



ANNUAL REPORT AND ORGANIZATIONAL PLAN

**PACIFIC YOUTH AND FAMILY SERVICES SOCIETY
PEAK HOUSE PROGRAM
APRIL 1, 2010 – MARCH 31, 2011**

www.peakhouse.ca

Prepared by: Janelle Kelly, Executive Director

**Pacific Youth and Family Services Society
Board of Directors
2010-2011**

**Rick Pelan
President**

**Coral Payne
Secretary**

**Scarlet Channe
Treasurer**

Alfred Faan

Anne Miller

Christine Smith

Kate Campbell

Kyra Biederman

Mike Arget

Resigned 2010

**Gail Boivin
President**

**Lesley Cox
Secretary**

**Mike Richards
Treasurer**

Dawna Hamilton

Peak House Staff & Consultants 2010-2011

Management Team

Janelle Kelly, Executive Director
Wendy Wittmack, Program Manager

Clinical Supervisor

Vikki Reynolds

Intake & Assessment Counsellor

Roisin Donnelly

Administration

Maria Telado

Family Therapists

Dennis Dion
Allison Rice

Teacher

Janet Eviston

Medical Consultant

Dr. N. Baria

Acupuncturist

Rose Siemens

Nutritionist

Debbie Scallion

Yoga Instructor

Butterfly Yoga

Kitchen Coordinator

Shannon Stewart

Cook

Yan Ho

Youth Counsellors

Bree Tominaga
Kinga Robinson (Maternity Leave)
Warren Whyte
Jessica Hilton
Rosy Deol
Warren Whyte

Night Attendants

Laila Biergans
Kathy Miller

On-Call Relief

Joe Pingitore
Lindsay Viscount
Lina Silano
Shannon Stewart
Wynne Pruden
Steffanie Kessenich
Angela Hamre
Matty Devinish
Steve Sorrenti
Jennifer Donovan
David Chung
Raeleen Novak

Summer Life Skills Coordinator

Steve Sorrenti

Practicum Students

Jennifer Donovan-Douglas College
Steffanie Kessenich-VCC
Kara Kalin-City University
Jaqueline Krestinski-VCC
Lorena Spencer-Douglas College

Reflective of March 31, 2011

Board of Director's Report

The fiscal year 2010-2011 saw number of changes to the membership the Board of Directors. We lost, through retirement, Gail Boivin for the second time, Dawna Hamilton, Leslie Cox our secretary, and Mike Richards our long-time treasurer. Our thanks go out the each of them for their dedication and support to Peak House over the last several years.

Needless to say with the above retirements much of the year was spent replacing the retired members. With Janelle's assistance in the posting of notices on several websites we received many applications for the vacancies. We managed, over the course of nine months, to interview and select eight new members. Coral Payne and Alfred Faan joined us in the spring, Scarlet Channe and Anne Miller in the fall, and Christine Smith, Kyra Biederman, Kate Campbell and Mike Arget coming on in the early winter. Unfortunately, Anne had to resign due to personal reasons shortly after she joined us. However, our remaining new members collectively represent a somewhat different demographic from that of our previous board, coming as they do from a wider range of professions. We believe that the enhanced diversity of the new board will strengthen our organization, and we are confident that over the next few years we will be well equipped to meet the challenges that are certain to present themselves.

In an effort to better understand our role as a board and to assist us in meeting these future challenges, two board governance workshops were held during the course of the year-one in the early summer and one in the fall. Both of these were led by Arden Henley, whose supportive and informative presentations were well received by all. We examined issues such as the board's role vis a vis the Executive Director's role and the importance of avoiding crossing the boundaries between the two, the value of the committee structure to a board's operations, and the importance of efficiently managed meetings. We also discussed at some length the various models of strategic planning and how we might, for the first time ever, incorporate such an undertaking in our organization.

