

Annual

Sharing | Supporting | Succeeding

Report 2009



Teacher

The Parent is the Child's First Teacher

Of all the people who have the potential to positively impact a child's development, parents possess the greatest opportunities. They are the constant and know their child best. But when a child has special needs, parents are often hesitant to see themselves as capable.

Therapies that promote development have been a key element of our support for children with special needs and their families, and families place enormous hope and trust in the hands of the qualified therapist. But parents were not always encouraged or given the tools which they could use themselves to promote their child's development.

"With individual therapy, parents may get information about a technique to try at home without having an opportunity to practice it. By showing a parent how to do something, and to practice it in group and at home, it empowers the parent and provides simple tools to promote language."

Fran Harman, MS CCC SLP

Harbor Regional Center





Participate

When Parents Participate, Children Do Better

The focus of care has increasingly shifted from being child-centered to family-centered. Through interactions with other children and adults, both parents and children can learn from one another.

"In recent years there has been a significant shift in focus for therapy...and a shift in thinking about our role as therapists. The best therapy focuses intervention on optimizing parent-child interaction through parent training, and well-trained parents are the child's best therapist."

Marcie Rhee, DPT

Director, Kids In Motion Pediatric Therapy

Parents may initially worry whether an approach that stresses their own involvement both in and outside of the therapy session can be as effective as 1:1 time between a therapist and a child. But we have seen parents overcome their initial concerns and realize that they have so much more opportunity to be key facilitators for their children's development in their everyday lives. What's more, they find the group approach is more fun and less stressful for their child, more beneficial for them as parents, and helps the child reach their goals faster.

"A truly family-centered approach encourages 100% parent participation and allows parents to realize quickly that it is not just about what new word their child learned in speech therapy that day, or how much help their child needed to negotiate an obstacle course in physical therapy or occupational therapy, but more importantly what the parent learned during that therapy session that could become part of everyday activities."

Marcie Rhee, DPT

Director, Kids In Motion

Pediatric Therapy



Activity

They Shouldn't Be In Isolation...These Are Social Activities

Being part of a parent participation therapy group also provides a built-in network of support. HRC therapist Fran Harman notes, "I have seen a great deal of change in the way that parents interact with their children and the kid's response to their parents. Coming together in a group provides the additional opportunity to learn social skills such as taking turns and sharing."

Adds therapist Marcie Rhee, "Parents can come together with other parents who experience and understand the same challenges they are experiencing, feel mutual support, and with their children can enjoy that social time together that they would not otherwise have."

***Children and their parents,
Sharing...Supporting...Succeeding.
That's what it's all about.***

"It can be a very lonely and discouraging world when you see that your child is different, but the therapists, the other parents and their children give us hope and encouragement that it will be OK, and that we are not alone. We as parents have grown confident in our ability to help our child when they need us the most. It empowers me every day when I can teach my child at home what we learn in therapy."

Kathleen Hayes, Parent

"Now she is so much more engaged. She will even approach other family members and give them a hug."

Laurie Eallonardo, Parent





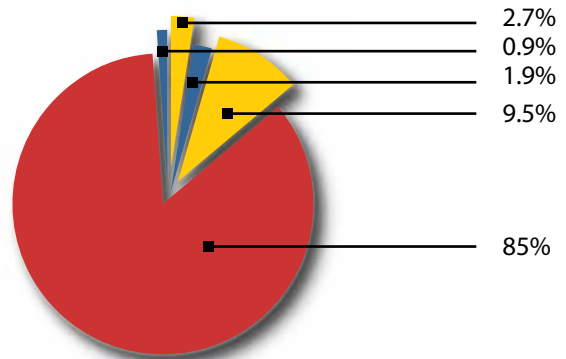
HRC Caseload 2009

Total Clients

10,043

Intake	2.7%
Prevention	1.9%
At-Risk Infants and Toddlers	9.5%
Active Clients in the Community*	85%
In State Developmental Centers	0.9%

