



ANNUAL REPORT 2021

SERVING CHILDREN AND REACHING FAMILIES, LLC

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BOARD OF DIRECTORS

BOARD MEMBERS

- Lawrence Knight
- Vina Small
- Diana Deitrick
- Jennifer Campbell

NON-VOTING MEMBERS

- Maria Lawrence
- Patrina Lawrence

The organization was founded in 2013 to improve the lives of at-risk children and families

S SCARF is a community based mental health organization with its main headquarters in Kissimmee, Florida. In 2021, still grappling with the changes of a world-wide pandemic, SCARF continued to serve approximately 2,127 children and families in the Osceola, Orange, Seminole, Polk, and Highland counties with no interruption in service.

The purpose of the report is to provide transparency of SCARF business practice, financial responsibility, and to outline our commitment to improve the lives of at-risk children and families.

Our organization is registered as a for-profit, limited liability corporation.

In November 2019, SCARF received accreditation from CARF making us a provider of quality mental health services, which further demonstrate our commitment in providing the best standards for our patients.



COMPANY AT-A-GLANCE



46

Employees/ Contractors



08

Revenue Sources



2586

Total Clients Served



63

Lupus Awareness
Training Events



890

Diversion Services
Families Served



1740

Outpatient Mental Health
Clinic Clients Served

EXECUTIVES - COMMUNITY PARTNERS - ACCREDITATION

EXECUTIVES



Patrina Lawrence, CEO



Maria Lawrence, CFO/COO

COMMUNITY PARTNERS



CLIENT SATISFACTION RESULTS

2021 Annual Satisfaction Survey

Service excellence and continuous improvement are at the forefront of SCARF services. We perform monthly survey of our client care and satisfaction with the services they receive from SCARF.

SCARF received great results from our clients, demonstrating that our clients continue to trust SCARF as a source of help and a vehicle of support. This is especially noteworthy in 2021, a year in which we offered only telehealth services due to COVID-19.

Highlights of our 2021 results

Our clients

- Indicated that they are satisfied with our services
- Reported that our staff are professional and courteous
- Reported that our staff provided them with a sense of hope
- Indicated that they were kept informed of their treatment and discharge plans

2021 ACCOMPLISHMENTS

WE

- became a Florida Certification Board approved provider
- added fidelity wraparound services to our service array
- were awarded the DOH Closing the Gap Grant to conduct lupus awareness training
- rolled out our Intranet, Prodigl
- awarded one high school graduate our first Vina Lee Small college scholarship
- welcomed our new medical director to our outpatient clinic
- began our SCARF leadership academy
- became a Florida Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling approved provider

COMPANY CULTURE

We are *Client Focused*

We are *Team-Oriented*

We believe in *Continuous Improvement*

We work for *One Common Purpose*

We value *Employees' Ideas*



MISSION

OUR MISSION

The mission of Serving Children and Reaching Families is to give at-risk children and families the opportunity to reach their full potential by breaking down barriers, increasing community support and maximizing personal growth.

SERVICE PHILOSOPHY AND PRINCIPLES

SCARF was born out of a well-known adage: "Only a life lived for others is a life worth living." Its founding members looked around and saw many societal ills that stirred their hearts: children in poverty, families torn apart by drugs, violence, or absent parents, decrease in school retention, and domestic disputes that result in tragedy. Moved to serve and compelled to make a difference, the founders were determined to reach families in the way they know best-through service. And when things became difficult and seemed impossible, they renewed their motivation and commitment by reminding themselves of their original questions-why?

WHY WORK WITH CHILDREN?

-because the heart hurts when one child hurt

WHY WORK WITH FAMILIES?

-because strong families equal stronger children

WHY MORE THAN ONE SERVICE?

-because life is complex and hard, and we must not be afraid to tackle the hard stuff

WHY US?

-because "to whom much is given, much is required"

SCARF BELIEVES IN CHILD WELL-BEING

CLIENT STORY: A DIFFERENT PATH

This family was referred to our Diversion Program due to allegations of household violence. Working with this mother to find safety began the social, emotional, and physical well-being for the child and family.

