

YOUTH SERVICE BUREAU OF ILLINOIS VALLEY

AGENCY WIDE CQI MEETING

EXECUTIVE SUMMARY

2ND QUARTER (OCTOBER, NOVEMBER, DECEMBER)
FY' 2020

On 2/14/20, an Agency Wide CQI meeting was convened to review the information and data gathered at the program level CQI quarterly meetings. All programs and most CQI Teams were represented. The meeting focused on the qualitative analysis of the data used to implement quality improvement in the programs with an emphasis on identifying trends or opportunities for improvement and developing plans or strategies to address the trends/opportunities identified by the data.

This summary represents a snap shot of the agency's efforts at Quality Improvement for the 2nd Quarter of FY 2020, with a comparison to the 1st Quarter of FY 2020. Quality Improvement category reviewed by the agency: Unusual Incidents, Accidents and Grievances, Outcomes, Surveys, Peer/Record Reviews and Improvement Projects. This report may or may not capture every program's report for this quarter. Only significant trends and actions/strategies are cited in the various categories of Quality Improvement.

The agency operates the following programs: Homeless Youth and Runaway Youth/Crisis Services, TLP, Redeploy, Second Chance, JSOP, Hope House, Treatment (Solutions Counseling, Child First and Medicaid), LADD, Hispanic Services, Foster Care, Specialized Foster Care, Licensing, Intact Family Services, and the Parenting Program.

A. UNUSUAL INCIDENTS, ACCIDENTS AND GRIEVEANCES (UIR's):

Program	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Total (FY 20)
FC – Aurora/Glen Ellyn	7	8			15
FC – Ottawa/Princeton	64	61			125
FC – Rockford/Specialized FC	42	42			84
FC – Crystal Lake/Aurora	0	0			0
Intact Family Services	26	25			51
Licensing	11	6			17
Parenting	1	1			2
Treatment	3	4			7
RHY/TLP/HY	3	4			7
Redeploy/Juvenile Justice	2	4			6
Hispanic Services	0	0			0
Administration	1	1			2
Hope House	1	0			1
Office Support	0	0			0
Totals	161	156			317

Summary:

In comparing the number of UIR's reported from the 2nd Quarter of FY'20 to the 1st Quarter of FY'20, it is noted that there was a slight decrease in the number of UIR's. The youth with specialized needs continues to experience the most UIR's. Many of the UIR's were attributed to youth who are refusing medications, aggressive behaviors, and short-term elopement. These youth are in residential setting with highly specialized needs. The majority of the UIR's reported continues to remain from Child Welfare Services that include Foster Care, Licensing and Intact Family Services. Most significantly, in the Foster Care Program overall, residential incidents remain the highest category. The teams continue to step up contact with the older youth in their placement settings and with the residential facilities. The teams recognize that many of these youth have mental health diagnoses, and will work to ensure that their services and treatment plans are appropriate. There are 2 youth in care with severe needs and have been approved for out of state placements. Until placements have been identified, and they have relocated, they will continue to generate a large number of UIR's in their current placements.

The Intact Family Services continues to see an upward trend of abuse/neglect incident reports, and an increase of the reports being indicated for the abuse/neglect. The complexity of Intact Family Services cases has increased, and IL DCFS

continues its efforts to attempt to avoid placing children in foster care. Since the beginning of this fiscal year, the agency has received more cases that have been deemed as high risk from the onset of referral. This last quarter the agency has seen an increase in the number of Intact Family Service referrals overall with recent change in DCFS policy regarding when to refer families to the Intact Family Services.

The Licensing Unit saw a decrease in the investigations this past quarter, and many were found to be unsubstantiated.

The category of abuse/neglect and psychiatric assessment also remains a recurrent trend in the other programs, as previously reported.

The agency continues to experience discrepancies in the number of UIR's reported at the CQI team meetings and what is being reported by the UIR report generated by the Data Entry staff, but the numbers are getting closer to being more accurate. Supervisor's are making a concerted effort to ensure the UIR's are being submitted in a timely fashion. For the purpose of this report, the data reported was obtained from the CQI reports, as this number appears more accurate as to the true number of UIR's.

There were no Critical Incidents as defined as a serious occurrence, accident, grievance that involves a threat of harm, death or serious injury that were reported in this last quarter.

B. PROGRAM OUTCOMES:

Summary:

A majority of the programs are meeting or exceeding their established program goals and outcomes. The number of clients served in the agency program's remains relatively stable as compared from the 1st Quarter FY'20 to the 2nd Quarter FY'20. The largest program based on the reported number of clients remains the Foster Care program with a 2nd Quarter end of 382 children in care, including 17 specialized children. The Department continues to shift its focus on trying to keep families intact, also creating an increase in Intact Family Services referrals.

