



DePaul Family & Community Services Year End Report FY 2015

Mission Statement: *“The DePaul Family and Community Services strengthens and empowers families and communities through innovative, evidenced-based, community-oriented services and the training of culturally-competent, socially responsible professionals.”*

EXECUTIVE SUMMARY

Dear Friends and other Stakeholders,

I am pleased to present you with the FY2015 Year End Report detailing DePaul Family and Community Services' (FCS) performance, programming, and improvement activities for the year. The Year End Report provides a framework for summarizing the Mission- and Data-driven work and achievements of FCS. The report not only reviews the year past, but also looks ahead by identifying actions that will be taken to improve and strengthen the behavioral health services we provide to children, families, and communities and the training we provide to the DePaul University community. *In reviewing the data, project activities, and progress towards strategic goals over the past year, the following observations and conclusions are evident:*

FCS continues to provide Mission-driven behavioral health services to under-resourced children, families and communities:

- Over 600 clients were served through our various projects;
- FCS provided a total of 2,554 hours of service at local schools including 894 hours of individual/family therapy and 757 hours of group therapy;
- FCS completed 60 comprehensive Psychological Evaluations most of whom were funded through the State Medicaid system or the Department of Children and Family Services;
- FCS served a diverse client base: 47% of clients identified as African-American, 38% of clients identified as Hispanic/Latino, 14% of clients identified as White; and 2% of clients identified as Asian/Pacific Islander;
- 68% of clients served reported annual household incomes of \$25,000 or less;
- FCS provided Parent-Child Interaction Therapy (PCIT) to 30 families in 652 therapy sessions;
- 97 students were provided with social emotional programming at the Chicago Lights Summer Day program;
- A total of 42 children participated in the evidenced-based ACT/ADAPT depression treatment program in 6 primarily low-income, ethnic-minority schools;
- FCS provided early-childhood services at St. Vincent DePaul Center, a preschool that serves primarily low-income, ethnic-minority families;
- FCS provided psychiatric services, including medication monitoring, to 45 children and adolescents;
- The early-childhood assessment clinic has served approximately 23 families and trained 2 students within the past 6 months;
- A total of 30 students participated in the Cities Mentor Project in schools located on the south-side of Chicago

FCS maximized learning to prepare students for success and ensure that staff have the resources and capabilities to deliver an exemplary education:

- 7 doctoral clinical psychology students, 3 MSW social work students, 2 Masters-Entry Nursing Students, and 3 undergraduate students were trained at FCS;
- FCS provided approximately 815 hours of Individual clinical supervision of doctoral psychology and MSW candidates, 258 hours of group supervision;
- FCS recruited its first art therapy intern and developed an art-therapy resource room

FY 2015 covers the time period from July 1, 2014 to June 30, 2015



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FCS Optimized Chicago as an active learning laboratory for students and acted as a partner with our urban community:

- FCS developed and strengthened its partnerships with several schools including: Jenner Academy of the Arts, Manierre Elementary, Chicago Quest Charter School, Darwin Elementary, Mark Sheridan Elementary, Community Youth Development Institute Alternative School, Avondale-Logandale School, Lincoln Park High School, Alcott College Prep, and Fourth Presbyterian/Chicago Lights Summer Day School

FCS will operate by a Sustainable Business Model thus ensuring FCS' continued strength and legacy of innovative, community-based services and training:

- FCS surpassed FY15 budget expectations by over 2% thus allowing us to continue to build our reserve fund;
- FCS contracted with various managed-care organizations;
- FCS continued to diversify its funding mix and saw a 370% increase in revenue from private insurance cases;
- FCS continued to grow its continuing education programming;
- FCS achieved a 32% increase in school-based sources of revenue

FCS provided our students with an intercultural education delivered by diverse faculty and staff:

- FCS offered a Diversity training series emphasizing the immigration experience of undocumented youth and received favorable feedback from students and staff;
- FCS delivers service in several neighborhoods across Chicago thus exposing students to diverse populations and communities

FCS continued to strengthen and promote collaboration and visibility within the DePaul University community:

- FCS provided students from local schools the opportunity to receive mentorship and exposure to life on a university campus in collaboration with various University Departments (Athletics, Theater School, School of Nursing, PCIT lab, Mission and Values, University Ministry, Vincentian Service Day). This year's Day at DePaul event was a success. 42 students, and 45 mentors participated in the event. Students participated in lab excursions, time with their mentors, campus tours, and reflections on life as a university student.
- FCS strengthened its relationship with the School of Nursing and the MSW Program

While these are challenging times for Human Services providers, FCS' distinctive strengths and competencies – *understanding diversity, partnering with community, teaching others, and psychological assessment* – position FCS to survive and thrive in the months and years ahead.

Many thanks for your continued interest and support of DePaul Family and Community Services.

Orson A. Morrison, Psy.D.
Director
DePaul Family and Community Services



Part 1: Program Background

A. Program Description/Environmental Issues (FY15):

Mission: The DePaul Family and Community Services strengthens and empowers families and communities through innovative, evidenced-based, community-oriented services and the training of culturally-competent, socially responsible professionals.

Vision:

To provide *quality* services that are flexible and responsive to the individual needs of clients, their families, and their communities;

To provide services that are *community-based* and focused on *prevention* and overall well-being;

To *empower* families and communities to make change in their lives and in the lives of others;

To *partner* with other child-serving organizations and systems to achieve shared goals of child, family, and community wellness;

To develop and implement *evidenced-based* approaches that take into consideration *culture* and the system(s) in which our clients live;

To strengthen the healthcare system by training *socially-responsible* professionals who are considerate of all social-determinants of health and well-being

On a Federal level, the passage of the Affordable Care Act continued to inform state-level discussions and planning around Medicaid expansion and service provision. The State of Illinois continued to expand Medicaid coverage to those adults who had not previously been eligible for this entitlement program (single adults). In addition, the State of Illinois focused on shifting the management of Medicaid benefits to managed-care companies (MCOs) (for services to children and adults). FCS addressed this reality by contracting with several popular managed-care plans and credentialed our staff members to be able to provided services for clients who are enrolled in managed-care companies and care coordination entities. The administrative burden of contracting and working with MCOs has been high.

