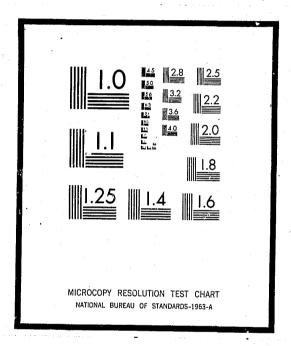
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Final Report of the Evaluation of Today, Inc.

Outpatient Program

NCJRS P. O. Box 24036, S. W. Post Office Washington, D. C. 20024 Topic: Final Report of the Evaluation of Today, Inc., Outpatient Program

Author: James E. Young (Project Director)

Grant Title and Number: (SE-339-72A) Expansion of Today, Inc.

Contact Person: Christine A. Fossett, Evaluation and Monitoring Unit, Governor's Justice Commission, Department of Justice, Box 1167, Harrisburg, Pennsylvania 17120

Objectives: Evaluation of variety of drug programs which provide detoxification, evaluation, crientation, long-term residential treatment and re-entry, prison counseling, hot line emergency service.

### Submitted to:

Mr. Thomas J. Quinn, Evaluation Coordinator
Governor's Justice Commission
Southeast Region
214 West Front Street
Media, Pennsylvania 19063

### Submitted by:

Center for Social Policy and Community Development
School of Social Administration
Temple University
of the
Commonwealth System of Higher Education
Philadelphia, Pennsylvania 19122
Seymour J. Rosenthal, Director

May, 1974



### SECTION I. SUMMARY OF EVALUATION REPORT

### A. Project Description

TODAY, Inc. was founded in 1971 by leading Bucks County citizens who were concerned about the rapid spread of drug abuse and crime, especially in the lower, more urbanized part of the county. It has grown to include programs at various locations which provide detoxification, evaluation, orientation, long-term residential treatment and re-entry, prison counselling, "hot line" emergency service, school and other community education, and outpatient service. This evaluation is concerned with the Outpatient Center at County Line.

### B. Project Activities

<u>Drug Client Activities</u>: Nine drug therapy groups are presently functioning, directed toward younger clients not deeply involved in the drug culture, with a weekly Narcotics Anonymous meeting. More emphasis is being placed upon individual counselling, educational and job concerns, social activities, and other interests. Median age is 19 for males, 17 for females.

<u>Puerto Rican Alcoholic Program</u>: A Spanish speaking staff member was assigned in March 1973 to develop this unique program. There are 56 present clients, with an emphasis upon involving whole families. There is weekly group therapy and an Alcoholics Anonymous meeting, individual and family counselling, help with health, job and housing problems. A small halfway house is established in Lacey Park, with 14 bungalows rented to house 28

clients. A local school recently established bi-lingual courses for 22 clients to facilitate communication in English. A number of agencies in Philadelphia and elsewhere in the Delaware Valley are referring all alcoholic Puerto Ricans to this program or requesting that groups be serviced in their areas. TODAY is seeking funds to employ a Puerto Rican woman counselor so that this work can be extended.

<u>Parent and Family Services</u>: Special emphasis is being given to involvement of drug client parents in TODAY's groups. As of May 28, 1974, 14 of the 21 parents in the Parent Orientation Group and 2 of 17 in the Advanced Group were related to outpatient clients.

County Line Center Volunteers and Advisory Council: The County Line Center was acquired, renovated and furnished through the help of its Advisory Council and other volunteers. There are frequent donations for socials, equipment and other needs. Volunteers trained by TODAY gave 229 hours of service during the past year.

<u>Community Education</u>: Various primary prevention work is in process, especially in the schools and County Line is receiving increasing numbers of student referrals from the schools.

### C. Evaluation Activities

<u>CSPCD Activities</u>: CSPCD prepared an Evaluation Plan, made eight onsite visits in which we met individually and/or in groups with the Board, administrative and line staff, and 40 clients. We assisted in the development of data collection instruments and analyzed data received. <u>Data Collection Efforts</u>: TODAY's data collection efforts have improved greatly. CSPCD receives monthly Admissions and Termination-Transfer Reports and Board Minutes, including regular reports from departments and special reports. We have received a summary of results of a follow-up study of 125 clients.

<u>Evaluation Limitations</u>: There were some reliability/validity limitations in the follow-up study, and there is still the need for differential analysis of variables. Data on Parent Groups and Volunteers needs improvement.

### D. <u>Project Results</u>

<u>Drug Client Outcomes</u>: Follow-up interviews with 106 of 125 clients admitted between January 1 and December 31, 1973 showed 78% to be drug free, 78% were employed or in school/college, and 88.7% had no involvement with the criminal system since their admission to TODAY.

Puerto Rican Alcoholic Client Outcomes: Follow-up interviews of 36 clients admitted since March 1973 indicated that 88.9% are sober, 94.4% employed full time with 58% of these going to school part time (mostly English courses), 92% have had no involvement with the law and are currently involved in TODAY's program.

Drug Client Retention Rates: Of 80 clients admitted from July 1, 1973 to January 31, 1974, 35% stayed for three months or more, which is substantially higher than for the first two years of the program. The female retention rate was substantially lower than that for men, which is a reversal of last year's pattern and is different from the trend in the residential program. It suggests the need for women staff at the points of outreach and intake, which is currently lacking.

### E. <u>Conclusions and Recommendations</u>

On the basis of our findings it is our conclusion that the TODAY Outpatient Program has made substantial progress toward attaining its goals and should be continued. Our recommendations are as follows:

- 1. That the collection of program outcome information through follow-up interviews with outpatient clients be systematized to be performed at regularly designated intervals, in person where possible, and designed to measure improvement in major variables of social functioning. That parent and other family group information be collected and reported to show admissions, attendance and termination data similar to that for clients, and that similar data be collected and provided for trained volunteers.
- 2. That staffing patterns be reviewed with the objective of including women staff, along with men, in the outreach and intake processes of County Line, as well as the counselling and therapy functions, with the goal of increasing the admissions and retention of women clients and improving their outcome.
- 3. That continued serious efforts be made to extend TODAY's outpatient services to the black population of need in Lower Bucks County, including the employment of a black outreach counselor. It is our impression that progress could best be made through utilizing basic guidelines of the Puerto Rican program, with emphasis on one-to-one and family relationships, with considerable effort directed toward helping meet their various social needs.

