

# YSBIV Performance & Quality Improvement 2019

## Annual Report

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YSBIV is a community-based agency, whose Mission is “to help young people and families succeed by serving them in their home, school, and community”. YSBIV strives to promote a culture that values quality and the efforts made to accomplish these performance results for the people we serve. The agency continues its efforts at improving the overall performance of its programs, and its function as an agency. The following is a summary of Quality Improvement efforts by the agency for 2019:

### **Agency Wide Continuous Quality Improvement (CQI) Process:**

The agency continues to engage in an agency wide and team level CQI process, with quarterly CQI team meetings and the quarterly agency-wide CQI meetings which occur with all the CQI team leaders. The CQI Executive Summary report is prepared, quarterly, and shared with the Board, Staff and posted on the agency website for stakeholders. The Q.I. Department continues to provide support and guidance to the CQI teams and their CQI Leader in this process and participates in each team’s CQI meeting. The Q.I Department imports and downloads the IL DCFS Dashboards for the Foster Care and Intact Programs. Quality Improvement also monitors the data on permanencies achieved, to ensure the agency’s data is accurate.

Quality Improvement participates in the monthly Administrative Team meetings, and reports on the ILDCFS Dashboard progress, and any other related COA or quality improvement items. The Administrative Team meeting minutes are posted on the internal agency website, to promote communication and transparency.

### **Outcome Measures, Analysis and, Improvement Planning:**

Each program has established outcome measurements, and tools for collecting this data. The program outcome data is reviewed and discussed during the quarterly team meetings. Each program’s data is recorded in the Program CQI Reports. Several programs have routinely met their outcomes in most areas. Data generated from the internal database continues to be monitored for its validity.

The IL Department of Children and Family Services placed a moratorium on issuing levels for the Performance Dashboards in the Child Welfare programs. The data continued to be provided through the Dashboards and the agency monitored its own progress in meeting their outcome goals, especially as it relates to contact with children, parents and caregivers. New IL DCFS Dashboards are to be release in the future with a focus on more qualitative data versus just quantity, the release date is unknown.

In January 2019, a Corrective Action Plan was put in place for a specific Child Welfare team due to findings from audits by an IL DCFS Agency Performance Team monitor. The plan included items related to required contact with children in relative foster homes, traditional foster homes, interviewing child outside presence of caregiver, completion of necessary safety assessments, safe protocols such as Safe Sleep, and the quality of documentation. The plan was shared with all the Foster Care supervisors and were asked to review contact requirements with foster children in their team meetings. Safety Protocol brochures were obtained for all offices, and staff were asked to distribute to clients as necessary. The first documentation training was held on 5/8/19 in Rockford with the Foster Care and Intact workers to review importance of documentation and necessary elements required in documentation. It is planned to present this to all the child welfare teams. The corrective action plan remains in effect and will be re-evaluated in 2020.

The Intact Program underwent a partial audit for compliance with completing required assessments on time, required contacts with children and parents, and documented contacts with providers. Initial results show a deficiency in completing safety assessments and service plans in the required time-frames, contacts with providers. Case notes were found to lack important details. Results were shared with the respective supervisors. The Corrective Action Plan implemented in January 2017 for the Intact Program that addressed case documentation, casework practice, increased home visit requirements with children ages 0- 5yrs, and a case closing protocol remained in effect throughout 2019. The IL DCFS Intact Family Services program plan implemented a significant change in required visit timeframes and quantities. All though the Dashboards do not reflect this change, the agency is following the program plan requirements. The corrective action plan will remain in effect in 2020 and be re-evaluated throughout the year based on audits.

The Staff Service Committee met 3 times in 2019, January, March and April. Many of the issues presented were resolved, and no new suggestions were being presented. In May 2019, it was decided to place the committee on hold, and re-evaluate its structure and purpose. Suggestions from the office Suggestion Boxes will be collected by Q.I. and presented at the Admin Team meeting for review. Office maintenance and repairs continue to be reviewed through the monthly checklists and are shared with the Facilities Coordinator. Requests for client assistance through the Board Special Assistance Fund, will continue to be reviewed by this committee through email distribution.

