

AGENCY WIDE CQI/EXECUTIVE SUMMARY
1ST QUARTER – FY2015

Attendance:

Jeff Sondergrath	FC – Ottawa	Emily Donat	FC – Aurora
Dave Conrad	Administration	Tina McCullough	Licensing
Lee Hicks	Parenting	John Coutre	Treatment - North
Terry Young	Staff Support - North	Rebecca Krise	FC – Rockford
Rebecca Krise	FC – Rockford	Rachel Wathen	FC- Glen Ellyn
Diana Beams	Intact Family Services	Kim Quick	Outreach
Michelle Murphy	Treatment – South	Peter Woodbine	Dir. Of Quality & Training
Lindsay Whitecotton	Redeploy	Frank Vonch	Executive Director

Peter Woodbine’s opening comments were regarding CQI processes and our goals for this meeting. Peter thanked Terry Young, Geoff Franklin, Lee Hicks & Rita Butler for initial efforts in forming a CQI committee. Staff is invited to contact Peter if they are interested in participating in this process.

The goal for the quarterly CQI meeting is not simply a regurgitation of information from program team meetings, but an opportunity to discuss what the numbers and team discussions represent and what they indicate in terms of positive practices in our programs, or areas that need improvement. Everything you do on a daily basis, all that you do, is part of CQI. It is not a separate piece of work, but what you do every day.

Terry Young reported on the Leadership CQI training with eleven (11) staff in attendance. The group discussed the agency mission statement and how our CQI perceptions/processes move the agency toward achieving that goal. Staff perceptions of CQI both positive and negative were discussed. Conveying the meaning/importance of CQI needs to be clarified. The organizers as well as attendees felt that the discussion was very helpful and would like to see such a meeting/discussion be held at least a couple times of year.

This summary represents a snap shot of the agency’s programs performance for the 1st quarter of FY2014. The following information is reported at the quarterly CQI meetings held at the end of each quarter. This report may or may not capture every program in each quarter.

YSBIV operates the following programs: Youth and Runaway Youth/Homeless Services, (Redeploy, Second Chance, JSOP, Hope House), Runaway and Homeless Youth (formerly Outreach), Kids Place, LADD, and Hispanic Services; Child Welfare Foster Care, Parenting Program, Licensing, M.I.S.T.E.R, Hope House, Intact Family Services, SOC, and Specialized Foster Care.

Reported Areas:

Incidents, outcomes for children, peer reviews, satisfaction surveys, projects and program corrective actions in the quarter.

Incidents, Accidents, Client Grievances

Break out by programs and offices:

Incidents, accidents, client grievances and Unusual Incident Reports (UIRs):

	Aurora	Glen Ellyn	Ottawa/ Princeton	Rkfd	IFS	Lic	Parent	Treatment	RHY	Redeploy/JJ	Hispanic Services	Admin	Office Support	Hope House	Totals
Total # UIRs	5	21	12	7	11	9	0	9	9	1	0	2	0	0	86
Abuse /Neglect				1	11			3	1	1					17
Aggression	2			1				1							4
Run/Missing Ward		1	1	2					2						6
Psychiatric Assessment				1					4						5
Behavior															0
Medical / Illness		2	4	1											7
Medical/Dispensing Error			1												1
Sexual	2		3			2									7
Residential Incidents		18													18
Arrest	1														1
Other			3	1		7		5	2			2			20

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Aurora: UIRs were down from the ten (10) reported last quarter. UIRs this quarter tended toward injury/illness which cannot be foreseen. No trends.

Glen Ellyn: UIRs dropped from 59 last quarter, to 21 this quarter. The drop was seen in reports from clients in residential settings. Caseworkers attribute drop to more contact with the facilities and clients. Team plans to concentrate on UIR protocol and request information from group homes be submitted on a more timely basis.

Ottawa/Princeton: Majority of UIRs were medical/surgical related. They do not note any trends.

Rockford: Rockford reported that their UIRs were mostly residential related and see no trend.

