

AGENCY WIDE CQI/EXECUTIVE SUMMARY  
4<sup>TH</sup> QUARTER – FY2014

Attendance:

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

This summary represents a snap shot of the agency’s programs performance for the 2<sup>nd</sup> 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):

Ottawa Admin	0
Aurora Foster Care	10
Glen Ellyn Foster Care	59
Ottawa Foster Care	4
Rockford Foster Care #1	12
Rockford Foster Care #2	3
Intact Family Services	12
Licensing	12
Runaway and Homeless Youth	0
Parenting	0
Ottawa/North Staff Support	1
Treatment North	1
Treatment South	1
Redeploy	4
Outreach	0

Incidents, accidents, client grievances & UIRs – **Aurora** reported ten (10) incidents. Three (3) hotline calls by a child were all unfounded. There was one (1) ER visit, five (5) children removed from homes for abuse, one (1) child reported for psychiatric issues, one (1) involved in car accident, one (1) child arrested, and two (2) were reported as runaways. **Glen Ellyn’s** fifty-nine (59) reported UIRs were all related to five (5) children currently in residential with the exception of one (1), which was an arrest. After review of the situation, the Glen Ellyn team determined that more contact with the group homes and the children in residence was needed. Due to the large volume of UIRs there is a need to concentrate on UIR protocol as well. **Ottawa** reported four (4) UIRs with two (2) being medical emergencies, one (1) removal from relative foster care placement, and one (1) hospitalization. The **Rockford** teams reported a total of fifteen (15) incidents in the 4<sup>th</sup> quarter. Four (4) incidents were for medical emergencies, one (1) aggression, one (1) school suspension, six (6) were for restraint in a residential setting, and three (3) for behavior/substance abuse. The teams will focus on more staffings/communication between agency and group home staffs, as well as encouraging teens to begin thinking about their futures and connecting them with more services to support their endeavors. **Intact Family Services (IFS)** reported 12 hotline calls with three indicated. Common issue was risk of harm with unsafe CERAPS indicating a need for increased contact with families. **Licensing** incidents included: one (1) relative medical

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neglect, one (1) relative inadequate food/neglect discipline, one (1) relative failure to protect, one (1) bio-parent issues, three (3) verbal/corporal punishment, one (1) report of abuse traditional placement, one (1) report of abuse home of relative, one (1) relative lack of supervision, one (1) relative risk of harm, and one (1) report of relative drinking while driving. Team noted that since caseworkers are in the homes at least monthly, they are in a position to note any licensing issues. They had noted that after licensing, homes may not be vigilant at following guidelines, and foster care workers could encourage licensing in HMR homes. Licensing is scheduling trainings to equip caseworkers to assist in these areas. **Runaway and Homeless Youth (RHY)** reported and unusually quiet quarter with no (0) incidents. **Parenting** reported no (0) incidents for the quarter. **Support staff** reported only one (1) incident out of the Rockford office as the result of a tornado warning that required the office to evacuate to the designated safe areas per the safety plan in place. **Treatment** reported two (2) incidents this quarter. One (1) teenage client attempted suicide by swallowing 30 pills belonging to another foster child. This child was placed in residential following treatment. One (1) hotline call was made by a therapist, to report abuse/neglect. **Redeploy** reported four (4) incidents: one (1) police called for aggressive client, one (1) client threatened a worker, one (1) guardian reported for being under the influence, and one (1) client failed to show at court so warrant placed for arrest.

**Outcomes:** The following are goals set by program contracts and their monitoring systems.

Break out by offices:            Permanencies/Moves

Aurora Foster Care:            Five (5) adoptions, five (5) return home, one (1) after care closed, two (2) moves that included one (1) within the first month, and one (1) move for unsupervised visits, and one (1) five siblings moved for abuse/neglect.

