

A photograph of a family of four sitting around a wooden coffee table, playing a board game. A woman in an orange shirt is in the center, looking at the game. To her left, a man in a light blue striped shirt is also looking at the game. To her right, two young boys are playing. One boy is wearing a red and white striped shirt and is smiling at the camera. The other boy is wearing a white t-shirt and is looking down at the game. The table is covered with a board game, including cards, dice, and game pieces. The background shows a window with white trim and a green cushion on a sofa.

CQIR ANNUAL REPORT 2015



Community Based Family Services

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REPORT SNAPSHOTS

4,152 clients and families
served

80% of outcomes achieved

95% rating on Peer Record
Reviews

A on overall satisfaction with
OHU Services

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Letter from the CQIR Team

September 10, 2015

Dear Stakeholders,

Fiscal year 2015 marks the completion of One Hope United's first year of the Line of Service model. With this transition the Continuous Quality Improvement and Research (CQIR) team has adapted and realigned to provide support and leadership to direct service staff in order to provide high quality services in support of the agency's mission of "Protecting children. Strengthening families".

To better support each of the agency's 3 Lines of Service (Child Development & Early Learning, Placement, and Community Based Family Services); we restructured our team so there is a CQIR Director and CQIR staff assigned to each Line of Service. This structure allows for a strong alliance to be formed between CQIR and operational leadership while building a platform for focus, shared ownership, specialization, accountability, and growth. We believe this approach will strengthen the agency's ability to become a leader in the Child Welfare and Child Development fields.

We are very excited to present to our stakeholders the first CQIR Annual Report organized by Lines of Service. In this year of transition, not only have our staff realigned, but all of the agency's data was reorganized in order to provide the Lines of Service the ability to review, analyze, and compare data and establish future goals. In addition to reorganizing the data, we have also transformed the way in which we present the data in order to better visually demonstrate the agency's successes and areas of opportunity. It is our hope that this representation is more informative to our stakeholders and creates more opportunities for improvement.

A new feature of each annual report is the "Goals and Priorities" section. Each CQIR Director, in partnership with their teams, developed goals based on the information presented in their reports. Throughout the year each team will develop methods to achieve these goals and in next year's annual report we will demonstrate what we have achieved and address any areas that need further attention. Additionally, in the Cross-Service annual report, CQIR has shared our Strategic Goals and Objectives, which were developed as part of the agency's Strategic Planning process. In future annual reports we will provide an update on our progress as well as share any new goals. This level of transparency will hold our team accountable to the quality improvement process and to agency's Strategic Plan.

As we reflect on this year, it is important to remember that change brings forth growth, opportunity, and knowledge. Coincidentally, this is what quality improvement is all about. We continuously strive for improvement through analyzing information, implementing changes, monitoring results, and beginning again.

We hope that you find this year's CQIR Annual Report useful and informative. As always, the information presented is used throughout the year to improve services. Thank you again to all stakeholders who are vital in ensuring that children and families receive the highest quality of services possible and who partner in our continuous quality improvement initiatives throughout the year.

Sincerely,

The CQIR Team

Continuous Quality Improvement & Research Team

To support direct service providers in implementing best practices and ensuring high quality service delivery throughout the agency, the Continuous Quality Improvement and Research (CQIR) team at One Hope United guides the organization in 14 core tasks (Performance and Quality Improvement (PQI) Standards) that are aligned with internal OHU principles and external accreditation standards.

Ruann Barack – Executive Vice President Shannon Stokes – Director of Special Projects				
Child Development & Early Learning	Placement	Community Based Family Services	Medicaid	Research
Stan Grimes <i>CQIR Director</i> Ryan Counihan <i>CQIR Technician</i>	Jeffrey Honaker <i>CQIR Director</i> Katurah Roby <i>CQIR Coordinator</i> Robin Sherwood <i>CQIR Coordinator</i> Lauren Stevens <i>CQIR Coordinator</i>	Jackie Schedin <i>CQIR Director</i> Christina Brown <i>CQIR Coordinator</i>	Elizabeth Hopkins <i>Medicaid Coordinator</i> Ian Kelly <i>Medicaid Technician</i>	Sarah Tunning <i>Director of Research</i> Kimberly Clark <i>CQIR Systems Analyst</i>
Ron Culbertson, CQIR Coordinator in Southern, Illinois/Community Based Family Services retired after 33 years with One Hope United. His expertise and experience will be missed.				

Information presented in the Community Based Family Services annual report is organized by these CQIR Core Tasks:

- | | | |
|---|--|---|
| <ul style="list-style-type: none"> ▪ Outcome Measurement ▪ Client Satisfaction ▪ Peer Record Reviews | <ul style="list-style-type: none"> ▪ Supervisory Reviews ▪ Case Consultations & Priority Reviews | <ul style="list-style-type: none"> ▪ Incident Reports ▪ Employee Recognition ▪ Quality Improvement Teams |
|---|--|---|

The CQIR Team achieved the following accomplishments in FY15. Accomplishments have been categorized in line with the OHU promises of Innovation, Collaboration, Leadership, Results, and Hope.

Innovation

- Under the leadership of Sarah Tunning and Shannon Stokes and in partnership with Community Based Family Services, the agency began piloting a process to collect post discharge outcomes on clients who have ended services with One Hope United.

Collaboration

- The CQIR Medicaid team (Elizabeth Hopkins and Ian Kelly) provided support to the SASS program in Southern Illinois during their Federal Evaluation.
- In collaboration with operations, CQIR began piloting a new case documentation system called SDS (Service Documentation System).

- Sarah Tunning and Ruann Barack have cultivated a relationship with Dr. Bob Foltz from the Chicago School of Professional Psychology. This is the agency's first effort at a formal research partnership.
- In partnership with the agency's Training Committee, Sarah Tunning and Shannon Stokes have updated and improved the agency's Training Policy, Curriculum, and Plan using Relias as an online training solution.

Leadership

- To support the agency's Line of Service transition, Stan Grimes, Jackie Schedin, and Jeffrey Honaker have been promoted to CQIR Directors of Child Development and Early Learning, Community Based Family Services, and Placement, respectively.
- Ruann Barack was officially named the Executive Vice President of the CQIR department.
- Kimberly Clark received a STAR award for her leadership in the re-accreditation process with the Council on Accreditation.
- Shannon Stokes continues to provide leadership in maintaining and updating the agency's Policies and Procedures in the Agency Manual.
- Under the leadership of Ruann Barack, the CQIR team has crafted a CQIR strategic plan in alignment with the agency's strategic plan. From the CQIR strategic plan, annual goals with intermittent benchmarks have been put in place to achieve the overall strategic plan goals.
- The CQIR team has provided tremendous leadership and support throughout the agency's transition to the Line of Service Model.

Results

- The CQIR Medicaid team, provided support to the CARE Residential program during their leadership transition by reviewing 100% of their Medicaid notes. This support led to the CARE program achieving a 96% on their post payment review.
- With support from the CQIR Medicaid team, the Hudelson Residential program achieved a 98% on their Medicaid post payment review.
- One Hope United has been approved and certified to bill the Illinois Department of Human Services for Medicaid services.
- With support from CQIR Director Jackie Schedin, the Illinois Foster Care team received the Dignity and Respect Reward for their Foster Parent Law.
- Under the leadership of Kimberly Clark, the entire CQIR team, and leadership from each Line of Service, One Hope United has been re-accredited by the Council on Accreditation.
- The CQIR Team in Florida (Katurah Roby, Jeffrey Honaker, and Robin Sherwood), assisted the Tampa Case Management team with their permanency results which were the focus of a corrective action plan. Tampa's success has led to an expansion of services for FY16.
- All CQIR data and databases have been converted to reflect the Line of Service model for both FY15 and FY14 data. This allows each Line of Service to compare their results to FY14 as a benchmark to gauge progress and the success of the transition.

Hope

- CQIR Coordinator, Ron Culbertson retired after 33 years with One Hope United.
- The CQIR team welcomed Ian Kelly (Medicaid), Christina Brown (Community Based Family Services), and Lauren Stevens (Placement) to the team.









Community Based Family Services Leadership

The Community Based Family Services (CBFS) Line of Service is comprised of four program categories: Behavioral Health, Intact, Prevention, and Youth Services. The Line of Service is led by an Executive Vice President, Deputy Director, and 4 Directors of Programs.

Patricia Griffith – Executive Vice President Timothy Snowden – Deputy Director			
Brionne Rhodes – Director of Programs (<i>Southern, IL Intact and Northern & Southern, IL System of Care</i>) Jill Novacek – Director of Programs (<i>Northern, IL Behavioral Health and Youth Services</i>) Nikki Quandt – Director of Programs (<i>Southern, IL Behavioral Health, Prevention, and Youth Services</i>) Sherry Harrington – Director of Programs (<i>Northern, IL Intact, Prevention, and Youth Services</i>)			
Behavioral Health	Intact	Prevention	Youth Services
Adolescents with Sexual Behavioral Programs Adult Sexual Abuse Treatment Anger Management Children with Sexual Behavioral Problems Community Counseling Comprehensive Counseling DCFS Counseling Emergency-Centered Home Outreach (ECHO) Foster Care Counseling Intact Counseling Screening, Assessment, and Support Services (SASS) System of Care (SOC) The Healing Path	Intact Family Services (multiple locations)	Adoptive Family Support Family Support Services (FSS) Foster Grandparent (FGP) Supplemental Services Parent Group	Comprehensive Community Based Youth Services (CCBYS) Functional Family Therapy (FFT) Intensive Family Services Multi-Systemic Therapy (MST) Youth Diversion Program (YDP)

Executive Summary

One Hope United served **4,152** clients and families in the Community Based Family Services (CBFS) Line of Service – an increase of 1.64% from FY14. The Compliance & Quality of service and record documentation overall was **95%**. The efforts of Community Based Family Services resulted in **80%** of all outcome goals being achieved.