IFS: IFS reported eleven (11) UIR's with 6 indicated that included; 2 risk of harm, 2 lack of supervision, 1 medical neglect, and 1 child observed with cuts/bruises/welts. Team noted these indicated incidents were related to caregivers "under the influence", substance abuse. Team plans to discuss with families what defines "inadequate supervision."

Parenting: No UIRs this past quarter.

Treatment: Treatment is focusing on client safety. Hotline calls were made on three clients. Clients are reporting neglect or abuse in sessions. The report of inadequate supervision was investigated by DCFS within 24 hours. No trends reported.

RHY/TLP/HY/SO: Last quarter there were no reported UIRs, but summer is usually slow. Trend noted this quarter was increasing psychiatric admission.

Redeploy: No Report

Hispanic Services: No UIRs.

Administration: Dave Conrad reported two Worker's Compensation claims. One has been submitted, the other is still being documented. No trend was seen other than perhaps lack of concentration, no safety issues. A client grievance at administrative level was addressed and resolved. Last quarter there were no Workman's Compensation claims. No trends noted.

Office Support Staff: No UIRs.

Hope House: No UIRs reported. Team is just joining the CQI quarterly review and is learning the guidelines of reporting.

Outcomes:

	Aurora	Glen Ellyn	Ottawa/ Princeton	Rkfd	Totals
Total Outcomes Foster Care					
Return Home		7	7	7	21
Traditional					
HMR (Home of Relative)					
Guardianship		2			2
Adoption	2	3	2	3	10
After Care	1				1
Independence	1				1
Moves	7	15	6	16	44
Age Out				1	1
College				1	1

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Break out by offices:	Permanencies/Moves
Aurora Foster Care:	Moves reported included 2 moves from HMR to TRAD placement, 2 to home of relative, 1 hospitalization, one child jailed, and one on the run.
Glen Ellyn Foster Care:	Glen Ellyn reported 2 clients moved to residential, 7 were moved from TRAD placement to TRAD placement, 2 moved from HMR to HMR, one in shelter, one hospitalized, and one in treatment,
Ottawa/Princeton Foster Care:	Moves included two children being moved due to reported abuse, two foster parents gave notice, one shelter court ordered child to be moved, a father was paroled to the foster home.
Rockford Foster Care:	Rockford reported the following moves; 3 for siblings, 2 due to investigations, 7 as the result of foster parents giving notice, 2 were hospitalized, 2 were returned home, and one child went to college.
Intact Family Services:	IFS reported that 97% 81 of 83 families remained intact exceeding their goal. 83% were not subject to investigation. 95% of new cases were visited within the initial 48 hours. IFS has just begun using the “Dashboard” tool to monitor their effectiveness and will be focusing on identifying and using the information supplied.
Licensing:	The overall number of agency foster homes is down, but believe this is due to many homes being licensed at the very end of the month and the numbers did not reflect those submission. The licensing team is concentrating on meeting all standards for licensing homes and not pushing through homes. Last quarter 10 relative and 3 traditional foster homes were licensed. Percentage of HMR homes licensed was July 73%, August 77%, and September 78%; making steady progress toward benchmark of 90%. Biggest difficulty is uncooperative/resistant relative families and homes where there is a criminal history present. The inability to license those homes is being addressed by DCFS so as not to affect the ability to meet the goals.
Parenting:	In the first quarter of FY2015, there were 62 initial face to face intakes completed, however participants will not complete the program till the 2 nd quarter. Numbers reported are from 4 th quarter face to face intakes not completing the program until July/August. 39/59, 61% demonstrated increased knowledge in parenting skills. (Goal 70%) 32/36, 89% reported being satisfied or above with their progress. Trend noted are clients being referred without caseworker disclosing to instructors clients having outstanding warrants resulting in increased arrests during this program period. 39/59, 61% of clients graduated from the program in the 4 th quarter (Goal 60%). 98% of the 116 participants enrolled were not subject of indicated report for child abuse or neglect. There were no convictions of criminal offense during the service period in this parent education program. There were 18 discharges for attendance, active substance abuse, incarceration, domestic violence, and crisis pregnancy. 8 Classes were offered this quarter.
Treatment:	Treatment reported 108 clients were served and 80 were discharged during this quarter. 85% met, or partially met, treatment goals and 13% were unsuccessful. (Goal 70%) 2% moved or were not eligible. CGAS (Children’s Global Assessment Scale) outcomes indicated 60% decrease in trauma/stress related symptoms. Goal is 70% CGAS indicated there was an 80% increase in overall functioning. (Goal 70%) Trend noted is successful discharges the last two quarters.
RHY/TLP/HY/SO:	RHY achieved 92% permanency, 100% safety, 83% wellbeing, 82% no further involvement in juvenile justice, 100% no child welfare, and 83% completed community service. TLP had no new clients. HY there were no new figures to report. HY/SOP reported meeting the goal of 75% of youth completing the ACLSA and developing a service plan demonstrating positive incremental change at 3 months. 50% of youth with a completed service plan will achieve a permanent connection through being involved in community service activities and /or linkage to an adult mentor. Goal not met. 3 listed, 18 opened). 5/5, 100% of youth seeking emergency shelter will be offered it through placement in a host home or shelter (PADS). 7/7, 100% will have access to emergency needs through drop in centers or street outreach program. Goal met. 100% of youth in the SOP will be provided access to emergency medical and mental health care if requested. 7/7 Goal met (low). TLP reported 100% of residential clients accepted in the program will receive safe shelter in scattered site apartment. (0 clients opened) 100% of youth will be safe and stable at exit. (0 clients closed) 80% of residential