As a direct result of these workshops, our plans for the next fiscal year include the establishment of a number of committees including fund raising and strategic planning. We will be examining the board's mission statement in an effort to determine the best possible way we as a group can facilitate the valuable work that Peak House has done over the last many years. We plan to be cognizant of the importance of involving all stakeholders in any efforts we may make in the planning area, and consequently will seek the input of our community in assisting us in our work.

On behalf of the Board of Directors, I want to take this opportunity to thank everyone involved in the Peak House program. In particular, I commend our dedicated and hard working staff for the unwavering efforts they make every day with the young persons who come to us for support. The board also gives its heartfelt thanks to Janelle, and Wendy, our management team, for the loyalty, diligence and professionalism they exhibit in their respective roles. Finally, we congratulate all the young adults who have come to us over the years, each one of whom has played a part in helping Peak House become the amazing place that it has been for almost a quarter of a century.

Respectfully,
-Rick Pelan, President

Management Team's Report

This has been a great year at Peak House. While not without challenges, it is in our accomplishments and willingness to take on new and exciting endeavors that best reflect this past year.

A few of our memorable accomplishments as a program include an emphasis on team building, staff training and workshops, the completion of a new backyard mural, board recruitment, a revised menu that compliments healthy food choices, monthly team reflection of our success', growth of our alumni meetings and the development of our values statement.

Last year's administrative budget cuts created opportunity for administrative reorganization. We are happy to report that with the help of our part time office assistant Maria Telado, we are managing through the restrictions of our new administrative budget.

This year marked the highest recorded occupancy rate in the history of Peak House. At 86% this is an incredible achievement, as it speaks directly to the team's commitment to ensure youth are at the center of our work.

Our team has worked incredibly hard toward building a community of inclusivity, respect and collaboration. Youth have been brought to the center of the work consistently over the past year. The Peak House commitment to supporting youth and their families of care was highlighted by the development and implementation of the Peak House Values Statement. This living document is a constant reference that helps to guide our ongoing commitment to reducing barriers and creating opportunity for young people across British Columbia seeking a life free of problematic alcohol and drug use.

We continue to benefit from the teachings of our Clinical Supervisor Vikki Reynolds. Her long standing commitment to the Peak House community serves as a map between our history as a program and helps to guide the evolving and innovative ways we work with young people and their supports. This year has also cultivated relationships within the community that have helped us to reach new and exciting goals. In particular, Arden Henley of City University has been a great support and source of wisdom over this last year.

We continued last year's initiative Peak Speaks, a lecture series in partnership with Vancouver Community College. Our second event held in early October focused on the topic of Substance Misuse and Disordered Eating; presented by former Peak House Therapist Christine Dennstedt. Drawing on the success of the Speak series we presented a full day workshop aimed at community workers on the topic of Trauma and Resistance. Our Clinical Supervisor, Vikki Reynolds, presented this workshop with support from our friends at City University. Both events highlight Peak House's commitment to the larger community through training and the collaborative approach to sharing of ideas, strengths and success. We are already receiving requests for the next event.

Our volunteer Board of Directors has taken on new direction, shifting to a working board model. With much of the year spent actively recruiting new members with varying cross sector skills, the board is moving forward with excitement and cohesion with the focus on

ensuring long-term sustainability of the program. I am excited about the opportunities that will be generated at the board level in the coming year.

I would like to thank Vancouver Coastal Health for their ongoing support, the generosity of our personal and corporate donors, our dedicated volunteer Board of Directors, our exceptional staff team, the youth's professional support networks, partners in the community, and all of the families and friends of Peak House staff and residents for making 2010-2011 another successful year for the Peak House program!

Thank you to the Peak House community for all of your hard work and commitment in supporting the young people we serve.