Because of the changing financial landscape of state-funded community mental health services (Medicaid), FCS continued to focus on diversification of funding and continuing to expand its reserve fund to reflect a more sustainable and less risky funding mix. Through the addition of contracts with Chicago Public Schools and other schools, paneling with private insurance companies, and providing continuing education workshops, FCS continued to diversify its funding mix.

On the horizon, FCS anticipates that Medicaid block-grant funding, such as the DHS Psychiatric Services grant will be eliminated or significantly reduced in FY16.

FCS Staff Members (FY15)

Orson Morrison, Psy.D. (Director), Winifred Kearn, LCSW (Associate Director), Renee Caliendo (Business Manager), Julie Brosnan, Psy.D. (Coordinator of Training), Trina Davis, Ph.D. (Assessment Coordinator), Richard Renfro, Ph.D. (Staff Psychologist), Maudette Jackson, Ph.D. (Staff Psychologist), Thara Nagarajan, Ph.D. (Staff Psychologist), Iu-Luen Jeng, LCPC, ATR (Staff Therapist/Art Therapist), Christina Warner-Metzger, Ph.D. (Staff Psychologist, PCIT Master Trainer), Donald Tyler, Ph.D. (Staff Therapist), Sophia Duffy, Ph.D. (Staff Therapist), Gabi Gerardi (Front Office Clerk), Veronica Loera (Front Office Clerk)

Affiliated Faculty (FY15)

Antonio Polo, Ph.D., Kathy Grant, Ph.D, Jocelyn Carter, Ph.D.,

Community Advisory Board Members (FY15)

Orson Morrison (FCS Director), Jamal Cornelius (Chair), Joseph Gartner (Secretary), Fr. Edward Udovic (DePaul), Tara Gill (Lurie Children's Hospital), William Cody (DePaul), Kristin Borgmeyer (St. Vincent DePaul Center), Gloria Purifoy (CPS), John Zeigler (DePaul), Trina Davis (DePaul)



Program Services & Projects:

Clinical Training Program: FCS provides exceptional training to DePaul University graduate and undergraduate students. The training program draws heavily on principles of Community Psychology, Multiculturalism, and Evidenced-Based Practice. Students provide individual, family, and group services to under-served populations under the supervision of Licensed Clinical Psychologists. FCS is the primary training site for the doctoral candidates who are enrolled in DePaul University's Psychology program (Clinical Child and Clinical Community Psychology Programs). FCS also provides internship experiences to psychology undergraduate students who are interested in learning more about clinical work with under-served populations. FCS also provides supervision for students in DePaul University's Masters in Social Work program by Licensed Clinical Social Work staff. During FY15, FCS provided approximately 815 hours of Individual clinical supervision of doctoral psychology and MSW candidates, 258 hours of group supervision including specialized group training and supervision in evidenced-based treatment modalities such as Parent-Child Interaction Therapy and ACT/ADAPT. For FY15, FCS trained 17 doctoral students, 3 MSW students and 3 undergraduate students were trained. We also provided training and supervision to two part-time Psychology Post-Doctoral Fellows who were recent graduates of DePaul's doctoral psychology programs. The most important and monumental happening in the Training Program was saying goodbye to Richard Renfro, Ph.D. after 14 years of exceptional supervision and dedication to the Training Program.

Diversity Training Committee: The Diversity committee focused on the immigration experience, which we felt was a very timely topic, and as we have seen this year, it continues to be an essential topic. We started the series watching the documentary "Which Way Home," which gave us all a riveting base of understanding about the immigration experience of undocumented youth. Our clinical training was equally riveting. The parent of a client presented and was interviewed by her DePaul FCS therapist (with the help of English interpreting) regarding her own immigration story and the issues that it has presented for her family. Our final training focused on policy and we heard from two speakers, Jessica Erickson from Catholic Charities and Nebula Li, from Community Activism Law Alliance, regarding the current laws regarding Immigration, how they affect individuals and how we as therapists can be helpful to our clients.

School Based Services: FCS continues a long tradition of providing responsive, evidence-based services at several schools in the community. Staff worked on-site and closely with the behavioral health/social service teams of several schools including Jenner Academy of the Arts, Manierre Elementary, Chicago Quest Charter School, Darwin Elementary, Mark Sheridan Elementary, Community Youth Development Institute Alternative School, Avondale-Logandale School, Lincoln Park High School, Alcott College Prep, and Fourth Presbyterian/Chicago Lights Summer Day School. Over the course of FY15, FCS provided a total of 2,554 hours of service at local schools including 894 hours of individual/family therapy and 757 hours of group therapy.

Fourth Presbyterian Summer Day Program: FCS developed a social-emotional curriculum on the topics of emotions, coping, communication, conflict resolution, goals, and consequences for the six-week Summer Day Program held at Fourth Presbyterian/Chicago Lights. FCS provided professional development to teachers and provided weekly groups to students. Through this partnership, FCS served approximately 97 students.

The Parent Child Interaction Therapy program: The Parent-Child Interaction Therapy (PCIT) Clinic uses an evidence-based intervention for parents and children aged 2-7 years with disruptive behaviors. In PCIT, parents are taught effective ways of interacting with their children, including warm, responsive attention and consistent use of behavior management techniques. PCIT was established in FCS in 2005 and completed its tenth year of operation in the most recent fiscal year. This year, Dr. Christina Warner-Metzger, PCIT International Certified Master Trainer, assumed the primary role of directing the PCIT Clinic and supervising training. In the past year, Dr. Warner-Metzger trained and supervised 6 doctoral clinical psychology students in delivering PCIT to 30 families in 652 therapy sessions. The PCIT Clinic ended the year with a waitlist of approximately 20 referred families seeking treatment, indicating maintenance in young child referrals. Training efforts increasingly focus on meeting PCIT International requirements for certification, with 3 trainees attaining therapist-level requirements and 3 trainees attaining Level I Trainer requirements within the past year.