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clients will be working full-time or in a full-time educational program at exit. (0 clients closed) 90% of residential clients will be involved in community service learning projects. (5/5, 100%) 90% if residential clients will exit the program with a positive kinship connection. (0 clients closed)

- Redeploy: No report.
- Hispanic Services: Performance standards are set by Dept. of Human Services for this program. They are working on the goal of 12 new applications for the SNAP program per month. The New American Initiative goal is for 5 new applications for citizenship per month working with the Immigration Project of Bloomington. They exceeded the goals of the program grants.
- Administration: Frank Vonch reported in the last quarter 13 people left employment representing 8.5% of the workforce. The reason most left was for another job. TLP had the biggest turn over. Retention issues are being looked at agency wide. The financial report indicates the agency has a positive surplus at the end of FY2014.
- Office Support Staff: This quarter saw the merging of the office support staff CQI teams. Due to this change discussion centered about what processes the teams were tracking and measuring to see what we were doing in common and differently. There were 20 employees scheduled for computer training this past quarter and 19 completed for a score of 95%. (The one person missed has completed) There were 27 new outside service sub-contracts completed. Last quarter we had 16 new. There were 47 renewals. Files were reviewed for the presence of Social Security Cards, current pictures and birth certificates. Foster care teams are in the process of bringing the information up to date. The Princeton office foster care files are done being converted to the new format. The Ottawa office is next. (A new part-time file clerk will be handling Ottawa and Princeton filing.)
- Hope House: Served 7 families in the first quarter. Two completed court requirements, one lost visitation rights, and one family did not follow through with requirements of program. Three are still active.

Satisfaction Surveys:

- Aurora Foster Care: Aurora foster care distributed 43 surveys. Results were collected from 22. One parent survey reported negative feedback, 12 child surveys were positive, and youth surveys were split with 2 positive and 2 negative.
- Glen Ellyn Foster Care: Glen Ellyn reported that they have not gotten the jump on this. The foster care team is adopting an approach of having surveys with them and distributing the surveys at visits, family meetings, court, and any other meetings that include the clients.
- Ottawa/Princeton FC: There were 62 surveys distributed; 21 foster parent, 16 parent, 16 youth, and 9 child. Foster parents returned 17 (81%), parents 8 (50%), youth 11 (69%), and child 9 (100%). Foster parents are generally reported being happy, satisfied, and supportive. Parent's responses were varied; one response was very happy, one does not like name on paperwork, one felt the situation was a "nightmare for self and son." One youth reported visits with siblings were positive. Overall a higher number of surveys were distributed this quarter with a higher return.
- Comment: Peter Woodbine pointed out that part of the survey success by the Ottawa team is the supervisor's active interest and support of the caseworker's efforts to deliver and pick-up completed surveys.
- Rockford Foster Care: Eight (8) surveys were distributed; 5 parent, 1 youth, and 2 children. One response was negative, and four were positive.
- Intact Family Services: Eleven surveys were distributed this quarter and the responses were positive.
- Licensing: The survey details were not gotten from Jill Orr who surveys the foster parents. Jill has not reported any issues to the licensing team.

