

# every minute counts



Begin doing what you want to do now.

We are not living in eternity.

We have only this moment.

SIR FRANCIS BACON



You are holding our annual book of numbers, full of statistical success.

But before you dive in, allow me to make it real.

These aren't numbers, they're people; mostly children. Foster children as young as 3 months old. Adolescents who battle five (or more) mental illnesses. Families barely hanging together – through poverty, abuse, PTSD, addictions. And teens in our group homes who will break your heart. They have grown up in impossible situations and taken the only path they could find: sometimes foolish, sometimes reckless, sometimes violent. Our partners at the Department of Public Safety turn to us to help these kids.

And we do. Our people are strong, resilient, courageous, and resourceful. We have teachers who cradle newborns, foster teams preparing homes, social workers traveling to remote areas, and group home workers who never give up. There is a story behind every success in this book, and it starts with an MHC employee.

*But don't take my word for it.* This year it was time for our triennial accreditation review from Teaching-Family Association. After rigorous

evaluation, on-site visits, and interviews with partners and families in our care, the multi-agency team accredited us, saying we met criteria in every category with no recommendation for improvement or change.

**What's next?**

We'll begin the year with new leadership. Ellen Scarborough – with 30 years MHC experience – will step into the role of vice president of program development and contracts. And Jessica Lang will join us as vice president of finance, bringing 20 years of finance and leadership to guide our team.

We are preparing to launch The Triplex, a new phase of transitional living. Available to a select few who have successfully completed our program, The Triplex will provide housing and supervision as they make the transition to successful, independent living.

This is work we are called to do even though it is difficult. We believe every person – no matter the circumstance – deserves the chance to succeed. So we dedicate ourselves to every child, every service, every day.

Every minute counts.

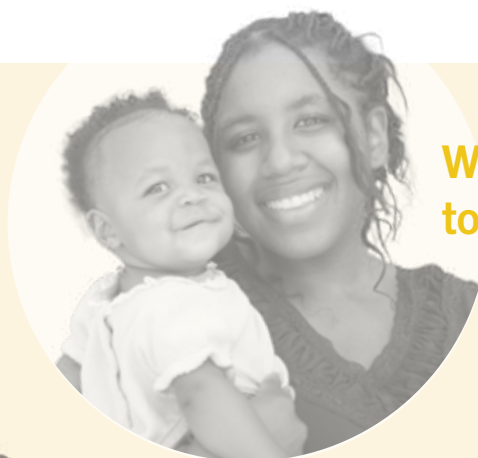
*Bruce E. Stanley*

Bruce E. Stanley, President / CEO



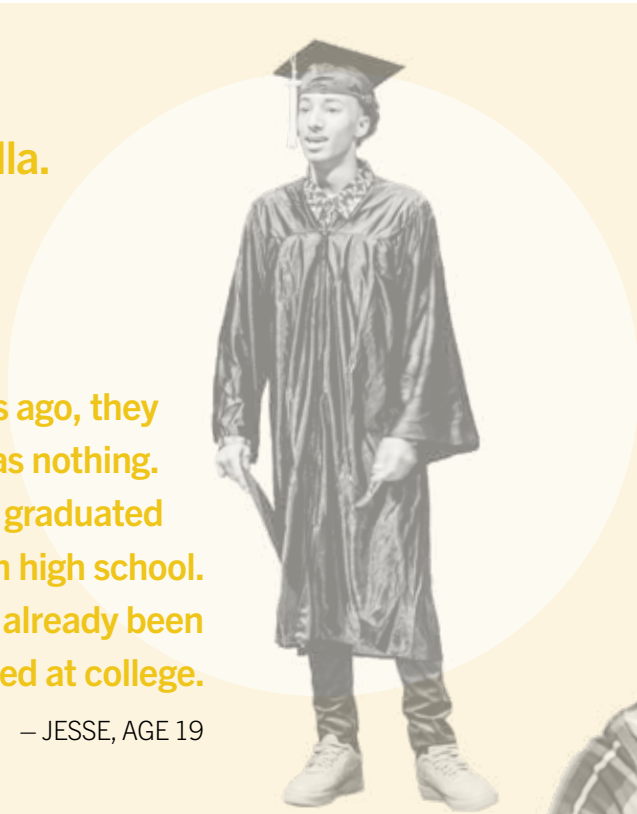
*MHC is accredited or has membership with these organizations*

LISTEN TO THE VOICES OF MHC



**We trust you to take care of Ella.**

– ELLA'S MOM



**Two years ago, they said my life was nothing. But today I graduated from high school. And I've already been accepted at college.**

– JESSE, AGE 19



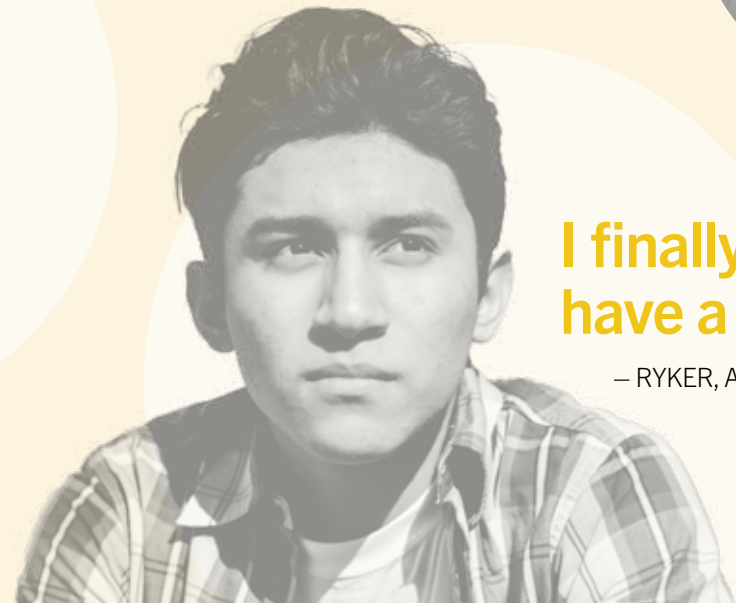
**See how many teeth I have!**

– RIVER, AGE 4



**Can I get a hug?**

– LUCY, AGE 3



**I finally have a bed.**

– RYKER, AGE 17



**Can I call my mom to tell her we won? WE WON!!**

– KYLER, AGE 14, AT MHC EDUCATION FAIR

THE YEAR IN REVIEW

number of unique MHC services

**27**

years MHC has served children in North Carolina

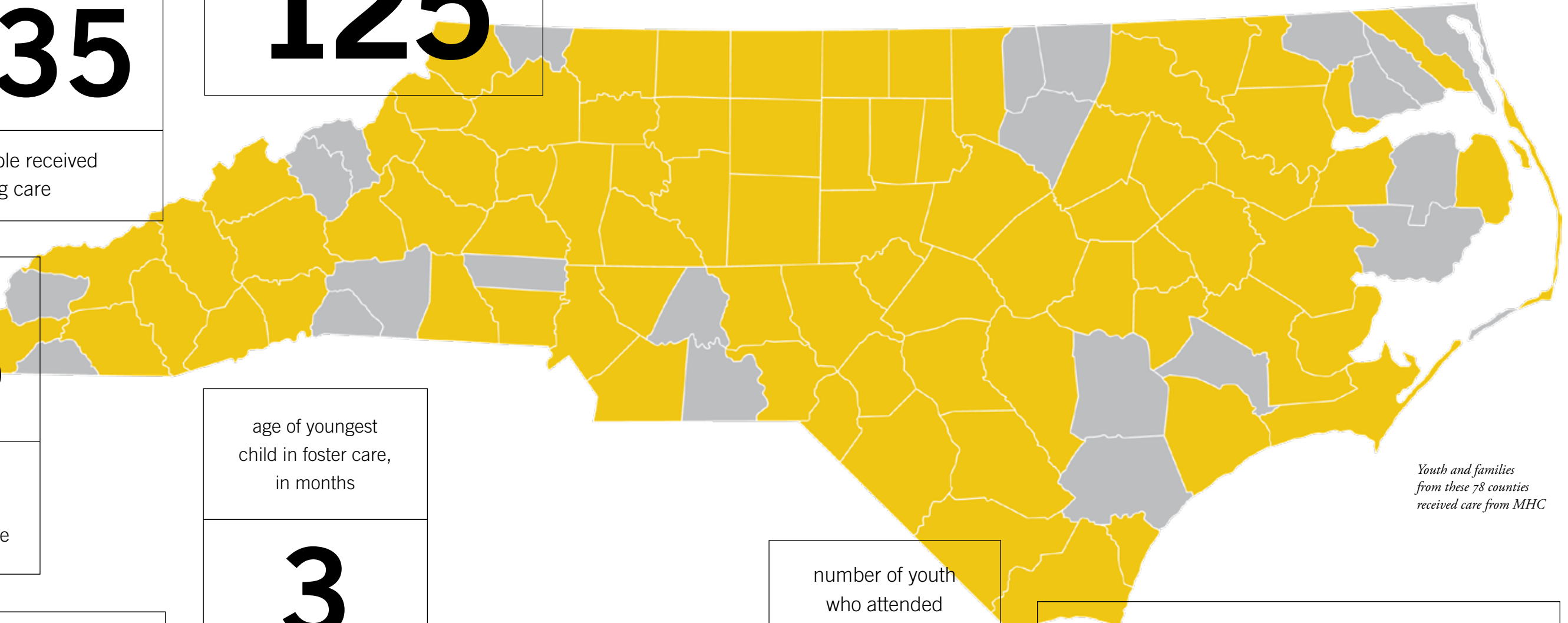
**125**

*the mission*

In service to God, our mission is to build upon the social, physical, emotional, and spiritual strengths of children, youth, and families, and to affirm their worth.