Sincerely,

-Janelle Kelly, Executive Director & *Wendy Wittmack*, Program Manager

Clinical Supervisor's Report

As the Peak House Clinical Supervisor I continue to meet with both the Youth Counselling Team and the Therapist Team on a monthly basis. I participate regularly in the Re-Authoring Group, and Community group, which provides me with an opportunity to see our workers in the practice. I also continue to offer trainings to the entire staff team as required. This year Peak House hosted a community-based workshop with the support of City University: *Trauma & Resistance in Community Work*, February 15. The workshop sold out and the responses to the learnings offered from the Peak House community were positive.

The Youth Counsellor Supervision meeting continues to be practice based skill development, and we have continued to watch DVDs of youth counsellor's conversations with youth. The monthly meeting is organized collaboratively, and we set the agenda based on the current issues the Youth Counsellor team is addressing collectively in their work. We have invited the Therapy Team to join us several times this year, as part of our focus has been weaving the work of the Youth Counsellors, and particularly the young people's work in the program, more closely with the therapy work. At times the format is experiential learning, at times it is skill based related to counselling conversations. I continue to circulate articles that are practice based and related to the work of the team.

The Therapist Team Supervision meeting also takes many forms, and sometimes follows directly after my participation in sessions, as part of a living supervision model. We are considering writing some of these supervision practice up in order to promote the teachings of Peak House, and to continue to support the open culture of critique we have created. We watch pieces of therapeutic work, or discuss actual sessions I have participated in. We also include our practicum students whenever that is possible, as it provides supervisory experience for the student, and brings some lovely questions forward in terms of making our work public. I also meet individually with each therapist monthly for a closer look at their work, sometimes this includes Youth Counsellors and the focus is working together more usefully. This often includes DVDs or live supervision of group or individual sessions. The amount of transparency in the supervision at Peak House continues to be impressive, and speaks to an ethic of accountability on behalf of the team at Peak House, the level of trust within the team, and a solid commitment to learn.

The work of Peak House inspires some of my writing, and I have been seeking consultation and permission from the Executive Director regarding any references to peak House in publications. Spreading some of the work competencies ethics and spirit of Peak House has been useful for the wider community, and promoting the reputation of this amazing program. Our work with Arden Henley to articulate the Value Statement for Peak House was an enriching expansive and ethical process. I am continually inspired and honoured by the culture of critique our team had kept alive and re-newed; and by the team's willingness to struggle and work hard to keep youth at the centre of our collective work.

With respect and appreciation,

-Vikki Reynolds, PhD RCC
Peak House Clinical Supervisor

Staff Team's Report

The Peak House staff team is pleased to report that great strides have been made during the past year to “walk the talk” of our values statement with our youth. A team-building day was the setting for our entire group to re-visit our values statement and discuss our priorities around how to better serve our clients, and we believe that our adherence to these values has had direct benefits to the Peak House youth and their families.

We have seen a greater number of young people with diverse needs complete our program and have witnessed the impact of these successes in their lives: some youth who have never read a book are reading and finishing school courses; some who have never played sports have found freedom and fun in a backyard basketball hoop; and some who have never even been able to imagine their lives free from the influence of drugs and alcohol are loving life clean and returning to share this gift with current Peak House youth.

Young people are continuing to be an ongoing source of inspiration and hope for each other and the Peak House team is providing them ongoing opportunities to pass on their wisdom to each other. Young people who have successfully completed the program are invited back to share their experience of change on Wednesday evenings for “Fight the Power” nights as well as being invited back into group therapy sessions as therapeutic consultants. The young people consistently report that it is important and necessary for both the sharers and the listeners as young people have a unique way of offering support that can have a significant impact on them finding freedom from substances. Similarly, the staff team also supports the ongoing monthly Alumni Group where youth who have left the program return to share their stories of hope with each other and with youth who are soon to finish. Our young people have reported this to be extremely helpful in role-modeling change, providing supportive contacts, and being inspired by previous Peak House residents.

