

# YOUTH SERVICE BUREAU OF ILLINOIS VALLEY

## AGENCY WIDE CQI MEETING EXECUTIVE SUMMARY 4<sup>TH</sup> QUARTER (ARIL, MAY, JUNE) FY' 2021

On 8/13/21, an Agency Wide CQI meeting was convened to review the information and data gathered at the program level CQI quarterly meetings for the 4<sup>th</sup> Quarter FY 2021. 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 4<sup>th</sup> Quarter of FY 2021, with a comparison information from the 3<sup>rd</sup> Quarter. Quality Improvement categories reviewed in the CQI process include: 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, and Medicaid), LADD After School Program (current on hold due to begin in August 2021), 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 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total (FY 21)
FC – Aurora			21	10	31
FC – Ottawa/Princeton	Source	Source	9	16	25
FC – Rockford/Specialized FC	Agency	Agency	9	12	21
FC – Crystal Lake	UIR	UIR	4	4	8
Intact Family Services	Report	Report	17	17	34
Licensing			7	6	13
Parenting			1	0	1
Treatment			4	3	7
RHY/TLP/HY			2	0	2
Redeploy/Juvenile Justice			1	0	1
Hispanic Services			0	0	0
Administration			2	0	2
Hope House			0	0	0
Office Support			2	0	2
<b>Totals</b>	<b>56</b>	<b>34</b>	<b>79</b>	<b>68</b>	<b>237</b>

### Summary:

The number of reported UIR's is much lower in comparison to past Fiscal year end totals that were generally much higher by the 4<sup>th</sup> quarter at around 500 UIRS reported, and it is unclear if they continue to be under reported or due to the pandemic and decreased in-person contact from all providers that less incidents were observed. With in person contact increasing and children returning to school, the agency may see an increase with the 1<sup>st</sup> quarter of FY 2022.

The majority of the UIR's reported continues to remain primarily 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 youth with the highly 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. Due to the pandemic case worker in-person contact was severely diminished for this category of youth as they lived in congregate care settings that did not allow workers to visit in person. The requirement for in-person contact with all child welfare programs

has resumed to normal expectations for the next quarter. The foster care teams recognize that many of these youth have mental health diagnoses and the pandemic restrictions were particularly hard on this population.

The Intact Family Services continues to see steady trend of abuse/neglect incident reports however this quarter saw a decrease in the number of the reports being indicated for the abuse/neglect and a decrease in cases disrupting. 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 the fiscal year 2021, there has been a significant increase in the number of foster care placements. The Licensing Unit saw a slight decrease in the investigations this past quarter, and many were found to be unsubstantiated.

The category of suspected abuse/neglect and psychiatric assessment/hospitalization remains a recurrent trend in the other programs such as Treatment, RHY, TLP and ReDeploy/Second Chance. The Treatment Program has gone back to almost all sessions being in-person and anticipate this will impact on an increase of the number of UIR's reported.

The agency continues to monitor 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. Staff will also be reminded that all UIR's must be submitted to Data Entry and the Director for review. 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 continue to meet or exceed their established program goals and outcomes. The number of clients served in the agency program's remains relatively stable with a significant increase in the number of foster children being served, with a 4<sup>th</sup> Quarter FY 2021 end of 613 foster children including 22 specialized children. At the beginning of the fiscal year (452 foster children including 23 specialized) the agency saw a dramatic increase in referrals that has continued throughout this fiscal year. Some programs did see a slight decrease with the COVID pandemic, but numbers are increasing as the COVID restrictions have eased. The agency continues to maintain protocols for contact with clients in and out of the office; protocols are adjusted as they are recommended by the CDC and current circumstances in the services areas of the agency.

The Foster Care Program's performance in the IL DCFS Dashboards ended the 4<sup>th</sup> Quarter FY'21 at a Level 2 and met the goal of permanency with 43%. 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 and completion of adoptions. Adoption and guardianship permanencies slowed as a result of limited court access during the pandemic and stay at home orders. Despite these obstacles, the agency saw a significant increase in the number of return home goals achieved with the highest number ever recorded for the agency. At the end of the 4<sup>th</sup> Quarter there were 118 return homes, 37 adoptions and 18 guardianships. IL DCFS continues to look at revising the Dashboard outcome measures with a shift towards more quality related outcomes versus solely compliance outcomes for both foster care and intact family services.