**1,335**

individual people received sustaining care



**78**

North Carolina counties have residents in our care

age of youngest child in foster care, in months

**3**

number of youth who attended a military ball

**1**

*Youth and families from these 78 counties received care from MHC*

**6**

average hours per week each transitional living youth volunteers

number of statewide services provided exclusively by MHC

**4**

**\$24,539**

amount donated to MHC by our own employees

## OUR PROGRAMS AND SERVICES

### foster care | adoption

#### **(Traditional) Family Foster Care**

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

#### **Therapeutic Foster Care**

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

#### **Kinship Care**

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

#### **Wake County Emergency Care**

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

#### **Respite Care**

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

#### **Juvenile Justice Foster Care**

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

#### **Adoption**

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

### early childhood services

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

### specialized services

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

#### **Day Treatment**

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

#### **Group Homes**

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

### family preservation services

#### **Family Preservation**

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

#### **Family Prevention**

When the stress imposed by outside circumstances – such as housing insecurity or lack of access to healthcare – threaten families, we become their first line of defense. Each situation is different, but in all we forge connections between the immediate need and available community resources. (2-6 weeks plus aftercare)

#### **Family Reunification**

Parents who have lost their children – due to foster care or residential placement – face insurmountable grief. We work to help parents overcome problems, adjust expectations, and ease tensions ensuring their children have a safe home and successful transition. (6-20 weeks)

#### **Comprehensive Clinical Assessments**

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

### in-home services

#### **Family Preservation Community Commitment (formerly Alternatives to Commitment)**

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

#### **Family Preservation**

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

#### **Transition and Reentry**

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

#### **Vocational Training**

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

### crisis & assessment centers

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

### multipurpose group homes

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

### transitional living homes

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

### hackley education and learning program

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

What's a typical time frame?  
**ongoing**  
 every minute counts



foster care | adoption

# homes are needed; we're committed to finding them

The goal of this program is simple and clear: To provide safe, stable, and nurturing homes to foster children in North Carolina. The process of identifying, recruiting, training, and licensing foster families is thorough and intense; no short-cuts allowed. MHC remains vigilant in our mission to safeguard every child in our care.

Following a period of immense internal change in our foster care program, this year we focused on rebuilding and growing. To attract new families, we increased online advertising and doubled the number of online information sessions. In addition to traditional foster care, we focused on recruiting families for kinship care.

Becoming a licensed foster family is a multi-step process that can take 3 to 6 months. We licensed 11 new families, and at year end, an additional 11 families were in the final stages of the process.

3-YEAR ANALYSIS	FY22	FY23	FY24
individual children served	108	91	80
total services provided	138	104	100

**outcomes**

- ▶ 80 individual children received care
  - ▶ 16 sibling groups
    - ▶ 38 siblings
- ▶ 54 foster homes

**program overview | services**

- ▶ 100 services
  - ▶ 47 received family (traditional) foster care
  - ▶ 18 received therapeutic care
  - ▶ 16 received kinship care
  - ▶ 10 received court-referred care (Department of Juvenile Justice)
  - ▶ 2 received respite care
  - ▶ 1 received Wake County emergency care
  - ▶ 6 adopted (after being in foster care)

*Service total is greater than 80 because some children received multiple services.*

- ▶ highest number of children served in one day: 48
- ▶ average number of children served per day: 42
- ▶ youngest child in care: 3 months old
- ▶ oldest child in care: 19 years old
- ▶ average length of stay: 9.6 months

**program overview | families**

- ▶ 11 new licensed foster homes

**Recruitment**

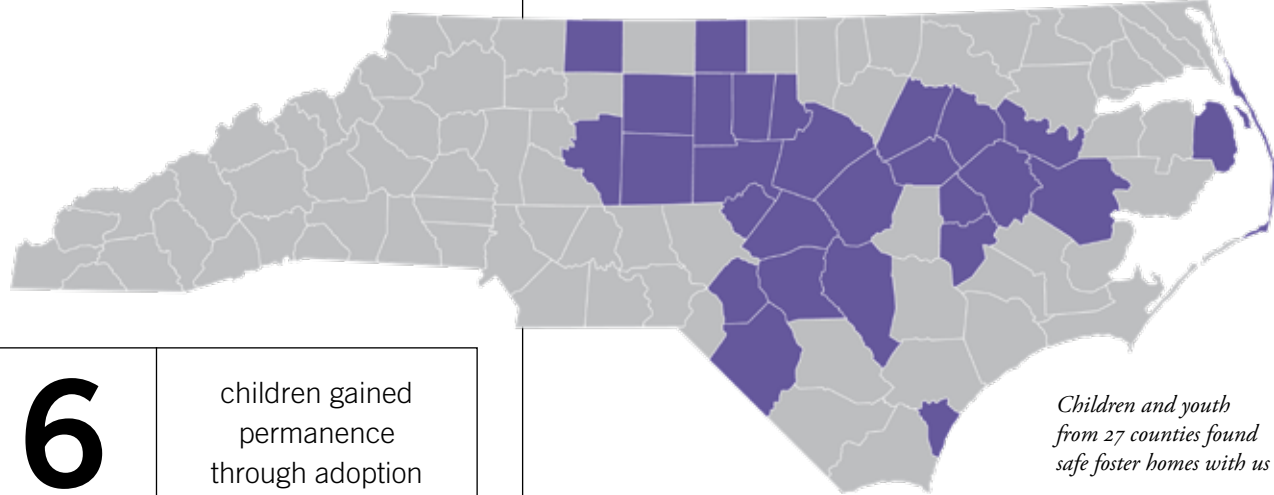
- ▶ 4 events
- ▶ 9 online information sessions
  - ▶ 32 families participated

**Training**

- ▶ 3 training periods (6 weeks of classes per period)
- ▶ MHC-developed curriculum (55 hours of instruction)
- ▶ 20 families completed MHC training

**On-going Parent Education**

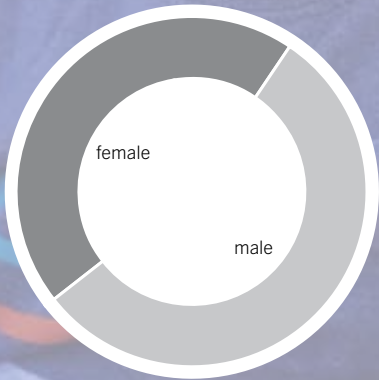
- ▶ 20 in-service programs offered year-round



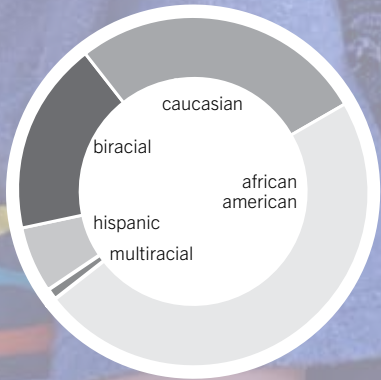
**6** children gained permanence through adoption

*Children and youth from 27 counties found safe foster homes with us*

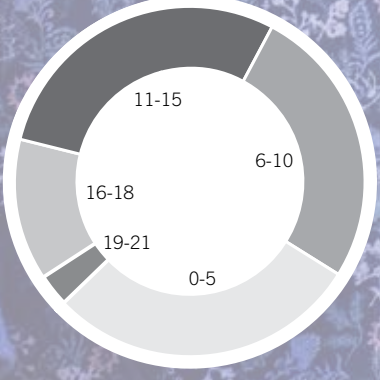
80 youth served



GENDER



RACE

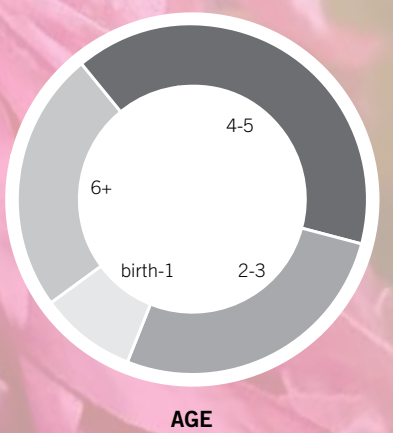
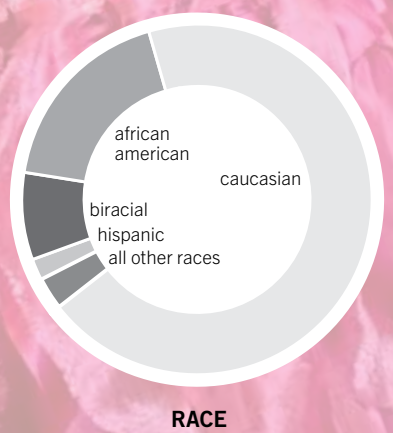
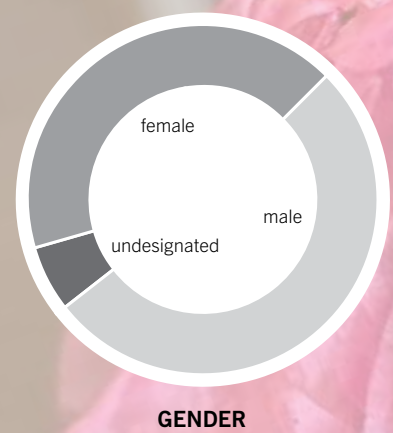