Our re-commitment to our values statement has also provided useful support to those people who have been as yet unable to complete the program. We have received letters of gratitude from ex-Peak House youth who have gone on to appreciate what our team offered them in the initial stages of their journey with us. We are also extremely proud to have ex-Peak folks feel comfortable enough to call us to inform us of their “slips” and to seek support without allowing shame or embarrassment to get in the way. Unheard of!

As a team we have been fortunate enough to have been provided with ongoing training from our Clinical Supervisor, Vikki Reynolds. We have been able to share this training with our larger professional community with wonderful results and feedback. The team has also stayed current through ongoing safety training – even completing one course alongside our youth.

Of course, we also never tire of seemingly ever-increasing number of success stories of our youth in the form of cake in the recovery fellowships, school graduations, athletic pursuits, career aspirations, family reconnections, world travel, and the reports from our youth who are simply enjoying the little things in life that they say never before seemed worthwhile.

It is truly wonderful for us to be able to witness our team's efforts to having such an immediate and long-lasting impact on the lives of our young people and their families. We are proud of cultivating belonging within our staff, which in turn influences a sense of

belonging within our youth; the effect of which, we believe, can be felt rippling throughout the community.

The Peak House team has had a busy year of success:

- ❖ One of the Peak House therapists, Allison Rice, successfully completed her Masters Degree in Counselling and graduated from City University
- ❖ The Peak House team continues to work collaboratively with other community partners. Over the year we supported a number of youth in transitioning to other day and residential treatment programs to support their ongoing learning of how to find freedom from substances.
- ❖ 3 Master's level practicum students
- ❖ 5 practicum students from various community college counseling certification programs
- ❖ We have welcomed a number of new staff this year
- ❖ Warren Whyte, one of the Youth Counsellors, began his Masters in Counselling Program at City University
- ❖ A number of staff and their families have new baby additions to their families: Kinga, Dennis, Ryan, Matty, Lindsay

-The Peak House Staff Team

School Report

Peak House School is a good place according to my students! They arrive ready to work and seem to enjoy their classes. Many of them commence Peak House with credit in Physical Education, Foods and Nutrition, Planning or Health and Career Education and they can also earn 120 Community Service hours.

This year, we had the great honor of seeing two young people complete their graduation requirements. One high school counselor phoned our student to say, as a result of the course work she had completed and the exams she had passed at Peak House, she was now a high school graduate! Lots of happy tears all around the classroom that day!

When a young person arrives at school and begins to explore tentative ideas for their post secondary futures, the entire group gets an insight to new scenarios for training and employment. This year we had an amazing visit to the office of a practicing child psychiatrist. She answered questions prepared by one of our students who is very interested in this profession. This visit prompted other students to share their own interests in work with children and youth. We have had excellent student response to our Vancouver Community College visits. Certified Dental Assisting, Dental Hygienist, Hair Design and Culinary Arts are some of the career ideas students have explored. We did a wonderful trip to BCIT to look at the skilled trades. This inspired a few students toward carpentry, automotives and metal work.

Peak House School students continue to motivate fascinating career and post secondary opportunities! This year, I requested a teaching evaluation. The Templeton High School vice-principal observed our classroom three times and (I need to brag) wrote: "You are magical with those kids. We are lucky to have you there!"

My response? I feel the students bring out the best in me and I am very, very lucky to be here!

-Janet Eviston, VSB, Peak House Teacher

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I. Introduction to the Peak House Program

Mission Statement:

Within a residential setting, we assist adolescents and their families in emancipation from substance misusing, problem lifestyles.

Peak House is a ten-week residential treatment program for substance misusing adolescents. Established in 1988 by Pacific Youth and Family Services Society, the program serves youth from all parts of British Columbia who, due to the serious nature of their substance misuse, require a more intensive level of service than can be provided in their home community.

The first 2 weeks of the program has been designed to provide a safe, less intensive environment where youth and staff can assess the youth's readiness to participate fully in the highly structured, eight-week treatment and aftercare phases of the program.

Peak House Values Statement:

We have a collectively held commitment to support youth to commence from our program.