### SECTION II. PROJECT DESCRIPTION

TODAY, Inc. began operation on March 1, 1971. The agency was founded by leading Bucks County citizens who were concerned about the rapid spread of drug abuse and crime, especially in the lower, more urbanized part of the county. Starting with intensive residential and outpatient programs on a farm near Newtown, it has grown to include an Admissions, Intake, Detoxification and Evaluation program (AIDE) at Newtown, programs in the three Doylestown correctional institutions, a center for information, initial counselling, referral, and "hot line" emergencies in Doylestown (TACT), a reentry and halfway facility at Hilltown (currently in the process of being transferred to the TACT facility), and an Outpatient Center at County Line. (See appendices A and B for organizational chart and a map showing component locations).

TODAY at County Line has been the Outpatient Center since September 1973. This final evaluation report is concerned specifically with this outpatient program (CSPCD's evaluation of the residential program will be submitted separately). The Outpatient Program, as funded by the Governor's Justice Commission, embraces group and individual counselling at County Line, various family related groups at Newtown and Doylestown, organization of volunteers and social activities at County Line, public relations activities, and primary prevention programs in the schools.

### SECTION III. PROJECT ACTIVITIES

### A. Project Goals

The goals and objectives of the TODAY Outpatient Program as projected in the Grant Application for FY 1973-74 were to:

- 1. Provide an environment for those young people not deeply involved in drug abuse and the drug culture in which clients will:
  - a. receive emotional support
  - b. learn nature of drug abuse and addiction
  - c. understand their emotional conflicts and learn to cope with them
  - d. learn to live drug-free lives without total separation from house, school, work and community
- Increase the number of client groups and numbers of clients served,
   with the provision of more individual counselling
- Provide reentry therapy in conjunction with Hilltown House, with reentry residents integrated with other outpatient clients
- 4. Place more emphasis upon parent and other forms of family therapy
- 5. Provide emergency counselling around the clock
- 6. Provide an expanded community education program:
  - a. Increased and improved presentations to and discussions with large and small groups, with special emphasis upon school administrators, teachers, parents, students and other youth groups
  - Utilize a racially and ethnically mixed staff for better communication
  - c. Provide on-going staff training
  - d. Establish a library service and initiate a county clearing house on drug abuse education. Design a small handout pamphlet incorporating all available service agencies within the county.

### B. Project Staffing

The current project grant, which expires June 30, 1974, totals \$81,312. Most of the grant provides for salaries, with lesser amounts for contracted and evaluation services. While all of the specified full-time salaried positions have not been filled, the number of part-time staff assigned to meet changing needs more than compensate for this discrepancy. Current staff by sex, ethnicity, recovered addict status, and educational degree are as follows:

	Sex	Recovered Addict	Degree
Director O.P. Serv.	Male	Yes	MA
Clinical Coordinator	Male	No	MA
Coordinator, Minority Program*	Male	Yes	
Coordinator, Womens Program (PT)	Female	Yes	
Family Therapy Consultant (PT)	Female	No	Ph.D.
Coordinator, Family Therapy	Female	No	
Administrative Assistant (30 hrs.)	Male	Yes	
Therapist-Counselor (PT)	Female	No	BA
Therapists (PT)	Male	No	BA
	Female	Yes	
	Female	Yes	
	Female	Yes	
Clerk-Typist	Female	No	
		<u> </u>	

<sup>\*</sup>Spanish Speaking. (All other staff members are white)

### C. Staff Training

Ongoing outpatient staff training consists of weekly sessions (2-3 hours) with emphasis on group dynamics and discussions of individual client and personal staff problems. The Coordinator of the Womens Program also provides

on-going training for women therapists and counselors in specialized approaches to women clients. A number of monthly seminars have been held for all of TODAY's line staff devoted specifically to family therapy, which receives considerable emphasis in both outpatient and residential programs. A highly successful five day workshop, conducted by staff of the National Center for the Exploration of Human Potential in California, was held at TODAY during the last week of January, with the support of the Bucks County Drug and Alcohol Commission. Participants included 32 TODAY staff members and 53 from other agencies.

### D. Outpatient Facility

County Line became the primary outpatient facility in September 1973 in order to emphasize the provision of services to people in the more urbanized part of the county, Lower Bucks, which has the highest incidence of drug abuse and crime. While the majority of population in this area is white, there are significant Black and Puerto Rican minorities.

This primary facility is leased from the Fischer and Porter Co. for \$1.00 a year, with the Suburban Bucks Jaycees providing over \$20,000 of donated materials and volunteer time for its renovation. It contains 3 offices, 2 bathrooms, reception area, 2 large group rooms, a large recreation area and a small kitchen. It is very appropriate for both clinical and recreational-social purposes and is so used.

The County Line facility is augmented by the use of the Doylestown

TACT program for information, referral, hot line, parents' groups, a training center, and an alumni group.

### E. <u>Project Activities</u>

Nine drug therapy groups are presently functioning at County Line. On Monday evenings an orientation group, an under 18 years group, and an over 18 years group meet. On Tuesday there are two mixed groups. Four groups meet on Thursday divided into men under 18, men over 18, women under 18 and women over 18. Male therapists lead the male groups and female therapists the female groups. Residential clients from TODAY's Re-entry Program participate in these Thursday groups along with outpatient clients as part of the re-entry to the community process. As of May 23, 1974, 47 persons were involved in the Thursday groups, including 8 residents from Re-entry. Regular clinic fees are \$10. for three sessions per week, \$7. for two and \$5. for one session. A Narcotics Anonymous group also meets once a week at the County Line Center. Minithons of 12 to 24 hours are periodically held for those clients deemed ready for such an encounter and prolonged introspection.

There is a great deal more flexibility in the outpatient program than was the case during fiscal 1972-73. Group therapy is seen less as a "cure all," with individual counselling, educational and job concerns, social activities and other interests being given a great deal more emphasis. The center has social committee with client participation. Two soft ball games and a camping trip for 25 clients at French Creek have already been scheduled as early summer activities.

Clients come from a variety of sources: on their own, through friends or parents, from other TODAY programs, from courts, probation officers and police, and referrals from other agencies. Because of particular staff

involvement with schools an increasing number are coming from this source. The age range for male clients is 14 to 33, with a median of 19. The largest numbers (56%) are in the 16-17 and 21-22 age groups. For female clients the age range is 14 to 25, with a median of 17. The 14 to 18 age range accounts for 66%.