AGE



What's a typical time frame?  
**up to 6 years**  
 every minute counts

**225 children served**



**early childhood services**

**the lessons we teach make a lifelong difference**

For a young child, the benefits of high-quality early childhood education are lifelong and include an increased likelihood for elementary school success, high school graduation, college attendance, and job readiness.

Our program provides a strong foundation for each student. Year after year 100 percent of our rising kindergarteners meet standardized readiness goals. Children leave our program equipped and ready to learn.

This year we made progress on our goal to recruit enough qualified teachers to reopen all classrooms. It's been four years since we were fully staffed and, after careful restructuring, we were able to hire additional lead teachers who met our requirements. The Jordan Center scored so high on a preliminary accreditation process, its 5-star license was immediately renewed. The Curtis Center celebrated its fifth anniversary – and we said goodbye to six rising kindergarteners who had been with us since opening day.

3-YEAR ANALYSIS	FY22	FY23	FY24
individual children served	197	207	225
▶ received financial aid	40%	31%	27%
▶ received therapeutic aid	18%	29%	14%

**outcomes**

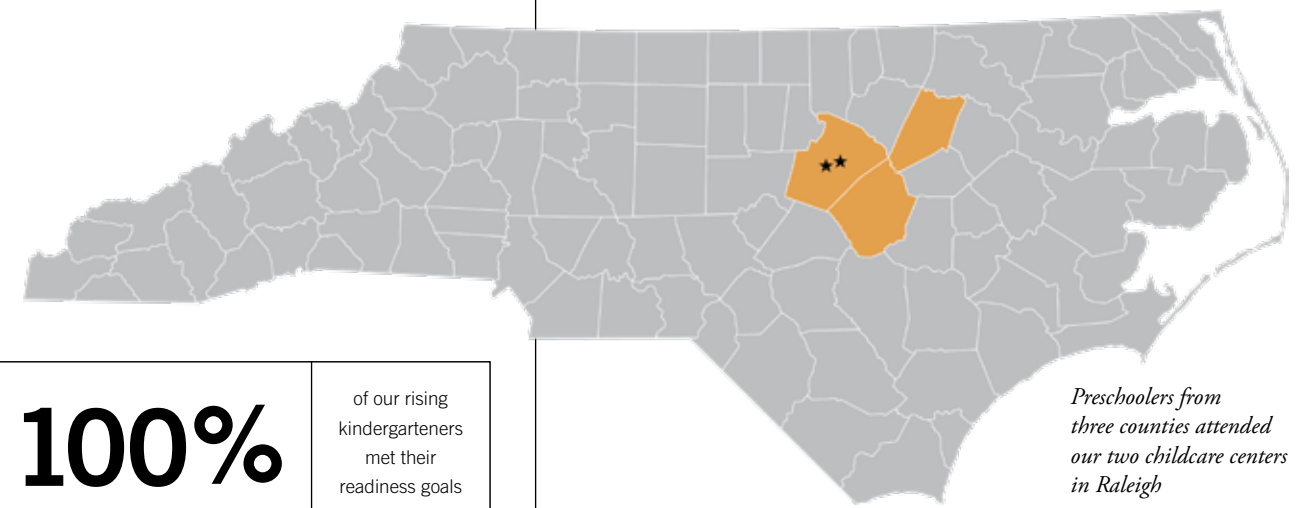
- ▶ 225 children served
- ▶ 27% received financial support
  - ▶ 70% scholarship
  - ▶ 30% subsidy
- ▶ 14% received therapeutic support while in care (speech, occupational, physical therapy, and early childhood mental health services)
- ▶ 7% have received an Individualized Education Plan (IEP) or an Individualized Family Service Plan (IFSP)
- ▶ 100% of rising kindergarteners achieved readiness goals (standardized assessment)

**program overview | centers**

- ▶ 19 classroom capacity
  - ▶ 16 classrooms open (by June 30, 2024)
- ▶ 17 lead teachers
  - ▶ 82% have an associate degree or higher in early childhood education or a related field
- ▶ 230 student capacity
  - ▶ 225 students enrolled (during fiscal year)

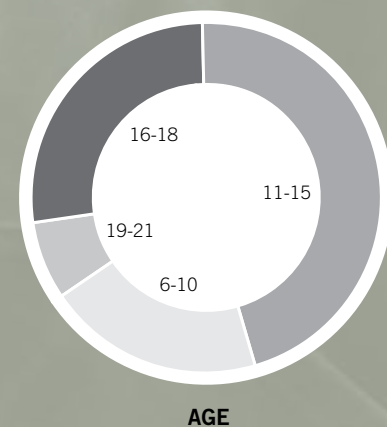
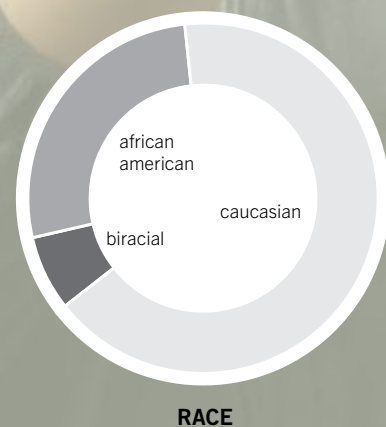
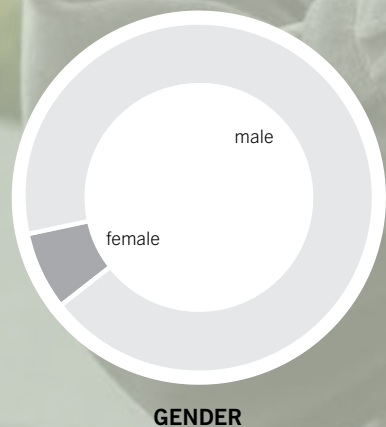
**program overview | instruction**

- ▶ evidence-based Conscious Discipline model
- ▶ research-based Teaching Strategies curriculum
- ▶ 5-star license from N.C. Division of Child Development and Early Education (DCDEE)
- ▶ classrooms are open year round
- ▶ quality of life support for families (i.e., community resources for housing, food, clothing, SafeChild & Project Enlightenment parenting trainings, parent counselor services, referrals for services, early interventions, and preschool special education services)



What's a typical time frame?  
**ongoing treatment**  
 every minute counts

15 youth served



specialized services

## we teach, build confidence, and unlock potential

Among all of the youth we serve, one population stands apart – in many ways exhibiting more creativity, more resilience, and more courage than other groups. They are the young people enrolled in our specialized services program.

Specialized services is a broad title for a very specific MHC mission: serving youth with a developmental disorder and a mental health concern. **MHC is the only provider of this service in North Carolina.**

The year brought many successes. Parenting involvement increased, creating consistency and stability as youth transition between environments. Our occupational course of study offerings grew. We expanded our day treatment facility and purchased housing for the group homes. And at the MHC education fair, by demonstrating their mastery of American Sign Language (ASL), the specialized services team took top honors. For youth who are often overlooked and ignored, this achievement alone made it a pinnacle year.