We have clear decision-making process about youth participation in the program including who the decision makers are and the criteria informing the decisions. Decisions and implementation are informed by staff collaboration.

We see young persons' struggles with problems, especially in their relationships with us, as their work and support one another in responding to these struggles including individually and collectively questioning our practices.

We maintain the success of all young people in the program when working with a young person with multiple barriers by keeping youth success at the center of our planning and work and assuring that youth are uniquely supported in their individual therapeutic work

We cultivate an inclusive and stress resistant team culture by

- continuing to learn together
- creating space and opportunities for healing moments
- taking time to reflect on, and acknowledge successes
- bringing our best selves to work
- not taking things personally
- using discretion around the expression of opinions
- sharing constructive feedback with one another
- honouring one another's strengths
- striving to create and maintain a positive environment
- refusing to engage in gossip or sub-grouping

Program Philosophy

While we do not think that any one model, theory, or framework holds a monopoly on what is effective for young persons struggling with the problem of substance misuse, we make the assumption that all young persons would like to be “the authors” of their own lives. Furthermore, we assume that young persons are able to do so because of the knowledge they have in regards to healing patterns and solution wisdoms that work for them. In concert with utilizing this philosophy in our therapeutic work, we provide young people with a part-time school program, life skills education, drug and alcohol relapse prevention planning, fitness and wellness programming, acupuncture, medical support, mental health support (when necessary), community resource education, creative arts programming and the opportunity for family therapy.

We think of our work within the context of collaboration- we collaborate with clients in opening space for their discovery of new (or forgotten about) stories and ways of being. We believe that all young persons are capable of rediscovering and remembering their preferred qualities, strengths and resources given a safe-enough environment and the support of their community members both at home and within our program.

Family and Community Cooperation

We believe that the problem of substance misuse can retreat or disappear when young persons, together with their families/caregivers and other concerned community members stand with clients against factors and situations that greatly contribute to the problematic use of drugs and alcohol. Peak House takes the position that we all share the responsibility of creating opportunities for youth, whose lives have been taken over by drugs and/or alcohol, to thrive in a healthy, supportive community. In this spirit, we continue to provide a standard of service that honors and matches the courage, commitment, and determination of our youth.

Our primary funding source, the Vancouver Coastal Health Authority, is very supportive of our efforts to find new ways to provide service that best serves the needs of youth and the communities in which they live.

The Pacific Youth and Family Services Board of Directors encourage and support the efforts of the Management Team to find inventive ways to meet the increasingly complex needs of our clients.

II. Peak House Program Evaluation

The reporting period for the following statistical analysis is April 1, 2010 to March 31, 2011.

Table 1: Overview of 2010/11 data regarding occupancy and program completion	
Total Number of Youth in Program	58
Average Days on wait list	55
Average age of first use	12
Average age entering treatment	17
Occupancy Rate	86%
Completion Rate Assessment	40
Completion Rate Commencement	28

Discussion of data:

Number of Youth in Program: The total number of youth in the program during this reporting period was 58. Seven youth were in the program as of April 01, 2010. There were 51 new intakes.

Wait List: The average number of days a young person waited for treatment was 55 days. The Peak House wait list has been (on average) just over a month and a half for the past three years.

Average Age of First Use: Youth accessing the Peak House program in 2010/11 reported, on average, 12 years as their age of first drug use. Table 1.1 details the history of Peak House young people's, self-reported, age of first use.

Table 1.1: Historical Average Age of First Use	
2005/06	11.4 years
2006/07	12.4 years
2007/08	11.5 years
2008/09	12.75 years
2009/10	12.5 years
2010/11	12 years

Average Age of Clients: The average age of clients accessing the Peak House program has remained consistent the past three years.

Average age:	2008/09	16.9 years
	2009/10	16.3 years
	2010/11	16.9 years

The average time elapsed between client's age of first use and entering Peak House is, on average, 4.6 years. Youth accessing our program are involved in drug/alcohol use and a lifestyle that involves associated risks for an average 4.6 years before entering to the Peak House program.