When the initial appointment was made with the mother on the case, mom informed Pierangeli, one of our diversion case managers, that her boyfriend became upset with her and dragged her by her hair around the house with no clothes. This occurred all while her 4-year-old daughter was home and witnessed the incident.

Mom was sure she wanted to be in a safe home and recognized that her daughter having witnessed the violence needed to find a non-violent home to live. Mom left her boyfriend and moved in with her parents. At first, mom was reluctant to make any additional changes and resisted both the child protective investigator and the diversion case manager's recommendations. Eventually, mom opted for individual and family counseling for her and her daughter. Pierangeli quickly linked the mother and child to counseling services. They both proceeded in completing their initial assessment appointments and began a new path.



During the closing appointment mom thanked her diversion case manager for connecting both her and her daughter to services and informed Pierangeli that counseling has finally allowed her to feel heard and allowed her to feel that her and her daughter will get the mental health aid they need to recover from what they both experienced.

WE GET THERE TOGETHER

SCARF BELIEVES IN INDIVIDUAL SELF-DETERMINATION

CLIENT STORY: TWO JOURNEYS ONE MISSION

One of the most exciting aspects of our current cultural climate is the increasingly positive acceptance of mental health awareness, care, and treatment. Individuals of all ages have started to be more vocal with their medical providers, loved ones, and even on social media about their mental health needs and healing journeys. As treatment providers, we often see a positive correlation in treatment outcomes, as clients enter treatment with increasingly open minds and perspectives which encourage hope in the care they are taking a brave step to receive. A challenge that many in the community mental health realm are all too familiar with, however, is to foster a similar openness with clients who are mandated to receive care. Whether required to attend therapy through child protective services, probational terms, or even by a caregiver, mandated clients often struggle to find value in the early stages of therapy for the simple, yet poignant reason that *they* aren't making the choice to engage. In a field where self-determination is so highly valued, mandated clients are often faced with a different reality.

This was certainly the case for Lisa* (not her real name) when she began therapy services at SCARF in 2021. Lisa was not a new client to SCARF; rather, she had begun mandated therapy services with SCARF and other agencies in her area numerous times over the last several years. Mandated by both the Department of Juvenile Justice and her parents, Lisa expressed in her first session that she wanted nothing to do with therapy. Her father had forced her to switch therapists due to feeling no progress was made so many times, Lisa asserted, that she couldn't even remember her last therapist's name. Like many other mandated clients, however, Lisa understood that the best way out was through. Lisa agreed to give another round of therapy a try, although she slyly remarked that she couldn't make any promises it would help.

During those first few months, Lisa's participation fluctuated. She shared that she felt much more trusting of me, noting that while past therapists seemed to always "take sides" with Lisa's parents and DJJ, I sought to better understand Lisa's perspective, feelings, history, and behavioral motivations. Although Lisa began exploring her goals for her life with a renewed interest, she soon began to regress. Lisa eventually began to attempt to join sessions in public spaces, cancel at the last minute, or no-show entirely. To be honest, I struggled to enact company policy that would have discharged her due to non-compliance. I struggled with the perceived reality that my expelling her would directly lead to a violation of probation and, subsequently, rearrest. Ironically, what I wasn't considering at that time was Lisa's self-determination. She wasn't in a place to fully engage, yet I was trying to make that decision for her.

After much-needed clinical supervision, I made the tough decision to submit Lisa's discharge. Within a week, she was arrested, although for unrelated reasons. The following month I was asked to participate in a hearing for Lisa which would determine whether she could reengage in the prior terms of her probation or be sentenced to a residential facility. Here, it was determined that Lisa could reengage in therapy services, which began again soon after.