Rockford Foster Care:        Five (5) adoptions; one (1) guardianship; five (5) return home; thirteen (13) moves resulting from: one (1) foster parent report, four (4) foster parents gave notice, one (1) foster parent found to be breaking standards, one (1) hospitalization, two (2) foster parent issues but then then returned, one (1) transfer to spec home due to seizure, one (1) found relative, and two (2) sibling moves. Team noted that foster parent giving notice appears to be the result that there was an expectation that younger children would be easier than older children; unrealistic expectations. Also relative placements were not good placements or violated rules more often.

Glen Ellyn Foster Care:      Six (6) adoptions, seven (7) guardianship, and three (3) return home. There were also four (4) failed return homes, six (6) moves due to foster home abuse, and two (2) incarcerations. Team is planning on scheduling CFTMs before return home to discuss resources and supports available to parents. The Dashboard review indicated two areas of failure. One was getting service plans done within the first 45 days; having issues with Spanish service plans (87%). Children placed with less than two providers over 12 months at 84.5% (Benchmark 90%) June indicated a dip in few categories, but still passing. Team is focusing on service plans for next quarter.

**Comments:**                    Peter indicated that “skeleton” service plans can be done and DCFS will accept till all the information can be added. DCFS is reviewing whether measurements are re-set to July 1<sup>st</sup>. The anticipation is that it will.

Ottawa Foster Care:         Six (6) return home, nine (9) moves that included one (1) foster home neglect, two (2) foster home abuse, one (1) behavior, and five (5) foster parent gave notice for removal of children.

Licensing:                      Bench mark set by DCFS is 90% of HMR homes are to be licensed. 65% were licensed in May and 67% were licensed in June. Team noted that biggest barrier is Spanish speaking homes where they have need for translator. Also, they find homes that indicate they will license and then they don't follow through. It is also difficult getting the required background checks and medical forms filed. The percentage of homes licensed in the last quarter is as follows” Aurora 73%, Glen Ellyn 56%, Ottawa 74%, Rockford 71% and 63% (they have two regions). The team reported implementing the “Quip” procedure as they had planned from the last quarter. It has been noted the time to get relative homes licensed is decreasing. Recruitment; they have gone to a couple of festivals and done office open houses which have not been as successful as hoped. Only two inquires as part of recruiting efforts.

Intact:                            Goal 90% of families will remain intact throughout the service period. 86 out of 86 families remained intact this quarter for a score of 100%. Goal is 85% of families will not be indicated and 83 out of 86 were not subject this quarter for a score of 96%. Goal is 90% of clients will be contacted within two

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days of being referred and 13 out of 20 referrals met the criteria for a score of 56%. It was noted that the initial contacts were impacted by the Fourth of July holiday, staff vacation, and multiple referrals to caseworkers. One caseworker had five (5) referrals in one day. IFS staff noted that they need to make initial contact whether the investigator is available or not, and to in the case of multiple referrals to see if fellow caseworker might be available to make that initial contact if needs be. IFS will be implementing Dashboard for their program this week and discussed what is in the Dashboard, Tier 1 & Tier 2 requirements and what will be expected.

RHY (formerly Outreach): Outreach reported the following: permanency 93%; safety 97%; well-being 83%; no further contact with juvenile justice 90%; no further CW 93%, and CSC complete 80%. TLP reported: safe shelter in scattered site apartments 100%; client safe and stable at exit (1 of 1) 100%; client working/education full-time at exit (1 of 1) 100%; client involved in community service/service learning (6 of 6) 100%. 90% of clients exiting with kinship connection, goal met; Street Outreach, 75% of youth completing Ansell-Cases Skills Assessment and Service Plan show incremental improvement at three months, goal met; 50% with completed service plan will achieve a permanent connection through community service or adult mentor, goal met; 100% of youth seeking emergency shelter (13 of 13), goal met, 100% of RHY seeking access to have emergency needs met through drop-in center or Street Outreach, goal met; 100% of youth in Street Outreach (2 of 2) has access to emergency medical/psychiatric care by request, goal met. Street Outreach assists homeless children, ages 18 and up secure shelter and employment.