Occupancy Rate: The occupancy rate for 2010/2011 was 86.1%, representing an increase of 5.6% since the last reporting period. This marks the highest occupancy rate the program has seen in many years.

Because it takes a great deal of preparation for clients to enter the Peak House program, we focused on meeting client’s needs around preparation to enter the program. This meant that, at times, intake dates were postponed due to a lack of client readiness. In many of these cases, we found that clients were more likely to remain in the program if we allowed them more time for detoxification and preparation.

Completion Rate: The implementation of the assessment phase has dramatically increased the ability of youth to successfully complete our program. Our completion rate for this reporting period decreased slightly to reflect a 69% completion rate. We had a total of 58 youth in Peak House during 2010/11. The breakdown is as follows:

- 58 youth entered the assessment phase
- 11 youth did not move into the treatment phase
- 40 youth moved from assessment into treatment – 28 of those youth successfully completed the program.

Table 1.2: Comparative Overview of Occupancy and Completion Rates

	2008-2009	2009-2010	2010-2011
Total Number of Intakes	53 (female n=34, male n=19)	48 (female n=30, male n=18)	58 (female n=39, male n=19)
Average Days on wait list	55.51	54.7	55.48
Average age of first use	12.75	12.5	12.03
Average age entering treatment	16.9	16.31	16.83
Occupancy Rate	81%	80.5%	86.1%
Completion Rate	70%	73%	69%

Based on the number of youth who moved into treatment from assessment.

III. Substance Use

The following table presents data collected at intake reporting young people's "drug of choice" (D.O.C.).

Comparison of percentage of program participant's self-report of drug of choice 2009/10 and 2010/11 Province-Wide.				
2009/10		2010/11		Difference
Alcohol	43.75%	Alcohol	36.2%	-7.55%
Crack Cocaine	6.25%	Crack Cocaine	6.9%	+0.65%
Crystal Methamphetamine	8.33%	Crystal Methamphetamine	8.62%	+0.29%
Cocaine	6.25%	Cocaine	5.17%	-1.07%
Cannabis	18.75%	Cannabis	17.24%	-1.50%
Heroin	8.3%	Heroin	16%	+7.7%
Ecstasy	8.3%	Ecstasy	6.9%	-1.4%

	2009/10	2010/11
Poly-drug use	87.5%	90%
Single drug use	12.5%	10%

Summary: Youth report an increase in heroin use from the last report period. Alcohol, Cannabis and Heroin continue to be the top three D.O.C of many of the youth coming to Peak House.

IV. Client Characteristics

Data regarding Peak House client characteristics is presented below. When possible, a comparative analysis is presented tracking change over time.

Gender	2008/09	2009/10	2010/11
Female	64%	62.5%	60%
Male	36%	37.5%	40%

Gender Diversity: The gender balance at Peak House has continued to demonstrate more female than male clients accessing the program. To our knowledge, we have not served any transgender or transsexual clients in the past five years. Our team has been focusing on ways to improve our program accessibility for transfolks who may want to utilize our service. We have altered our intake and referral documentation to be more trans-inclusive and continue to consult with local trans-youth services in our efforts to improve the accessibility of our program.

Ethnicity	n=63
Asian	2%
First Nations	29%
Caucasian	67%
African	9%
Middle Eastern	-
Indo-Canadian	2%
Latin American	-
Other	-

Note: some youth report more than one ethnicity

Diversity: Peak House continues to serve a diverse client population and we are always looking to improve our cultural accountability to youth in our program. Peak House has a reputation for being a safe, respectful and inclusive program for young people from various cultural positions and backgrounds. In 2010-2011 young people continued to have the opportunity to explore cultural belonging as a theme in their therapeutic work throughout the program.

