

# Citizen Centric Report FY2017

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## GBHWC History

**Prior to 1983, mental health services were provided by the Guam Memorial Hospital. With the passage of Public Law 17-21, the Department of Mental Health and Substance Abuse was created to:**

- Provide comprehensive mental health, alcohol and drug programs and services for the people of Guam.
- To continually strive to improve, enhance and promote the physical and mental well-being of the people of Guam who experience the life-disrupting effects of mental illness, alcoholism and drug abuse or are at risk to suffer those effects and who need such assistance.
- To encourage the development of privately-funded community-based programs for mental health, drug and alcohol abuse, in particular those programs that employ qualified local residents.
- Finally, as those services become developed and/or available in the Territory, the government of Guam may gradually phase out of such operations.
- With over 200 staff, GBHWC has grown to meet the needs of the people of Guam. GBHWC has its main facility located across the Guam Memorial Hospital, as well as satellite offices in the J&G Commercial Center in Hagatna, and an adult mental health transitional residential service in Asan. In addition, privatized services are located in Mangilao (adult mental health permanent supportive residential service); Tamuning (child mental health residential and outpatient services; drop-in services; supported employment; consumer enrichment center); and outsourced drug and alcohol services provided by Sanctuary, OASIS and The Salvation Army.

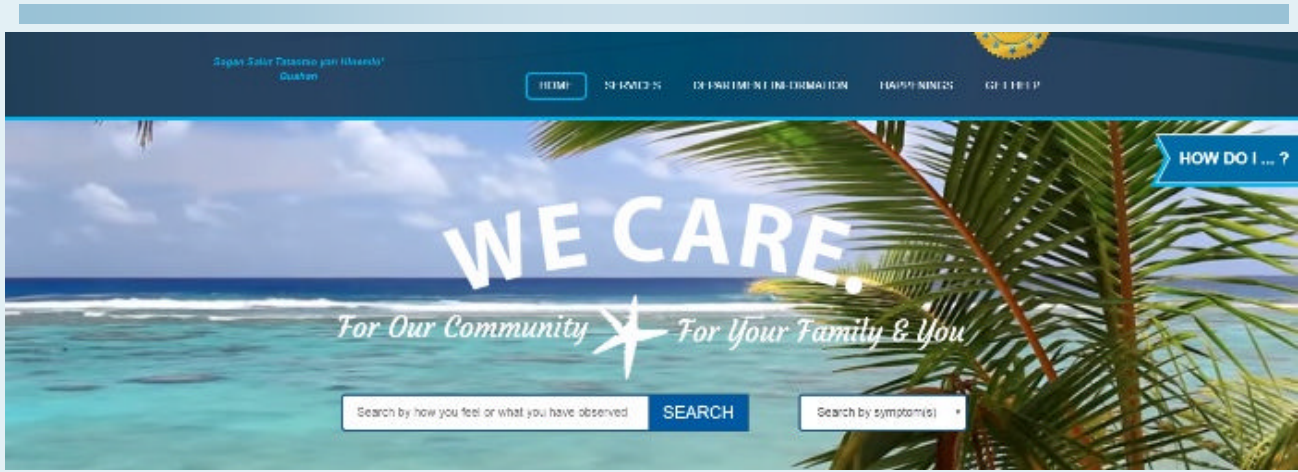
## Contents of Report

About Us .....	1
Programs/Purpose.....	2
Performance .....	3
Financial Report .....	4
Outlook .....	5

## Special points of interest

- GBHWC History
- Mission Statement
- Statement of Values

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## Mission Statement

To provide a culturally respectful, quality behavioral health services, that support and strengthen the well being of the persons served, their families and the community in a safe environment.

## Vision

We envision a healthy island, committed to promoting and improving the behavioral health and well-being of our community.

## Statement of Values

### CARE Statement of Values as the guiding principle for the organization's operations and delivery of care

**Cultural Humility** - Understanding of our cultural heritage and sensitivity to our consumers and their families.

**Achievement** - Providing gold standard care by utilizing evidence based program, policies and trainings while respecting and integrating cultural practices.

**Respect** - Treating our consumers and their families, co-workers, and professionals from other organizations with respect and dignity.

**Engagement and cooperation** with the persons and organizations working together for the benefit of our consumers.

## Programs/Purpose

### ADMINISTRATION

Provides direction, management and operation of GBHWC and Professional Support for the Clinical and Inpatient care – Administrative Support in financial management, research, planning and development, information management, regulatory affairs, plant & facility maintenance, human resources assistance.

### CLINICAL PROGRAM

#### INTAKE, ADULT COUNSELING, COMMUNITY SUPPORT SERVICE, PREVENTION & TRAINING, GROUP HOMES, DAY TREATMENT, DRUG/ALCOHOL –

Provides comprehensive community based outpatient and residential mental health services for adults and alcohol and drug prevention and education, early intervention and treatment program for children, youth and adults.

### RESIDENTIAL TREATMENT PROGRAM –

To provide transitional living services for mentally ill, and to provide adequate supervision and counseling through assistance and support.

