighteen (18) clients continued in aftercare services once reunified with their parent or legal guardian from the month of October to December.</p> <p>During this reporting quarter Four (4) clients were placed at Serenity, Department of Youth Affairs or Guam Police Department as a disposition upon exiting.</p> <p>Results: 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>Objective IV 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>Indicators/Outcomes/Periodicity: <i>Conflict Mediation skills of children and their families</i></p> <p>Activity A: 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>Time line: ongoing</p> <p>Responsible Parties: Crisis Intervention Worker, Case Manager and Program Director.</p>	<p>Results: Twenty (20) 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>Activity 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>Timeline: ongoing</p> <p>Responsible Parties: Program Directors, Case Manager, and AmeriCorps volunteers.</p>	<p>Results:</p> <ul style="list-style-type: none"> • Ten (10) 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. • Twelve (12) Middle School YAM classes were conducted during this reporting period with an average of Five (5) 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.
<p>Objective V: 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>Indicators/Outcomes/Periodicity: <i>Availability of supportive services to children and their families in crisis situations.</i></p> <p>Activity A:</p>	<p>Results: 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:</p> <ul style="list-style-type: none"> - One hundred and ninety (190) youth individual supportive counseling sessions

<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>Timeline: ongoing</p> <p>Responsible Parties: Program Directors and Case-Manager</p>	<ul style="list-style-type: none"> - Twenty (20) parent individual supportive counseling sessions - IPP completion rate for this quarter is at 90%
<p>Activity B: The project will provide case management services for 200 youth and their families that will enhance stabilize and strengthen their relationships.</p> <p>Timeline: ongoing</p> <p>Responsible Parties: Program Director and Case Manager</p>	<p>Results: Seventeen (17) youth received case management services via the Co-Ed Shelter, Eighteen (18) 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 10 of the 17 (58.8%) 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 manager for 9 of the 17 (52.9%)</p>

	<p>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>
<p>Families Satisfied with Program</p>	<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"> 1) Noted quality in family relationships 2) Future access of services 3) Accessibility and response time 4) Overall rating of services 5) Recommending services to others
<p>Client Satisfaction</p>	<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> <p>**Note: All clients who received services opted not to complete the satisfaction surveys upon exiting shelter services.</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

"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



COPY

Transmittal Form

Date: January 7, 2014

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

Enclosed herewith is the following document:

1. 1st Quarter Report (October 1, 2013 - December 31, 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

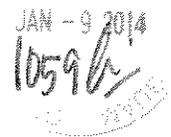
Receipt of the above is hereby acknowledged:

Print Name: Jishawna Menchola

Signature: *li*

Date: Jan 09, 2014

Time: 10:59 am





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



January 7, 2014

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 October 1, 2013 through December 31, 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 1st Quarter Ending 12/31/13

- A) **PROJECT GRANT NO.:** 2012-VA-GX-0029
- B) **CONTRACT NO.:** C131100018
- C) **FEDERAL FY OF FUNDING:** 2014
- D) **PROJECT TITLE:** Sanctuary, Incorporated Victim Assistance Program
- E) **REPORTING PERIOD:** October 1, 2013 – December 31, 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.:** 5101H121120SE113-280

I. EXECUTIVE SUMMARY

For this fiscal year, Sanctuary was awarded the sum of \$30,240 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, and Helen Onedera, University of Guam (UOG) Masters of Clinical Psychology student intern. 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 nineteen (19) staff completed training and received certification in Safe Talk and four (4) staff completed training and received certification in Applied Suicide Intervention Skills Training (ASIST). 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), and Guam Police Department (GPD). 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:	October 1, 2013-December 31, 2013
Organization:	SANCTUARY, INC
TYPE OF VICTIMIZATION	TOTAL
1. <i>Child Victims of Physical Abuse (0-17)</i>	5
2. <i>Child Victims of Sexual Abuse (0-17)</i>	2
3. <i>Victims of DUI/DWI</i>	
4. <i>Victims of Family Violence</i>	
5. <i>Adult Victims of Sexual Abuse</i>	
6. <i>Elder Abuse</i>	
7. <i>Adults Molested as Children</i>	
8. <i>Survivors of Homicide Victims</i>	
9. <i>Assault</i>	
10. <i>Robbery</i>	
11. <i>Other (TOTAL A-K)</i>	3
<i>A. Arson</i>	
<i>B. Burglary</i>	
<i>C. Child Neglect (Endangerment)</i>	3
<i>D. Fraud</i>	0
1. Forgery	
2. Fraud	
3. Indentity 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>	
GRAND TOTAL	10
Victims with Disabilities:	

**VICTIMS OF CRIME ACT
VICTIM STATISTICS WORKSHEET**

FOR THE PERIOD OF:		October 1, 2013-December 31, 2013	
Organization:		SANCTUARY, INC	
AGE		TOTAL	
0-12		2	
13-17		8	
18-24			
25-59			
60+			
Unknown			
NATIONAL ORIGIN		TOTAL	
1. African American:		6. Filipino:	
2. Asian :		7. Hispanic:	
3. Caucasian/White:		8. Other Pacific Islander:	
4. Chamorro:	6	9. Other: Indian	1
5. Chuukese:	3	10. Unknown:	
GENDER		TOTAL	
Male		4	
Female		6	
Unknown			
Institutions Victimized		TOTAL	
Business Owned Building/Office/Property			
Religious Organization Building/Office/Property			
Federal Government Building/Office/Property			
Government of Guam Building/Office/Property			
Public or Private School Building/Office/Property			
TYPES OF SERVICES PROVIDED		TOTAL	
Crisis Counseling		325	
Follow-up Contact		23*	
Therapy		1	
Group Treatment/Support			
Shelter/Safe House		10	
Information & Referral (In- Person)		285 (Outreach)	
Criminal Justice Support/Advocacy			
Assistance in Filing Compensation Claims			
Emergency Financial Assistance			
Emergency Legal Advocacy			
Personal Advocacy			
Telephone Information & Referral		Est. 35*	
Other: (specify)		1 (respite due to family conflict)	
Other: (specify)			

*Total may be skewed due to damaged files.



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
www.sanctuaryguam.org

CONFIDENTIAL

January 6, 2014

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 1st quarter of Fiscal Year 2014 from October 1, 2013 – December 31, 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 2014 (October 1, 2013 - December 31, 2013)
1st Quarter Expenditure Report
Office of the Attorney General
VOCA

Fund	Contract Amount	Object Classification	Expenditure
Federal	\$ 30,240		
		Salary	\$ 6,490
		Benefits	874
		Travel	-
		Contractual	-
		Supplies & Materials	-
		Equipment	-
		Utilities	-
		Miscellaneous	-
		Grand Total	<u>\$ 7,363</u>

I CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF THE EXPENDITURES FOR FISCAL YEAR 2014 FOR THE PROJECT ABOVE.

SIGNATURE OF AUTHORIZED OFFICIAL:



 MILDRED Q. LUJAN
 EXECUTIVE DIRECTOR

DATE: 01/08/2014