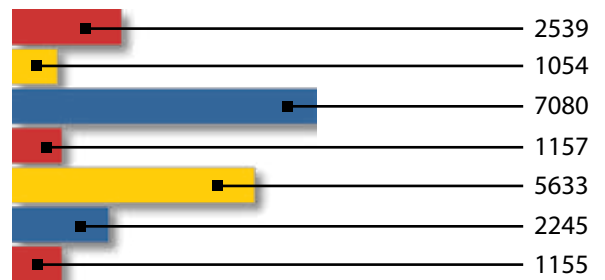
* with a diagnosed developmental disability



Clients by Diagnosis

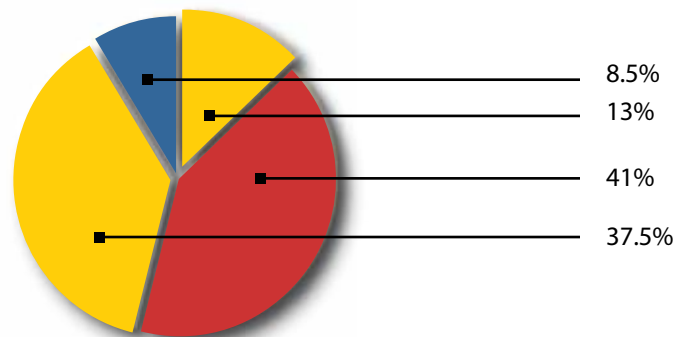
Autism	2539
Cerebral Palsy	1054
Chronic Medical Condition	7080
Epilepsy	1157
Intellectual Disability	5633
Psychiatric Disorder	2245
Other Developmental Disability*	1155

* Individuals may have more than one diagnosis



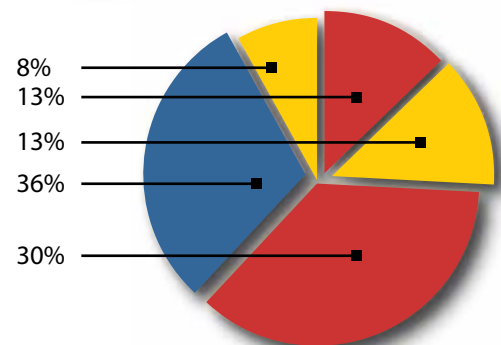
Clients by Age

Birth to Three Years	13%
Ages 3 to 18	41%
Ages 18 to 50	37.5%
Ages 50 and over	8.5%