### RESIDENTIAL GROUP HOMES –

Provide residential group housing for adults with mental illness, physical and developmental disabilities



**HEALING HEARTS CRISIS CENTER-**

Provides victims of sexual assault and abuse discrete, immediate and full medical attention incorporating a holistic approach including crisis intervention, intake assessments, forensic interviews, case management, medical examinations including the collection of forensic evidence, emergency contraception, STD testing and treatment 24 hours a day, 7 days a week.



**PERFORMANCE SUMMARY OF MISSION ACCOMPLISHMENTS AND OUTCOMES**

**NURSING PROGRAM - INPATIENT UNITS, OUTPATIENTS AT RESIDENCE, MEDICAL CLINIC**

Provide inpatient treatment services  
24-hour crisis hotline  
Medical Clinic for outpatient services



**CHILD/ADOLESCENT SERVICES – P'FAMAGUONTA SYSTEM OF CARE, THERAPEUTIC GROUP HOME & DAY TREATMENT, TRANSITION HOME**

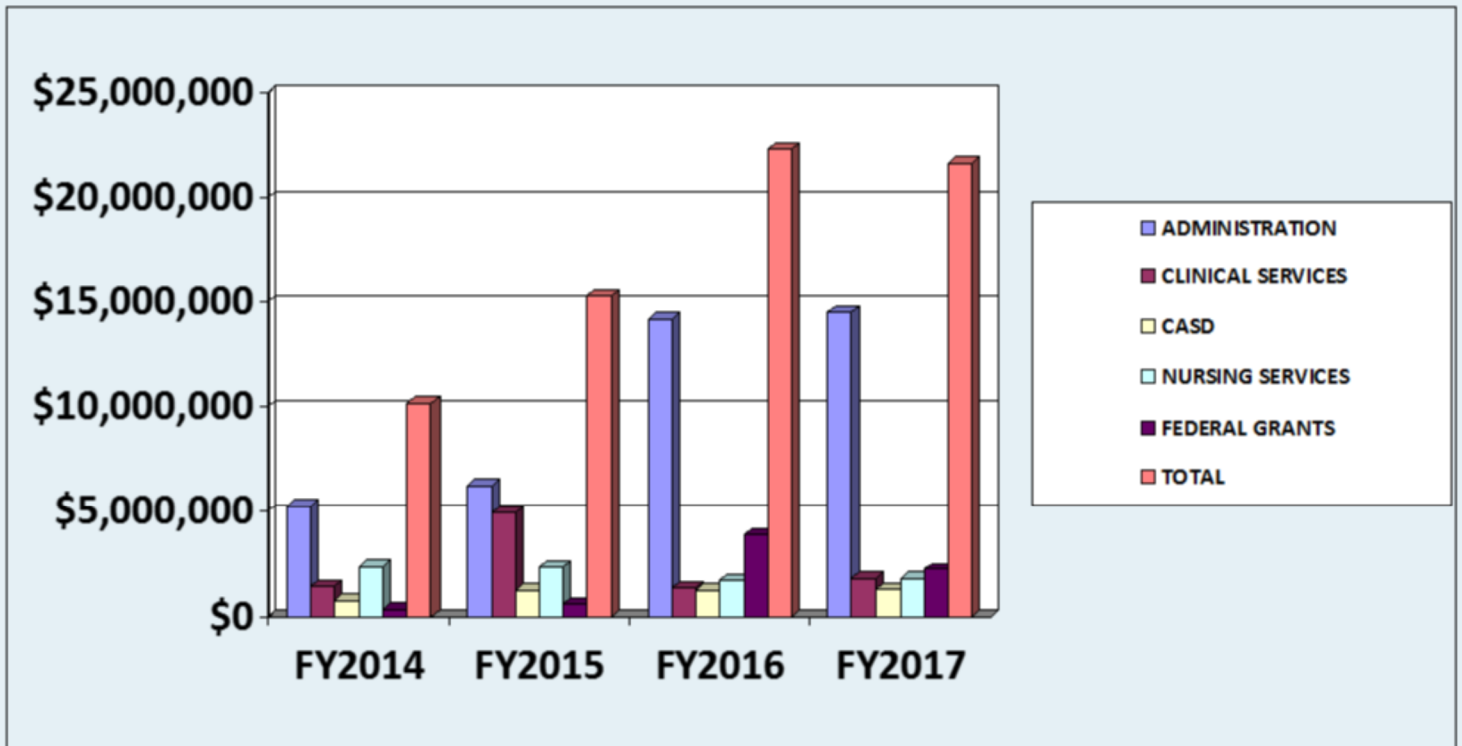
Provides integrated, community-based outpatient services for children/adolescents at high risk or with serious emotional disturbances and their families includes individual, group and family counseling; 24-hr intervention, outreach, prevention and education, transitional placements, support and assistance for related services in the community