 <h3>OUTCOME MEASUREMENT</h3> <p>Across all programs, 80% of Outcome goals were achieved in FY15 (a 7% increase from FY14).</p>	 <h3>CLIENT SATISFACTION</h3> <p>In FY15, the Community Based Family Services scored a 4.73 in overall client satisfaction, which is a 0.2% decrease from FY14 (this is in the “A” range, which represents scores above 4.50).</p>
 <h3>PEER RECORD REVIEWS</h3> <p>Out of 478 files reviewed in FY15, Community Based Family Services achieved a Compliance & Quality rating of 95% on service documentation (a 3% increase from FY14).</p>	 <h3>SUPERVISORY REVIEWS</h3> <p>In FY15, Community Based Family Services achieved a 98% in Supervisory Systems Compliance (a 1% increase from FY14).</p>
 <h3>CASE CONSULTATIONS & PRIORITY REVIEWS</h3> <p>There were 4 Case Consultations (down 2 from FY14) & 11 Priority Reviews (up 3 from FY14) conducted in FY15.</p>	 <h3>INCIDENT REPORTS</h3> <p>Community Based Family Services experienced a 4.6% increase in the number of incidents in FY15 compared to FY14.</p>
 <h3>EMPLOYEE RECOGNITION</h3> <p>There were 4 STAR awards and 2 GALAXY awards distributed this year.</p>	 <h3>QUALITY IMPROVEMENT TEAMS</h3> <p>The QIT attendance rate in the Community Based Family Services Line of Service was 99.8%.</p>

Goals and Priorities for FY16

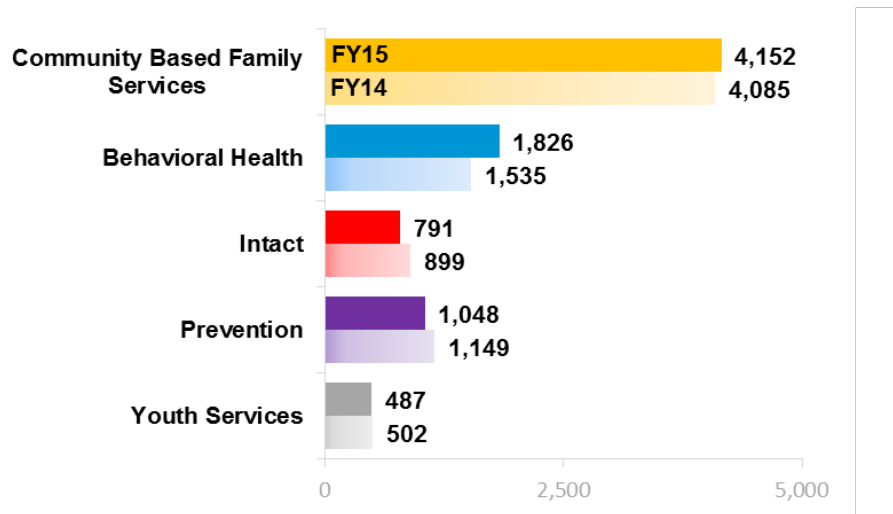
Based on the information and results discussed in the following pages of this report, the following goals and priorities have been established for FY16.

1. In FY15, there was a low number of STAR and GALAXY awards distributed. Additionally, there is an identified need to increase staff morale within the CBFS Line of Service. To address this concern CQIR will work with the Best Place to Work Committee to improve the agency's staff recognition system.
2. There has been an increase in the number of Suicidal Ideations and Suicide Attempts in the CBFS Line of Service. To address the rising need of serving clients with these tendencies, CQIR in partnership with staff and leadership from all Lines of Service, will develop an Agency Suicide Protocol and a Training Curriculum. Additionally, Marion County, one of the counties served by Southern, IL has one of the highest suicide rates in the state. CBFS Leadership will coordinate and work together with other mental health agencies in Marion County to provide support and resources to the community.
3. There was a decrease in the number of client satisfaction surveys collected in FY15. The CBFS Line of Service will work with CQIR to identify the number of programs that reached validity in FY15 and increase the number of programs that reach validity in FY16. The Line of Service will also strategize and plan how to increase the number of surveys returned for FY16.
4. Through the agency's Peer Record Review process, "Closing" has been identified as the area with the lowest Compliance & Quality rating especially in Behavioral Health programs. In FY16, more closed records will be selected for review. Furthermore, CQIR and the Line of Service will develop a Closing Checklist that can be used by all programs.

Clients and Families Served

In fiscal year 2015, One Hope United served **4,152** clients and families in Community Based Family Services – an increase of 1.64% from FY14. Behavioral Health is the only Program Category that experienced an increase in the number of clients and families served (+18.96%). Intact, Prevention, and Youth Services all experienced decreases of 12.01%, 8.79%, and 2.99%, respectively.

Community Based Family Services Experienced a Slight Increase in the Number of Clients and Families Served in FY15



The most significant percent increases/decreases (+/- 25%) in the number of clients and families served are summarized below.

Behavioral Health:

- SASS (+65.5%) added two counties, Marion and Fayette, to the program's coverage area.
- Comprehensive Counseling – Charleston (-33.3%) was keeping cases open longer than expected, which inhibited the program from providing services to more clientele. Once cases were closed, when clinically appropriate, DCFS was notified that we had openings for new clients. Toward the end of the fiscal year new clients began receiving services.
- SOC – Southern, IL (+44.4%) added a therapist in Mt. Vernon, which increased the agency's ability to provide services to LANs 8, 9, and 10. In addition, Collinsville and Mt. Vernon, under the authorization of the DCFS program administrator, allowed the program to provide services to families that were ineligible for the service (the children were categorized as "specialized" through CIPP). An increase in referrals also came from CIPP meetings and recommendations because SOC services must be referred before a child can be categorized as "specialized".
- Children with Sexual Behavior Problems – St. Charles (-100%) did not have any referrals from DCFS.
- Community Counseling – St. Charles (-100%) did not have a staff member available to take referrals so none were accepted.
- Comprehensive Counseling – St. Charles (-87.5%) did not have a staff member available to take referrals so none were accepted.

- Foster Care Counseling – Joliet (-54.5%) reduced the number of therapists to conduct therapy for foster children per direction from Foster Care leadership.
- Community Counseling – Gurnee (+47.4%) was able to accept more referrals because therapists had lower case loads in the Adolescent with Sexual Behavior Problems program.
- Intact Family Counseling – Chicago (-31.2%) had no referrals from DCFS.

Intact:

- Intact Family Counseling (-31.2%) and Intact Families – Eastern (-25.4%) both had a decrease in the number of staff (1 from each office) which directly affected the number of cases that could be taken. The positions were never replaced because there was an overall decrease in the number of referrals from DCFS due to a rotation process that they implemented so agencies were equally receiving referrals.

Prevention:

- Visitation Transportation Program (-100%) closed in FY15.
- FSS (-90.3%) ended a contract with DCFS in FY15. The program has remained opened for private referrals and with a small contract with a private agency; however, the program went from serving over 100 clients to serving 10.

Youth Services:

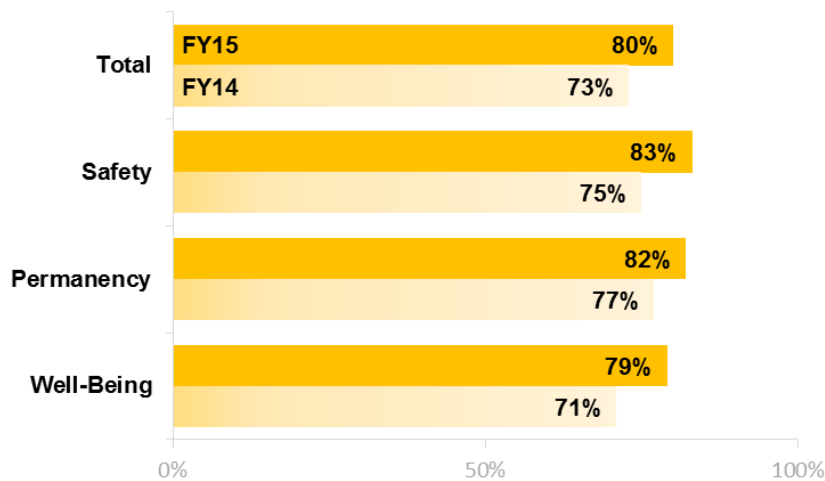
- Youth Diversion Program (+58.8%) had an increase in the number of referrals to the program due to increased community support from police officers and from the St. Louis 211 phone number, where the program is listed in the directory of community services.
- FFT Madison Co. Redeploy (-28.6%) had a decrease in referrals from a subcontract held with a private agency. During the year, the agency ended the subcontract.
- MST 16th Circuit/Kane (+58.8%) was fully staffed in FY15, so the number of cases referred and accepted increased.
- Intensive Family Services (-66.67%) had a reduction in the number of referrals so the number of therapists were reduced.

Outcome Measurement

An outcome is a specific benefit that occurs to participants in a program. It can be captured in a change in the participant's behavior, attitude, knowledge, skills, condition or status. In essence, it is the improved "quality of life" in clients. Outcome goals are important to establish because they provide purpose for the work with clients and families and should tie either directly or indirectly to the mission of the agency. Additionally, outcome goals create a culture of accountability and also provide an evaluation of *Child Welfare Measures* (referring to a client's **Safety, Permanency and Well-Being**). Outcomes are utilized throughout the year by CQIR and operations to: improve service delivery; inform stakeholders of the agency's performance; obtain new funding through grants based upon our performance; provide information to the community on our social impact for advocacy efforts.

All programs at One Hope United report outcomes on a quarterly basis. At the end of the year the quarterly outcomes are aggregated over the year to determine the year to date impact on the clients served by the program. Many outcomes are collected only at the time of case closing; however, there are some outcomes that are collected for all clients served regardless of whether the case closed. All outcome goals have an established target that is determined either through the program's contract and/or research from like programs. In FY15, Community Based Family Services achieved **80%** of their outcomes (this is a 7% increase from FY14).

Community Based Family Services Achieved 80% of their Outcomes in FY15 (a 7% Increase from FY14)



In the pages that follow, the outcomes for Behavioral Health, Intact, Prevention, and Youth Services will be described in more detail. Appendices A-D provides a summary of outcomes for FY15 by individual program, office, and/or location.