Redeploy Two (2) youths and their families achieved all four outcomes for 100%

Parenting/M.I.S.T.E.R: Parenting reported thirty-nine (39) clients enrolled this quarter; Probation there were eight (8) enrolled; the M.I.S.T.E.R program has seven (7) enrolled; and 1 Joyner N.R.C. had five (5) enrolled. Goal: 70% of participants will demonstrate through pre and post testing and increased knowledge of healthy parenting skills. 45/50 (90%) demonstrated an increase in their knowledge of healthier parenting skills. Client satisfaction surveys indicated 43/46 (93%) of graduates reported being satisfied with their progress. Mental and literacy issues presented barriers for five (5) participants. Goal: 60% of participants enrolled will graduate upon their completion and earn a certificate for their attendance validating their completion of the parenting program. 50/70 (70%) graduated from third quarter intake totals, goal met. 90% of participants enrolled will not be the subject of an indicated report for child abuse or neglect during the service period in this parenting education program. 100% of the 109 participants enrolled were not subject of an indicated report. (50/71 graduated in April – 59 intakes completed in May for a total of 109 participants in the 4<sup>th</sup> quarter.) During the 4<sup>th</sup> quarter, of the 59 intakes, six (6) were discharged for: two (2) attendance, one (1) active substance abuse, one (1) child care, one (1) incarceration, and one (1) was ineligible due to history of violence.

Treatment: Eighty-two (82) clients were discharged this quarter. Of those clients, 78% were discharged successfully, 12% (10) were discharged unsuccessfully, 4% (3) refused treatment; and 6% (5) moved or services were not recommended. Treatment North reported CANS assessment of child/youth trauma indicated a decrease in symptoms of 60% (Goal 70%). CGAS functioning indicated a 50% increase; 50% stayed the same (Goal 70%). Treatment South indicated CGAS 75% increased (Goal 70%). Traumatic stress decreased 100% with a goal of 70%; goal met. Clinicians will obtain 3 CEU's per quarter either online, or by attending training/conference.

Administration: The employee turnover report was reviewed and eleven (11) employees left the agency in the last quarter. At total of forty-eight (48) employees left employment in FY2014. The agency appears to be finishing FY2014 with a positive financial balance. June financials not completed to date.

Office Support Staff: Office Support - North looked at 1042 submissions for this past quarter. Rockford submitted a total of forty-four (44) 1042s for a total dollar amount of \$3,768.67 in recoverable expenses. Five (5) were for initial clothing, nine (9) for beds, two (2) were for infant care equipment and twenty-eight (28) were for birth certificates. Glen Ellyn submitted at total of nineteen (19) 1042s for a total dollar amount of \$2,418.03 in recoverable expenses. Nine (9) were for Initial Clothing, two (2) were for infant care equipment, six (6) were for beds, four (4) were for birth certificates, and one (1) was for graduation expenses. Aurora submitted a total of twenty-four (24) 1042s for a total dollar amount of \$5,570.24 in recoverable expenses. Twelve (12) were for Interstate placement, five (5) initial clothing, five (5) infant equipment, one (1) medical exam, and one (1) TB test. In addition sixteen (16) new

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subcontracts were issued, and seventy-one (71) contracts were renewed. Foster Parents surveyed by phone broke down as follows: Rockford – six (6) completed; Aurora – ten (10) completed; Glen Ellyn – eleven (11) completed; and Ottawa – ten (10) completed.

Support Staff - Ottawa reports that for this quarter the goal for computer training was met at 100% up from 95% last quarter. Staff will make sure that employee names are correctly reported to Liz, along with the name they preferred to be addressed by. Compliance with the submission of updated driver's license and automotive insurance has increased to 100% with the procedure of withholding of mileage checks for employees not in compliance.