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- Parenting: Forty-five surveys were returned out of 59 that were distributed. 17 surveys were sent out to participants who were discharged with 9 being “return to sender.” 41/45 (91%) rated their overall experience as very satisfied or satisfied with the Parenting Education services. 35/45 (78%) indicated they *would* recommend the class to others. 4/45 (8%) said they would *maybe* recommend this class to other parents. 2/45 did not answer this question. The parenting program is looking into developing a preliminary survey form consisting of approximately five (5) random questions for clerical to do a phone survey for client satisfaction.
- Treatment South: Treatment south had forty-three (84 sent) adult surveys completed and thirty-five (94 sent) youth surveys completed. Two-thirds reported strongly disagree and overall surveys indicated strongly agree. Youth surveys overall indicated strongly agree. Goal is to have 80% of clients surveyed. The team will examine survey for possible revisions to be more program specific.
- Treatment North: 24/39 surveys were returned. While 2 surveys indicated strongly disagree, the majority of survey responses were neutral to strongly agree. Twenty-five children surveys were completed (21 child and 4 youth) and all responses were positive. Three children indicated they did not know why they were seeing the worker. Goal is to see 80% of clients surveyed, if not service tickets will need to be written documenting effort.
- RHY/TLP/HY/SO: Five adult surveys completed with most “strongly agreeing.” Five child surveys were completed with good responses. Six homeless youth were surveyed. Five surveys completed by Street Outreach Program. The Learning Place reported 5 surveyed with good responses. Next quarter RHY will concentrate on distributing more surveys.
- Hispanic Services: Hispanic Services completed development of survey and began implementation the last week of October.
- Hope House: Hope House has just begun implementing CQI procedures and does not have survey results at this time.

Record/Peer Reviews:

- Aurora Foster Care: Aurora reviewed 12 files. Peer reviews will be occurring monthly. Supervisor will choose files for review. Trends noted the same things missing from files; missing birth certificates and finger prints. Focus is to get that information up to date. The team will also follow up right away when assigned a new file or one is transferred in to be sure the required information is present.
- Glen Ellyn Foster Care: Glen Ellyn is reviewing 25 cases per quarter. Trend noted is missing birth certificates, current photos (SACWIS as well as file), and Social Security Cards. Team is concentrating a making sure this basic information is present. File review results to be followed up in supervision to be sure necessary additions/corrections occur.
- Ottawa/Princeton FC: Files were reviewed as follows: July – 3, August – 4, and September – 6. Trend indicated missing documents, especially fingerprints and the 407s. Team noted that file reviews need to get done and corrections completed within 30 days of review.
- Rockford Foster Care: Rockford’s record review showed missing finger prints and 407s. Caseworkers will be requesting 407s from the schools.
- Intact Family Services: IFS reported 22 files were reviewed. The Home Safety Checklist and Paramour Checklist were most often missing. The missing Home Safety is an ongoing issue that needs to be addressed.
- Licensing: Fifty files were reviewed in the first quarter. Trend noted was missing pet inoculation documents. Overall the files are in very good shape.
- Parenting: 121 files were reviewed this quarter. Trends noted were missing signatures of caseworkers on the referral consent forms. There was a 75% improvement on receiving paperwork from caseworkers prior to the client’s intake interview. It continues to be a challenge to get paperwork from caseworkers in a timely manner.

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Treatment South: Twenty-two files were reviewed. All corrections have been made

Treatment North: Twenty-five files were reviewed. Trend notes was expired consents/releases. All corrections completed. Treatment program is preparing for Medicaid Review in November.