To supplement PCIT-related training efforts, DePaul TIES (Teaching and Implementing Evidence-based Service) was awarded a \$4,725 Vincentian Endowment Fund Grant to employ education, technology, and therapeutic intervention to



improve children's quality of life. DePaul TIES provided direct intervention to underserved populations, as well as training to the DePaul students and community professionals who serve them. Regarding training efforts, DePaul TIES and DePaul FCS sponsored an advanced PCIT training, an event providing 20 continuing education credits and professional development to 6 individuals from across the country and 4 DePaul students. Further, Dr. Warner-Metzger presented a Child-Adult Relationship Enhancement (CARE) workshop for caregivers and professionals who work with children, offering 4 continuing education credits to 10 participants from DePaul and the Chicagoland community. Additional highlights of the year include a total of 6 PCIT informational and research presentations to local and international audiences, a peer-reviewed publication focusing on Teacher-Child Interaction Training (TCIT), and a student-led dissertation project assessing the effectiveness of TCIT in Chicagoland schools, impacting 16 teachers and 109 students.

Early Assessment and Recommendations for Learning in Young Children Clinic: The Early Assessment and Recommendations for Learning in Young Children (EARLY) Clinic focuses on direct clinical service and graduate-level practicum training in assessing a variety of psychological and developmental issues for children ages 0 – 7 years. Dr. Warner-Metzger directs the EARLY Clinic and provides supervision in specialized assessment approaches for children with Autism Spectrum Disorders, Developmental Disabilities, and histories of trauma. The EARLY model offers families a full psychological assessment, diagnostic clarification, and initial recommendations within a single day's appointment. In its inaugural implementation in January 2015, the EARLY Clinic has served approximately 23 families and trained 2 students within the past 6 months.

ACT/ADAPT Program: Act and Adapt is a school-based cognitive behavioral group intervention program targeting depression in youth. Throughout the course of the program, youth are provided with psychoeducation about depression, discuss the relationship between negative thoughts and one's feelings, and learn coping skills to manage feelings of depression when they occur. Dr. Antonio Polo, an Associate Professor in DePaul University's clinical psychology program, supervises this intervention. At-risk youth in 5th through 8th grade from several Chicago Public Schools are identified through either classroom surveys or teacher referrals and students are interviewed and administered standardized instruments to determine eligibility. Then, if the child is eligible and the family is interested and consents to participate, they are registered as clients of DePaul FCS and enrolled in the groups. Data on the efficacy of the program are collected before, during, and after the program ends. During FY15 42 total clients participated in the program and 29 enrolled in Medicaid and through the clinic. 2 PhD (1 Clinical Child, 1 Clinical Community) students, 1 MSW student, and 1 Senior Intern were trained in the ACT/ADAPT treatment model. 2 additional PhD clinical child students ran the program under Dr. Polo's supervision.

ACT/ADAPT partnered with several CPS schools including:

Goethe Elementary, Otis Elementary, Darwin Elementary, Pulaski International, Chase Elementary, and Funston Elementary. The ACT/ADAPT program reported several highlights including adding four new partnership schools, enrolling the most students/families into the program, running the most groups/family sessions they have ever run and submitting an additional grant application and received additional funding from the Annie E Casey Foundation to continue to evaluate the program and serve additional schools/youth/families.

Cities Mother-Daughter Project: The Cities Mentor Project provides early adolescent Chicago Public School students with **a)** training in research-based strategies for coping with severe and chronic stressors that negatively affect health and learning (e.g., community violence); **b)** connection to undergraduate mentors who support youth coping efforts in real-life situations, advocate for youth academically, and connect youth to **c)** high-quality after-school and summer programming that provides additional support. The 2014-2015 academic year was the first year that Cities Mentor Project was offered through DePaul Family and Community Services (FCS). Beginning in the summer of that year, the program provided training to three doctoral students, two social work students, and one undergraduate senior intern. In the fall of 2014-2015, our team recruited 30 participants from Joplin and Wentworth Elementary Schools on Chicago's Southside, and we opened 22 of those participants as clients through FCS. We began providing weekly services to those clients during the winter quarter of 2015 and continued through spring quarter. As part of the services we provided, we connected participants with additional support at partner community organizations (i.e., St. Sabina Church and YOUmedia at Thurgood Marshall Library). Finally, we recruited an additional 30 wait-list control participants to continue to evaluate



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effects of the program on behavioral, emotional, social, and academic outcomes. Results to date indicate that participants in Cities Mentor Project have fewer behavior problems and more prosocial and leadership skills (as reported by teachers, parents, and the students themselves). And, the more time youth spend in Cities Mentor Project activities, the more positive academic skills reported by their parents and the higher their reading scores.

St. Vincent DePaul Center: DePaul FCS continued its long standing partnership with Saint Vincent DePaul Center over the past year. The focus of the partnership was on supporting the needs of individual Saint Vincent's students. A student clinician coordinated with the Family Support Specialists at Saint Vincent's to identify students who would benefit from a developmental assessment and/or individual or family therapy. Identified students were screened and enrolled in the appropriate program at DePaul FCS. Family services were provided within the clinic, however, to increase convenience for families individual services were offered at Saint Vincent's.

The Psychological Testing Program: FCS Staff Psychologists and Graduate Psychology Students provide comprehensive Psychological Evaluations that help to clarify formal mental health diagnosis, assess learning and academic functioning, and provide clinicians and clients with individualized treatment recommendations. FCS provides testing for clients who have the state Medicaid insurance, Department of Child and Family Services (DCFS) funding, or those that can pay out of pocket for the services. Over the course of the year, FCS completed 60 comprehensive Psychological Evaluations.