3-YEAR ANALYSIS	FY22	FY23	FY24
individuals served	48	15	15
total services provided	77	26	24

outcomes

- ▶ 15 youth received care

Day Treatment

- ▶ all 15 youth in our care
  - ▶ 10 currently progressing in the program
  - ▶ 5 completed the program, all went to a lower level of care
- ▶ average length of stay: 28.8 months

Group Homes

- ▶ 9 of the youth in our care
  - ▶ 6 currently progressing in the program
  - ▶ 3 completed the program, all went to a lower level of care
- ▶ average length of stay: 33.6 months

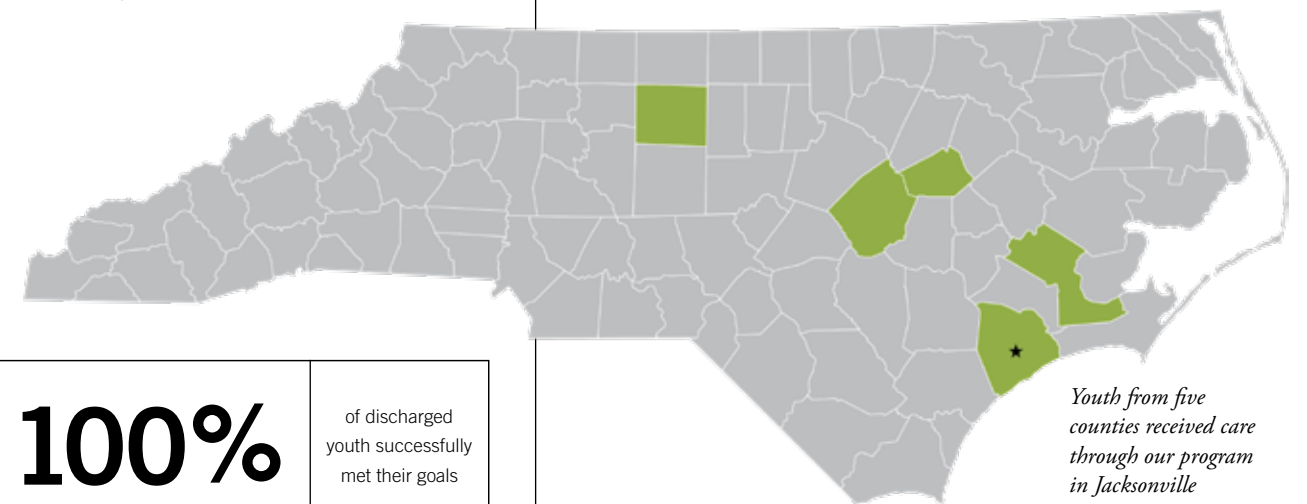
most common mental health diagnoses

- ▶ 100% Attention Deficit Hyperactivity Disorder (ADHD)
- ▶ 60% Autism Spectrum Disorder
- ▶ 40% Disruptive Mood Dysregulation
- ▶ 20% Borderline intellectual functioning
- ▶ 20% Various learning disability disorders

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

experience

- ▶ 24/7 care
- ▶ intensive therapies which may include individual and group psychotherapy, psycho-educational groups, psycho-social groups, life skills, recreational therapy, and parent counseling
- ▶ phased return to the community with local support services in place







What's a typical time frame?  
**1-6 months**  
 every minute counts

family preservation services

## our mission: restore unity, one family at a time

By the time families reach us for these services, they are in crisis and we must work quickly. The intense interventions we provide have short timelines; immediate goals are safety and family stability.

While our statistics report how many families remain intact or the rate of reunifications, numbers can't fully capture the deep sense of trust, resilience, and renewed hope families experience through our support. Their emotional growth leads to stronger, healthier family dynamics that statistics alone cannot always adequately represent.

Further, a reported unsuccessful outcome may actually represent a success for a child who is in an unsafe situation. Without our intervention, there would not be adequate information about the safety concerns, and the child could be seriously harmed. We remain true to our mission to protect every child in our care.

3-YEAR ANALYSIS	FY22	FY23	FY24
families served	61	198	219
total family members served	249	408	483
total services provided	61	198	219

**outcomes**

- ▶ 219 adults and their families (483 individuals) received care
- Our staff also worked with 20 families (88 total family members) who ultimately declined or were deemed not eligible for full services. Their data are not included in this report.*

**Family Reunification**

- ▶ 22 families (73 family members)
  - ▶ 20 families completed the program
  - ▶ 75% of the disrupted families were reunified

**Family Preservation**

- ▶ 91 families (304 family members)
  - ▶ 69 families completed the program
  - ▶ 96% maintained custody of their children

**Comprehensive Clinical Assessments**

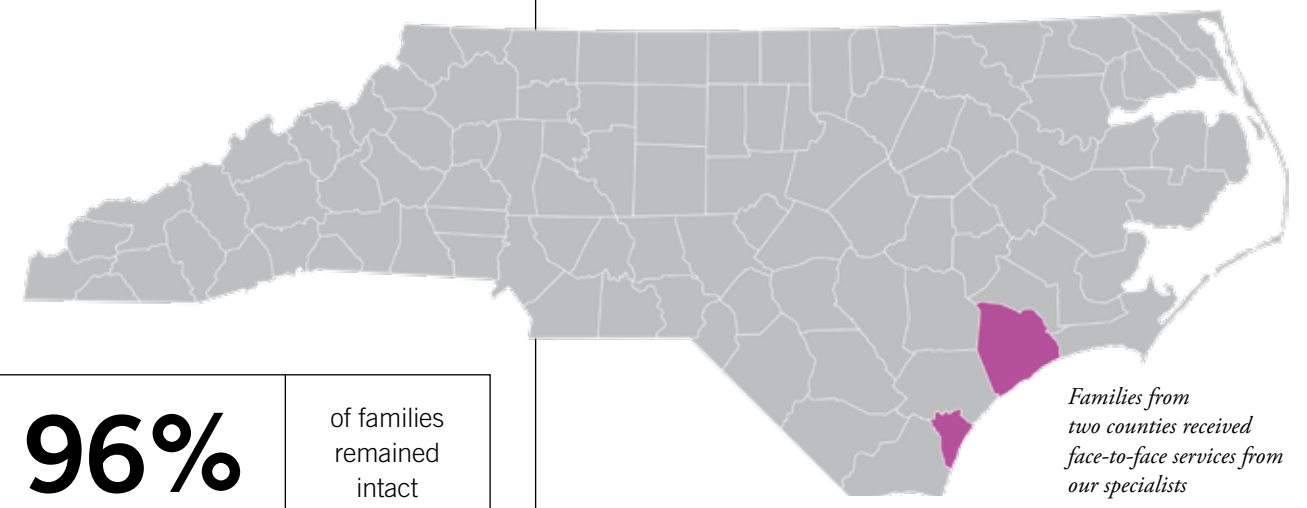
- ▶ 24 adults received comprehensive clinical assessments

**Family Prevention**

- ▶ 82 adults received care

**program overview**

- ▶ all services are in partnership with the Department of Social Services from New Hanover and Onslow counties
- ▶ our assistance extends to emergency help with rent and utilities, crisis support, medical equipment, school supplies, food, and clothing

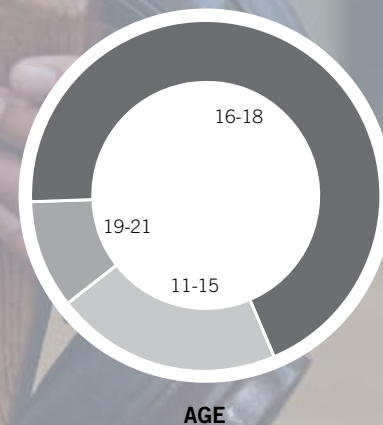
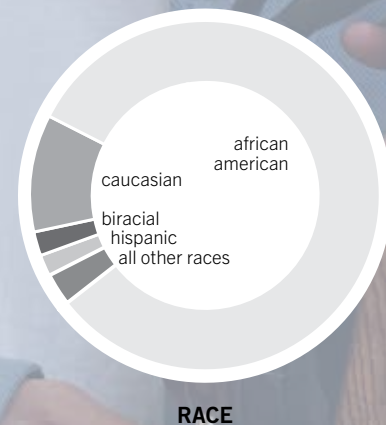
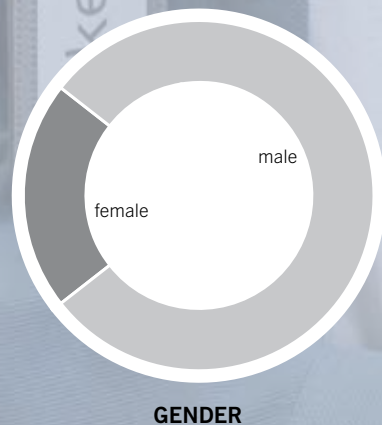


**96%** of families remained intact



What's a typical time frame?  
**1-6 months**  
 every minute counts

**97 youth served**



**in-home services**

**we help teens mend, at home and in the community**

There are many reasons adolescents and teens get in trouble: substance abuse, peer pressure, poverty, mental health, school problems, learning disabilities, or boredom.

We work with kids who are on the line – helping them change their course either through a new job, community resources, or by strengthening the family.

We also work with teens who have crossed the line and have been in a residential program – either a Youth Development Center (YCD) or a center such as our multipurpose group homes. When their residential time is complete, “re-entry” can be challenging.

Many youth are returning to families and homes in high crime areas. Our work includes the teen, their family, and their trauma. Most of our specialists have experienced the death of a client (teen) – either while in service or following discharge.

Our goal is always to keep them safe and prepared to live a successful life.