Behavioral Health

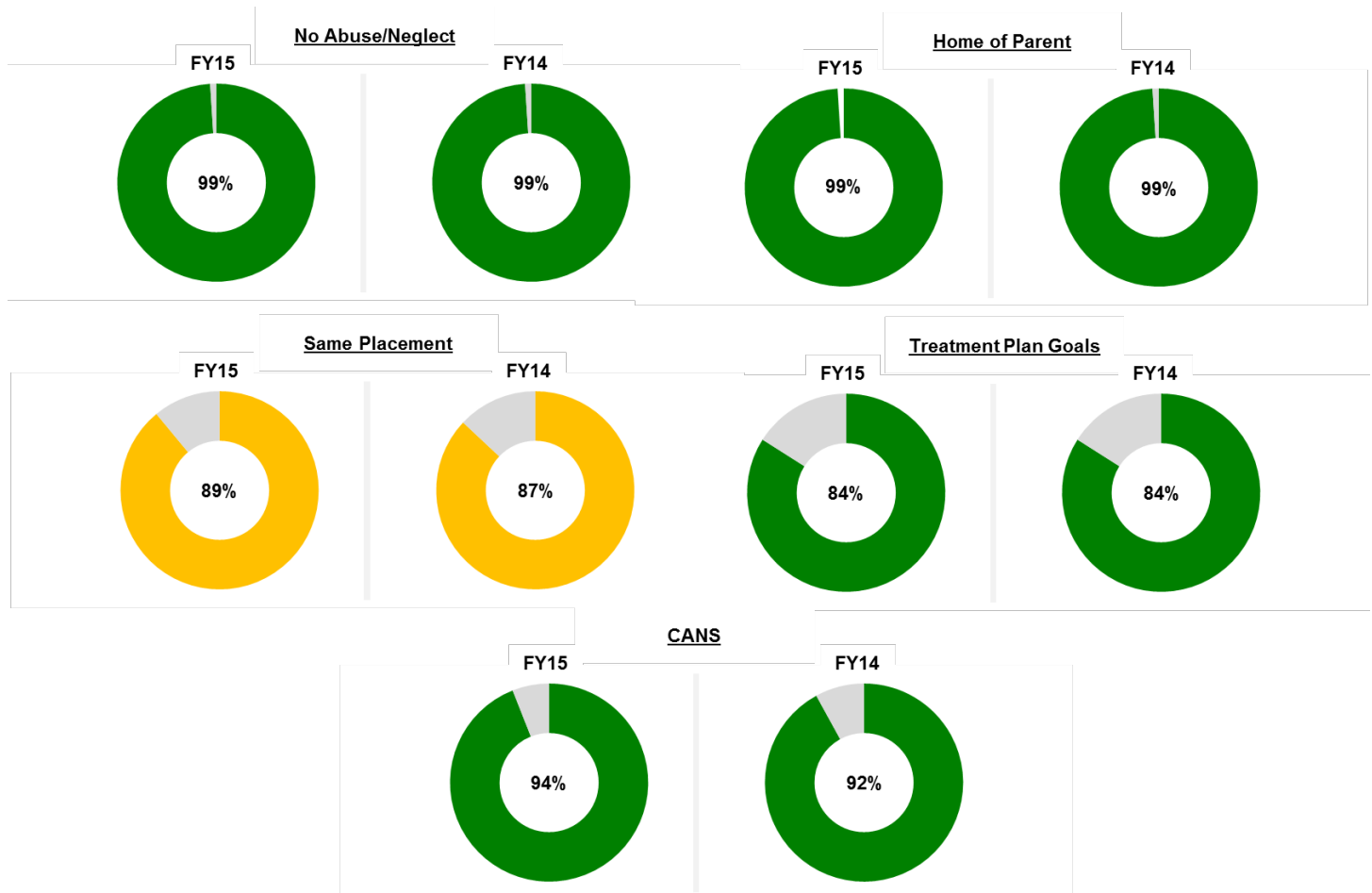
Behavioral Health programs report on outcomes that are categorized as: Safety, Permanency, and Well-Being. In FY15, across all Behavioral Health Programs, **73%** of outcomes were achieved (a 3% increase from FY14). The outcomes for Behavioral Health are summarized below for Child Welfare Counseling, Community Counseling, SASS, Sexual Abuse Treatment Counseling, SOC, and The Healing Path.

Child Welfare Counseling

There are several programs/locations that report outcomes that are aggregated into the Child Welfare Counseling outcomes. They are: Foster Care & Comprehensive Counseling in St. Charles, Joliet, Gurnee, and Charleston, Foster Care/Medicaid Counseling in Cook County, ECHO, DCFS Counseling, and Intact Counseling. Child Welfare Counseling has five programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of clients who reside in the home of a parent will remain in the home at the time of discharge.
3. **Permanency** – 90% of clients who reside in foster care or other out of home placement will remain in the placement or achieve permanency.
4. **Well-Being** – 80% of clients will achieve at least 75% of their treatment plan goals.
5. **Well-Being** – 80% of clients will show an overall improvement between initial and closing CANS.

In FY15, Child Welfare Counseling programs achieved **80%** of their outcomes.



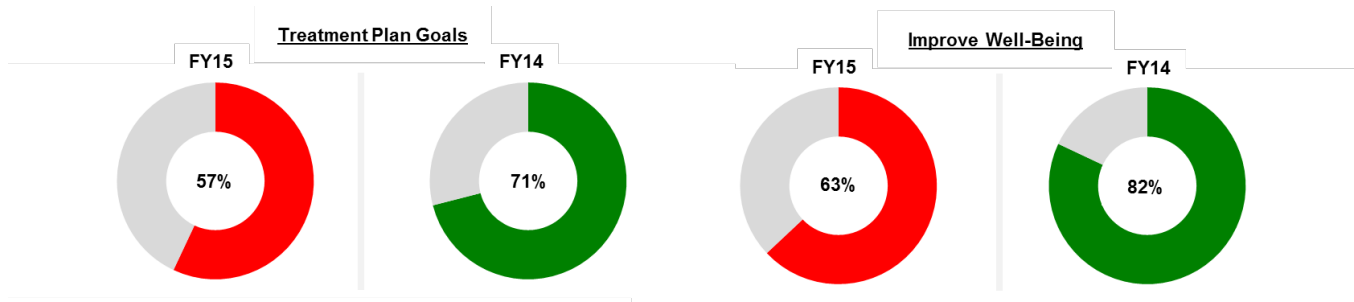
Community Counseling

There are two locations that provide Community Counseling (St. Charles and Gurnee).

Community Counseling has two programmatic outcomes.

1. **Well-Being** – 70% of clients will achieve at least 75% of their treatment plan goals.
2. **Well-Being** – 75% of clients will demonstrate improved well-being as measured by a standardized instrument, pre and post service.

In FY15, Community Counseling achieved **0%** of their outcome goals.



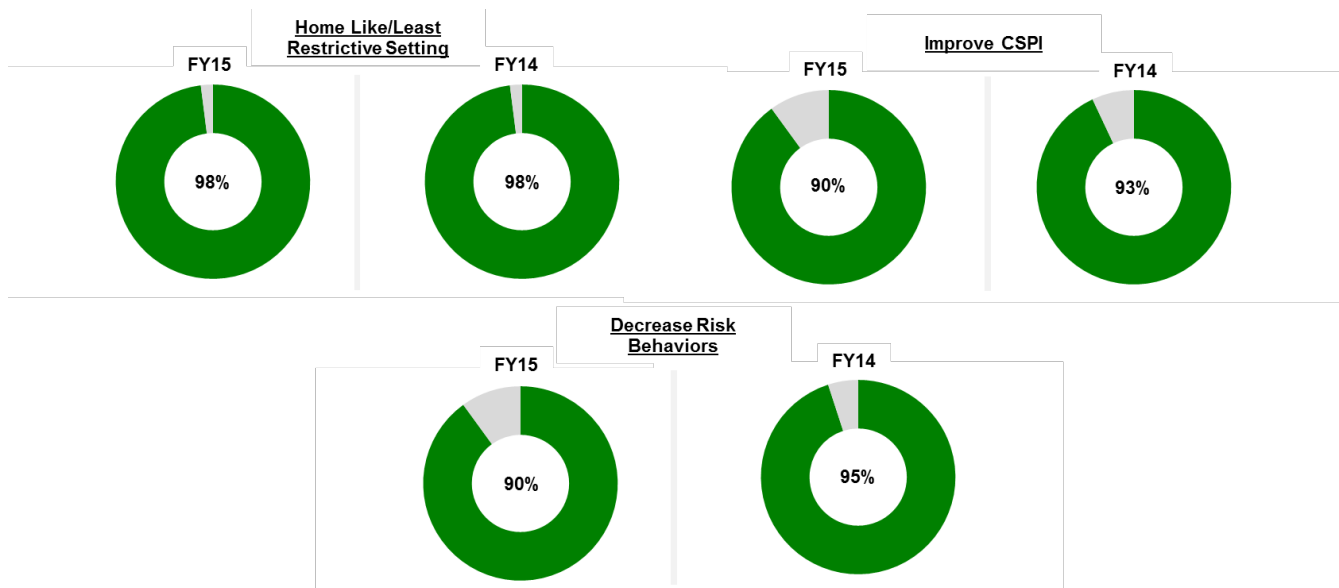
Screening, Assessment, and Support Services (SASS)

SASS operates out of two locations (Mt. Vernon and Effingham); however they report their outcomes together.

SASS has three programmatic outcomes.

1. **Permanency** – 90% of youth will remain in a home like setting or least restrictive setting.
2. **Well-Being** – 85% of youth who completed services will improve or maintain their CSPI score from initial screen to closing screen.
3. **Well-Being** – 85% of youth will decrease their risk behaviors as evidence by a reduction in the risk behavior domain on the CSPI at time of discharge.

In FY15, SASS achieved **100%** of their outcome goals.