The Intact Family Services program continues to work on improving their performance and ended the 4<sup>th</sup> Quarter at a Level 3, meeting 5 of 10 measures as established by the IL DCFS Dashboards. The program overall did see an increase in the measures met. 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, collateral contacts are to documented, and all cases are reviewed by the Q.I. Department prior to closure. The agency will continue to monitor the Dashboards especially as it relates to the required contacts with children and caregivers.

The Treatment Program reports the total clients served in the 4<sup>th</sup> Quarter FY'21 was 257. Clients who are self-pay and insurance cases make up the majority of the clients. The program reports that the goal of the 70% goal of successful discharged was met at 87%. The IM-CANS data tracking system is still in the process of making changes and reduction in trauma outcomes are not available this quarter. The program continues to offer services through tele-therapy for those that prefer, but a majority of the therapy is now in-person.

The Hispanic Services program contract established goals have been revised with a new Dashboard in assisting participants the SNAP and Medicaid program. The program has met and exceeded many of the goals despite obstacles with COVID 19, and served 707 clients. They provided drive up services for many clients, or meeting with the clients

where they are as opposed to the office, as the clients generally have limited access to technology for virtual services. The program was recognized for its efforts of providing services during the height of the pandemic, its work with COVID 19 vaccination events, and providing mass outreach.

The Youth Outreach/Runaway Homeless Youth (RHY/TLP) programs reported the following outcomes for their program goals: Permanency (90%) met at 100%; Safety (95%) met at 100%; Functioning (80%) met at 80%; Child Welfare (90%) met at 96%; Juvenile Justice (85%) met at 90%; and Community Service (80%) at 71%.

The TLP program reports meeting the goals in Permanency, Safety, Well-Being, and in Community Service at 100%. It did not meet the goal of Connections with positive kinship with 0% which may be impacted by COVID 19 pandemic. The program will continue to encourage clients to develop and foster positive kinship relationships.

The Parenting Program reported 42 participants had been initially enrolled in the program this last quarter, however at the end of this quarter 11 had been discharge unsuccessfully from the program for various reasons. The remaining 31 clients are anticipated to graduate in the 1<sup>st</sup> Quarter of FY 2022. This program has adapted its services to provide the classes virtually through Zoom and other technology.

Hope House met the program goals of completing of all scheduled visits at 100%, and 100% of the visits were not terminated before the scheduled time. This program has seen a decrease in court referrals and appears directly related to COVID 19 restrictions on face to face contacts, as the restrictions ease up, it is hopeful more referrals will be received.

The ReDeploy/Second Chance-Juvenile Justice program reports the following outcomes: 100% in Successful completion, 100% Avoid Incarceration, 100% Increased YASI scores (improved functioning), and 100% in Life Goal accomplishments. The ReDeploy/Second Chance saw a significant increase in their outcomes this quarter, and attribute this to the increased in-person contact and support to these youth that struggle with at risk and oppositional behaviors.

The LADD Afterschool program has not been operating with the COVID 19 pandemic as schools were not operating in-person learning for much of the time, however this program is set to resume the afterschool program in August 2021 when school begins in the area.

**C. SURVEYS:**

Program	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3rd Quarter	4th Quarter	Totals (FY'21)	
FC –Aurora		COA	0	3	3	
FC – Ottawa/Princeton			0	0	0	
FC – Rockford		Surveys	0	0	0	
FC – Crystal Lake			0	0	0	
Intact Family Services		Completed	13	17	30	
Licensing	13		27	8	48	
Parenting		By	38	0	38	
Treatment			16	58	74	
RHY/TLP/HY		Clients	8	31	39	
Redeploy/Juv. Justice			8	4	18	
Hispanic Services			0	33	33	
Hope House			2	1	3	
Admin			6	6	12	
Support Staff			0	0	0	
<b>Totals</b>	<b>13</b>	<b>255</b>	<b>118</b>	<b>161</b>	<b>553</b>	

**Summary:**

Survey distribution slowed quite significantly during the pandemic, as the surveys are often distributed in person. As the agency has moved to more in-person contact with services, the number of surveys completed has increased.