The Woodstock office, that serves the McHenry County area, moved to a new location in Crystal Lake, that offered more efficient space, that included a private parent-child visiting room, a private conference room, and a dedicated secure room for file storage. The office expanded the staff to include Foster Care workers in addition to the Intact Family Services workers, to meet the needs of the growing number of cases in the McHenry County area, more effectively.

The Glen Ellyn office that served the DuPage County area was closed on 12/12/19 and consolidated with the Aurora office location. This consolidation enhanced staffing alternatives and costs savings and did not impact on the agency's ability to continue to provide services to clients in the DuPage County area.

A Marketing and Development Associate was hired in June 2019 for the Northern Region to assist with fundraising in this area. Overall the Marketing and Development Department was able to secure new donors for the agency to benefit clients this past year. The agency saw an overwhelming positive outpouring of response for the holiday gift drive for children and families.

### **Information and Technology:**

The agency has been working on replacing and upgrading copiers and printers in various area offices as needed.

The HR Department continues to do the newsletter, entitled News You Can Use, that goes out quarterly to highlight HR policies, announcements, and reminders.

The Marketing Department continues to put out the Because of You Newsletter and will be highlighting staff persons in the upcoming issues in 2020.

## **Training and Staff Development**

The agency offered one agency sponsored training this year entitled: Mass Violence, Risk Identification, Intervention Strategies for potentially violent clients and treatment techniques for survivors presented by Kathryn Seifert, psychologist. This training was offered to all direct service staff and supervisors. It occurred on 10/30/19, by video conference in the Ottawa office. It was attended by approximately 16 staff persons.

An All Staff Gathering occurred on 7/29/19, in DeKalb, where staff were able to bowl and play games with goal of getting to know staff from other offices. Presentations were made to staff for benchmark Years of Service. A short presentation about the upcoming COA re-accreditation was also provided.

An All Staff Development Day is planned for March 6<sup>th</sup>, 2020 to involve the staff the agency strategic planning for 2020. A Strategic Planning Committee was formed with staff who have been with the agency at least 3-4 years, and the first meeting occurred on 12/12/19. The Strategic Planning process was launched on 12/18/19 with the staff, and invited all staff to provide ideas for long term, 4 year, goals to be used in the development of the agency's new Strategic Plan.

A Training Needs survey was conducted in October 2019 to help identify training needs or wants at the agency level and the program level. Results have been shared with the Admin Team, and respective program supervisors. The agency trainings for the upcoming year will focus on worker safety in the workplace, working with difficult clients and de-escalation techniques, as budget and resources allow. Confidentiality was also rated high, but this will be dealt with at the program level.

A Staff Satisfaction Survey was completed in November 2019, and the results showed mostly positive results, with the staff feeling satisfaction in their job at 91% yes, out of 100 responses. Areas for improvement include having regular meetings with supervisors where 15% said it was not occurring, 22% indicated that the agency need quicker resolution of employee issues, and 20% indicated they felt undervalued as an employee.

### **Maintain the agency's compliance with COA standards, policy and procedures:**

The Q.I. Department completed the Maintenance of Agency report in October 2019 as required by COA. The Q.I. Department is responsible for filing required COA Self-Reports, should the situation arise. No Self-Reports incidents occurred this past year. A Concern Report was falsely filed with COA using the Director's name, and this was addressed.

The agency is due to be re-accredited in October 2020, with a site visit scheduled for August 24, 2020. The agency has begun its COA re-accreditation process and is working on the agency's self-study. The agency has been exploring ways to implement the new required policies such as vehicle inspections and annual driving records for staff who transport clients. The goal is to implement this within the first few months of 2020. The agency will be reviewing other major policies relating to worker safety, drug-free work place and such. The Annual Risk Assessment will be completed by the end of January 2020, with a preliminary assessment of low risk.

**Summary:**

The Agency's CQI process remained consistent this past year, and all teams participated in the quarterly team meetings, and in the Agency-wide CQI Meeting. The agency will continue to work towards improving our internal processes and reviewing its policies as it prepares for and completes the COA self-study.

The agency will continue to focus on improved documentation in the child welfare programs and monitor the progress. The agency will continue to its focus on Staff Development as the budget allows.

Respectfully Submitted,

Sherri Nestmann, Q. I. Director  
Quality Improvement Department