This time, Lisa's entire outlook had changed. Lisa openly and vulnerably shared the process of deep reflection she underwent while incarcerated, detailing the life she realized she was creating for herself and how deeply and increasingly irreversibly this lifestyle was taking her away from her goals and dreams. She reflected over the relationships she was cultivating and the life she hoped to someday live. Lisa began the process of making amends with her loved ones *and* with herself, and thus the real therapy process commenced.

Over the next year, Lisa made incredible steps and achieved each therapy goal initially outlined through the conditions of probation. Throughout the process, she even began defining her own treatment goals which she expressed a desire to address once probation was completed. She was successfully discharged and subsequently released from a long-term probation, proud of the new life she worked so hard to build for herself.

Lisa often thanked me for the work I did as her therapist, but really, the thanks belong to her. I would always remind her that *she* made the brave decision to show up and engage, to face her fears and struggles, despite the urge to walk away. She not only built the strength to forge a new life for herself but taught me to be a better therapist in the process. And she is currently in the process of reengaging in therapy services, only this time, of her own accord.

SCARF BELIEVES IN ADDRESSING THE SOCIAL DETERMINANTS OF MENTAL HEALTH

CLOSING THE GAP GRANT: SUPPORTING THE FIGHT FOR BETTER HEALTHCARE

In 2021 the Florida Department of Health awarded SCARF the Closing The Gap (CTG) Grant. Through this grant, SCARF help to promote community coordinated efforts to eliminate racial and ethnic healthcare disparities in Osceola, Orange, and Polk Counties as a means to increase clients overall health.

SCARF coordinated and facilitated the education of 250 healthcare workers on lupus disease by providing Community Healthcare professionals information that would equip them to serve patients suffering from this disease and to bring awareness to our patients on how their circumstances in which they live, and work shape their health outcomes.



SUPPORTIVE SERVICES

OUR SUPPORTIVE SERVICES PROVIDE OUR CLIENTS WITH COMPREHENSIVE CARE

SCARF supportive services have expanded to include telehealth care. Through the use of telecommunication, we have reached more children and families in our catchment area.

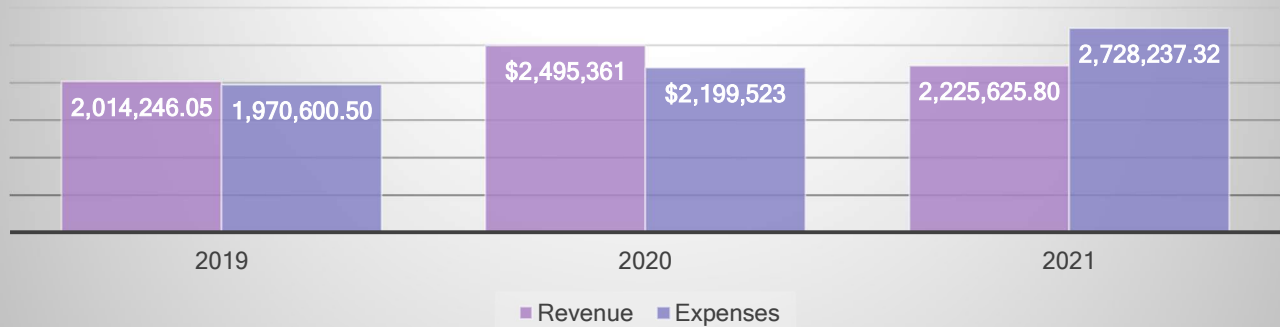
Supportive services include:

- Mental health targeted case management services
- Parenting groups and individual classes
- Supervised family visitation
- Wraparound services
- Psychological testing

FINANCIAL STATEMENTS

SUMMARY

Revenue vs Expenses



FISCAL YEAR

Fiscal Year Begin:	January 1, 2021
Fiscal year End:	December 31, 2021
Projected Revenue:	\$2,519.900.00
Projected Expenses	\$2,435.929.10

Income Projections

SCARF's 2021 income projection is an increase of 6% over the previous year. It included the new training initiative startup program which is 3% of the 2021 income.