### F. Puerto Rican Alcoholic Program Activities

A unique program was started in March 1973 with the assignment of a Spanish speaking staff member to develop work with Puerto Rican Alcoholics. His primary emphasis has been directed toward Lacey Park, a low-income community of 3000 families, 600 of whom are Puerto Ricans. In 14 months he has worked with 68 individuals or family units, with 56 of these currently in treatment for alcoholism (51 men and 5 women). Due to the resistance of some clients to formal intake procedures, only 42 persons had case records as of May 23, 1974. These clients are generally older than the drug program clients, ranging in age from 17 to 47, with a median of 33. Because of the lack of facilities for Spanish speaking alcoholics in Philadelphia and throughout most of the Delaware Valley, the following agencies refer all such clients to TODAY's Minority Program Coordinator: Diagnostic and Rehabilitation Center/Philadelphia; St. Lukes Hospital; Eagleville Hospital; Hahneman Hospital; the V. A. Hospital in Coatesville; the Valley Forge Medical Center and Livengrin.

The minority program coordinator is the therapist for one weekly group at County Line and two in Philadelphia. He also has an Alcoholics Anonymous group at County Line. It recently held its first annual celebration with a bi-lingual meeting at County Line attended by over 100

members and their families. Family socials are periodically arranged at County Line. The coordinator frequently takes local members to other Spanish speaking A.A. meetings in Newark, Manhattan, Bronx and Baltimore on weekends. He devotes a great deal of time to counselling clients and families concerning health, employment, housing, and education. He has made arrangements with three local employers to hire Puerto Rican clients. For medical detoxification he has arranged for referrals to the Valley Forge Medical Center. For non-medical detoxification he established a small half-way house in Lacey Park with five beds. When steady income has been arranged, clients move to Lacey Park bungalows in pairs (2 beds) @ \$75. per month rent. As of May 23, 1974 there were 28 clients in fourteen such bungalows. Due to the many difficulties that are faced by Puerto Ricans who can speak only Spanish, the coordinator met with the principal of Warminster School about this problem. The principal applied for, secured State aid, and in April 1974 started two classes with bilingual teachers, each meeting once a week. Both English and Bi-Cultural Values are taught and 22 clients are currently enrolled.

There is a growing demand for the services fo the Minority Program Coordinator. He has been asked to meet with a group of seven Puerto Rican drug abusers in the Bucks County Prison, and to conduct a Safe Driving Clinic for 20 Puerto Ricans convicted for "drunken driving" by Philadelphia courts (no funds, however, have been offered to cover the cost of these additional activities). A local Puerto Rican woman was recently interviewed by TODAY regarding becoming an assistant to the coordinator. This would

make it possible to extend the scope of this unique program, as well as developing special approaches to Puerto Rican women with drug or alcohol problems. TODAY is seeking sources of funding to make this possible.

### G. Family and Related Services

Groups for parents, families, siblings and couples meet at TACT and Newtown under a Consultant Director of Family Therapy and Related Services. These services are for families of both residential and outpatient clients. All parents are encouraged to attend a series of orientation sessions and then move into an advanced group. The goal is for the parents to better understand themselves, their youth, and the purposes of the TODAY programs. In the Advanced Group they are also trained to perform as volunteers in the TODAY program. Volunteer parents have provided considerable assistance in covering the TACT "hot line" and a telephone service in Levittown.

Because the clients in the residential program have more severe problems and are away from home, it is generally easier to involve their parents. Recently, however, special efforts were made to involve parents of outpatient clients and 10 of 11 admitted during April to the Orientation Group were such parents. (See Appendix C) This process has continued into May and as of May 28, 1974 we were informed verbally that 14 of 21 parents in the Orientation Group were related to outpatient clients, as were 2 of the 17 in the Advanced Group.

The need for Family, Couples, and Sibling Groups are determined by staff. As of April 1, 1974 three of nine members in Family Therapy were related to outpatient clients, as were three of ten in Sibling Groups.

(See Appendix C)

### H. Volunteers and Advisory Councils

TODAY has a volunteer Director of Volunteer Services with each center having its own Advisory Council. The one at County Line, for instance, has been invaluable through renovating the building, providing furnishings, performing typing, clerical and telephone service, raising money, and helping with public relations, including speaking engagements. Volunteers are initially given 12 hours of orientation, consisting of a tour of all TODAY facilities, followed by seminars of 2-3 hours per month. The Director of Volunteer Services recently reported that she has a record of 229 hours of volunteer service provided at County Line with another 315 hours at TACT since May 1973, when volunteer time sheets were introduced. She indicates that this is probably a quite incomplete record.

### I. AIDE

The Admissions, Intake, Detoxification and Evaluation Program (AIDE), housed separately at Newtown since August 15, 1973, has been of major importance in coordinating and providing services for all of TODAY's programs, substantially increasing the number of clients, with a considerable drop in the "split" rate. It provides detoxification, an orientation period and evaluation of one week to two months, depending on need before referring clients to other TODAY or outside programs. While most of its referrals have been to residential programs, some have been to outpatient. The outpatient program refers its clients to AIDE when this kind of crisis intervention is needed.

### J: Referral Resources and Library

The outpatient program has developed a library of some 40 books on addiction and related subjects, and maintain a book on referral resources on an on-going basis, known as "The Bible."

### K. <u>Administration</u>

During the current fiscal year there have been substantial improvements in the administration of TODAY affecting all of its components including outpatient. Regular reporting and data collection has been established. A Table of Organization has been established which serves to facilitate the development of the various components of TODAY into a more unified network of needed services. Admissions procedures have been greatly improved. Accounting system changes have been made to establish fiscal controls and accountability. (See Appendix E ) As a reflection of TODAY's serious effort to develop a network of needed related services, service needs assessment has become an on-going process and is reflected in its development of a specific budget projection for FY 1974-75. (See Appendix F )

### SECTION IV. EVALUATION ACTIVITIES

### A. Nature, Extent and Timing

- 1. Preparation of an Evaluation Plan
- 2. CSPCD staff made eight on-site visits between June 1973 and May 1974, beginning with a meeting with the new Director soon after he assumed that position. These visits included tours of the new Outpatient Center at County Line and the Lacey Park concentration point for work with Puerto Rican Alcoholics. We attended an outpatient staff meeting and met individually with most staff. We participated in three different client therapy groups and talked individually with some of the 40 different clients involved. We also met with board and staff members individually and/or in groups as follows: attended a special meeting of the Board; interviewed administrative, research, admissions, family service and AIDE staff; interviewed the Director of Treatment and the Director of Volunteer Services
- 3. CSPCD assisted in the development of data collection instruments
- Analysis of data.