**3-YEAR ANALYSIS**    FY22    FY23    FY24

individual youth served	121	113	97
▶ successfully completed the program	70%	88%	75%

**outcomes**

- ▶ 97 individual youth received care
  - ▶ 59 discharged
    - ▶ 75% successfully completed the program

**Family Preservation Community Commitment (formerly Alternatives to Commitment)**

- ▶ 100% showed improvement in their home environment\*
- ▶ 75% completed services successfully or satisfactorily\*
- ▶ 50% had no new adjudications after admission\*

**Family Preservation**

- ▶ 83% showed improvement in their home environment\*
- ▶ 100% completed services successfully or satisfactorily\*
- ▶ 100% had no new adjudications after admission\*

**Transition and Re-entry**

- ▶ 97% showed improvement in their home environment\*
- ▶ 91% completed services successfully or satisfactorily\*
- ▶ 78% had no new adjudications after admission\*

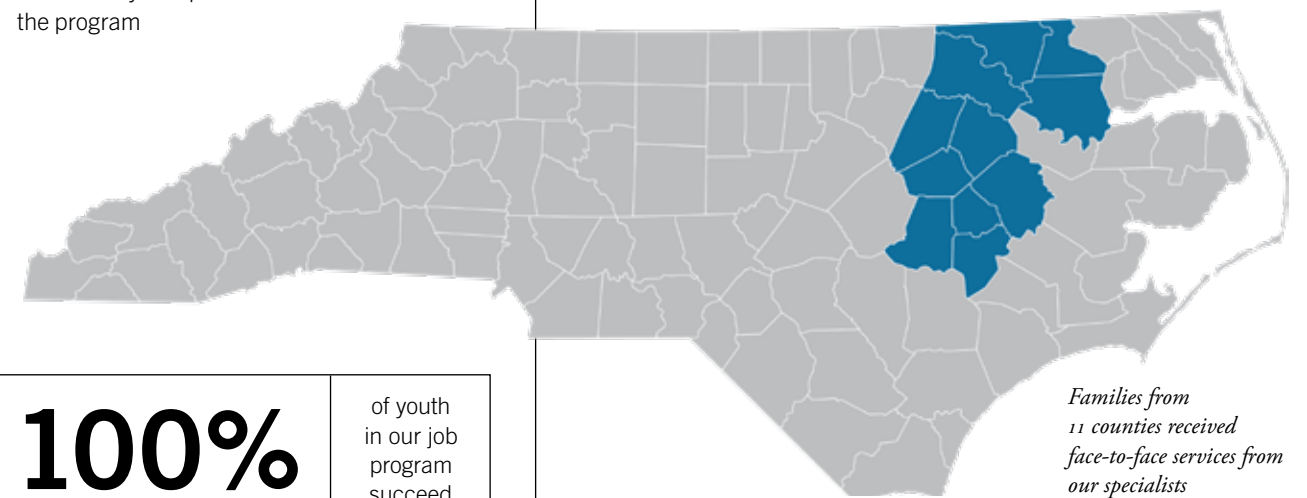
**Vocational Education**

- ▶ 100% showed improvement in their home environment\*
- ▶ 89% completed services successfully or satisfactorily\*
- ▶ 100% had no new adjudications after admission\*
- ▶ upon completion of MHC program, one youth gained permanent employment at his work site (restaurant)

*\* Information provided by the U.S. Department of Public Safety for calendar year 2023.*

**program overview**

- ▶ all services are in partnership with Juvenile Crime Prevention Councils (JCPC), and the N.C. Department of Public Safety
- ▶ youth in our vocational education program held MHC-sponsored jobs at a barber shop, restaurant, retail stores, and the YMCA. This allows them to gain the skills they need to become successful young adults.



**100%** of youth in our program succeed

*Families from 11 counties received face-to-face services from our specialists*



What's a typical time frame?  
**14-30 days**  
 every minute counts

crisis & assessment centers

## these youth are in crisis; we uncover why

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

This year we opened our fourth crisis & assessment center (Kinston). We continue to provide exceptional services – with a significant cost savings – to the state.

### cost per youth

Crisis & Assessment Center	\$12,239
NC Youth Development Center	\$136,692

### 3-YEAR ANALYSIS

	FY22	FY23	FY24
individual youth served	276	303	263
total services provided	299	318	325

### outcomes

- ▶ 263 individual youth received care
  - ▶ average age: 15
- ▶ all services are in partnership with the N.C. Department of Public Safety

### Crisis

- ▶ 152 crisis youth (average length of stay: 15 days)
  - ▶ 32 moved from crisis to assessment
  - ▶ 3 moved from crisis to secure

### Assessment

- ▶ 148 assessment youth (average length of stay: 36 days)
  - ▶ 144 were discharged
    - ▶ 86% completed the program with full assessment reports and recommendations
    - ▶ Top 3 recommendations
      - In-home Family Services
      - Functional Family Therapy
      - Outpatient Services

### Secure

- ▶ 25 secure youth (average length of stay: 28 days)
  - ▶ 3 moved from secure to assessment

*Total is greater than 263 because some youth received multiple services.*

### most common diagnoses

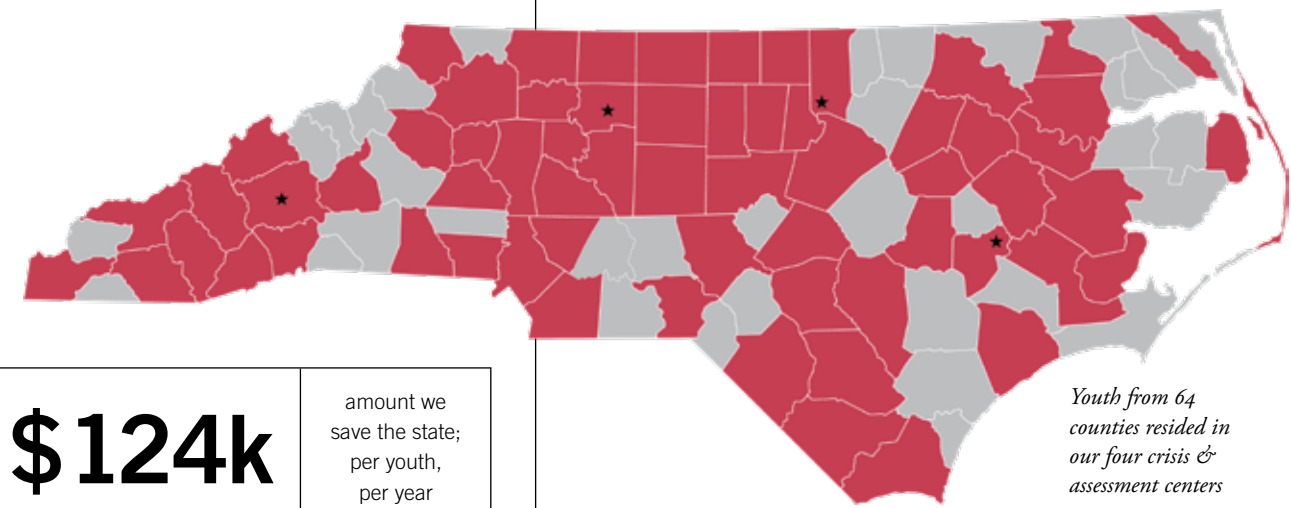
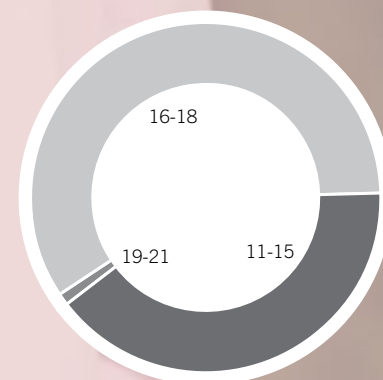
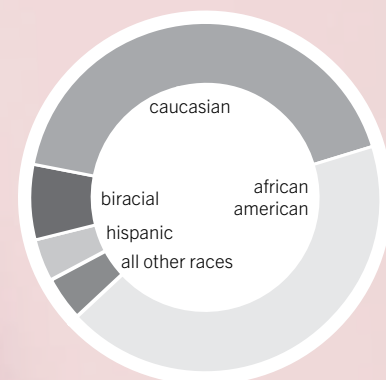
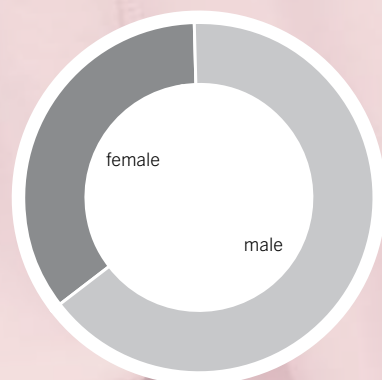
- ▶ 49% Attention Deficit Hyperactivity Disorder (ADHD)
- ▶ 42% Oppositional Defiant Disorder
- ▶ 20% Conduct Disorder

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

### experience

- ▶ 24/7 monitored care
- ▶ highly structured, daily programming in a safe, predictable atmosphere
- ▶ qualified teacher provides classroom instruction