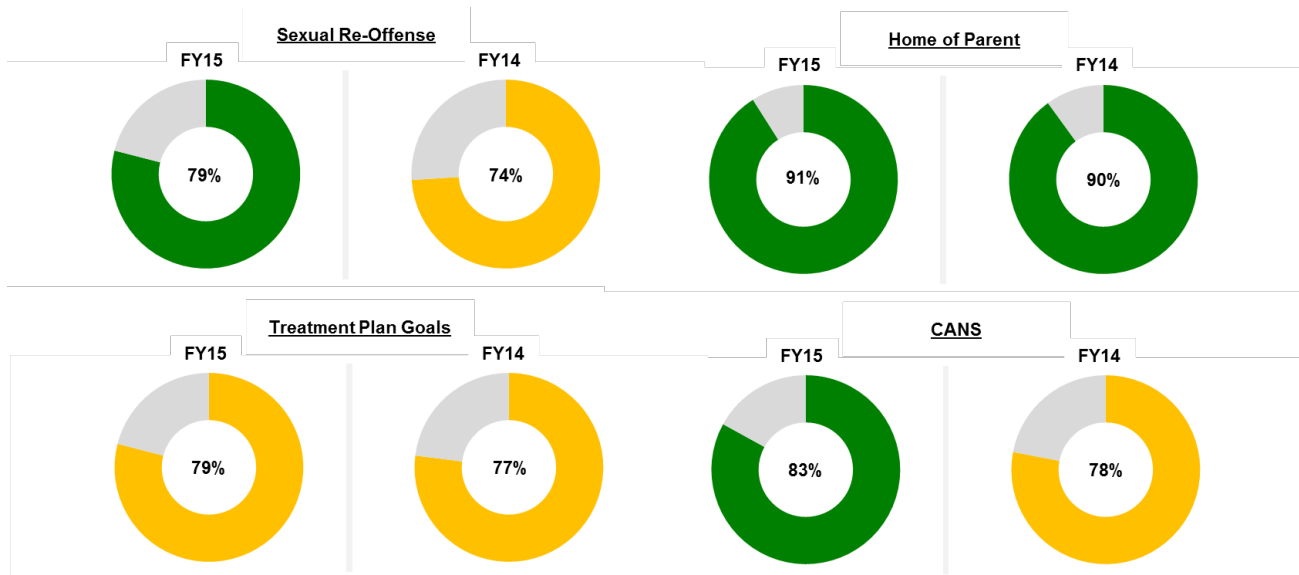
Sexual Abuse Treatment Counseling

There are several programs/locations that report outcomes that are aggregated into the Sexual Abuse Treatment Counseling outcomes. They are: Adolescents with Sexual Behavior Problems in Gurnee/Kenosha and St. Charles; and Children with Sexual Behavior Problems in Gurnee and St. Charles. Furthermore, there is an Adult Sexual Abuse Treatment program, which reports its outcomes separately from the Adolescent and Children programs.

Children/Adolescents with Sexual Behavior Problems has four programmatic outcomes.

1. **Safety** – 75% of clients will have a reduced level of risk for sexual re-offense as measured by the ERASOR and JSOAP (adolescents).
2. **Permanency** – 90% of clients who reside in the home of a parent will remain in the home at the time of discharge.
3. **Well-Being** – 80% of clients will achieve at least 90% of their treatment plan goals.
4. **Well-Being** – 80% of clients will show an overall improvement between initial and closing CANS.

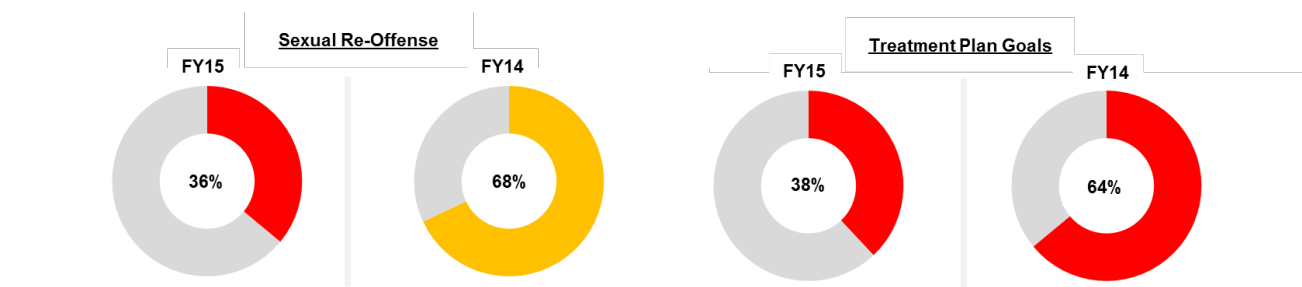
In FY15, Children/Adolescents with Sexual Behavior Problems achieved **75%** of their outcome goals.



Adult Sexual Abuse Treatment has two programmatic outcomes.

1. **Safety** – 75% of clients will have a reduced level of risk for sexual re-offense as measured by the Static 99 and Vermont (adults).
2. **Well-Being** – 80% of clients will achieve at least 90% of their treatment plan goals.

In FY15, Adult Sexual Abuse Treatment achieved **0%** of their outcome goals.



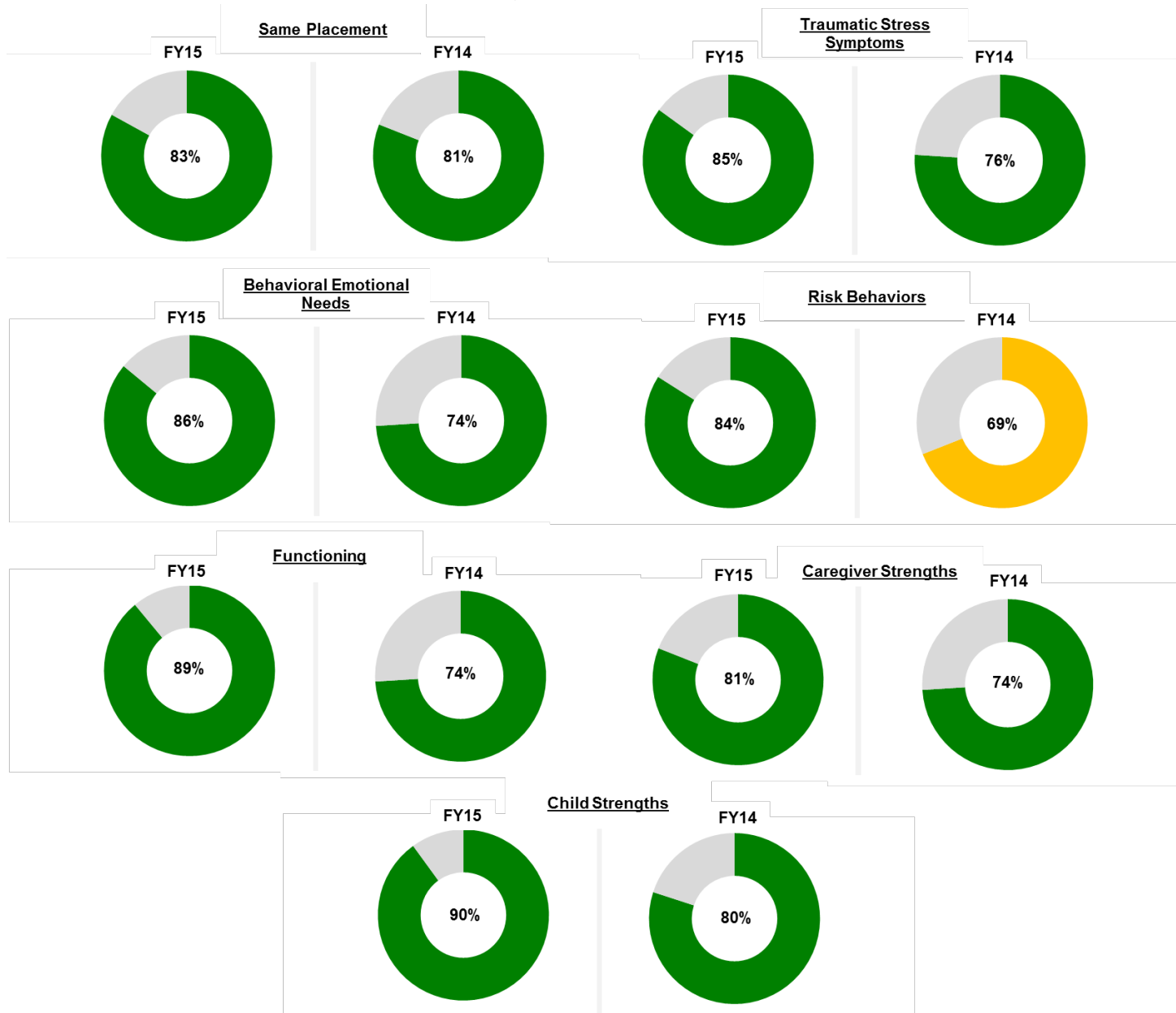
System of Care (SOC)

There are several locations of the SOC program that report outcomes that are aggregated into the SOC outcomes. The program locations include: Charleston, Collinsville, Mt. Vernon, and Chicago.

SOC has seven programmatic outcomes.

1. **Permanency** – 60% of clients will remain in their same placement during SOC enrollment.
- 2-7. **Well Being** – 70% of clients will demonstrate improvement in “actionable” items in the CANS domain of: Traumatic Stress Symptoms, Behavioral/Emotional Needs, Risk Behaviors, Functioning, Caregiver Strengths, and Client Strengths.

In FY15, SOC achieved **100%** of their outcome goals.