### B. <u>Data Collection</u>

Generally there has been significant improvement in data collection efforts since CSPCD's evaluation for FY 1972-72:

1. Admissions and Termination-Transfer Reports for the residential and outpatient programs have been submitted to CSPCD from July 1973 through April 1974. For the past several months transfers from one TODAY component to another have been designated.

- 2. Minutes of TODAY's Board of Directors meetings have been submitted to CSPCD since October 1973, including monthly reports from the various departments and special reports dealing with fiscal, administrative and programmatic issues.
- 3. CSPCD has received a summary of results of a follow-up study of outpatient drug clients admitted during the period January 1 to December 31, 1973 (See Appendix G), and Puerto Rican Alcoholic clients from March 1973 to May 1974 (see Appendix H).
- 4. TODAY is participating in the Uniform Data Collection System of the Governor's Council on Drug and Alcohol Abuse.

### C. Evaluation Limitations

- 1. The major limitations of the client follow-up study are that:
  - a. No differential analysis of the data has yet been completed. The follow-up study of residential clients preceded that of outpatient clients and the residential report does contain differential analysis (see Final Evaluation Report-Residential)
  - b. Many follow-up interviews were completed by phone. We are informed that there are plans to hire two follow-up workers during the summer to interview former clients personally
  - c. The outcome of complete drug freeness is difficult to ascertain, and in any case is not measured for any uniform length of time. We prefer before and after measures of improved social functioning including a group of variables such as: drug usage; education; employment; social relationships and family status.
- Since efforts are made to include all parents in Parents Groups it would be useful to collect admission, attendance and termination data

in the same manner as for clients, including outcome in terms of volunteer activity. This would make it possible to determine the relationship between parent involvement and client outcome.

- 3. The Director of Volunteer Services has indicated difficulties in getting complete data on volunteer services. In addition to this it would be useful to collect admission, attendance and termination data for those volunteers who receive initial and on-going training for more systemative volunteer activities.
- 4. The Governor's Council on Drug and Alcohol Abuse was not able to provide the CSPCD with requested Project data from its Uniform Data Collection System.

### SECTION V. PROJECT RESULTS

### A. Drug Client Outcomes

Follow-up interviews of outpatient drug clients admitted between the period January 1 to December 31, 1973 were completed in May 1974. Of 125 clients designated for follow-up, 106 were reached either by phone or personal contact. The data shows that 78.3% were drug free, 78.5% were employed or in school/college (corrected for opportunity), 88.7% had no involvement with the criminal justice system since their admission to TODAY. Those not currently involved in treatment represent 67.6% (see Appendix G). The total population is almost entirely white, almost equally divided between men and women, with drug free status by sex almost the same.

Despite the reliability/validity limitations indicated in IV. C-1, the lack of time for differential analysis by TODAY, and the fact that the data covers a period that includes half of the current fiscal year grant and half of the previous year, the results presented in this report are considered to be impressive. The data at least conforms generally to our positive impressions from on-site involvement with most of staff and a large number of current clients.

### B. Puerto Rican Alcoholic Client Outcomes

Follow-up interviews of 36 Puerto Rican alcoholic clients admitted since March 1973 indicate that 88.9% are sober, 94.4% are employed full time, 58.3% of those working are going to school part time (mostly English courses), 97.2% are involved in TODAY's group therapy and Alcoholics Anonymous, with 97.2% having no involvement with the law since admission. Of the 36 clients 34 are men. (See Appendix H)

Despite the fact that the reliability/validity of this data is limited by the fact that it results largely from the information of the Minority Group Coordinator, and the fact that a number of Puerto Rican clients resist giving intake information, our discussions with the Spanish speaking therapist (including a CSPCD Spanish speaking evaluator), as well as other TODAY staff, gave us the strong impression that this program is unusually unique and is getting impressive results. (see III. F)

Despite the research limitations indicated above, the retention rate of Puerto Rican Alcoholic clients admitted since July 1, 1973 is unusually high, according to Admission and Termination Reports (see Appendix I). The population recorded is less than that for the follow-up study due to the fact that the latter covers a period several months before the introduction of Admission-Termination Reports at the beginning of FY 1973-74.

### C. <u>Drug Client Retention Rates</u>

cspcD determined the program retention rates for outpatient drug clients from the Admission and Termination Reports provided by TODAY. Of the 80 clients admitted from July 1, 1973 to January 31, 1974, 28 (35%) remained in the program three months or more. (See Appendix I) This compares with 43 of 146 clients (29%) admitted to the program from March 1, 1971 to February 20, 1973 as reported in our evaluation for FY 1972-73. While the current fiscal year's retention rate is not considerably greater, it should be noted that the average admission rate per month for the first two years of the TODAY outpatient program was six, compared to eleven for the first seven months of the current fiscal year.

A differential analysis of this data indicates that the three month and more retention rate for females for the first two year period of TODAY was 36%, compared to the male rate of 26%. On the other hand the seven month data for the current fiscal year indicates a female retention rate of 24% compared to 41% for males (see Appendix I). Furthermore this latter finding conflicts with Residential Program data which shows higher three month program retention rates for females and substantially higher female client outcome rates (see Final Evaluation Report--Residential).

Our interpretation of this conflicting data, based on differential analysis by sex, resulting from meetings and individual discussions with TODAY staff, and clients, and reports provided by TODAY's Board and staff, are as follows:

nantly women staff that directed the outpatient program. During the current fiscal year all full-time line and outreach staff are men. Recently additional staff women from the residential program have been added to the Thursday night separate sex groups as therapists and individual counselors, but to date none are at the point of outreach and admissions. On the other hand the residential program has competent women (in most cases recovered addicts) at the point of admissions, orientation and evaluation, long-term residential and re-entry programs. We were especially impressed with self-assurance and willingness of recovered addict women staff to share their ideas and treatment experiences with evaluators.

2. The expression of greater self-respect and assurance shown by women clients has led to expressions of considerable frustrations and anger shown by male clients in both outpatient and residential programs, according to our observations. This is more obvious in the residential program, and a "male awareness staff" group has recently been formed to help understand this problem among themselves in order to better develop such a consciousness among male clients. We view these special efforts toward sex role awareness among both women and men as positive contributors toward the future results of TODAY's outpatient and residential programs.