Operating Expense Projections

SCARF's 2021 expense projection includes both Operating and variable expenses. These expenses also includes for the first time Department, building, draw and scholarship/donations, all variable expenses.

Administrative Cost Projections

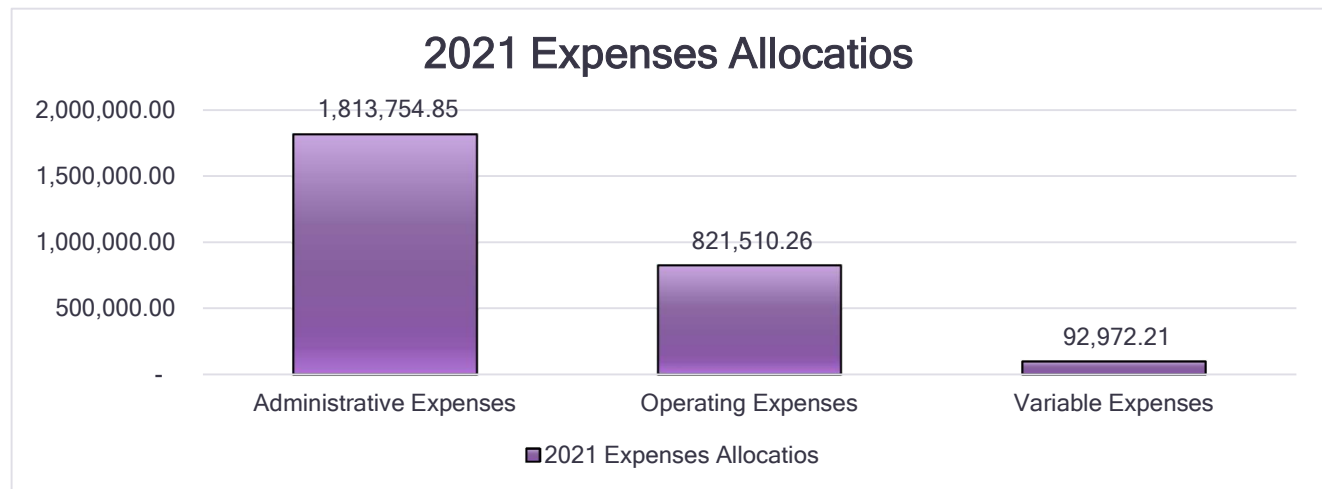
SCARF's 2021 Administrative cost projection includes Salary, Benefits and contractor wages which is considered cost-of-labor (COL). SCARF's COL is estimated at 35% of gross income. The employee salary includes new staff and an increase of current employee salary. The employee benefits include SCARF's portion (4% of projected income) which includes the new 401K offered.

2021 FINANCIAL

REVENUE BREAKDOWN

Source of Revenue	Sum of Total	% of Total
County and Local Funds	755,859.85	33.96%
Federal Funds	-	0.00%
Medicaid Funds	1,358,639.20	61.05%
State Funds	25,000.00	1.12%
Other Funds	86,126.75	3.87%
GRAND TOTAL	2,225,625.80	100.00%

EXPENSE CHART



EXPENSE BREAKDOWN

DESCRIPTION	Sum of Total	% of Total
Contractual	27,533.75	1.01%
Depreciation	-	0.00%
Facilities	143,869.58	5.27%
Operating	568,956.92	20.85%
Wages and Benefits	1,987,877.07	72.86%
GRAND TOTAL	2,728,237.32	100.00%

WE ARE HERE FOR YOU!



Serving Children and Reaching Families is please to offer mental health services to children and adults within the state of Florida.

Contact us today to learn how we can support you!

321-236-1540
CALL US

SCARF@SCARFFL.COM
EMAIL US

321-594-6096
FAX US

Kissimmee Site

1216 Patrick Street Kissimmee, FL 34741

Office Hours:

Monday Thru Friday 8:00 AM to 5:00 PM

Tuesday & Thursday 8:00 AM to 7:00 PM

Saturday: by appointment only

Sunday: Closed