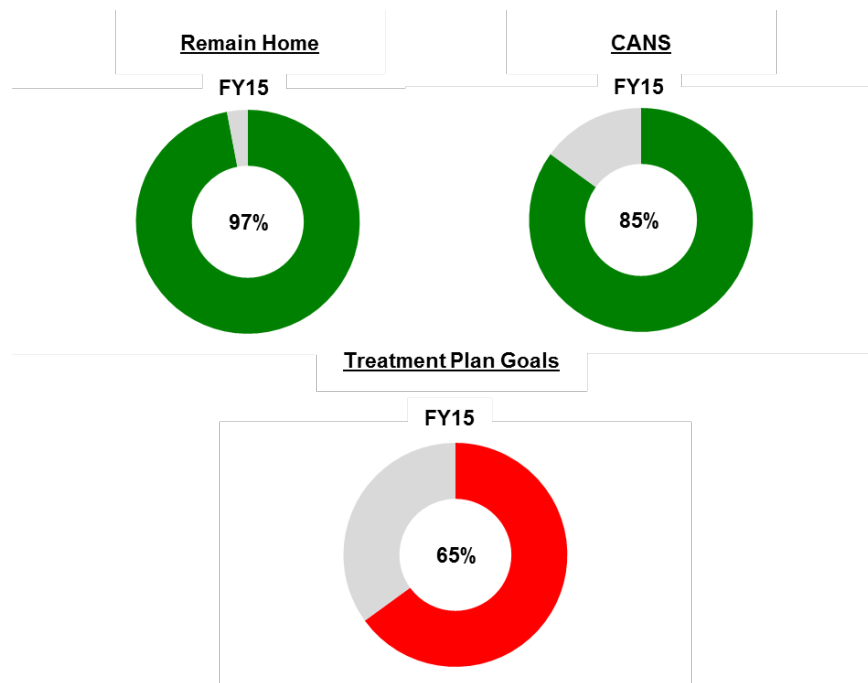


The Healing Path

The Healing Path has three programmatic outcomes.

1. **Permanency** – 90% of children served will remain in their home at discharge
2. **Well-Being** – 80% of clients that have received services for 6 months will demonstrate an improvement on the CANS.
3. **Well-Being** – 80% of clients will achieve at least 75% of their treatment plan goals.

In FY15, The Healing Path achieved **67%** of their outcome goals. (The Healing Path did not collect outcomes in FY14).



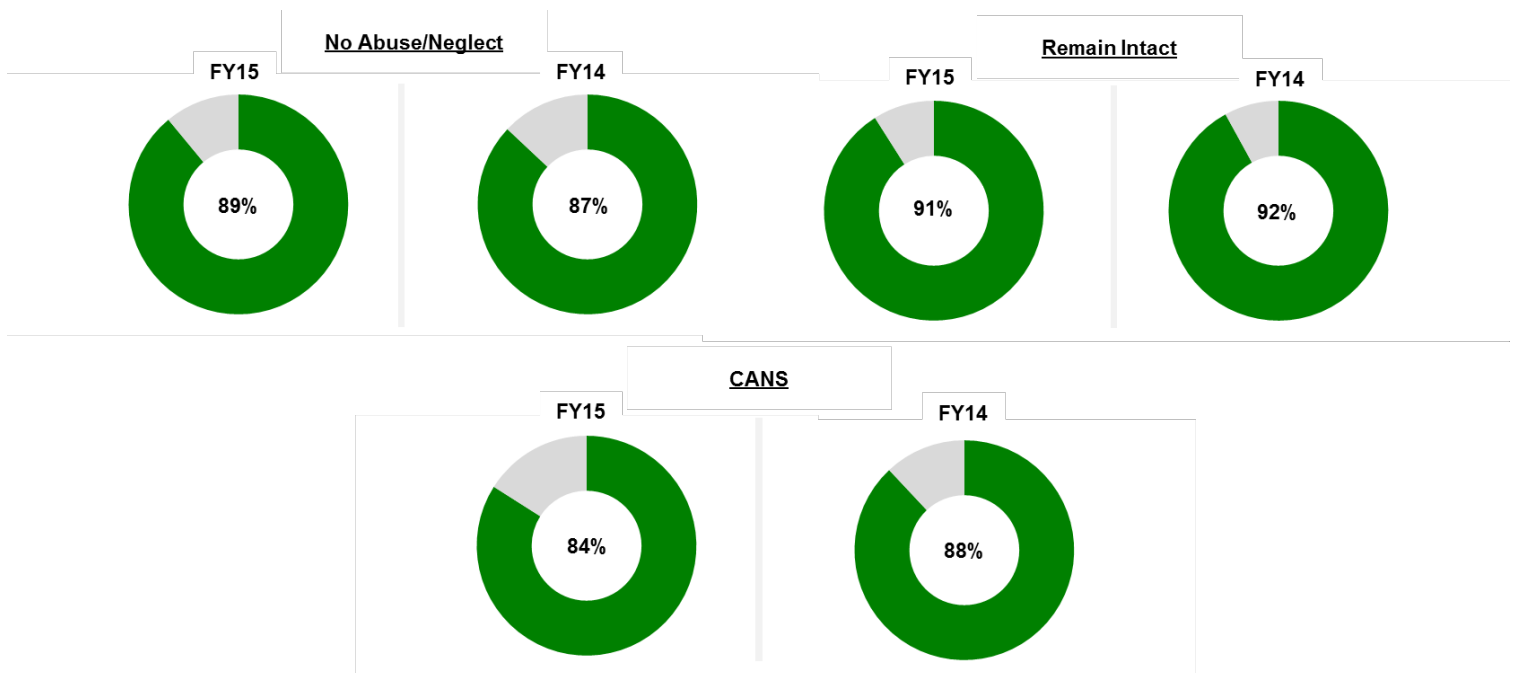
Intact Family Services

Intact Family Services reports on outcomes that are categorized as: Safety, Permanency, and Well-Being. Intact Family Services operates out of several locations including: Waukegan, Chicago, Springfield, Charleston, Mt. Vernon, Effingham, Olney, and Collinsville. Their outcomes are aggregated across all these locations.

Intact Family Services has three programmatic outcomes.

1. **Safety** – 85% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of families will remain intact.
3. **Well-Being** – 80% of families will demonstrate an overall improvement between initial and closing CANS.

In FY15, across all Intact programs, **100%** of outcomes were achieved (no change from FY14).



Prevention

Prevention programs report on outcomes that are categorized as: Safety, Permanency, and Well-Being. In FY15, across all Prevention Programs, **77%** of outcomes were achieved (a 7% increase from FY14). The outcomes for Prevention programs are summarized below for Foster Grandparent, Family Support Services – Private, Supplemental Services, and Parent Group. (Adoptive Family Support did not have any closures in FY 15; therefore no outcomes will be reported.)

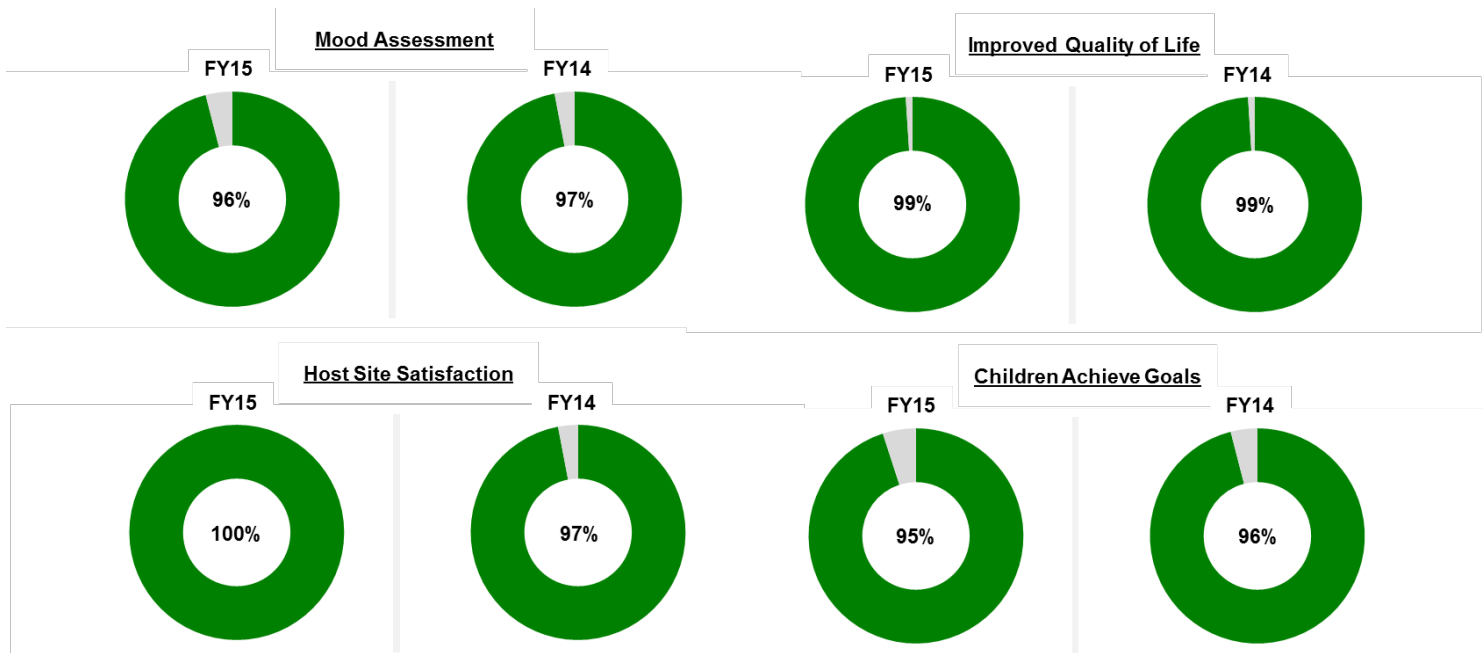
Foster Grandparent Program (FGP)

The Foster Grandparent Program (FGP) operates in two locations (Springfield and Mt. Vernon). Their outcomes have been aggregated across both programs.

The Foster Grandparent Program has four programmatic outcomes.

1. **Well-Being** – 90% of the Foster Grandparent volunteers will score a 5 or below on the Mood Assessment Scale (Short-form) on a bi-annual basis.
2. **Well-Being** – 90% of the Foster Grandparent volunteers will report that participating in the program has improved the overall quality of their life as surveyed on an annual basis.
3. **Well-Being** – 90% of Foster Grandparent volunteer sites will report that they are satisfied with the Foster Grandparent's over-all ability to perform tasks with individual children and/or groups of children as assigned by the site supervisor.
4. **Well-Being** – 80% of the children receiving one on one mentoring and/or tutoring by a Foster Grandparent volunteer will achieve academic, social, or behavioral goal(s) indicated on the individual childcare plans.

In FY15, the Foster Grandparent Program achieved **100%** of their outcome goals.