RHY/TLP/HY/SO: Eleven files (100%) were reviewed and found to be in good shape.

Hispanic Services: Hispanic Services reported that they review files on a monthly basis

Administration: Dave Conrad reported that the recent CQI Review team conducted the exit interview. This preliminary review indicated the agency is good shape regarding their CQI process and supplied additional information to guide improvement. The DCFS fiscal audit occurred and the preliminary report indicated no major findings. The annual audit will be final in November. The employee 3 & 6 month evaluations are in process.

Office Support Staff: Staff is focusing on pulling cases within 30 days. Tracee/Liz can pull a closed case report and send to office support on a monthly basis.

Hope House: Reviewed seven files. It was noted that the Client Rights copy was not in file. They will be sure to keep signed copy moving forward.

Improvement Projects:

Aurora Foster Care: The installation of shelving in kitchen is an ongoing project. They are still working with IT regarding installation of wireless internet in office. A team building exercise was to participate in a 5k walk on a weekend.

Glen Ellyn Foster Care: Team attended a barbecue as a way of getting to know newer members of the team. They worked on a resource list. Next quarter they are putting together tags for Christmas Wish tree(s) for their foster care children and planning a team Christmas party as well as a cookie day.

Ottawa/Princeton FC: Team will help with the Ottawa area Christmas party for the foster children.

Rockford Foster Care: Fundraising for a foster care Christmas party, as well as a second printer for the office.

Intact Family Services: Working on a resource list for each office.

Licensing: Team reported one potential foster home was connected with at an event they had a table at in Plainfield. There is a possibility of two more. While they continue to identify events that they can use as outreach, word of mouth continues to be a source of potential foster homes. Team is participating in Orphan Saturday, exploring training to support foster families, meet in FH for informal meetings with families, and utilize outside volunteers.

Parenting: The team continues having a quarterly team lunch. They are continuing marketing efforts to increase community/agency awareness regarding the YSB Parenting Education Dept. in Freeport and Belvidere utilizing brochures and meetings. Trend noted: they experienced increased number of persons served in Freeport for the 1st quarter.

Treatment South: They are working on updating surveys and hope to implement in January 2015.

Treatment North: Lisa hosted a “self-care” outing at her home in September. Therapists attended a training “Therapeutic Intervention for Sexually Abused Children” in October 2104.

RHY/TLP/HY/SO: Team remodeled a bedroom for the HY Program (foster home). Kelly & Julie will be attending the National RHY Conference in November.

Hispanic Services: Participating in state and federal training. Team is working on a program brochure.

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- Administration: Agency received a new grant, DHS Homeless; it helps supplement RHY expand the ages of the children they are serving. Looking at building and seeking funding/grant to help utilize that structure. The Streator office has plumbing /electrical issues being addressed. An office clean-up day is scheduled as well on Nov. 7th.
- Office Support Staff: A new file clerk was hired for the Ottawa/Princeton offices. Issues with treatment service tickets need to be addressed as mileage for therapists is paid through those and accounting is not getting the information in a timely manner. Playrooms are not being cleaned up following visits and need better tracking of who is using. Fire/tornado emergency information needs to go in every office.
- Note: Service ticket issues need to be brought to the attention of supervisors and be addressed during supervision.
- Hope House: The facility needs to have carpet cleaned (has been arranged). New age appropriate games need to be purchased.
- Notes: CQI leaders were informed that programs should put together “wish lists” for their programs. This information will be placed on the website. When the agency is approached with the question as to what can be done to assist the agency, having specific needs to share with interested businesses/individuals is very important. This information will also be available on the website.

Closing Comments:

Frank Vonch expressed that he is appreciative of the time that staff sets aside for CQI as it is so important to the agency. We examine what we do as an agency and identify how to do things better. We have two challenges. One is that while you may do something 100%, you don't stop seeking ways to improve. Also, how do we improve the quarterly meeting? Anyone with ideas/suggestions should email their thoughts to Lee Hicks.

Next CQI Meeting: **January 30, 2015; 10:00 am**