Day at DePaul: Day at DePaul is one of FCS' signature events, which provides students from local schools the opportunity to receive mentorship and exposure to life on a university campus. This year's Day at DePaul event was a success. 42 students and 45 mentors participated in the event. Students participated in workshops run through the Athletics Department, Theater School, School of Nursing and the PCIT lab with their mentors, participated in campus tours, and reflected on life as a university student. FCS partnered with the STARS Mentor Program through DePaul's Office of Multicultural Student Services. Support was also received from University Ministry, Outreach and Engagement, and Mission and Values.

Psychiatry Services: Due to gentrification in the near north area of Chicago and community mental health center closures across the city, we've seen increases in our client population from the south and west-sides of Chicago. Families travel great distances, and will wait lengthy periods of time, to access child psychiatry services (upwards of 6 months). *During FY15, our Child Psychiatrist provided assessment and medication monitoring services to 45 clients.

Art-Therapy Program: This was an exciting year for the Art Therapy Program. We served a total of 46 clients at the clinic and at two partner schools, Darwin Elementary School and Mark Sheridan Academy. We also offered two in-service sessions to staff and current clinicians in training at DePaul FCS. We established partnerships with Master's level art therapy programs in Chicago and hosted the first art therapy intern at FCS. In addition, we built an art material resource room and began to strategize for programs that will increase the overall quality of client experience for the upcoming year.

Administrative Projects: The FCS Administrative Team and Front Office Staff put an enormous amount of work into adjusting to new MCO organizations and our Business Manager customized TIER (electronic medical record) to better meet our business needs.



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B. Total Clients Served by DePaul Family and Community Services

Actual number of clients served this fiscal year	Registered=424 Non-Registered=197Total=621
Projected number of clients to be served in the next fiscal year	500

C. FY2015 Client Demographics*

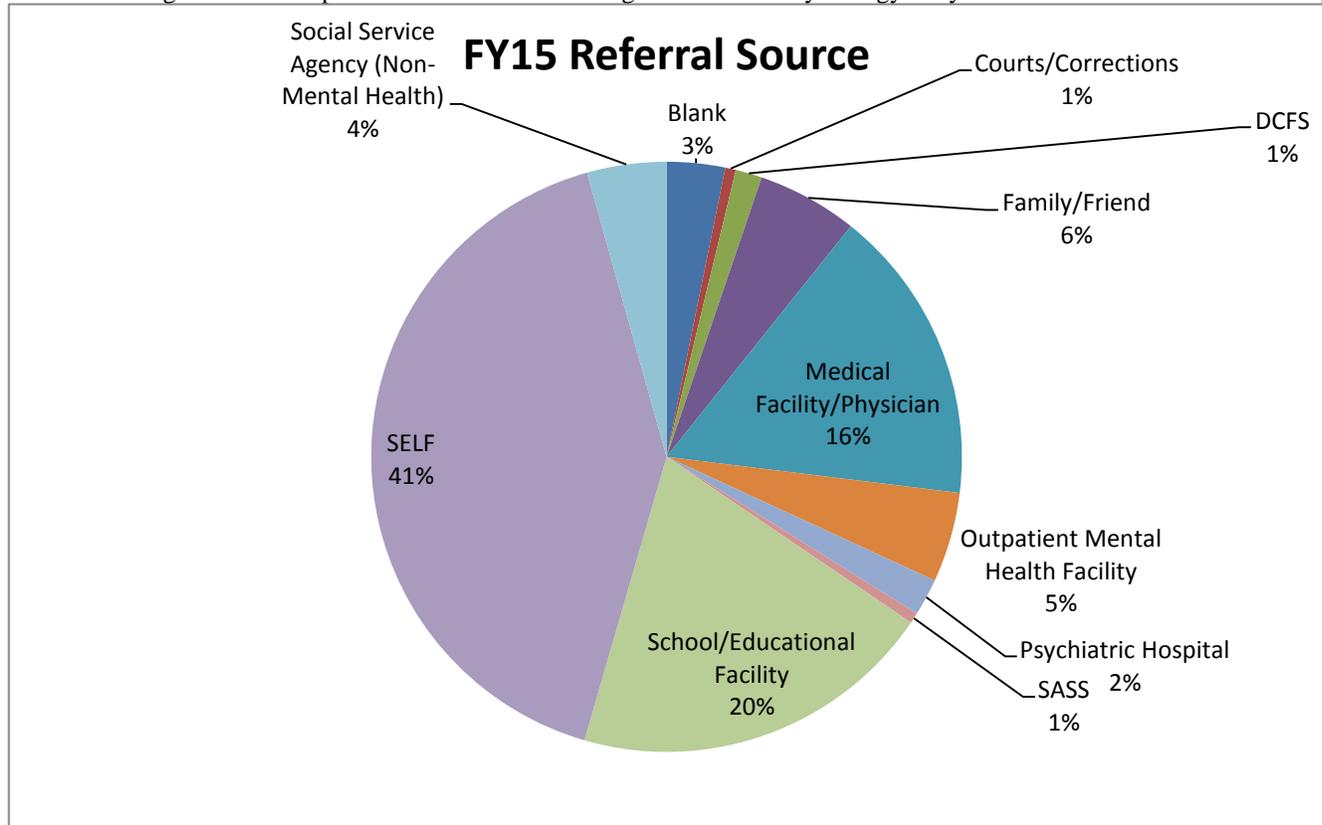
Gender			Female	171	40%	Male	252	59%							
Age	0-6	74	17.5%	7-10	110	26%	11-14	133	31.5%	15-17	64	15%	18+	43	10%
Ethnicity	Asian/Pacific Islander	9	2%	African American/Black	200	47%	Hispanic/Latino	162	38%						
	White/Non-Hispanic	58	14%	American Indian	0	0%	Other/Unknown	1	0.2%						

*Based upon the 424 registered clients

D. Client Characteristics

In FY15, FCS served a total of 424 “registered” clients. “Registered” refers to those that were officially opened to provide Medicaid, Self-Pay, Private Insurance or DCFS services. In addition to those “registered” clients, approximately 197 additional clients were served through involvement in special projects such as the Chicago Public School contracts, Day at DePaul and class-room based educational interventions at various schools.