The Foster Care Program's performance in the IL DCFS Dashboards ended the 2nd Quarter FY'20 at a Level 2 with a high permanency rate. The Illinois Dept. of Children and Family Services continues its focus on increasing the number of children returned home within 12 months of entering foster care. The agency is seeing an increase in the number of return home goals achieved. At the end of the 2nd Quarter, there were 28 return homes, 22 adoptions and 9 guardianships. IL DCFS continues to look at revising the Dashboard outcome measures with a shift towards more quality related outcomes versus solely compliance outcomes.

The Intact Family Services program continues to work on improving their performance and ended the 2nd Quarter at a Level 3 as established by the IL DCFS Dashboards, one level down from the previous quarter. The program remains on an internal Corrective Action Plan that was initiated in January 2017. The agency continues to focus on ensuring the required Safety and other assessments are being completed at the required intervals. The agency will continue to monitor the Dashboards especially as it relates to the required contacts with children and caregivers. Changes were made to the IL DCFS Program Plan for Intact family Services for FY 2020 increases the number of required weekly visits to the home at the beginning of the case and has added a High-Risk case category, which requires more intensive contact. The IL DCFS Outcomes for the Intact Family Services program are also undergoing revisions.

The Treatment Program reports the total clients served in the 2nd Quarter FY'20 were 275, almost the same as the previous quarter. Clients who are self-pay and insurance cases make up the majority of the clients. The program reports that the goal of 70% of clients will see trauma symptom reduction was not met at 66%, and the 70% goal of successful discharged was met at 80%.

The Hispanic Services program contract established goals have been revised with a new Dashboard in assisting participants the SNAP and Medicaid program. The program underwent a site visit on 12/19/19 from the Immigrant Family Resource Program (IFRP), and its findings supported that the program is needing to increase the number of applications completed and approved for SNAP. It is also recommended that program increase the amount of information and referral activities, flyer distribution and interpretation. The program is now looking at how they are recording contacts to ensure that they are properly coded in the new IFRP database, as previously the program was

meeting its goals as required by the funding source. An improvement plan was requested by the IFRP and will be reviewed again prior to the end of the next quarter.

The Youth Outreach/Runaway Homeless Youth (RHY/TLP) programs reported the following outcomes for their program goals: Permanency (90%) met at 96%; Safety (95%) met at 100%; Functioning (80%) met at 92%; Child Welfare (90%) met at 90%; Juvenile Justice (85%) met at 100%; and Community Service (80%) at 100%.

The TLP program reports meeting the goals in Permanency, Well-Being, and in Community Service at 100%. It did not meet the goal of Safety at exit with 0% as one client was removed from the program, and not successfully discharged. Only 88% was achieved for Connection with a Positive Kinship but did not meet the goal of 90%.

The Parenting Program reported 51 participants had been initially enrolled to graduate in December 2019. Of the 51 enrolled, 41 enrollees graduated as anticipated, resulting in an 80% graduation rate. Of the 41 graduates, 90% saw an increase in knowledge based on pre and post-tests. The remaining 10 had been previously discharged from the program. Discharges were attributed to clients withdrawing from services, substance abuse issues, mental health, emotional and cognitive issues. The staff continues to see an increase in the number of clients with literacy issues and have attempted to address this with individualized help in between classes.

Hope House met the program goals of completing 100% of all scheduled visits, and no visits were terminated before the scheduled time.

The ReDeploy/Second Chance-Juvenile Justice programs continue to see positive outcomes with 100% in Successful completion, 100% Avoid Incarceration, 100% Increased YASI scores (improved functioning), and 100% in Life Goal accomplishments.

C. SURVEYS:

Program	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Totals (FY'20)	
FC –Aurora/Glen Ellyn	0	0			0	
FC – Ottawa/Princeton	3	25			28	
FC – Rockford	0	0			0	
FC – Specialized	0	0			0	
Intact Family Services	27	12			39	
Licensing	24	8			32	
Parenting	27	41			68	
Treatment	49	35			84	
RHY/TLP/HY	51	43			94	
Redeploy/Juv. Justice	6	4			10	
Hispanic Services	0	5			5	
Hope House	1	0			1	
Admin	10	3			13	
Support Staff	6	18			24	
Totals	204	194			398	

Summary:

Surveys continue to be distributed and completed across the programs with generally positive comments towards the work being done at YSBIV. There was a slight decrease in the number of reported completed surveys this quarter. There still needs to be an increase in the number of surveys completed in the child welfare programs. The agency will continue to look at other ways to distribute surveys to allow for a higher return rate in these programs and has implemented an on-line survey for biological parents serviced in the Foster Care program and the Intact Family Services Program. This will continue to be monitored to see if it is a viable way to have parents participate in surveys versus paper surveys. Some teams will continue to use paper survey as their clients lack access to on-line surveys. The Licensing Department began using an on-line survey for foster parents in the 1st Quarter saw a significant increase, but not in the 2nd Quarter. The HR Department continues its efforts at increasing the number of exit interviews with employees at termination of employment.

A Training Needs Survey was completed in this quarter, looking for input on overall agency training topics and program specific training topics from staff. The areas most identified for the overall agency training included staff/client safety in the workplace, managing and engaging difficult clients, and de-escalation techniques. These will be incorporated into future trainings. Program specific training ideas were sent to the respective Supervisors and Program Directors.