### 263 youth served



**\$124k**

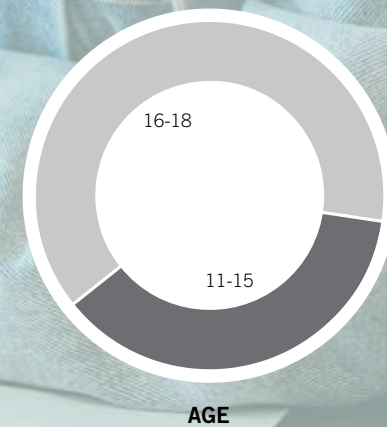
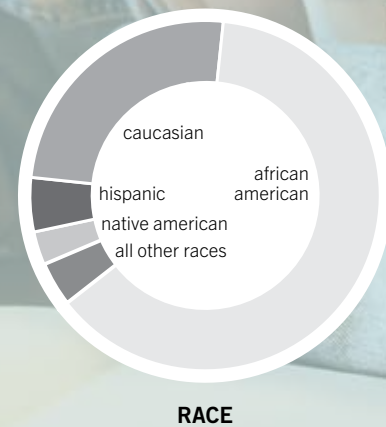
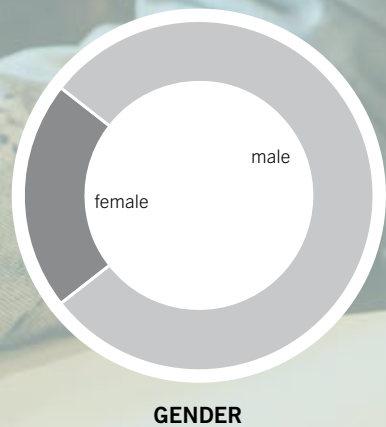
amount we save the state; per youth, per year

Youth from 64 counties resided in our four crisis & assessment centers

What's a typical time frame?  
**up to 8 months**  
 every minute counts



**98 youth served**



**multipurpose group homes**

**our work extends to families, ensuring long-term success**

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

This program provides exceptional services – with a significant cost savings – to the state.

**cost per youth**

Multipurpose Group Home	\$32,736
NC Youth Development Center	\$136,392

Our biggest goal this year was to increase the work we do with families of youth in our care. We provided transportation for home visits and more telephone time. And we worked directly with the parents – teaching positive discipline, increasing caregiver strengths, and improving the reintegration of the child into the family.

**3-YEAR ANALYSIS**

	FY22	FY23	FY24
individual youth served	134	130	98
▶ successfully completed the program	75%	70%	87%
total services provided	150	155	115

- outcomes & overview**
- ▶ 98 individual youth received care
  - ▶ all services are in partnership with the N.C. Department of Public Safety

- Multipurpose Services**
- ▶ 94 youth received multipurpose services
    - ▶ 67 youth were discharged
      - ▶ 87% successfully completed the program
  - ▶ average length of stay: 4.67 months
  - ▶ recidivism shows program effectiveness
    - ▶ 81% no juvenile complaint after 6 months
    - ▶ 77% no juvenile complaint after 12 months

*Recidivism data provided by the N.C. Department of Public Safety.*

- Aftercare Services**
- ▶ 19 youth received aftercare services (completely voluntary)
    - ▶ 16 youth started aftercare following discharge
    - ▶ 3 youth completed aftercare that began during FY23
  - ▶ length of program: up to 6 months

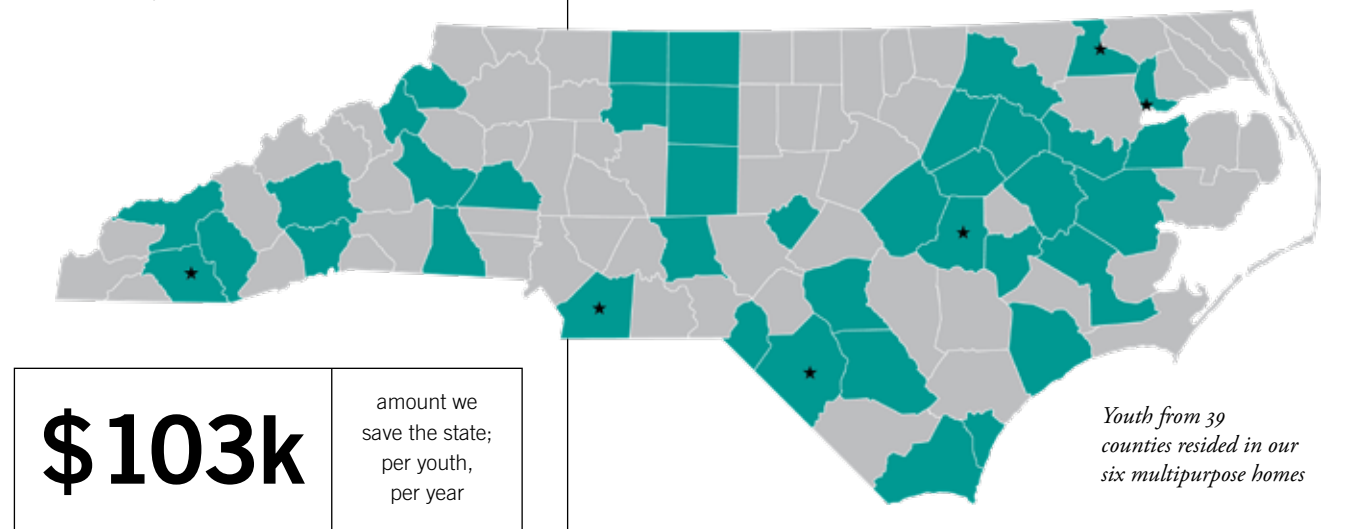
- Crisis Care**
- ▶ 1 youth received care (no reporting data)

*Total is greater than 98 because some youth received multiple services.*

**education**  
 Youth come into our care two or three years below grade level yet make measureable gains in our classrooms.

Reading Composite FY23	GRADE LEVEL	4.8	9.1
Reading Composite FY24	GRADE LEVEL	5.2	6.4
Math Scores FY23	GRADE LEVEL	5.4	6.2
Math Scores FY24	GRADE LEVEL	4.6	5.6

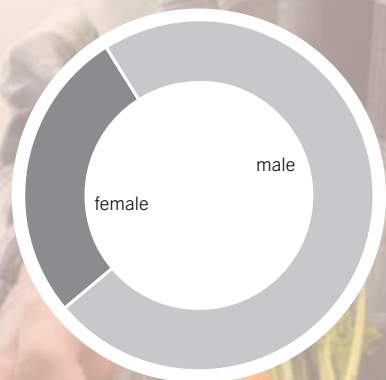
admission    discharge



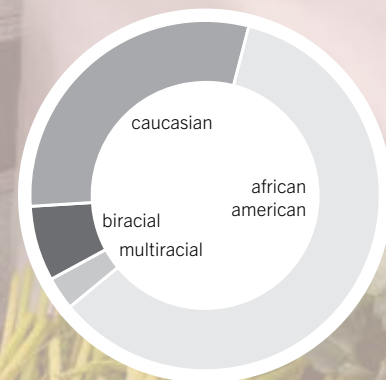
What's a typical time frame?  
**up to 12 months**  
 every minute counts



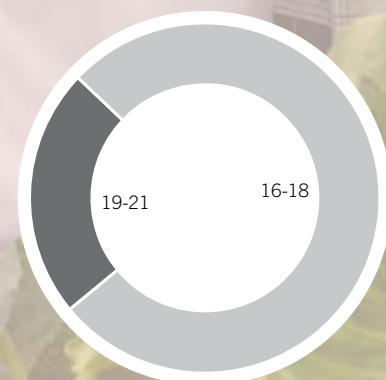
60 youth served



GENDER



RACE



AGE

transitional living

## we teach skills needed for independent living

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

**MHC is the only provider of this service in North Carolina.**

This program provides exceptional services – with a significant cost savings – to the state.

**cost per youth**

Transitional Living	\$33,676
NC Youth Development Center	\$136,692

The Farm – our newest transitional living home – opened this year and it is the first of its kind. In addition to program fundamentals (education, vocation, life skills, and community service), residents are learning to tend plants and farm animals.