Client are referred from a variety of sources. During the fiscal year we saw an increase in self-referrals in response to our efforts to strengthen our web presence on online marketing sites such as Psychologytoday.com.



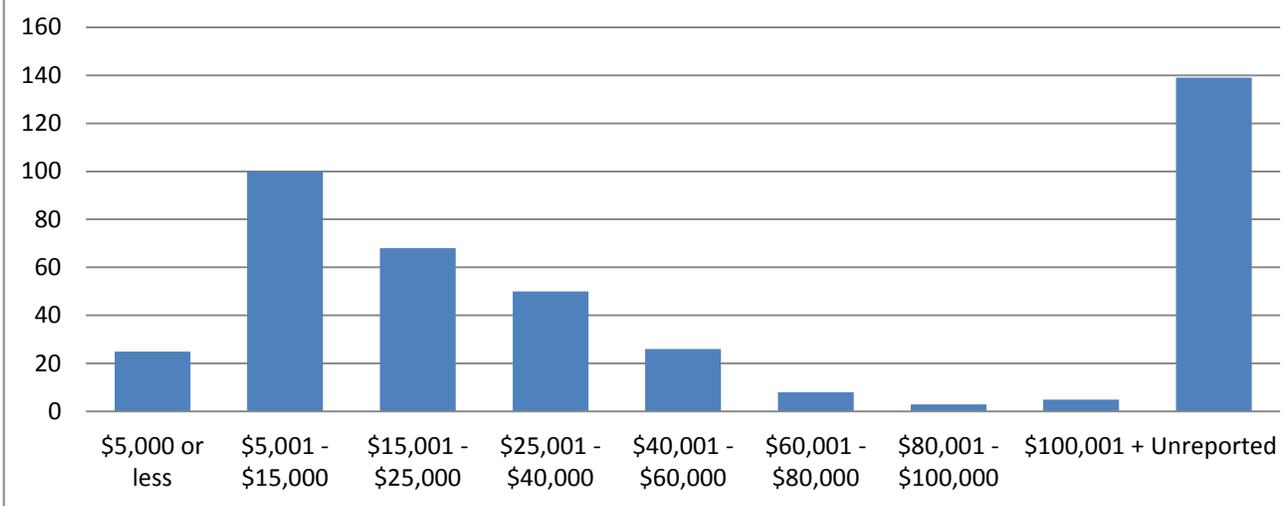
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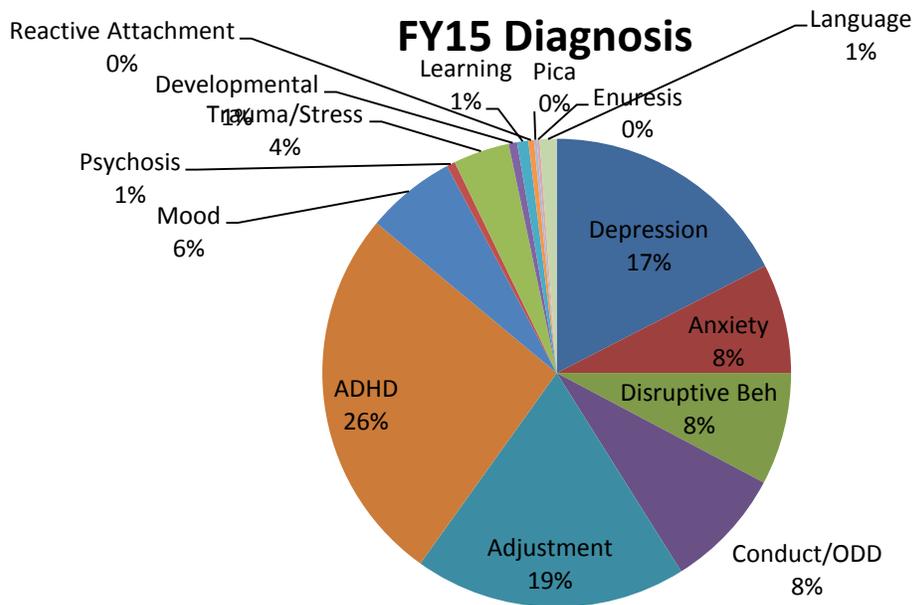
FCS continued to provide services to primarily low-income children and families, consistent with its mission. The majority of clients have household income levels between \$5,001 and \$15,000/yr, followed by \$15,001-\$25,000/yr, followed by \$25,001-\$40,000, \$5,000 or less/yr. 68% of families who report household incomes, report household incomes of \$25,000 or less per year.

FY15 Household Income



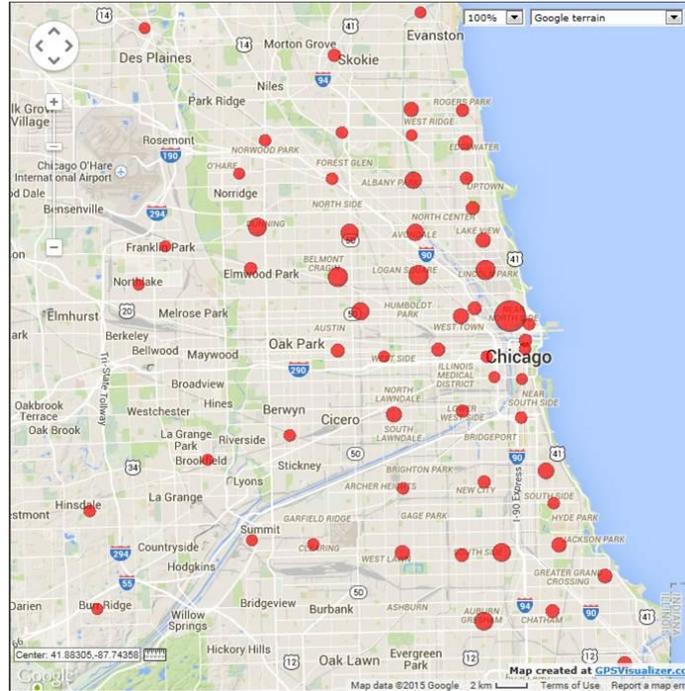
The most common primary DSM-IV diagnosis seen in FY15 included ADHD, Adjustment Disorders, and Depression.