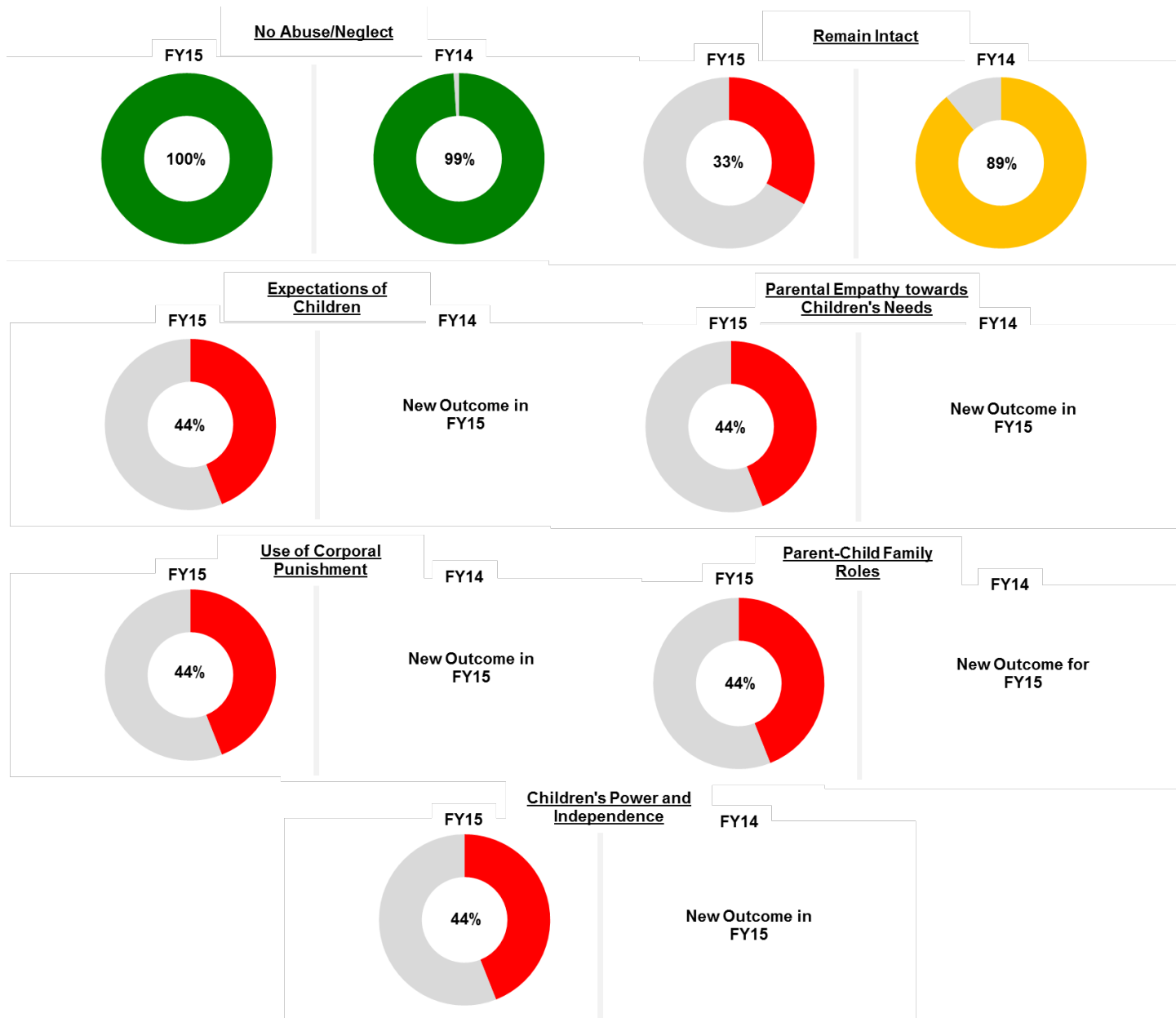


Family Support Services (FSS) – Private

FSS - Private has seven programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of families will remain intact.
- 3-7. **Well-Being** – 85% of parents will demonstrate improvement in the constructs of Expectations of Children, Parental Empathy towards Children's Needs, Use of Corporal Punishment, Parent-Child Family Roles, and Children's Power and Independence as measured by the AAPI – II.

In FY15, FSS – Private achieved **14%** of their outcome goals.

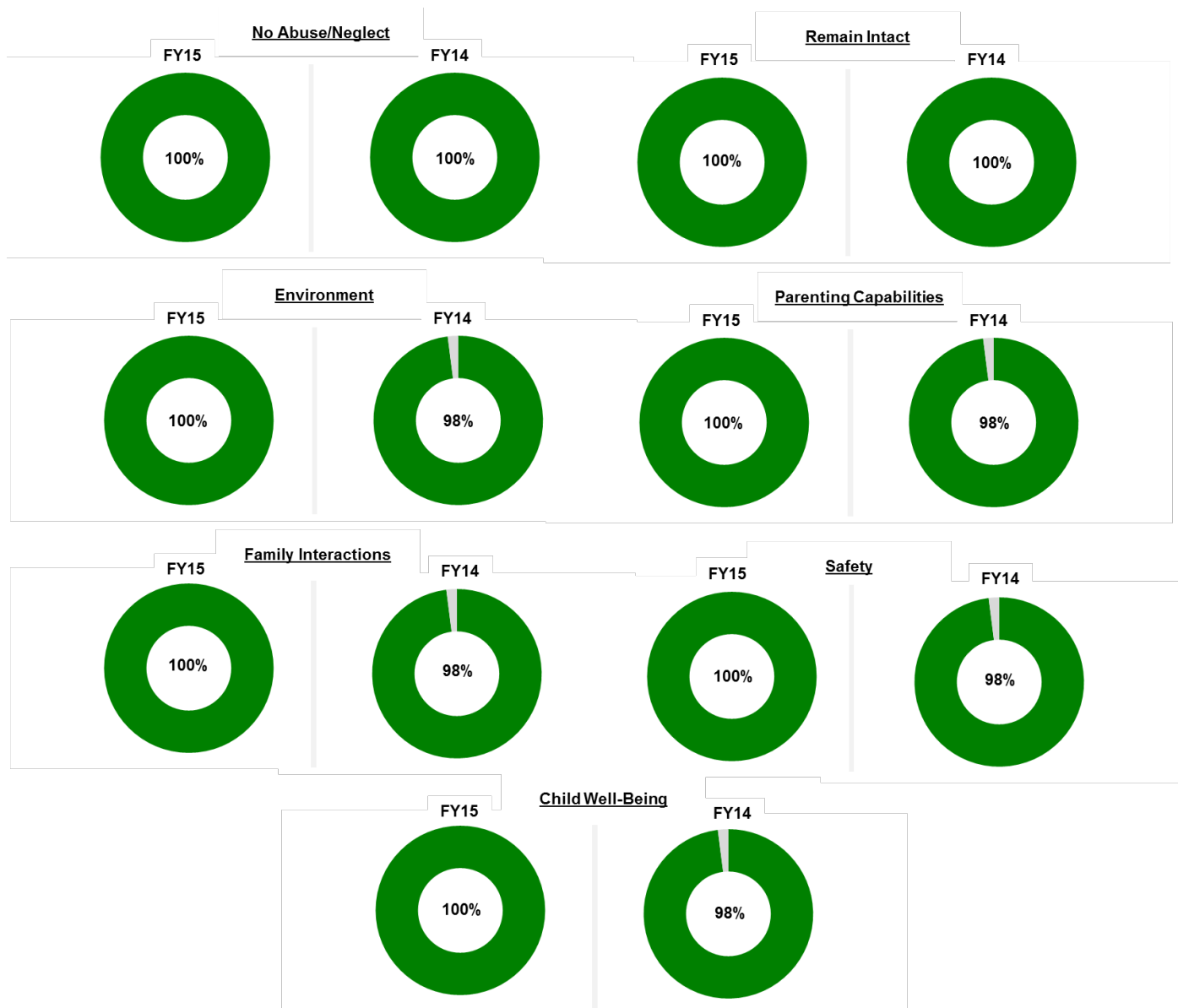


Supplemental Services

Supplemental Services has seven programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of families will remain intact.
- 3-7. **Well-Being** – 70% of parents will demonstrate improvement in the domains of Environment, Parenting Capabilities, Family Interactions, Safety, and Child Well-Being as measured by the NCFAS.

In FY15, Supplemental Services achieved **100%** of their outcome goals.