**Satisfaction Surveys**

- Aurora Foster Care: Thirty (30) surveys were sent out. Results included: fourteen (14) youth, three (3) children, and six (6) parents. Comments were positive towards staff.
- Rockford Foster Care: Nine (9) surveys were sent and seven (7) returned. The breakdown included three (3) parents, one (1) child, one (1) youth, and two (2) foster parents. One (1) parent response was negative.
- Glen Ellyn Foster Care: Glen Ellyn completed seven (7) surveys this quarter, down from fourteen completed last quarter. The team is in the process changing methods for surveying and is considering making it a part of CFTMs.
- Ottawa/Princeton FC: The Ottawa/Princeton team distributed 61 surveys with the following results: Foster Parents –sent 22, 13 returned (60%); Parents – sent 24, returned 16 (67%); Youth – sent 9, 7 returned (78%); Child – sent 6, 4 returned (67%). Overall feedback was positive including case aide performance. They have no concerns.
- Parenting/M.I.S.T.E.R: Forty-six (46) of fifty (50) (92%) surveys – oversight with five (5) participants (left without completing surveys). Attempts were made to get survey completed (arrest, moved). Twenty-one (21) surveys were mailed to discharged participants with one (1) returned. Goal - 85% completing the Parenting Education Program will complete a survey and rate their overall experience as satisfactory or better. 45/46 (98%) rated their overall experience as satisfactory or better. Goal met. 39/46 (85%) indicated they would definitely recommend class to other parents. 6/46 (13%) indicated maybe they would recommend class to other parents. Trends: Surveys did not have the participant name, date or the class facilitator's name. Information needed to place in participant file.
- Counseling: Northern region distributed sixty-two (62) surveys with thirty-seven (37) returned. 10/24 adult surveys – 8/10 had neutral to positive response; 9/9 youth surveys had neutral to positive response; 18/31 children surveys had all positive response. Goal is to have 80% of clients surveyed in a quarter by all therapists. Ottawa region served 107 clients. Sixty (60) child/youth and forty-seven (47) adults surveyed. Fifteen (15) child/youth surveys returned with thirteen (13) positive and two (2) negative results. One child thought YSB was not helping and one child did not recall get information rights. Forty-three (43) adults responded to survey with some negative comments about YSB. However they counseling feels they were not distinguishing between counselors and caseworkers.
- IFS: Twenty-two (22) surveys were completed. All were positive with feedback regarding team as “understanding, patient, professional.”
- Licensing: The Licensing team is still in the process of revising and combining their survey with the survey that is being conducted independently by office support. It was felt by foster parents they were being surveyed too frequently. Kelly Lumpkin along with input from Peter Woodbine will present update for approval.
- RHY (formerly Outreach): Sixteen (16) adults were surveyed and twenty (20) youth. Surveys for adult crisis – eight (8) and youth crisis – twelve (12). TLP reported one (1) survey and Street Outreach two (2).
- Redeploy: Redeploy completed three (3) surveys, one (1) youth and two (2) adults. Responses were positive.