FY15 Diagnosis

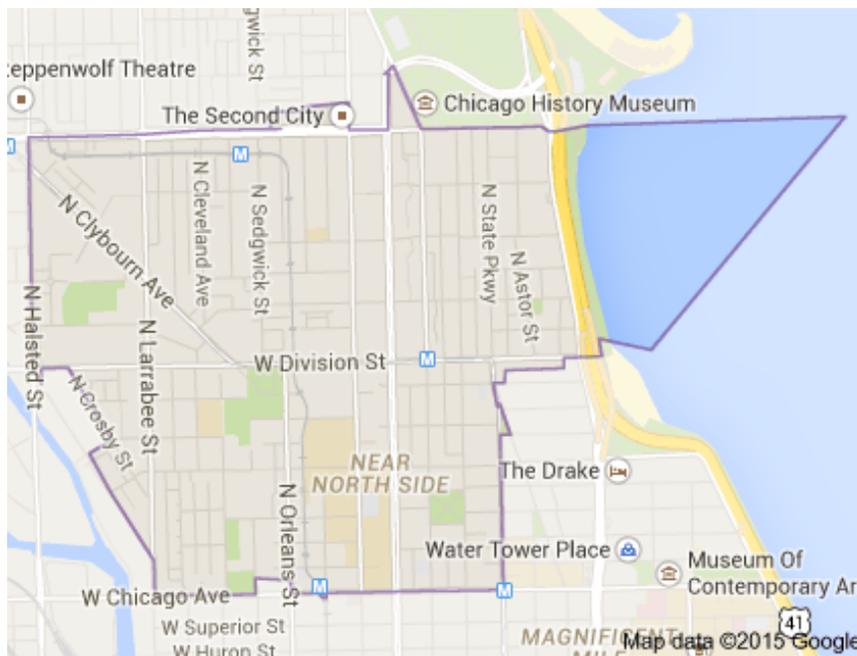




Clients travel far distances to receive access to high-quality behavioral health services:



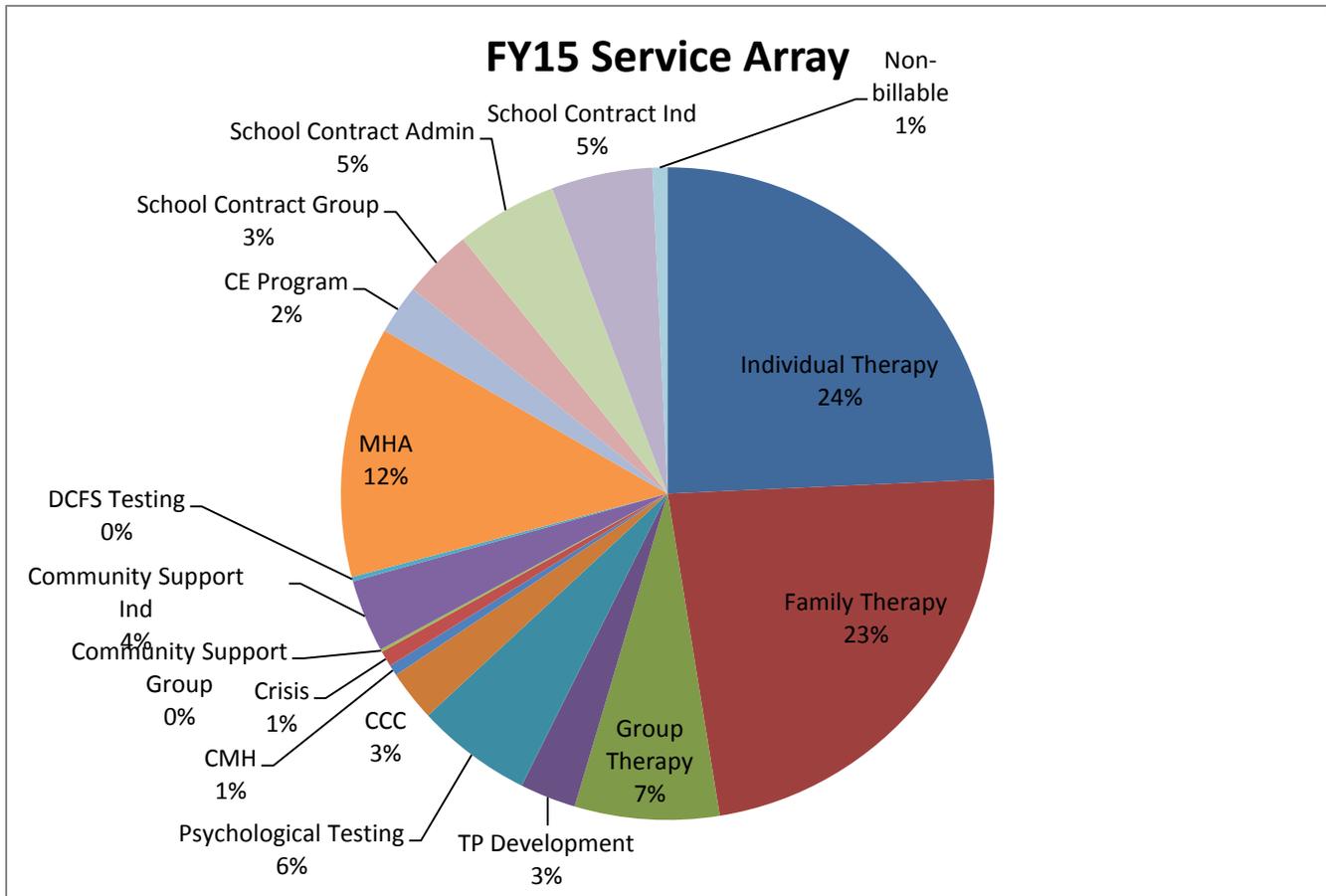
The ZIP Code with the largest number of FCS clients is 60610 (9.6% of clients):



Part 2: Services and Activities Summary

Service Array

The chart below summarizes the array of behavioral health services that were provided to “registered” clients over the course of FY15.