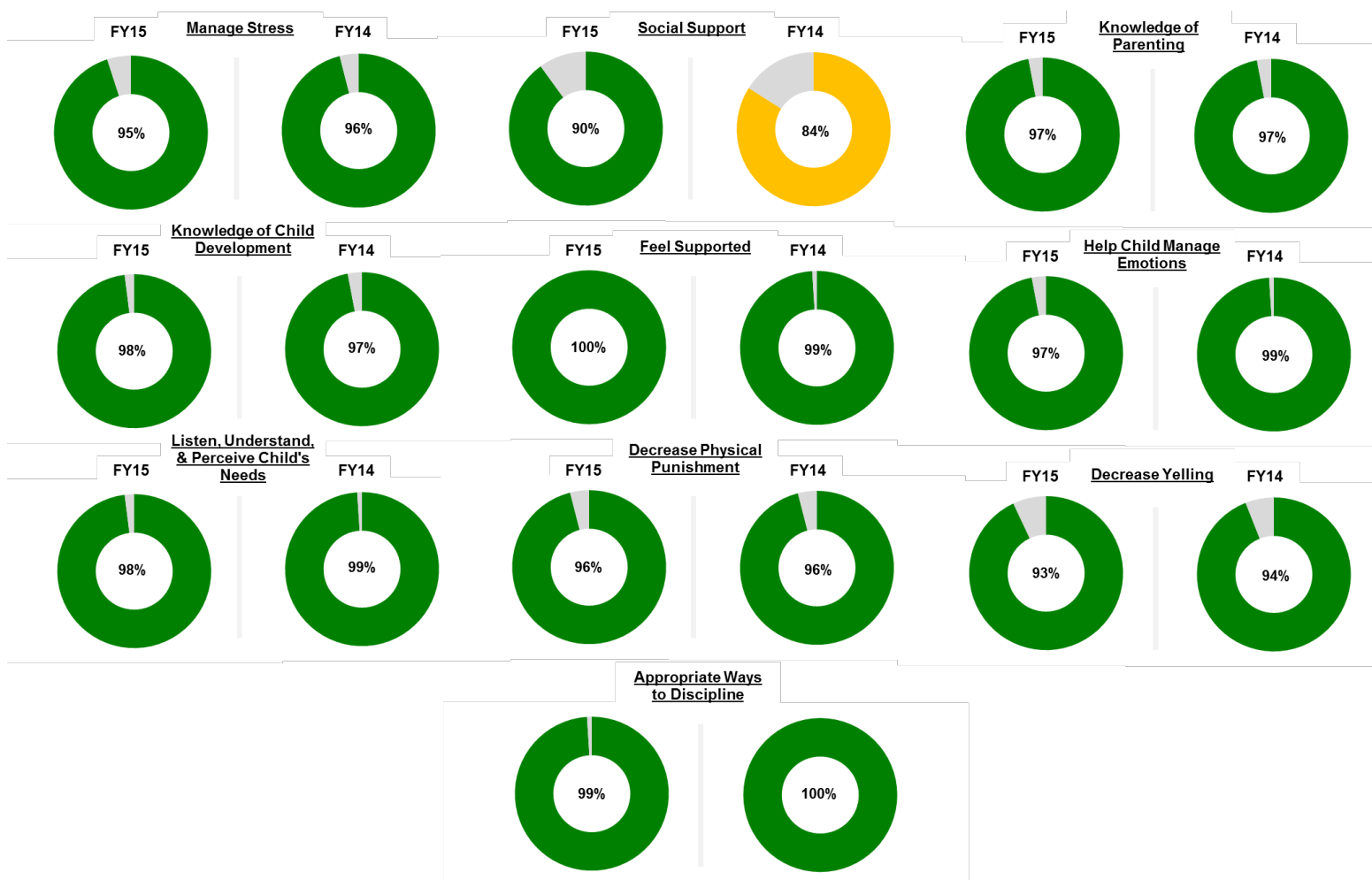
Parent Group

Parent Group has ten programmatic outcomes.

Well-Being – 85% of parents will report the following as a result of participating in the Parent Group:

1. An increase in their ability to manage stress.
2. That their social support connections outside of the parent group have grown.
3. That their knowledge of parenting has improved.
4. Report that their knowledge of child development has improved.
5. Report that they feel supported by the parent group.
6. That they are better equipped to help their child handle his/her own emotions.
7. That they better listen, understand and perceive the needs of their children.
8. A decrease in the use of physical punishment as a discipline approach.
9. A decrease in the use of yelling as a discipline approach.
10. That they have an understanding of developmentally appropriate ways to discipline children.

In FY15, Parent Group achieved **100%** of their outcome goals.



Youth Services

Youth Services report on outcomes that are categorized as: Safety, Permanency, and Well-Being. In FY15, across all Youth Services programs, **100%** of outcomes were achieved (a 23% increase from FY14). In FY14, there was a Multi-Systemic Therapy-Re-Entry program in Chicago, IL for very high risk youth. The program closed in mid-FY14; however, their low outcomes affected Youth Services in FY14. The MST-Re Entry program in Chicago had lower targets than Traditional MST.

The Safety outcome for Youth Services measures that youth served will not be subjects of indicated reports of abuse or neglect (target = 90%). In FY15, across all Youth Services programs, **99%** of youth were not subjects of indicated reports of abuse or neglect (a 1% increase from FY14).

The Permanency and Well-Being outcomes for Youth Services are summarized separately for Comprehensive Community Based Youth Services (CCBYS), Functional Family Therapy (FFT), and Multi-Systemic Therapy (MST), Intensive Family Services & the Youth Diversion Program (YDP) because the targets for the outcomes are different based on the risk level of the population of youth served.

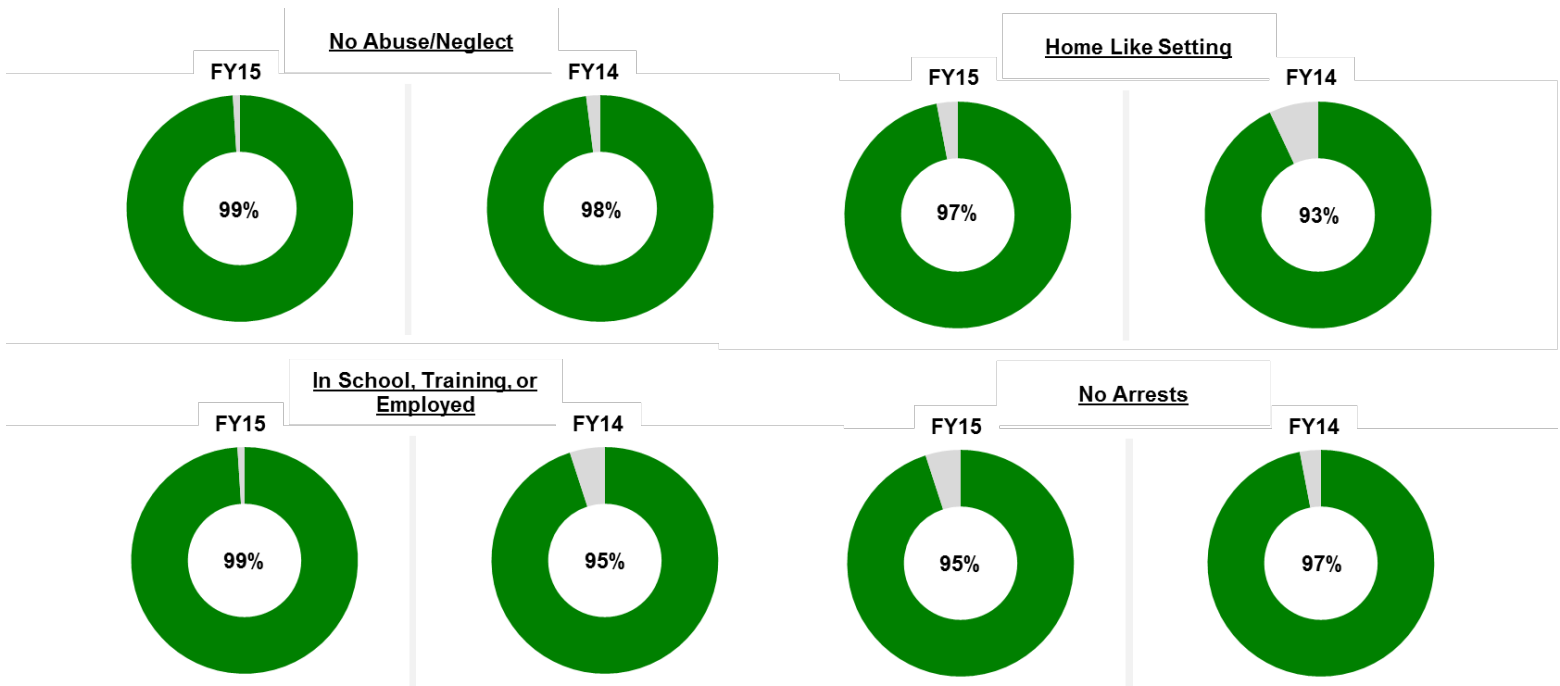
Comprehensive Community Based Youth Services (CCBYS)

Comprehensive Community Based Youth Services (CCBYS) provides services in Waukegan, Effingham, Olney, and Mt. Vernon.

There are four outcomes for CCBYS:

1. **Safety** – 90% of youth served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% youth will be maintained in a home like setting.
3. **Well-Being** – 90% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 90% of youth will be deflected from further involvement in the juvenile justice system.

In FY15, CCBYS achieved **100%** of their outcomes.



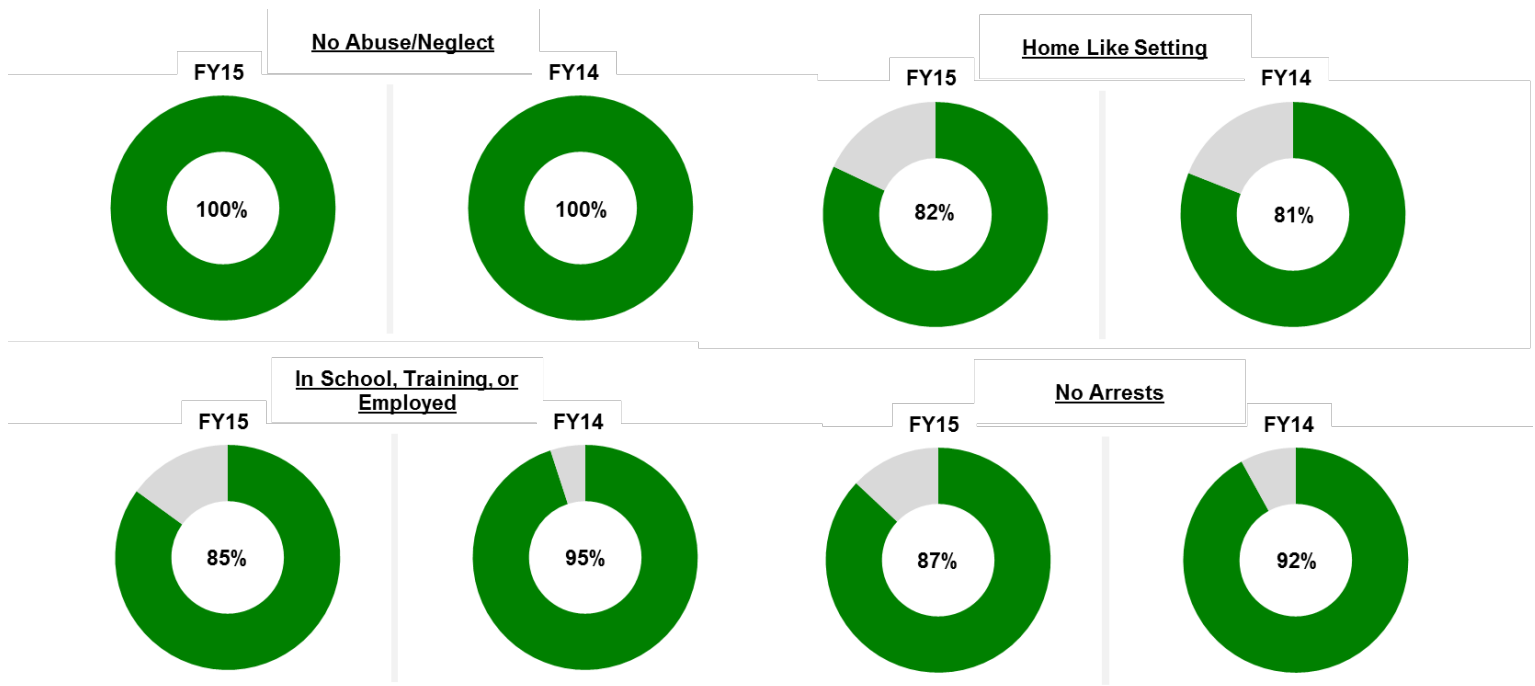
Functional Family Therapy (FFT)

Functional Family Therapy (FFT) is an evidenced based program that provides services in St. Louis, MO and Collinsville, IL.