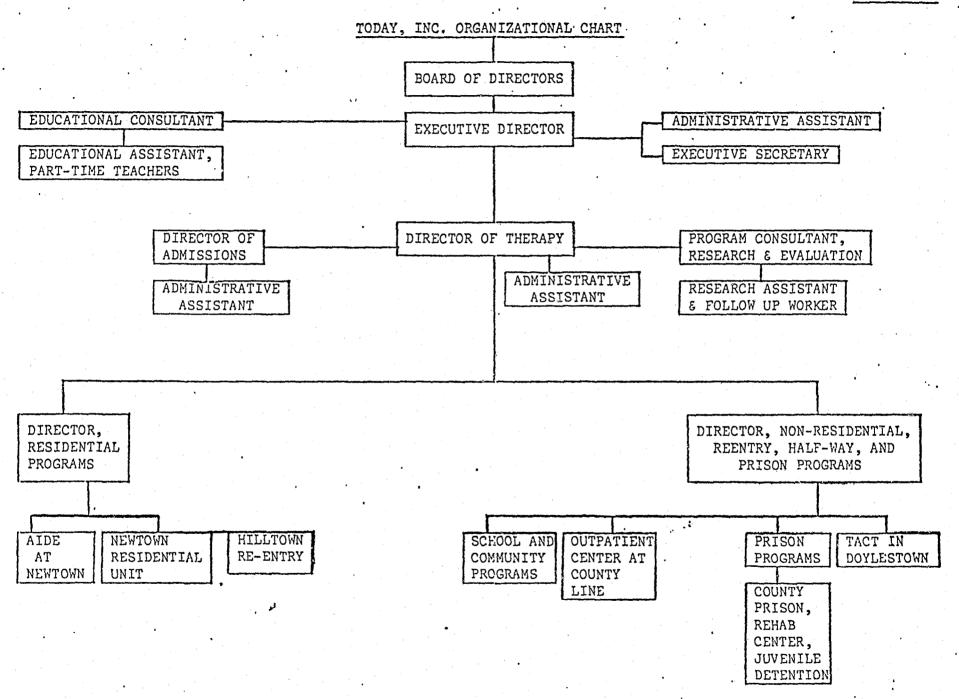
### D. Application to Other Programs

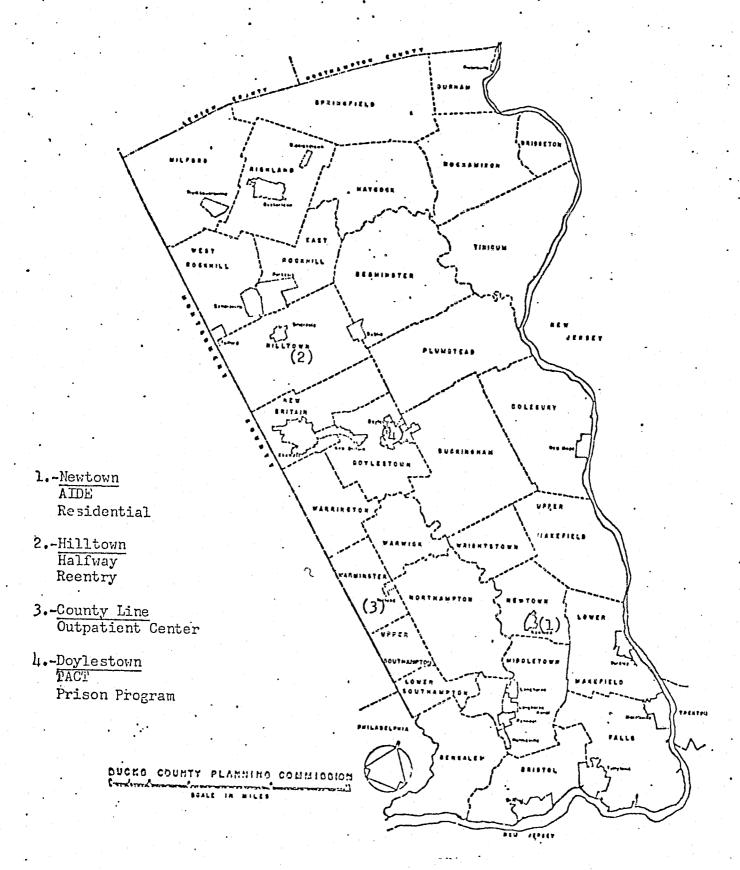
TODAY's Director of Therapy, a recovered woman addict, presented a paper on special approaches toward women drug clients at the National Drug Abuse Conference in Chicago in late March. It provoked considerable discussion and she was named co-chairperson of next year's conference. On the basis of the data and our observations we consider TODAY's approaches toward young women drug clients and male Puerto Rican alcoholic clients as unique and adaptable to other programs.

### SECTION VI. CONCLUSIONS AND RECOMMENDATIONS

On the basis of our findings it is our conclusion that the TODAY Outpatient Program has made substantial progress toward attaining its goals and should be continued. Our recommendations are as follows:

- 1. That the collection of program outcome information through follow-up interviews with outpatient clients be systematized to be performed at regularly designated intervals, in person where possible, and designed to measure improvement in major variables of social functioning. That parent and other, family group information be collected and reported to show admissions, attendance and termination data similar to that for clients, and that similar data be collected and provided for trained volunteers.
- 2. That staffing patterns be reviewed with the objective of including women staff, along with men, in the outreach and intake processes of County Line, as well as the counselling and therapy functions, with the goal of increasing the admissions and retention of women clients and improving their outcome.
- 3. That continued serious efforts be made to extend TODAY's outpatient services to the black population of need in Lower Bucks County, including the employment of a black outreach counselor. It is our impression that progress could best be made through utilizing basic guidelines of the Puerto Rican program, with emphasis on one-to-one and family relationships, with considerable effort directed toward helping meet their various social needs.





Map of Bucks County Municipalities

### TODAY, INC. STATISTICAL REPORT FAMILY SERVICES

MONTH OF April 1974

					· · · · · · · · · · · · · · · · · · ·
SERVICES RENDERED	AS OF April 1, 1974	NO. ENTERED	DISCONTINUED	nS OF May 1, 1974	LOSS . GAIN
Parent's Groups  Advanced Group  (Newtown)	17	2	2*	17	0
Orientation Group ('!cwtown)	9	11	5***	15	6+
TOTAL PARENTS! GROUP	26	13	7	32	6+
Family Therapy' Newtown	9	0	0	9	0
Couples' Groups Newtown'	2	0	0	2	0
Sibling Groups Newtown	10	.0	24सनः	8	2-
TOTAL RECEIVING FAMILY SERVICES	47	13	9	51	4+

<sup>\*</sup> Two discontinued since son left the program to attend private school.

\*\* Three left after splits; two came just for information as a community service.