FY15 Outputs:

- 45 clients received psychiatric services
- 2562 hours of individual therapy/community support services provided – total clinic
- 1804 hours of family therapy services provided – total clinical
- 836 hours of group therapy/community support group – total clinic
- 17 doctoral students, 3 MSW students and 3 undergraduate students were trained
- 815 hours of Individual clinical supervision of doctoral psychology and MSW candidates
- 258 hours of group supervision
- 60 testing batteries completed
- 238 hours of case-management services
- 191 hours of CE programming
- 23 children served through the Early Assessment and Recommendations for Learning in Young Children (EARLY) Clinic



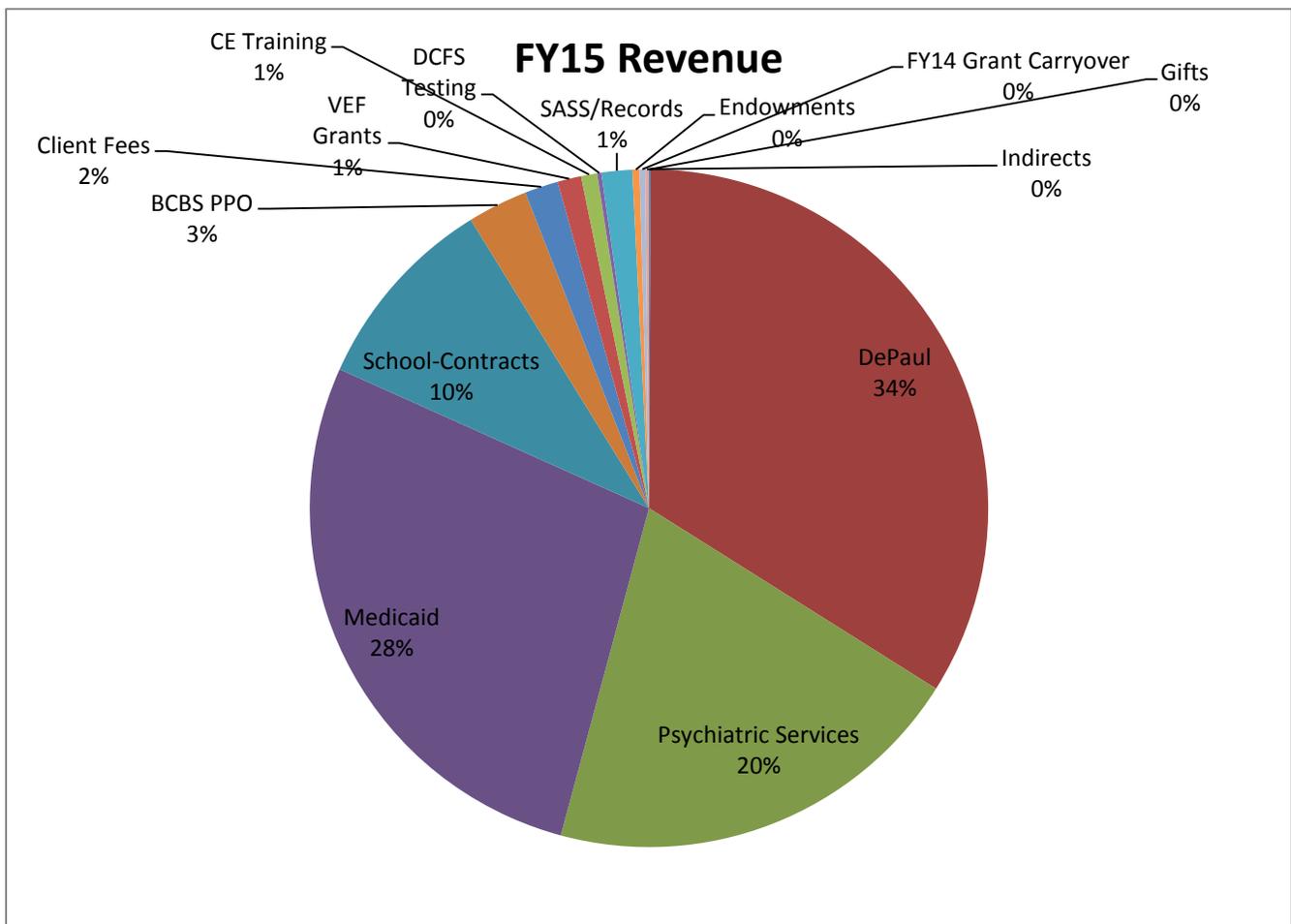
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Budget Performance:

DePaul’s fiscal year ended June 30, 2015. Total revenue was \$1,066,510; expenses were \$1,042,124. Revenue exceeded expenses by \$24,386 (2.3%).

Total Medicaid and SASS billings were approximately \$309,000. This was significantly lower than previous years due to a greater diversification of funding sources. \$103,000 was earned through school-based projects (32% increase); \$30,500 was earned through BCBS billings (370% increase); and \$8100 was earned through training-related fees (440% increase). However, overall billing performance was also affected by staff vacancies during the first quarter of the year.

The remaining revenue of \$24,386 will be transferred to the FCS reserve account for FY16.



Outcome Indicators:

The following data represents evaluations of symptomatology completed every three months to assess progress and current difficulties. The data presented below represent the average scores for all clients served within that year at various stages in their treatment, beginning with their first session (i.e., intake), continuing every three months of their treatment, as well as average scores for symptoms when clients ended treatment (i.e., closing).