Reported Sexuality	n=58
GLBQ youth (gay, lesbian, bisexual, queer, questioning)	7%
Heterosexual	41%
Non-Disclosed	52%

Sexuality: We consistently work to ensure that the Peak House program remains a safe place for all youth, signaling that the house is a queer-friendly space through art, literature and information about GLBTQ2 issues and fostering awareness about sexual and gender diversity in our community resource programming.

Reported Socioeconomic Position	n=58
Low	57%
Mid	38%
High	5%

Mental Health Status: In the 2010/11 year, 34% had a diagnosed co-occurring mental health concern prior to entering the program.

Mental Health Status	2008-2009 n=18	2009/10 n=43	2010/11 n=58
Diagnosed, Co-occurring Mental Health Concern	42%	65.38%	34%
No Mental Health Concerns	58%	60.46%	66%

Legal Involvement	2008/2009	2009/10	2010/11
Percentage of Residents with Legal Involvement	32%	27.08%	33%

Legal Involvement: There was an increase in program participants with current criminal justice system involvement and/or pending charges in 2010/11. The Completion rate for those with legal involvement is reported in section V.

School: Over the past two years, more than half of the youth who entered our program were connected to a school. While at Peak House, young people work on setting up an Independent Education Plan with the teacher who works part-time with program participants.

Living Situation	2009/10	2010/11
Living with parent (s)	58%	60%
Living with other family member	1%	12%
On Independent Living	2%	3%
In Foster Placement	18%	12%
With no fixed address	21%	12%
In the care of MCFD	31%	24%

Living Situation: Although young people entering our program require a housing plan (somewhere to go in case they decide to leave on short notice), 12% of our clients last year were homeless. These clients are presented with an extraordinary challenge upon entering the program as participating in a therapeutic program without having housing in place presents a barrier to success. As a program, we will continue to work with community stakeholders to advocate for housing for all youth who access treatment.

Provincial Region: Peak House serves clients from across the province of B.C. The following table represents the percentage of youth from each provincial region.

Region	n=58
Vancouver, Richmond, N. Shore & Garibaldi (VCH)	28%
Vancouver Island (VIHA)	14%
Fraser Valley: Surrey, Langley, Chilliwack, Hope, Upper/South Fraser Valley & Simon Fraser (FHA)	34%
Okanagan, Kootenay & Thompson Cariboo (IHA)	20%
Northwest, Northern Interior & Northeast (NHA)	4%

V. Client Characteristics With Relationship to Completion

We continue to identify trends, and review the characteristics that contribute to a young person's success or lack of success in their journey to a substance-free lifestyle. One of the most critical factors continues to be community capacity, both in identifying concerns and having the resources to assist and support youth

prior to treatment and in their transition from the Peak House community back into their home community.

Mental Health Concerns and Assessment Phase Completion Rates

Mental Health Concerns	Percentage of youth	Completion Rate
Co-occurring Disorder	34%	60%
No Mental Health Concerns	66%	79%

In 2010/11, 60% percent of youth entering treatment with a diagnosed co-occurring mental health concern completed the Assessment Phase of the program.

Living Situation and Assessment Phase Completion Rates

Living Situation	Percentage of youth	Completion Rate
Living with parent(s)	60% (n=35)	74%
Living with other family member	12% (n=7)	57%
Living Independently	3% (n=2)	50%
In Foster Placement	12% (n=7)	57%
With no fixed address	12% (n=7)	58%
In the care of MCFD	24% (n=14)	64%

Please note some youth reported more than one living situation.

Family Sessions and Completion Rates

For a number of years, our statistics have shown that young people whose families are able to attend 2 or more family sessions complete the Peak House program.

While family meetings are not an option for some young people, we continue to strive to locate and help re-build young people's 'communities of concern' in order to help them reach their treatment goals.

Legal Involvement and Completion Rate

	% of youth with legal involvement	Completion Rate
2008/2009	32%	72%
2009/2010	27%	77%
2010/2011	33%	63%

The completion rate (client's completing the assessment phase) for those youth with legal involvement was 63%.

