

YOUTH SERVICE BUREAU OF ILLINOIS VALLEY

AGENCY WIDE CQI MEETING

EXECUTIVE SUMMARY

1ST QUARTER (JULY, AUGUST, SEPTEMBER)
FY' 2020

On 11/8/19, 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 1st Quarter of FY 2020, with a comparison to the 4th Quarter of FY 2019. 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				7
FC – Ottawa/Princeton	64				64
FC – Rockford/Specialized FC	42				42
FC – Crystal Lake/Aurora	Not reported				0
Intact Family Services	26				26
Licensing	11				11
Parenting	1				1
Treatment	3				3
RHY/TLP/HY	3				3
Redeploy/Juvenile Justice	2				2
Hispanic Services	0				0
Administration	1				1
Hope House	1				1
Office Support	0				0
Totals	161				161

Summary:

In comparing the number of UIR's reported from the 1st Quarter of FY'20 to the 4th Quarter of FY'19, it is noted that there was a decrease. The youth in Specialized Foster Care continue 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. 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.

The Licensing Unit has seen an upward trend in the investigations, many to be found unsubstantiated.

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

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. It was discovered in discussing UIR's in the Foster Care team meetings that often there is more than one incident reported in a UIR report, and potentially only one incident is being recorded in Data Entry. 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 4th Quarter FY'19 to the 1st Quarter FY'20. The largest program based on the reported number of clients remains the Foster Care program with a 1st Quarter end of 372 children in care, including 19 specialized children. This is an increase over last quarter, as teams that were on hold began accepting referrals again due to new staff hiring. 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 1st 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 1st Quarter, there were 16 return homes, 14 adoptions and 4 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 1st Quarter at a Level 2 as established by the IL DCFS Dashboards. 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 and are to be released this fiscal year.

The Treatment Program reports the total clients served in the 1st Quarter FY'20 were 274, a slight decrease this 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 50%, and the 70% goal of successful discharged was not met at 63%. There was an increase in the number of clients who refused treatment.

The Hispanic Services program continues to meet or exceed their goals in assisting participants the SNAP and Medicaid program. The program undergoes site visits from the Immigrant Family Resource Program (IFRP) regularly, and its findings support that the program is meeting its goals as required by the funding source. The program is commended for its efforts in providing services to an underserved community in an area where transportation is not accessible, for management of case files, and the program's outreach approaches to target their different communities.

The Youth Outreach/Runaway Homeless Youth (RHY/TLP) programs reported the following outcomes for their program goals: Permanency (90%) met at 92%; Safety (95%) did not meet at 92%; Functioning (80%) met 83%; Child Welfare (90%) not met at 83%; Juvenile Justice (85%) met at 100%; and Community Service (80%) at 83%.

The TLP program reports 100% in Permanency and Safety, Well-Being, Connection with a Positive Kinship and in Community Service.

The Parenting Program reported 43 participants had been initially enrolled to graduate in August 2019. Of the 43 enrolled, 27 enrollees graduated as anticipated, resulting in a 56% graduation rate. Of the 27 graduates, 93% saw an increase in knowledge based on pre and post-tests. The remaining 16 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 has seen 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	
FC – Ottawa/Princeton	3				3	
FC – Rockford	0				0	
FC – Specialized	0				0	
Intact Family Services	27				27	
Licensing	24				24	
Parenting	27				27	
Treatment	49				49	
RHY/TLP/HY	51				51	
Redeploy/Juv. Justice	6				6	
Hispanic Services	0				0	
Hope House	1				1	
Admin	10				10	
Support Staff	6				6	
Totals	204				204	

Summary:

Surveys continue to be distributed and completed across the programs with generally positive comments towards the work being done at YSBIV. There was an increase 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 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. 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 will be conducted in the upcoming quarter. As will client and community satisfaction surveys for the upcoming Strategic Planning process.

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				22	
FC – Ottawa/Princeton	37				37	
FC – Rockford	18				18	
FC- Specialized	0				0	
Intact Family Services	14				14	
Licensing	46				46	
Parenting	10				10	
Treatment	15				15	
RHY/TLP	42				42	
Redeploy/Juvenile Justice	6				6	
Hispanic Services	104				104	
Administration	13				13	
Hope House	2				2	
Totals	329				329	

Summary:

The Peer Reviews continue to occur in most of the programs with a review of open and closed cases, and there was a significant increase 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 Quality Improvement Department also completes random file audits in the various programs and assists with reviews when necessary.

E. IMPROVEMENT PROJECTS:

Summary:

The Foster Care unit will be working on holiday gift collections and distributions, along with holiday staff gatherings or activities to boost morale and peer support. The Licensing Unit is updating their CQI form to better capture data for licensing investigations, and to better identify trends in the data for traditional licensed homes versus relative licensed homes.

Intact Family Services continues to work on an improved rate of contacts with schools and other collaterals. They will be reviewing cases to ensure that the post case closure daycare option is being utilized to the fullest extent. In addition, the Crystal Lake team will be creating a staff shout board to encourage positive peer support.

The Parenting Program is re-evaluating home work assignments according to the abilities and literacy skills of the clients served and will adjust assignments as needed. They report success in providing their progress report earlier in the sessions and getting feedback earlier from the caseworkers involved.

The Treatment Program is seeking CBT training opportunities for clinicians. They are putting together a Wish List for the therapy rooms. They continue to look at alternative office space within the Ottawa office for Solutions clients.

The Redeploy/Second Chance is helping with the unloading of the Walmart donations and organization of the back storage room. The ReDeploy program will be looking to expand its client base to include youth with misdemeanors, and a grant will be sought to assist with this expansion. The RHY/TLP/HY programs will be working to update the after-care plans and process for both the RHY and TLP programs.

Hispanic Services continues to work on training and learning the new ICIRR database that was implemented on July 1, 2019. They are also working labels for the file cabinets for FY 2020, for better organization. Hope House is revising the rules for visitation and the brochures since they are outdated.

The Support Staff they will be working on identifying track task associated with various departments represented on this team such IT, HR, Fiscal, Marketing and Development, and Office Support personnel. Ideas include better tracking of vehicle maintenance with uniform tracking and developing or adding to the marketing database to track all donations. The IT Department is also working on updating various databases for HR and Marketing and Development.

The Admin team is looking to have the curtains replaced in the Princeton office. File cabinets need to be obtained and brought over to Princeton office. The Admin team will be looking at other options for a LaSalle space, as the expansion work was deemed too costly for the agency. An inventory of the Glen Ellyn office has been done, a list of available items will be sent out to programs, to review and request.

Comments/Announcements:

An announcement was made that agency is going to begin its Strategic Planning process in December 2019 and will involve the help of the CQI Leaders. There will be a Strategic Planning Committee, and program supervisors will also be involved. The agency is planning an All Staff get together in March 2020, to work further on the Strategic Planning. More information will be sent out to supervisors and the CQI Leaders.

The Director emphasized the importance of getting the information for the gift tags to the Marketing Department in a timely fashion as donors have deadlines to get this information out. He would also like to see all the gifts are distributed, and not left until after the holidays if it can be avoided.

Annual Evaluations will be occurring in the coming month and are due to be completed by the end of December 2019. Make sure to ask your Supervisors about your evaluation to ensure it gets completed. Salary adjustments are based on these evaluations.

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, the agency will continue to work towards collecting accurate data through the central office.

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. The lack of staff in some programs has had an impact on this, but this should improve as many vacancies have been filled.

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 1st 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

12/2/19