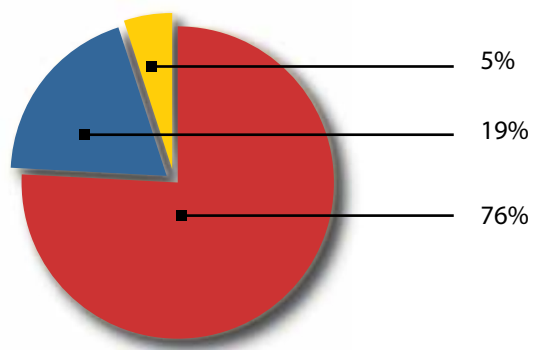
Clients by Ethnicity

African American	13%
Asian	13%
Hispanic	36%
White	30%
All Other	8%



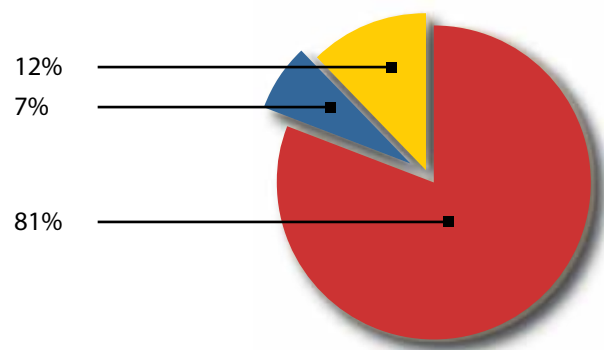
Clients by Primary Language

English	76%
Spanish	19%
All others	5%



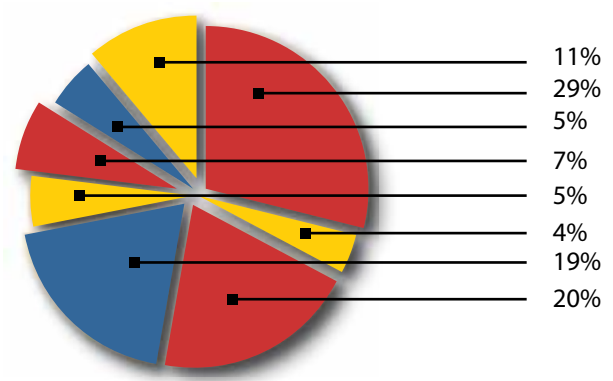
Clients by Residence Type

Family	81%
Independent & Supported Living	7%
Licensed Home	12%



Purchase of Services Expenditures

Licensed Homes	29%
Supported Living	4%
Day Activities	20%
Therapy Services	19%
Respite	5%
Transportation	7%
Medical Services	5%
Other	11%



Statement of Financial Position

ASSETS	June 30, 2009	June 30, 2008
ASSETS		
Cash and cash equivalents	\$ 13,378,356	\$ 7,548,986
Certificates of deposit	67,379	3,096,401
Cash – client trust funds	1,255,110	1,050,685
Contracts receivable – state of California		111,312
Accounts and loans receivable	97,441	64,018
Receivable from State for accrued vacation and other leave benefits	912,033	744,056
TOTAL ASSETS	\$ 15,710,319	\$ 12,615,458
LIABILITIES AND NET ASSETS		
LIABILITIES		
Accounts payable	\$ 10,476,660	\$ 9,890,572
Accrued salaries	1,056,365	1,289,079
Accrued vacation and other leave benefits	912,033	744,056
Contract advances – state of California	2,368,990	
Unexpended client trust funds	755,792	556,333
	15,569,840	12,480,040
COMMITMENTS AND CONTINGENCIES		
NET ASSETS		
Unrestricted	140,479	135,418
TOTAL LIABILITIES AND NET ASSETS	\$ 15,710,319	\$ 12,615,458

Statement of Activities

	For the Year Ended	
	June 30, 2009	June 30, 2008
CHANGE IN UNRESTRICTED NET ASSETS		
SUPPORT AND REVENUE		
Contracts – state of California	\$ 123,281,848	\$ 115,494,418
Interest income	357,336	746,067
Donations and grants	30,636	34,232
Other income	133,111	128,704
Total Support and Revenue	123,802,931	116,403,421
EXPENSES		
Program Services		
Direct client services	120,824,718	113,493,948
Supporting services		
General and administrative	2,973,152	2,900,183
Total Expenses	123,797,870	116,394,131
CHANGE IN NET ASSETS	5,061	9,290
NET ASSETS AT BEGINNING OF YEAR	135,418	126,128
NET ASSETS AT END OF YEAR	\$ 140,479	\$ 135,418

Expense

Statement of Functional Expenses

FOR THE YEAR ENDED JUNE 30, 2009

	Program Services	Supporting Services	Total Expenses
	Direct Client Services	General and Administrative	
Salaries	\$ 10,842,779	\$ 1,841,737	\$ 12,684,516
Employee health and retirement benefits	2,518,344	435,904	2,954,248
Payroll taxes	160,237	11,473	171,710
Total Salaries and Related Expenses	13,521,360	2,289,114	15,810,474
Purchase of services:			
Residential care facilities	29,554,221		29,554,221
Day program	20,173,018		20,173,018
Other purchased services	53,474,808		53,474,808
Communication	294,251	49,911	344,162
General office expenses	29,253	4,964	34,217
Printing	51,686	8,766	60,452
Insurance	99,158	16,818	115,976
General expenses	758,871	127,375	886,246
Facility rent	1,912,765	324,428	2,237,193
Equipment and facility maintenance	387,532	65,730	453,262
Consultant fees	313,316	53,142	366,458
Equipment purchases	94,963	16,107	111,070
Board expenses	25,640	4,349	29,989
Staff travel	83,921	3,975	87,896
Legal fees	6,351	1,077	7,428
Accounting fees	43,604	7,396	51,000
TOTAL EXPENSES	\$ 120,824,718	\$ 2,973,152	\$ 123,797,870





HARBOR DEVELOPMENTAL DISABILITIES FOUNDATION, INC.
21231 Hawthorne Boulevard, Torrance, CA 90503 • (310) 540-1711 • www.harborrc.org