2010/11 Organizational Plan Review

Goal	To pursue partnerships and opportunities for funding and support with local business and organizations.
Action Plan	<ul style="list-style-type: none"> • Continue to build relationships with local businesses to garner increased in-kind donation opportunities and cash donations • Continue to build a private donor list
Outcome	<ul style="list-style-type: none"> • Board Fundraising Committee developed • Peak Speaks and Community workshop hosted • Community members hosted skating party fundraiser • Continued fundraising opportunities are being explored
Goal	To create increased exposure and generate community engagement to highlight the success of the Peak House program, especially in these times of economic uncertainty.
Action Plan	<ul style="list-style-type: none"> • Create opportunities for increase awareness of program credibility • Continue community lecture series to highlight Peak successes and the work that we do in the community.
Outcome	<ul style="list-style-type: none"> • Peak Speaks • Community Workshop held at City University
Goal	To continue to build strong board membership for the society.
Action Plan	<ul style="list-style-type: none"> • Increase board membership • Provide board governance training
Outcome	<ul style="list-style-type: none"> • Board membership was filled to capacity with a strong cross sector representation. • Board Governance Training was provided
Goal	To explore opportunities to develop an on-site and remote access parent/caregiver support group.
Action Plan	<ul style="list-style-type: none"> • Explore equipment required to reach out of town participants • Determine interest from former and current program participants • Explore funding possibilities to staff groups.
Outcome	<ul style="list-style-type: none"> • Conference phone, Skype and Facebook Account acquired • Development planning and funding sustainability are being explored
Goal	Restructure office administration to reflect recent budget reduction.
Action Plan	<ul style="list-style-type: none"> • Seek out administrative efficiencies • Secure part time office support
Outcome	<ul style="list-style-type: none"> • Administrative process reorganized • Part time office support obtained • Continued exploration to increase efficiencies
Goal	Create opportunities to meet the needs of young people referred with multiple barriers.
Action Plan	<ul style="list-style-type: none"> • Hold staff team day to collaboratively develop strategies and values statement to reflect our commitment to addressing the needs of youth with multiple barriers.
Outcome	<ul style="list-style-type: none"> • Team Day held • Values Statement developed and implemented • Continued reassessment will occur to ensure we are best

serving the needs of youth with multiple barriers
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2011/12 Organizational Plan Review

Goal	To pursue partnerships and opportunities for funding and support with local business, organizations and individuals
Action Plan	<ul style="list-style-type: none"> • Continue to build relationships with local businesses to garner increased in-kind donation opportunities and cash donations • Continue to build a private donor list • Explore fundraising tools to increase exposure
Goal	To create increased exposure and generate community engagement to highlight the success of the Peak House program.
Action Plan	<ul style="list-style-type: none"> • Create opportunities for increase awareness of the program • Continue community engagement to highlight Peak successes and the work that we do in the community
Goal	Maintain a strong board membership for the society.
Action Plan	<ul style="list-style-type: none"> • Maintain and recruit cross sector board members • Create increased opportunity for alumni caregiver membership • Continue to establish strong working committees
Goal	To explore opportunities to develop an on-site and remote access parent/caregiver support group
Action Plan	<ul style="list-style-type: none"> • Determine interest from former and current program participants • Explore model and facilitation options • Explore funding possibilities
Goal	Strategic Planning development: Board
Action Plan	<ul style="list-style-type: none"> • Develop a Strategic Planning Outline • Liaise with stakeholders • Review and revise as necessary the Society Mission Statement
Goal	Maintain a strong cohesive staff team.
Action Plan	<ul style="list-style-type: none"> • Continue to refer to the Peak House Values Statement as a guiding document • Seek out ways to highlight program success • Explore cost efficient ways to increase staff training opportunities • Provide opportunities for team building

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Your support really made a difference!



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