3-YEAR ANALYSIS	FY22	FY23	FY24
individual youth served	65	66	60
▶ successfully completed the program	70%	61%	77%
total services provided	80	85	72

**outcomes**

- ▶ 60 individual youth received care
- ▶ all services are in partnership with the N.C. Department of Public Safety

**Transitional Living Services**

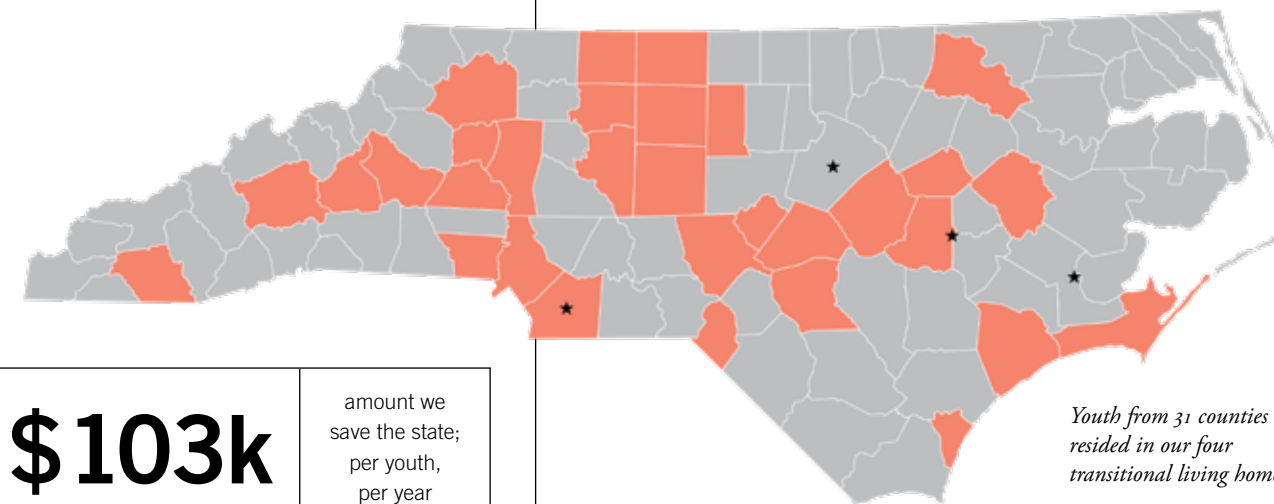
- ▶ 51 youth received transitional living services
  - ▶ 36 youth were discharged
    - 77% successfully completed the program
  - ▶ average length of stay: 3.7 months
- ▶ 100% of eligible youth earned high school diploma or equivalent
- ▶ 100% of eligible youth attended Wake Technical Community College
- ▶ 100% of eligible youth attended the VOLT Center at Craven Community College
  - ▶ classes include baking, culinary events, core (safety), forklift, HVAC, and welding levels I and II
- ▶ 4 professional certifications earned (all sources)
  - ▶ 1 forklift
  - ▶ 3 ServSafe
- ▶ 86% of eligible youth were employed
- ▶ recidivism shows program effectiveness
  - ▶ 82% no adjudications or convictions after 6 months
  - ▶ 75% no adjudications or convictions after 12 months

*Recidivism data provided by the N.C. Department of Public Safety.*

**Aftercare Services**

- ▶ 17 youth received aftercare services (completely voluntary)
  - ▶ 8 youth started aftercare following discharge
  - ▶ 9 youth completed aftercare which began during FY23
- ▶ length of program: up to 6 months

*Total is greater than 60 because some youth received multiple services.*



**\$103k**

amount we save the state; per youth, per year

*Youth from 31 counties resided in our four transitional living homes*



## HELP

# ready for higher education: we make it happen

For more than 44 years we have supported the higher education ambitions of young adults who have been in our care. Many have overcome abuse, neglect, and other childhood obstacles to complete high school and they now aspire to attend college. HELP makes that possible.

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

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

### 3-YEAR ANALYSIS

	FY22	FY23	FY24
young adults served	13	15	14
▶ degrees earned	1	1	1

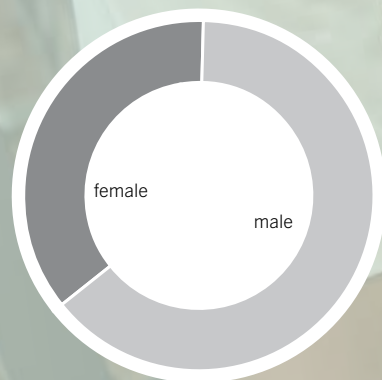
### outcomes

- ▶ 14 young adults served
- ▶ 1 graduate
  - ▶ BSW from North Carolina Central University

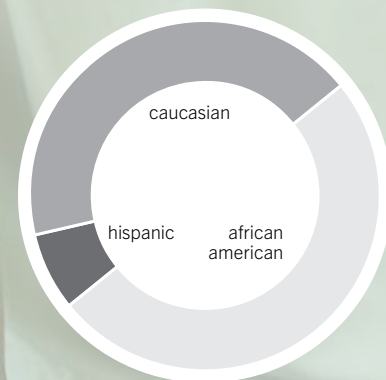
### service overview

- ▶ 12 academic institutions
  - ▶ Alamance Community College
  - ▶ Appalachian State University
  - ▶ Communica Institute (Kobe, Japan)
  - ▶ Craven Community College
  - ▶ East Carolina University
  - ▶ Guilford Technical Community College
  - ▶ MedCerts
  - ▶ North Carolina Central University
  - ▶ North Carolina State University
  - ▶ University of Mount Olive
  - ▶ Wake Technical Community College
  - ▶ Winston-Salem State University
- ▶ students receive scholarships plus a dedicated mentor
  - ▶ scholarships help cover costs for tuition, transportation, parking, test-prep classes, and meal plans
  - ▶ MHC employees and former HELP recipients serve as mentors to program participants
    - monthly meetings with students
    - approximately 189 volunteer hours invested

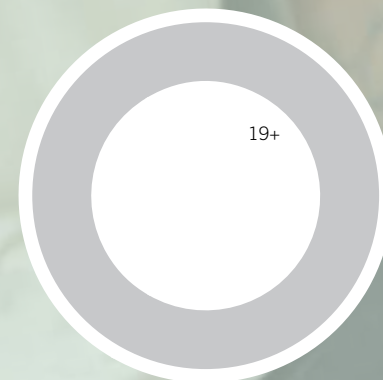
### 14 young adults served



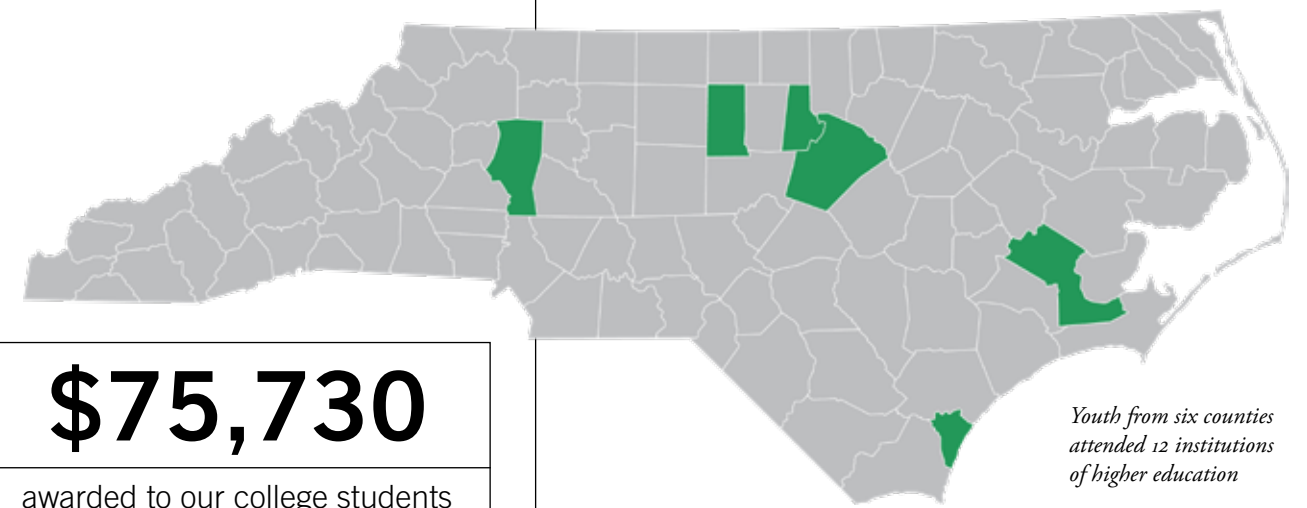
GENDER



RACE



AGE



# \$75,730

awarded to our college students

*Youth from six counties attended 12 institutions of higher education*



staff development

## our goals: build resources and support employees

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

To strengthen our employee base, we restructured, creating a division encompassing all aspects of working at MHC. By bringing together human resources, recruitment, and staff development, we believe there will be greater opportunities for employees to find their strengths, expand their knowledge base, develop mentoring relationships, and grow into their best positions.

Although MHC provides services that are vital and rewarding, it is challenging work. Retaining our employees was a top goal this year. Our first strategy was to adjust salaries and wages. Next we began reviewing benefits, identifying improvements to be made in the coming year.

3-YEAR ANALYSIS	FY22	FY23	FY24
employment capacity	358	333	365
new hires	162	182	220

outcomes

- ▶ 322 MHC employees (avg.)

Recruitment

- ▶ 9 events
- ▶ 1,428 applications submitted
  - ▶ 119 per month (avg.)
- ▶ 220 new hires
  - ▶ 18 per month (avg.)