\*\*\* Two left and will work with mother through Alinon.

### TODAY, INC. STATISTICAL REPORT

OF

, Month	of	· April
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### Admissions, Terminations, Transfers

FACILITY	POPULATION	ADMISSIONS		TERMINATED:		TRANSFI	POPULATION	
	AS OF March 31	NEW	RE.	BY DISCH.	BY SPLIT	OTHER	OTHER PROGRAM	AS OF April 30
Residential								20
Newtown House	40	436	1	0	7	0	0	38
AIDE	5+++	9	1.	1	0	4	1	9**
HILLTOWN HOUSE	13	0	0	0	0	0	0	13
TOTAL RESIDENTIAL	58××	13	2	1	7	4	1	60**
Non-Residential  County Line	33	8	1	1	5	0	0	36
Alcohol Group	39	3	0	0	0	0	0	42
Prison Program	37	7	2	114+++	5	1	0	29
TOTAL NON-RESIDENTIAL	109	18	3	12	10	ı	0	107

<sup>\*</sup> These admissions were all transfers from the AIDE Unit.

<sup>\*\*</sup> These figures include one re-entry resident who is residing in the AIDE Unit.

<sup>\*\*\*</sup> These were all legal discharges.

TODAY INCORPORATED
P.O. Box 317
NEWTOWN, PENNA. 18940

TO:

Mr. William Hood

FROM:

B.J. Bieg

SUBJECT: Accounting System Changes

Since October many improvements have been instituted into our fiscal program. These changes can be classified into the following general categories:

- 1. Record keeping
- 2. Prompt payment of taxes and bills
- 3. Controls over receipts and disbursements
- 4. Petty cash funds
- 5. Record retention system (improved filing system)
- 6. Bank reconciliation
- 7. Payroll system

Our initial steps concerned the journals which had been maintained by the program. We assembled the past year's journals and bound them together in order to provide quick reference. Next we revised the journals (new page formats) so that they would be more manageable and easier to maintain. The final step in our bookkeeping system involved the establishment of a general ledger which up until October had not been implemented. This took a good deal of time because we had to rework the ledger from July 1, 1973. Presently these components are up to date and provide easier reference for any problems that may develop.

The bill paying process has also been improved and made more timely. Invoices received are backed up with initial purchase order to insure accuracy. The lag time between receipt of bills and payment of two months has been eliminated. Of even more importance, our payroll taxes are being paid currently and past overdue taxes and penalties have been paid or alleviated.

One problem that was quite evident in our past system was the lack of controls and accountability over cash. We have initiated a strict system in which all receipts are deposited immediately in our bank account and all disbursements are made by check. All receipts and disbursements are documented and can be easily traced to their source. In addition, a number of petty

cash funds have been established in order to meet small cash expenditure needs and these funds are only replenished as receipts are presented as evidence of payments.

-2-

Our filing system has also been revamped. Old vouchers and checks have been segregated and our present file contains only current fiscal year vouchers filed by vendor with bills attached to each voucher. Secondly, our cancelled checks are in a separate file in numerical order. Both these changes have supplied us with more accurate and easier to find back-up information.

Another major area that was previously left unattended was bank reconciliations. We started in October to reconcile both the general account and the payroll accounts from July 1973. We have now reconciled both accounts through April 1974.

The final major area of change is the payroll system. All payroll checks are now paid out of our payroll account. This was not the case in the past. We have also changed our pay period to one of two week duration and employees are paid every other Friday. This has helped with our record keeping functions and has eliminated much confusion over pay day. We have also endeavored to establish a tighter control over the payroll by keeping time records for each employee. Each week this record is updated and any problems are readily apparent.

Even though this is a brief recapitulation of the major areas that have been improved, the significance of these changes can not be overlooked. Other prodecures have also been undertaken and even though they can be considered minor, they have contributed to the overall improvement in our fiscal system.

Bernard J. Bieg

### APPENDIX F TODAY INCORPORATED RECAP - PROJECTED RECEIPTS AND EXPENDITURES

TOTAL

ro ected Needs

JULY 1, 1974 TO JUNE 30, 1975

Projected Receipts	•		
Drug & Alcohol Expansion Funds D.P.A. Clinic Fees Room & Board Residential Fees & Service Contributions Federal Lunch L.E.A.A.		\$ 187,000 42,900 51,600 4,200 3,600 9,600 5,400 1,800 120,000	
Miscellaneous TOTAL RECEIPTS		4,800	\$ 430,900
TOTAL RECEIPTS	• • • • • • • • • • • • • • • • • • •	•	Å 420\200
Projected Expenditures	Residential	Outpatient	
Salaries:			
Administration Treatment Prison	\$ 129,000 126,000	\$ 76,200 71,400	
Consultants Taxes Benefits Princeton Intern	18,000 21,000 .9,470 840	11,400 5,000 840	
Operating Expenses:		•	
Training Public Relations Equipment Purchase & Rental Office Supplies Postage Communications	2,100 2,400 4,800 2,400 480 11,400	2,100 600 600 600 120 2,400	
Automobile - Travel Real Estate Insurance Rent	7,200 4,200 5,400	4,200	
Education Maintenance Food	3,000 10,200 36,000	1,200	
In-Patient Supplies Household Supplies Utilities Fuel Oil	6,000 6,600 8,700 9,150		
Inflation Factor Miscellaneous	10,800 4,800	1,200 1,800	6.610.600

\$ 619,600

(\$ 188,700)