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, and 22% indicated that the agency need quicker resolution of employee issues, and 20% indicated they felt undervalued as an employee.

D. PEER/RECORD REVIEWS:

Program	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Totals (FY'20)
FC –Aurora/Glen Ellyn	22	15			37
FC – Ottawa/Princeton	37	27			57
FC – Rockford	18	13			31
FC- Specialized	0	0			0
Intact Family Services	14	19			33
Licensing	46	24			70
Parenting	10	6			16
Treatment	15	15			30
RHY/TLP	42	48			90
Redeploy/Juvenile Justice	6	6			12
Hispanic Services	104	95			199
Administration	13	7			20
Hope House	2	2			4
Totals	329	277			599

Summary:

The Peer Reviews continue to occur in most of the programs with a review of open and closed cases, and there was a decrease in the number of files reviewed this past quarter. Many of the programs report that the files reviews indicate most files are found to be in compliance. The Foster Care Program shows deficiencies in medical documentation with several teams, and the lack of Foster Child Bill of Rights in the files. Intact Family Services shows deficiency is medical and educational reports for the children.

E. IMPROVEMENT PROJECTS:

Summary:

There was an agency wide effort at collecting and distributing holiday gifts for all clients in need throughout all programs. There was an overwhelming positive response from the community in donating gifts for the agency. Several offices had holiday lunches/gatherings to boost morale and peer support.

As part of the Strategic Planning process, all teams collected ideas for the long term goals to be included in the agency’s upcoming Strategic Plan. This was led by the CQI Leaders and was the focus of their improvement projects for the quarter.

The Admin team is still looking to have the curtains replaced in the Princeton office. The file cabinets have been obtained and need to be brought over to Princeton office. The Admin team will be looking at other options for a LaSalle space. An inventory of the Glen Ellyn office has been done, a list of available items has been sent out to programs and other offices. Items will be delivered through Two Men and a Truck.

During this meeting, all programs were asked to briefly share what their program does, as it was noted in recent surveys and feedback form the Strategic Planning process that there are staff who unaware of all the programs offered in the agency. The agency covers a wide geographical area, and some programs are only offered in select locations, while other programs are in every area such as foster care and treatment.

Every program was also asked to share a short positive story, act or outcome, this proved to be a helpful exercise in looking at the work they have accomplished. We will continue to incorporate into this meeting.

All programs are working on completing their COA self-study and will be a focus over the next several months.

Comments/Announcements:

An announcement was made regarding the agency's upcoming Strategic Planning Meeting set for March 20th, 2020, and a reminder to RSVP to Lauren Beck. If a worker has a conflict with court or ACR, or pre-approved day off, they can be excused from attendance with their supervisor's approval. A thank you went to all the CQI Leaders for their assistance in the exercise of collecting ideas for the upcoming Strategic Planning meeting. The agency had an excellent response and participation from all the teams.

The Director emphasized the importance of the CQI process and expressed his appreciation for the efforts out into the process.

The Director reminded all the CQI Leaders about the importance of communication, and emphasized that if any staff person has a concern or question, it should be brought to their supervisor's attention, and an answer will be given to these concerns.

Analysis and Recommendations:

After review of all CQI categories in the reports submitted by each program, the following observations, analysis and recommendations are noted.

In reference to number of UIR's generated in the Foster Care unit, the highest number remains with youth in residential settings. Strategies remain for increased contact with the clients, efforts at identifying client specific triggers of negative behaviors, and modifying services to minimize these triggers. The number of UIR's for Abuse/Neglect remains constant and the Licensing Unit continues to focus on educating foster parents on appropriate discipline and supervision. The collection of data remains inconsistent between the central office and what is reported at the CQI meetings, but the numbers are getting closer to be more accurate.

The programs across the agency remain focused on meeting and/or exceeding their program goals and/or established outcomes, many of which are determined by program contracts or plans. Each program needs to ensure that their data collection is valid and a consistent method for aggregating the data is in place.

It continues to be recommended that all programs continue their efforts at distributing surveys on a consistent basis, and the agency has explored other means of distributing survey to obtain a higher participation in some of the programs that are struggling.

With regards to Peer/Record Reviews, all programs should adhere to the agency and COA requirements that the review be conducted by peers, and supervisors should not be reviewing files when they supervise cases being reviewed. To maintain the integrity of the process, case files are being chosen at random via the agency's internal client information system.

The agency continues its commitment to move forward in the, ongoing, Continuous Quality Improvement process with a focus on using the data collected to identify areas in which to improve services to the clients.

Upon review of the UIR's and other information contained in the categories of review, it is assessed that the agency is experiencing a low potential for risk in the 2nd Quarter of FY'20. All recommended strategies developed by the program level CQI teams should be implemented and monitored for improvements.

Respectfully submitted,
Sherri Nestmann
Quality Improvement Director

3/24/20