<u>PROGRAM</u>	<u>TOTAL</u>
Adult Inpatient Unit	402
Adult Outpatient Group Therapy	108
CASD - I Famagu'on-ta	567
Children's Inpatient Unit	59
D&A - New Beginnings Intake	53
D&A - New Beginnings Outpatient 0.5	267
D&A - New Beginnings Outpatient 0.7	31
D&A - New Beginnings Outpatient 1	117
D&A - New Beginnings Outpatient 2	184
Guma Asusena	9
Guma Hinemlo	12
Guma Kamia	8
Guma Metgot	6
Guma Pahong	12
Healing Hearts Crisis Center	94
Hinanao-ta	5
Intake & Registration	243
Mary Clare	8
Residential Central Intake	1
SERENITY	9
Treatment Team 1	984
Treatment Team 2	649
Treatment Team 3	604
Treatment Team 4	18
<b><u>TOTAL</u></b>	<b><u>4450</u></b>

## FINANCIAL-BASE OPERATIONS COST

	FY2014	FY2015	FY2016	FY2017
ADMINISTRATION	5,251,743	6,208,766	14,167,251	14,458,114
CLINICAL SERVICES	1,420,456	4,920,310	1,322,158	1,813,332
CASD	789,417	1,232,201	1,218,649	1,242,931
NURSING SERVICES	2,360,068	2,333,345	1,697,163	1,833,224
FEDERAL GRANTS	325,793	587,137	3,862,765	2,248,910
<b>TOTAL</b>	<b>10,147,477</b>	<b>15,281,759</b>	<b>22,267,986</b>	<b>21,596,511</b>



GBHWC is funded by the General Fund and Healthy Futures Fund for base operations. The above information is derived from those appropriations/expenditures for the year indicated. GBHWC has been generously programmed by federal grants through the exceptional endeavors of the respective staff of programs of Community Mental Health Service, Prevention and Training, Substance Abuse Treatment and Education, and Child Mental Health System of Care.

The Residential Treatment Fund has been primarily used for court-ordered treatment and housing of wards of the court. The fund is under the DOA custody but is authorized for services requested by GBHWC for those purposes. There are currently seven consumers being treated off-island by court order. The costs are inclusive of travel for consumer and escorts from the court, GBHWC, Public Health and others that the court may decree. The FY2011 budget for **Residential Treatment Fund** was \$1,188,466.34, FY2012 (\$1,200,000), FY2013 (\$1,100,000), FY2014 (\$1,100,000), FY2015 (\$1,571,939) FY2016 (\$2,291,525), FY2017 (\$2,222,825). Additionally, the court ordered **Child Support Fund** allocated in FY2011 in the amount of \$676,503 was expended for youth foster care services and residential treatment services under Guam Court Orders. Allocated CSF Funds for following years FY2012 (\$649,962), FY2013 (\$649,962), FY2014 (\$649,962), FY2015 (\$684,052), FY2016 (\$857,260), FY2017 (\$787,588).

# FUTURE CHALLENGES AND ECONOMIC OUTLOOK

## GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER

In line with the Federal Administration – Substance Abuse and Mental Health Services Administration Initiatives – the GBHWC will adopt the same initiatives and endeavor to implement the same to be abreast with national evidenced based practices and which have shown to be most effective with the recovery programs that GBHWC is engaging and propose to engage through the department’s mandates and local/federal appropriations. The SAMHSA initiatives that are mirrored in GBHWC programs are:

- **Prevention of Substance Abuse and Mental Illness** – *Creating communities where individuals, families, schools, faith-based organizations, and workplaces take action to promote emotional health and reduce the likelihood of mental illness, substance abuse including tobacco, and suicide.*
- **Trauma Justice** – *Reducing the pervasive, harmful, and costly health impact of violence and trauma by integrating trauma-informed approaches throughout health, behavioral health, and related systems and addressing the behavioral health needs of people involved in or at risk of involvement in the criminal and juvenile justice systems.*
- **Military Families** – *Supporting America’s service men and women –Active Duty, National Guard, Reserve, and Veteran –together with their families and communities by leading efforts to ensure that needed behavioral health services are accessible and that outcomes are positive.*
- **Recovery Support** – *Partnering with people in recovery from mental and substance use disorders to guide the behavioral health system and promote individual-level, program, and system-level approaches that foster health and resilience; increase permanent housing, employment, education, and other necessary supports; and reduce barriers to social inclusion.*
- **Health Reform** – *Broadening health coverage to increase access to appropriate high-quality care and to reduce disparities that currently exist between the availability of services for substance abuse, mental disorders, and other medical conditions such as HIV/AIDS.*
- **Health Information Technology** – *Ensuring that the behavioral health system, including States, community providers, and peer and prevention specialists, fully participates with the general health care delivery system in the adoption of Health Information Technology (HIT) and interoperable Electronic Health Records (EHR).*
- **Data, Outcomes, and Quality** – *Realizing an integrated data strategy and a national framework for quality improvement in behavioral health care that will inform policy, measure program impact, and lead to improved quality of services and outcomes for individuals, families, and communities.*
- **Public Awareness and Support** – *Increasing the understanding of mental and substance use disorders to achieve the full potential of prevention, help people recognize mental and substance use disorders and seek assistance with the same urgency as any other health condition, and make recovery the expectation.*