,	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June
cinnin Bal.	0-			•					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
o ected Recei_ts												
Drug & Alcohol ,		17,000	17,000	17,000	17,000	17,000	17,000	17,000	17,000	17,000	17,000	17,000
Expansion Funds	4,500	4,500			-	4,500	4,900	4,900	4,900	4,900	4,900	4,900
D.P.A.	4,300	4,300	4,300	4,300	4,300	4,300	4,300	4,300	4,300	4,300	4,300	4,300
Clinic Fees	350	350	350	350	350	350	350	350	350	350	350	350
Room & Board	300	300	.300	300	300	300	300	300	.300	300	300	300
Residential Fees & Ser.	800	800	800	800	800,	800	800	800	800	008	800	800
Contributions	450	450	450	450	450	450	450	450	450	450	450	450
Federal Lunch Program	150	150	150	150	150	150	150	150	150	150	150	150
Miscellaneous	400	400	400	400	400	400	400	400	400	400	400	400
stal Recei ts	11,250	28,250	23,750	23,750	23,750	28,250	28,650	28,650	28,650	28,650	28,650	28,650
	-											
resident Program)	(38,555)	(37, 385)	(36,055)	(36,455)	(36,055)	(36,055)	(36,505)	(36,105)	(36, 105)	(38, 705)	(36,005)	(35,955
al.Residential Pro ram	(27, 305)	(9,135)	(12,305)	(12,705)	(12,305)	(7,805)	(7,855)	(7,455)	(7,455)	(10,055)	( 7,355)	<u>(7,30</u> 5
al.Residential Pro ram otal Year Needs-Residential		( 9,135)	(12,305)	(12,705)	(12,305)	( 7,805)	( 7,855)	( 7,455)	(7,455)	(10,055)		<u>(7,30</u> 5 129,040
otal Year Needs-Residential		( 9,135)	(12,305)	(12,705)	(12,305)	( 7,805)	( 7,855)	( 7,455)	( 7,455)	(10,055)		
		<u>(9,135)</u>	(12,305)	(12,705)	(12,305)	( <b>7,</b> 805)	( <b>7,</b> 855)	( 7,455)	( 7,455)	(10,055)		
otal Year Needs-Residential		( 9,135)	(12,305)	(12,705)	(12,305)	( 7,805)	30,000	( 7,455)	( 7,455)	30,000		
otal Year Needs-Residential *With Inclusion of Prison & Outpatient Program				30,000	(12,305)		30,000			30,000	<u>}</u>	129,040
otal Year Needs-Residential  *With Inclusion of Prison & Outpatient Program  eccipts - Outpatient  otal Monthl Ex enditures (Outpatient)	(15,955)	(15,475)	(14,675)	-30,000 (14,775)		(14,675)	30,000 (14,775)	(14,675)	(14,675)	30,000 (15,955)	30,000 (14,675)	129,040
otal Year Needs-Residential *With Inclusion of Prison & Outpatient Program eccipts - Outpatient otal Monthl Ex enditures	(15,955)	(15,475)	(14,675)	-30,000 (14,775)	(14,675)	(14,675)	30,000 (14,775)	(14,675)	(14,675)	30,000 (15,955)	30,000 (14,675) (15,325)	129,040

otal Year Needs-Combined

### PROJECTED AVERAGE MONTHLY EXPENDITURES - BREAKDOWN

					CUTPATIENT			
	Long-Term	AIDE	Re-Entry	Administration	Prison	County Line		
Gross Salaries	\$ 7,940	\$ 1,660 .	\$ 1,850	\$ 12,250	\$ 5,950	\$ 6,350		
Taxes	575	140	125	810	440	480		
Benefits	325	80	45	330	200	220		
Total Payroll	\$ 8,840	\$ 1,880	\$ 2,020	\$ 13,390	\$ 6,590	· \$ 7,050		
Operating Expenses				•		<b>.</b>		
<pre>Fixed: (Phone, Food, Utilities, Travel, Rent)</pre>	\$ 4,875	\$ 975	\$ 700	\$	\$ 125 .	\$ 425		
Other Costs	2,965	650	300,	***	100.	485		
Inflation Factor	700	100	100		*	100		
Total Operating	\$ 8,540	\$ 1,725	\$ 1,100	\$	\$ 225	\$ 1,010		
Grand Total	\$ 17,380	\$ 3,605	\$ 3,120	\$ 13,390	\$ 6,815	\$ 8,060		
Yearly Projection	\$ 208,560	\$43,260	\$37,440	\$160,680	\$81,780	\$96,720		

TODAY INCORPORATED
PROJECTED EXPENDITURES
FISCAL YEAR - JULY 1, 1974 TO JUNE 30, 1975

•												
JULY		,	AUGUST		SEPTE	MBFR	ОСТОЕ	OBER NOVE		IBER	DECEME	BER
	Res.	Non-Res.	Res.	Non-Res.	Res.	Non-Res.	Res.	Non-Res.	Res.	Non-Res.		Non.Res
vroll Administration Treatment Outpatient Treatment Prison Consultants	10,750 10,500	6,350 5,950	10,750 10,500	6,350 5,950	10,750 10,500	6,350 5,950	10,750 10,500	6,350 5,950	10,750	6,350 5,950	10,750 10,500	6.350 5,950
Taxes Senefits	3,850 670	2,000 350	1,250 2,100	720 1,150	1,250 670	720 350	1,650 670	820 350	1,250 670	720 350	1,250 670	720 <b>3</b> 50
Princeton Intern	70	• 70	70	70	70	70	70	70	70	70	70	70
TOTAL LABOR COSTS	27,340	14,720	26,170	14,240	24,740	13,440	25,140	13,540	24,740	13,440	24,740	13,440
rating Expenses raining ruplic Relations quip.Purchase & Rental ffice Supplies costage communications utomobile-Travel eal Estate Insurance tent ducation aintenance cod	175 200 400 200 40 950 600 350 450 250 850 3,000	175 50 50 50 10 200 350	175 200 400 200 40 950 600 350 450 250 850 3,000	175 50 50 50 10 200 350	175 200 400 200 40 950 600 350 450 250 850 <b>3,</b> 000	175 50 50 50 10 200 350	175 200 400 200 40 950 600 350 450 250 850 3,000	175 50 50 50 10 200 350	175 200 400 200 40 950 600 350 450 250 850 3,000	175 50 50 10 200 350	175 200 400 200 40 950 600 350 450 250 850 3,000	175 50 50 10 200 350
In-Patient Supplies  & Medicine  *ousehold Supplies  tilities  uel Gil  iscellaneous  nflation Factor	500 550 800 600 400 900	100	500 550 800 600 400 900	150 100	500 550 800 700 400 900	150 100	500 550 700 800 400 900	150 100	500 550 700 800 400 900	150 100	500 550 700 800 400 900	150 100
TUTMU OFERATING EXP.	11,215	1,235	11,215	1,235	11,315	1,235	11,315	1,235	11,315	1,235	11,315	1,235
TOTAL EXPENDITURES	38,555	15,955	37,385	15,475	36,055	14,675	36,455	14,775	36,055	14,675	36,055 1	14,675