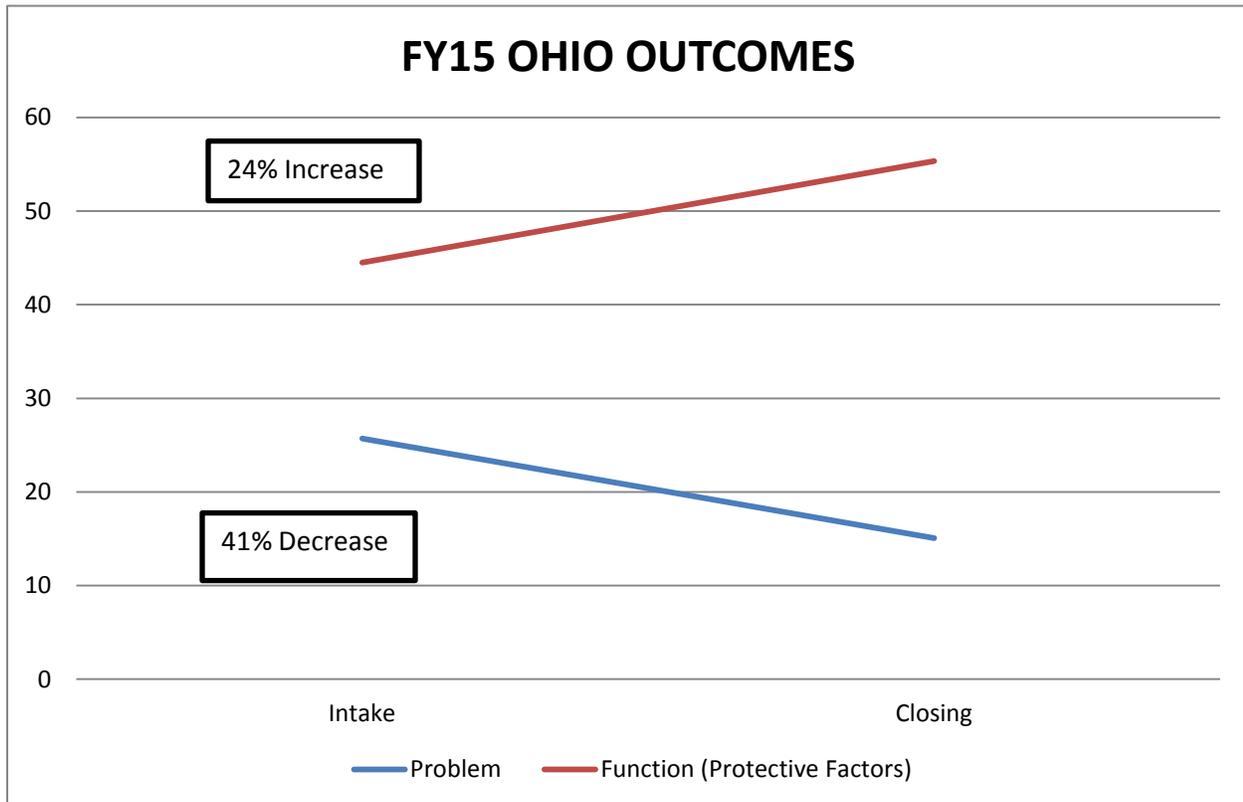
Ohio Scales and the Level of Care Utilization System (LOCUS) are completed by the client’s clinician. Clinicians complete Ohio Scales for youth aged 6 through 17 years, and Ohio Scales include two scores, one indicating the severity of problem behaviors and the other indicating protective factors and positive functioning exhibited by the client. Both scores

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have a maximum of 75. The clinical cut-off score for problem behaviors is 20. For cases that closed in FY15, there was a 41% decrease in the problem (symptom) severity ratings compared to intake ratings. Concurrently, there was a 24% increase in functioning (protective factor) ratings.



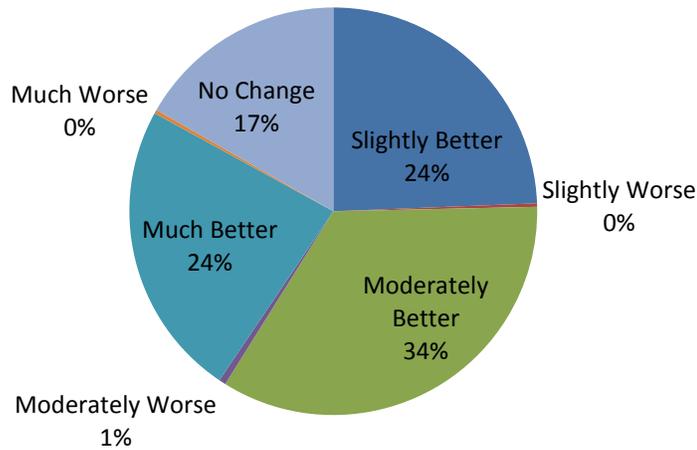
Client Satisfaction and Perceptions of Treatment:

Individualized Treatment Plan goals are collaboratively determined between client and therapist. At each treatment plan review and at discharge, treatment plan goals are evaluated. At discharge, both client and therapist are expected to rate progress towards the identified treatment plan goal. Below is a graph of client rating of perceived change towards achievement of identified treatment goals.



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FY15 Client Change Ratings



Of those clients who participate in the treatment review process, 58% report that their treatment issue is moderately- or much-better over the treatment period.

Part 3: Action Planning

Action Planning: What are the 3 key areas the department will be focusing on for improvement in FY 2016 as a result of data and information obtained in FY 2015?

1. Build the capacity to respond to school-based partnerships and the needs of Spanish-speaking families.
2. Diversification of funding stream & Sustainable funding model: The FCS team will continue to have strategic discussions and planning around the goals of ensuring a diverse funding mix, while remaining true to the overall mission and values of the program. Of paramount priority is to create a more sustainable and diverse funding mix which will help to create resilience and lower risk with regards to changing and unstable financial environment. FCS will increase senior staff member's Blue Cross Blue Shield cases.
3. Continue to develop and evolve program metrics and data. We will continue to develop and assess our current program metrics system and areas of improvement/strengthening will be noted. This will include a examining and strengthening our clinical outcomes measures, client and partner satisfaction measures, and clinic appointment scheduling data.

Prepared by: Dr. Orson Morrison (Director)

Date: 11/15/2015

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