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- Administration: The results of the All Staff Survey were reviewed by the Personnel Committee and the Board of Directors. The trend noted is that communication within the agency still is an on-going issue. No exit interviews were conducted this quarter.
- Support Staff: Support staff north distributed their bi-annual survey to the entire agency staff (115), and thirty (30) were completed for a 26% return. Over all the responses were positive with some issues indicated by daycare. Support staff Ottawa surveyed the Ottawa office staff and twenty-nine surveys were returned with positive results.
- Comments: Peter Woodbine & Frank Vonch commented on the need to properly construct surveys and that they should never include the name of an employee. It is unethical to do so and presents a number of problems. It is appropriate to ask how people feel about the “Support Staff” accomplishing a particular task, not a specific employee. Both Frank and Peter reminded staff that proposed surveys should be cleared through CQI and thoroughly discussed before they are implemented. Surveys are to be used to provide clarity to the agency. It was also noted that client surveys to be effective need to be anonymous. Again, when names are included it affects the response.
- Record/Peer Reviews:**
- Aurora Foster Care: There were thirteen (13) files reviewed in the last quarter. Going forward staff will conduct reviews following the monthly team meetings and staff will have a week to accomplish. At the meeting the cases to be reviewed will assigned by randomly pulling the names. The staff had been reviewing their office mate, and that wasn’t working out well with some doing more than others. Trend noted was missing signatures from DCFS transfers and “Rights & Responsibilities” missing for children over twelve. Peter Woodbine again commented that regardless of how review assignments are done, it is the supervisor’s responsibility to determine cases to be reviewed and keep the records.
- Rockford Foster Care: Jordan Jenkins reported twenty-five children were reviewed. There were no trends, filing was up to date. Rebecca Krise reported seventeen (17) children were reviewed. The trend is missing birth certificates and social security cards. Also, it was noted that Child & Family Team Meetings are not properly documented.
- Comment: Jordan Jenkins said support staff had offered to help with the random assignment of files to be reviewed and to track which ones had been done. Peter noted that this is the responsibility of the supervisors and that support staff should not be part of this process.
- Glen Ellyn Foster Care: 100% of the files were reviewed in the last fiscal year. The goal is to review twenty-five (25) children per quarter. Each case worker reviewed the files for 3 to 4 children. The trend noted is a disconnect between the findings of the review and corrections by caseworker involved. Team will be looking at tracking follow-up to be sure corrections are made.
- Ottawa Foster Care: The team reviewed twelve (12) files out of their goal of fifteen (15). Still need to review the remaining three. Trend noted: missing documents; birth certificates, social security cards, investigative documents, etc.
- IFS: Twenty-one (21) files were reviewed. Two trends were noted: Home Safety Checklists and Unsafe CERAPS. CERAPS need to be done weekly with a Safety Plan. Results of review were positive with files in compliance.
- Licensing: Twenty-three (23) files were reviewed. Peer review takes place at the monthly staffing. Caseworkers have a month to do questions and send back to Kelly Lumpkin. Trend noted was missing documentation for veterinary records showing up-to-date inoculations/vaccines across all offices.
- Parenting/M.I.S.T.E.R: Seventy-one (71) files were reviewed this past quarter. It was noted that a common problem was caseworkers were not signing the confidentiality consent form as a witness for their clients. The corrective action had caseworkers contacted, and forms were faxed, emailed, or taken to caseworkers for their signature.
- Redeploy: Eleven (11) files reviewed. No corrections required. Good review.

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RHY (formerly Outreach): The program reviewed thirty (30) files and found most all of them complete. Plan to do more next quarter. Street Outreach and TLP did not do any file review this quarter, but the goal is do so next quarter.

Counseling: The Ottawa counseling team reported twenty-one (21) files with fifteen (15) needing correction. Trend noted was outdated consents/releases. The team will be working with IT for training on how to use Outlook for keeping track of due dates. Goal is to accomplish this by end of August. Treatment north did twenty-seven (27) file reviews with one (1) correction. Peer reviews will be conducted at staff meetings to have them done by staff versus treatment support staff.

Administration: Supervisory staff was sent a list of staff that was due, or overdue for their employee evaluations. The preliminary financial audit was completed and the process went well. DCFs conducted a foster care case review in the Ottawa area and the results were good.

Office Support Staff: Office support north reviewed file procedures. All offices reported meeting the goal of pulling closed cases within 30 days of the close date. The team is implementing goal of having all new/transferred cases set-up with 30 days of the case being assigned. To accomplish this, Jill Orr will report case opening/closing information to the appropriate office support staff. Staff is working on file conversion in Princeton and will be moving on to Ottawa in the fall. All offices will be utilizing the same filing system. Peter noted staff checking for birth certificate, social security cards, and pictures. Supervisors should be sharing with staff for file reviews. Ottawa staff reported sixteen new hires. 60% of files completed with Confidentiality forms still being needed.

**Projects:**

Aurora Foster Care: Aurora is planning on having a shelf installed in the kitchen. There is on-going discussion regarding Wi-Fi in office.

Rockford Foster Care: Helped Jen Shelton to help with foster care recruitment at Old Settler's Day. The need for foster homes is great, so the foster care team, with licensing's approval, would like to be part of the recruitment efforts and identify locations and events for outreach. They will also visit the Lewis Lemon School and read to youth as a way to give back to the community, enhance awareness of YSB, and team build.