TODAY INCORPORATED
PROJECTED EXPENDITURES
FISCAL YEAR - JULY 1, 1974 TO June 30, 1975

	JANU		FEBRU	UARY Non-Res.	MARC Res.	CH Non-Res.	APR Res.	RIL Non-Res.	MA			JNE Non-Res
	Res.	Non-Res.	Res.	Mon-uss.	nes.	Non-nes.	Res.	Non-Res.	Res.	Non-Res	nes.	NOH-nes
<u>reall</u> -dministration  Treatment  Cutpatient Treatment Prison	10,750. 10,500	6,350 5,950	10,750 10,500	6,350 5,950	10,750	6,350 5,950	10,750	6,350: 5,950	10,750	6,350 5,950	10,750	6,350 5,950
· Consultants	1,500		1,500		1,500		1,500		1,500		1,500	,
Taxes Denefits	1,650 670	823 350	1,250 670	720 350	1,250 670	720 350	3,850 670	2,000 350	1,250 670	720 350.	1,250 670	
Princeton Intern	70	70	70	70	70	70	70	70	70	70	70	7.0
TOTAL LABOR COSTS	25,140	13,540	24,740	13,440	24,740	13,440	27,340	14,720	24,740	13,440	24,740	13,441
ration Expenses Training Public Relations Lquip.Purchase & Rental Office Supplies Postage Communications Automobile-Travel Rent Estate Insurance Hent Education Maintenance Food In-Potient Supplies	200 40 950 600 350 450 250 850	175 50 50 50 10 200 350	175 200 400 200 40 950 600 350 450 250 850 3,000	175 50 50 50 10 200 350	175 200 400 200 40 950 600 350 450 250 850 3,000	175 50 50 50 10 200 350	175 200 400 200 40 950 600 350 450 250 850	175 50 50 50 10 200 350	175 200 400 200 40 950 600 350 450 250 850 3,000	175 50 50 10 200 350	175 200 400 200 40 950 600 350 450 250 850	5 5 5 1 0 3 5 1 1 0 1 1 0 1 1 0 1 1 1 0 1 1 1 1 0 1
& Medicine Household Supplies Litities Fual Dil Miccellaneous Inflation Factor	500 550 700 850 400 900	150 100	500 550 700 850 400 900	150 100	500 550 700 850 400 900	150 100	500 550 700 850 400 900	150 100	500 550 700 750 400 900	150 100	500 550 700 700 400 900	· .
TATAL CHERATING EXP.	11.365	1,235	11,365	1,235	11,365	1,235	11,365	1,235	11,265	1,235	11,215	1,23
י דמדאנ באפב; DITURES	36,505	14,775	36,105	14,675	36,105	14,675	38,705	15,955	36,005	14,675	35,955	14,67

### OUT-PATIENT FOLLOW-UP (DRUG CLIENTS) May, 1974

N - 125 (Persons for year, January 1, 1973 to December 31, 1973

19 persons could not be reached

106 persons either contacted by phone or staff follow-up

61 Females 65 Males

Sober or drug free	Males - 41 Females - 42	78.3%
Definitely using		13.2%
Questionable, but	using	8.5%
Employment/Educati	onal Employed School/College Not Employed/School	49.2% 29.3% 11.3%*
Living Arrangement		50.0% 14.4% .0% 3.8% 11.5% 6.7% 7.7% 4.8%
Arrests Treatment	No involvement Arrests In jail	98.7% 4.7% 6.7%
11 Cavine 110	Group Therapy Still in Treatment Not involved in Treat. Jail treatment groups Other Residential Prog. Methadone Treatment Individual Counseling	8.6% 10.5% 67.6% 1.9% 4.8%

<sup>\*</sup>Percentage is corrected for opportunity, e.g., some are in jail, etc.

### OUT-PATIENT ALCOHOL GROUP

FOLLOW-UP

MAY 21, 1974

Total N -36

Females -5.6%

Males -94.4%

.Sober - No usage - 88.9%

Not using or slips - 11.1%

Employment/Educational:

94.4% Employed full time (no part time) 5.6% not employed

58.3% of those working are going to school part time (mostly English courses)

Living Arrangements:

63.9% alone
16.7% residential
11.1% spouses
2.8% opposite sex friends

5.5% with parents

Treatment: (and A.A. groups)

97.2% in treatment (groups) 2.8% not involved in groups

97.2% involved in A. A.

Arrests:

97.2% not involved with law 2.8% had 1 arrest

### OUTPATIENT CLIENTS ADMITTED FROM 1/31/74 BY RETENTION RATES

DRUG CLIENT RETENTION RATES

	# Admitted	Stayed 3 or more months
Men	51 **	21 (41%) *
Women	29	<b>7 (</b> 24%) *
Total	80	28 (35%)

\* 18 clients were in program between 4 to 10 months as of 4/30/74

\*\* 2 male clients were Black, all females White

 PUERTO RICAN ALCOH	OLIC CLIENT RETENTION RATES	_
	•	
 # Admitted	Stayed 3 or more months	_
2)1*	23 (96%) **	
24*	23 (96%) **	

\* 1 female client included

\*\* 22 clients were in program between 4 to 10 months as of 4/30/74



### TEMPLE UNIVERSITY

SCHOOL OF SOCIAL ADMINISTRATION PHILADELPHIA, PENNSYLVANIA 19122

CENTER FOR SOCIAL POLICY AND COMMUNITY DEVELOPMENT

June 4, 1974

Mr. Thomas J. Quinn Evaluation and Monitoring Unit Governor's Justice Commission Southeastern Region 214 W. Front Street Media, Pennsylvania 19063

Dear Tom,

Attached are our final reports on the evaluation of the TODAY programs: Outpatient (SE-339-72A) and Residential (SE-340-73A). Should you have any questions on the reports, we would be glad to meet with you and/or members of the Governor's Justice Commission Region Office staff.

Sincerely,

James E. Young Project Director

JEY/tp

enclosure

cc: Christine Fossett Robert Allen, Director

roject or Program being Evaluated:
rant litle: (SE-339-72A) Expansion of Today, Inc.
(include grant number)
rantee: Bucks and Delaware County
rief Description: Residential and out-patient treatment program (both project and evaluation effort) for drug abusers.
•
Scheduled date of final Evaluation Report: June 10, 1974
Person to contact concerning the Evaluation:
Christine A. Fossett, Chief, Evaluation & Monitoring Unit
name) Governor's Justice Commission, Department of Justice
address) Box 1167, Harrisburg, PA., 17120
717-787-1422
(telephone)
If completed, is Evaluation Report on file with NCJRS?yes $x$ _nc
• • • • • • • • • • • • • • • • • • •
Please mail completed form to:

MAJOR EVALUATIONS UNDERWAY OR COMPLETED IN YOUR SPA

Keith Miles Office of Evaluation LEAA-NILECJ Department of Justice Washington, D.C. 20530

## END