Training

- ▶ CORE training (monthly) for all new employees
  - ▶ 195 participants
- ▶ 14 advanced workshops and in-service programs
  - ▶ 112 participants

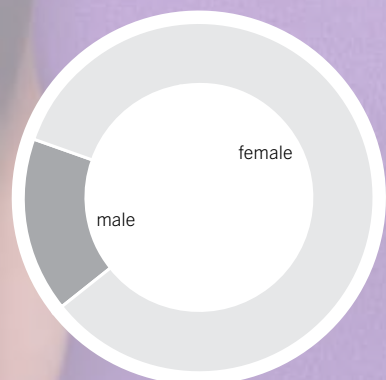
Development

- ▶ 7 staff promotions
- ▶ 73 employees eligible for MHC Lighthouse certification
  - ▶ 80% earned certification

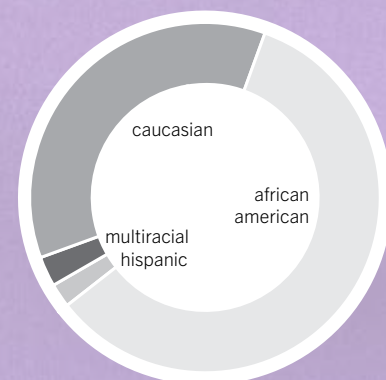
program overview

- ▶ all new employees attend CORE training
  - ▶ full day of orientation to MHC, our mission, values, and policies
  - ▶ direct care staff attend 6 additional days of intense training and evaluation for our model of care
- ▶ workshops and in-service programs offered year round
  - ▶ Model Booster
  - ▶ Consultation Workshop
  - ▶ Evaluation Workshop
  - ▶ Supervision Workshop
  - ▶ Elevate Leadership Cohort
- ▶ Lighthouse certification
  - ▶ required annual evaluation of all direct care staff and foster parents
  - ▶ recognized internationally through Teaching-Family Association

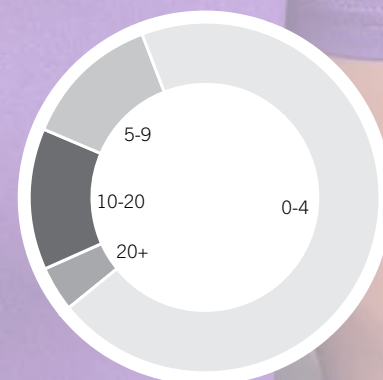
322 MHC employees (employment capacity 365)



GENDER



RACE



YEARS OF SERVICE

70

hours of pre-service CORE training available to each employee



consultation and program development

## we share our knowledge and expertise

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

Agencies seek our help because of our strong reputation for program fidelity and the support we offer to all levels of programs for youth and families. Our work helps agencies shift practices away from monitoring youth to teaching and restoring youth and – as a result – helps agencies reduce the financial liabilities associated with unsafe practices.

This service area is small – only two dedicated consultants – but a contract with MHC carries whole agency support. If a client has questions or needs help from any department, MHC leadership and directors answer the call. And, through a value added program we call Boots on the Ground, clients are offered on-site support from all MHC departments. Requests may include leadership, accounting, or human resources in addition to program areas. In every case, MHC personnel have provided side-by-side guidance in real time.

3-YEAR ANALYSIS	FY22	FY23	FY24
individuals trained	225	53	81

**26**

years we have been a TFA Sponsor Site

### outcomes

- ▶ 81 people trained
- ▶ 580 youth and families supported
- ▶ 4 clients
  - ▶ Boys and Girls Home of North Carolina (Lake Waccamaw, North Carolina)
  - ▶ Gift of Hope (Boones Mill, Virginia)
  - ▶ Hope Ranch of Missouri (Sullivan, Missouri)
  - ▶ Thornwell Charter School (Clinton, South Carolina)

### program overview

- ▶ 2 dedicated staff members
- ▶ 31 weeks of travel
- ▶ consulting topics
  - ▶ Teaching Family Model consultation and development
  - ▶ Comprehensive best practices
  - ▶ Foster care
  - ▶ Residential treatment
  - ▶ Juvenile delinquency
  - ▶ In-home services
  - ▶ Early childhood development
  - ▶ Adoption
  - ▶ Facility management
  - ▶ Administrative processes and practices
  - ▶ Community integration
  - ▶ Supervision and management
  - ▶ Quality assurance and improvement





**CONSOLIDATED STATEMENT OF FINANCIAL POSITION**

June 30, 2024 (with comparative totals for 2023)

	2024	2023
<b>ASSETS</b>		
Cash and cash equivalents	\$ 1,496,596	\$ 1,650,775
Common investment fund	24,157,996	22,233,973
Accounts receivable	1,988,590	1,674,366
Pledges receivable	120,000	160,000
Prepaid expenses	245,622	247,142
Annuities contracts	1,426,187	1,179,423
Beneficial interests in trusts and perpetual trusts	867,984	825,080
Property, equipment, and right of use assets	4,725,089	4,399,173
<b>Total assets</b>	<b>\$35,028,064</b>	<b>\$32,369,932</b>

**LIABILITIES AND NET ASSETS**

<b>LIABILITIES</b>		
Accounts payable	\$ 468,074	\$ 393,246
Line of credit	228,353	-
Accrued pension liability	-	704,509
Accrued salaries and vacation	1,080,030	814,576
Deferred compensation	1,426,187	1,179,423
Other liabilities	-	139,695
Lease liabilities	1,544,060	1,327,456
<b>Total liabilities</b>	<b>4,746,704</b>	<b>4,558,905</b>

<b>NET ASSETS</b>		
Without donor restrictions:		
Undesignated	4,255,380	4,751,974
Board designated	20,140,284	18,599,395
<b>Total without donor restrictions</b>	<b>24,395,664</b>	<b>23,351,369</b>
With donor restrictions:		
Purpose restricted	4,527,829	3,141,413
Perpetual in nature	1,357,867	1,318,245
<b>Total with donor restrictions</b>	<b>5,885,696</b>	<b>4,459,658</b>
<b>Total net assets</b>	<b>30,281,360</b>	<b>27,811,027</b>
<b>Total liabilities and net assets</b>	<b>\$35,028,064</b>	<b>\$32,369,932</b>

**2024 REVENUES**

TOTAL: **\$27,879,246**



- 69% Fees for service  
\$19,200,824
- 17% Donations and grants  
\$4,711,732
- 14% Investment and other income  
\$3,966,690

**2024 EXPENSES**

TOTAL: **\$25,408,913**



- 84% program services  
\$21,437,789
- 6% fundraising  
\$1,535,969
- 10% general and administrative  
\$2,435,155

**CONSOLIDATED STATEMENT OF ACTIVITIES**

For the Year Ended June 30, 2024 (with comparative totals for 2023)

	2024			2023
	Without Donor Restrictions	With Donor Restrictions	Total	Total
<b>SUPPORT AND REVENUE</b>				
Fees for service	\$19,200,824	\$ -	<b>\$19,200,824</b>	\$18,540,327
Donations and grants	3,585,982	1,125,750	<b>4,711,732</b>	4,296,554
Investment income (loss)	2,137,964	414,086	<b>2,552,050</b>	1,912,592
Change in value of annuities and trusts	246,764	42,904	<b>289,668</b>	236,935
Other income	1,124,972	-	<b>1,124,972</b>	19,826
<b>Total support and revenue</b>	<b>26,296,506</b>	<b>1,582,740</b>	<b>27,879,246</b>	25,006,234

<b>RECLASSIFICATIONS</b>				
Net assets released from restrictions	156,702	(156,702)	-	-
<b>Total reclassifications</b>	<b>156,702</b>	<b>(156,702)</b>	<b>-</b>	<b>-</b>

<b>EXPENSES</b>				
Program service expenses				
Foster care and adoptions	1,955,852	-	<b>1,955,852</b>	1,971,930
Early childhood	4,252,336	-	<b>4,252,336</b>	4,028,846
Family preservation and in-home	1,698,944	-	<b>1,698,944</b>	1,589,890
Mental health	1,560,657	-	<b>1,560,657</b>	1,416,421
Assessment centers and juvenile homes	11,678,506	-	<b>11,678,506</b>	11,042,831
Scholarships	79,735	-	<b>79,735</b>	91,364
Consultation and program development	211,759	-	<b>211,759</b>	279,588
<b>Total program service expenses</b>	<b>21,437,789</b>	<b>-</b>	<b>21,437,789</b>	20,420,870
Supporting activities				
Fundraising	1,535,969	-	<b>1,535,969</b>	1,516,870
General and administrative	2,435,155	-	<b>2,435,155</b>	2,386,633
<b>Total expenses</b>	<b>25,408,913</b>	<b>-</b>	<b>25,408,913</b>	24,324,373
Change in net assets	1,044,295	1,426,038	<b>2,470,333</b>	681,861
Other pension-related changes	-	-	-	349,714
Net assets at beginning of year	23,351,369	4,459,658	<b>27,811,027</b>	26,779,452
<b>Net assets at end of year</b>	<b>\$24,395,664</b>	<b>\$5,885,696</b>	<b>\$30,281,360</b>	<b>\$27,811,027</b>

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

Our work continues thanks to benevolent support.

If you would like to make a gift that will lead us forward, please visit [mhfc.org/donate](https://mhfc.org/donate) or scan the QR code for a secure giving page.