The agency needs to see an increase in the number of surveys completed across the programs, especially the child welfare programs. The agency will continue to look at other ways to distribute surveys to allow for a higher return rate. The agency maintains an on-line survey for biological parents serviced in the Foster Care program and the Intact Family Services Program in addition to paper surveys. The HR Department continues its efforts at increasing the number of exit

interviews with employees at termination of employment. All programs have been requested to focus on the survey distribution effort.

The Training Needs Survey and Staff Satisfaction Survey will be completed in the coming months, more than likely this fall.

**D. PEER/RECORD REVIEWS:**

<b>Program</b>	<b>1<sup>st</sup> Quarter</b>	<b>2<sup>nd</sup> Quarter</b>	<b>3<sup>rd</sup> Quarter</b>	<b>4<sup>th</sup> Quarter</b>	<b>Totals (FY'21)</b>
FC –Aurora	0	0	7	10	17
FC – Ottawa/Princeton	14	0	0	14	28
FC – Rockford	12	0	0	4	16
FC- Crystal Lake	0	0	59	7	66
Intact Family Services	19	12	18	20	69
Licensing	0	0	25	27	52
Parenting	14	5	10	8	37
Treatment	41	0	41	13	95
RHY/TLP	20	0	28	44	92
Redeploy/Juvenile Justice	27	13	8	4	52
Hispanic Services	73	41	130	75	319
Administration	0	0	4	0	4
Hope House	0	0	0	2	2
<b>Totals</b>	<b>220</b>	<b>71</b>	<b>330</b>	<b>228</b>	<b>849</b>

**Summary:**

The Peer Reviews are now being done in most of the programs. Many of the programs report that the files reviews indicate most files are found to be in compliance. The Foster Care and Intact Family Services Program did show deficiencies in documentation in the files with several teams and indicated the need to print documents located with the electronic file for the paper file. This has been attributed to limited presence in the office, in person, during the pandemic. They are working to correct this deficiency. The Foster Care program has suffered staff shortages as well increased caseloads, and Peer Reviews have been slowed due to time constraints as well.

**E. IMPROVEMENT PROJECTS:**

**Summary:**

The agency continues to conduct improvement activities and is now back on the regular schedule of quarterly team meetings. The agency will begin reviewing and focusing on the Strategic Plan developed in August 2020, and the committee is set to meet in August 2021. The agency completed the required Maintenance of Agency (MOA) for COA as required at the end of the fiscal year.

The Admin team is making building improvements with the replacement of windows, doors and siding in some areas of the Ottawa Main office building, owned by the agency. The fence has been replaced in the back area of the Ottawa Office. The Admin team continue to look at other options for the LaSalle and Princeton office space as staff numbers have increased in these offices.

The Child Welfare teams are focusing on improving their files and finding better ways to distribute surveys. The Licensing Unit is working on updating their file review tool, and developing a training library for foster parents to access through the website. The Hispanic Services Program is looking at developing a Facebook page to promote the program’s services and access to public benefits. The RHY/TLP programs is looking to recruit more Crisis Foster Homes and will be working together to develop a presentation and recruitment strategies. A worker has been hired to fulfill the duties of a Crisis Foster Home recruiter. The Parenting Program continues at adapting their curriculum for on-line classes and adjusting as warranted. The ReDeploy/Second Chance program will be implementing the after school mentoring program for their clients, this is set to begin in late August 2021 as school begins again, many of the clients are behind in their learning with the pandemic. Hope House will focus on marketing the program as there has been a decrease in referrals with the pandemic.

**Comments/Announcements:**

Staff Driving Record Abstracts requests were discussed, and all staff will be requested to obtain their driving abstract as this is required by the agency for various risk management reasons and is part of agency policy.

The Staff were commended by the Director for all the efforts that have been put in by workers during this past year in the pandemic. The Director stated the agency does what it can when it is possible to pass along extras to the staff, this fall all employees who have a 401K set will up will receive a distribution, if an employee has not set one up, they need to contact Joyce Garbs, HR Director, for more information. The Director emphasized again the importance of the CQI process and expressed his appreciation for the efforts put into the process. He offered to answer any questions, or address any concerns, none were brought forward.

**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, the Foster Care unit has the highest number, and mostly pertain to 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 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 4<sup>th</sup> Quarter of FY'21. All recommended strategies developed by the program level CQI teams should be implemented and monitored for improvements.

Respectfully submitted,

Sherri Nestmann  
Quality Improvement Director

8/25/21