Glen Ellyn Foster Care: The Glen Ellyn team is planning on developing a resource guide for our parents, kids, and foster parents.

Ottawa/ Foster Care: Ottawa foster care is going to obtain and install a fish tank to provide an area of relaxation.

Licensing: The team is going to continue in its recruitment efforts. They had an informational table at Plainfield Fest in July and will be seeking other events that would be appropriate. They plan to have a team building activity that is yet to be determined.

IFS: Develop office specific list of resources for each county that caseworkers can have on hand during first home visit.

Parenting/M.I.S.T.E.R: Continue to have lunch together as a team once per quarter. They accomplished that this past quarter. YSB Parenting Education Program set-up a two year contract with Joyner Neighborhood Resource Center to provide services for parents not involved in the Child Welfare System. The team continues marketing efforts to increase community/agency awareness regarding the YSB Parenting Education Department in Freeport and Belvidere (brochures, meeting).

Treatment: The Ottawa treatment staff is planning an all staff team building by the end of September. They will be reviewing the surveys and updating. Treatment north is planning a self-care outing that will be

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hosted by Lisa Gustafson at her home. Each therapist will also identify a relevant, cost-effective training to share with the group to encourage on-going development in the team.

RHY (formerly Outreach): The staff is planning a half day retreat to discuss the YASI/Cornerstone Program.

Redeploy: Looked at YASI checklist for Cornerstone. The team is seeking an anger management curriculum for teens. New phones, computers, copier for new office for Redeploy is an on-going project with Tracee. Urban Warrior program being developed to mentor teens is being worked on by Cindy.

Staff Support: Support staff north implemented standardized car rental forms. The team is looking at COA standards for vehicle usage logs. Rockford office implemented emergency plan for Rockford office and is sharing with Aurora and Glen Ellyn offices as a template. Foster parent phone survey and licensing survey is being combined and will be submitted for review and approval. The Princeton/Ottawa file conversion is an on-going project. Ottawa support staff reported the data base should be completed soon. The will check email for all employees every day for better communication. A procedure is being implemented to improve the clean-up of the visitation room following visits. TKP teachers are applying for credentials for Excelerate program for the accreditation process. In addition they are working on two fund-raisers this summer and encouraging more family involvement. There was a parent/teacher program on Summer Safety for child care.

Comment: Peter asked regarding the time table for the data base, if there was a specific date targeted for completion. Kathy will pass that question on and get back to Peter.

Administration: Administration continues to look at options for the vacant building. Plumbing repairs were completed in the Ottawa office.

**Closing Comments:**

Peter reminded staff that information from these meetings needs to be taken back to your teams. The idea of having one person represent an entire program at the CQI meeting was submitted. How does everyone feel about the idea? Rockford mentioned that it would make sense for one person to report from that office. However, the idea is to have one person represent the entire foster care team. The consensus was the idea had merit. The question of when to begin, 1<sup>st</sup> or 2<sup>nd</sup> Quarter FY 2015 was asked. Leaders need to take this idea back to their team for discussion as to when they feel it would be best to implement one representative from the program. This would allow for time to transition and for Peter to present this to the supervisors at the Monday morning call. The hope would be that this would shorten the meeting and yet allow it to remain a good source of CQI information. This representative would have to collect information and data from the office supervisors and CQI scribes. The representative would not have to attend all the office team CQI meetings, just collect and report the information. Terry Young asked if there would be a combining of all the support staff into one CQI report as well. Peter remarked that this has been an on-going goal and the discussion continues. The agency benefits from having programs function as one unit to accomplish the goals of the agency.

In addition to peer reviews, Geoff Franklin will be conducting independent reviews and will report his finding to the supervisors to share with their staffs. Geoff is responsible for the physical records and Peter will be reviewing the SACWIS records. The goal is to move this process towards all programs as CQI is not just geared to foster care, but to all programs within the agency.

Peter thanked everyone for their work as moving forward it makes the agency better and makes work easier for everyone involved.

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The following is a breakdown of children and families served, provided by IT tracking.

**CLIENTS SERVED**