There are four outcomes for FFT:

1. **Safety** – 90% of youth served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 80% youth will be maintained in a home like setting.
3. **Well-Being** – 80% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 80% of youth will be deflected from further involvement in the juvenile justice system.

In FY15, FFT achieved **100%** of their outcomes.



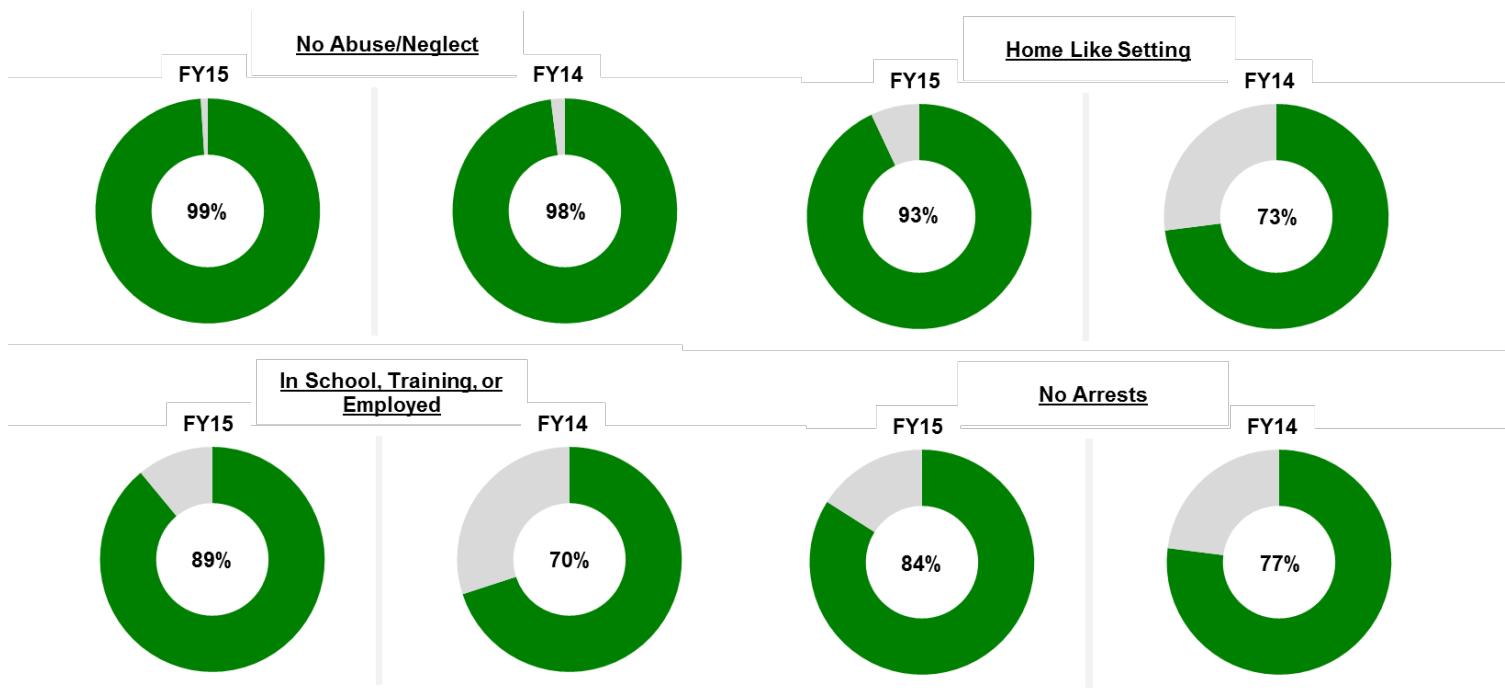
Multi-Systemic Therapy (MST), Intensive Family Services (IFS), and Youth Diversion Program (YDP)

Multi-Systemic Therapy (MST) is an evidence based program that provides services in Kane County and several counties in Southern Illinois, Intensive Family Services (IFS) provides services in Chicago, and the Youth Diversion Program (YDP) provides services in St. Louis, MO.

There are four outcomes for MST, IFS, and YDP:

1. **Safety** – 90% of youth served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 70% youth will be maintained in a home like setting.
3. **Well-Being** – 70% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 70% of youth will be deflected from further involvement in the juvenile justice system.

In FY15, MST, IFS, and YDP achieved **100%** of their outcomes.

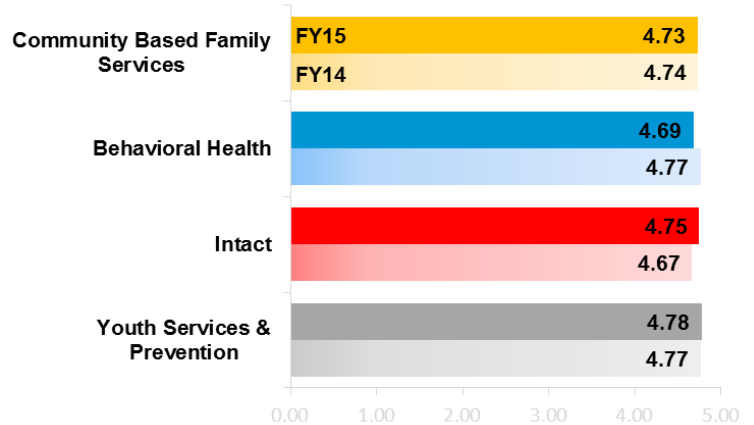


Client Satisfaction

CQIR conducts an annual Client Satisfaction Survey to assess OHU clients' impressions of the quality of services provided. After all surveys have been received, program and Line of Service reports are compiled to provide stakeholders with a Consumer Report Card that compares their program to the programs in their program category and to the Line of Service as a whole. The results from these surveys are used by programs to make improvements in service delivery. Please contact Sarah Tunning, Director of Research for One Hope United, for a report card on any program or region.

Community Based Family Services scored a **4.73** in overall client satisfaction in FY15; no significant change from FY14. Each program category, Behavioral Health, Intact, and Youth Services & Prevention¹, has scored in the "A" range (above **4.50**) the past two fiscal years. There were slight increases in overall client satisfaction in Intact and Youth Services (+1.7% and +0.2%, respectively). Behavioral Health programs had a slight decrease in overall client satisfaction (-1.7%).

Community Based Family Services has Scored an "A" in Overall Satisfaction with OHU the Past Two Fiscal Years



Number of Surveys Returned in FY15	
Behavioral Health	311
Intact	97
Youth Services & Prevention	262
Community Based Family Services = 670	

In FY15, there were 670 surveys returned in Community Based Family Services. This is a 24.04% decrease from the 882 surveys returned in FY14.

¹ Youth Services and Prevention programs were originally categorized into one program category called Youth Services. As CBFS has continued its transition into the Line of Service model, it made sense to separate the Prevention programs from Youth Services. In FY16, Prevention programs will be separated out in the Client Survey process.

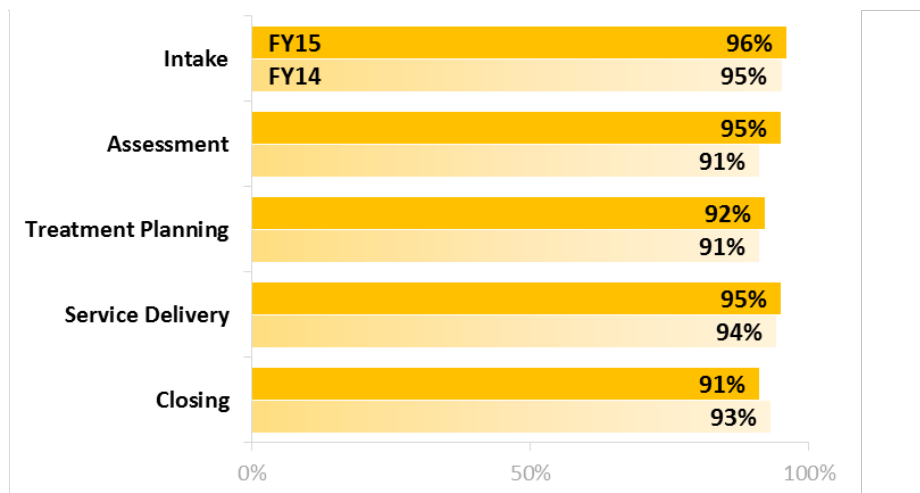
Peer Record Reviews

A Peer Record Review is the practice by which internal peer reviewers examine the quality and appropriateness of services provided to clients by looking at the documentation and quality of service delivery in the client record. The reviewers document their findings and this information is used as a quality improvement tool to: identify staff training needs and provide the necessary information/training; identify and eliminate obstacles that may be keeping staff from providing the highest quality service to their clients and documenting that work; and improve the staff learning process through their participation as reviewers and those reviewed.

CQIR conducts file reviews for each program every quarter and the results are communicated via a report for each review date, as well as in Risk Management reports that show individual program results and results by program category. For the annual report, peer reviews are looked at for the fiscal year beginning July 1st, 2014 through June 30th, 2015. The program categories reviewed for the Community Based Family Services (CBFS) Line of Service in this report are: Behavioral Health, Intact, Prevention, and Youth Services. In FY15, **478** files were reviewed across these program categories.

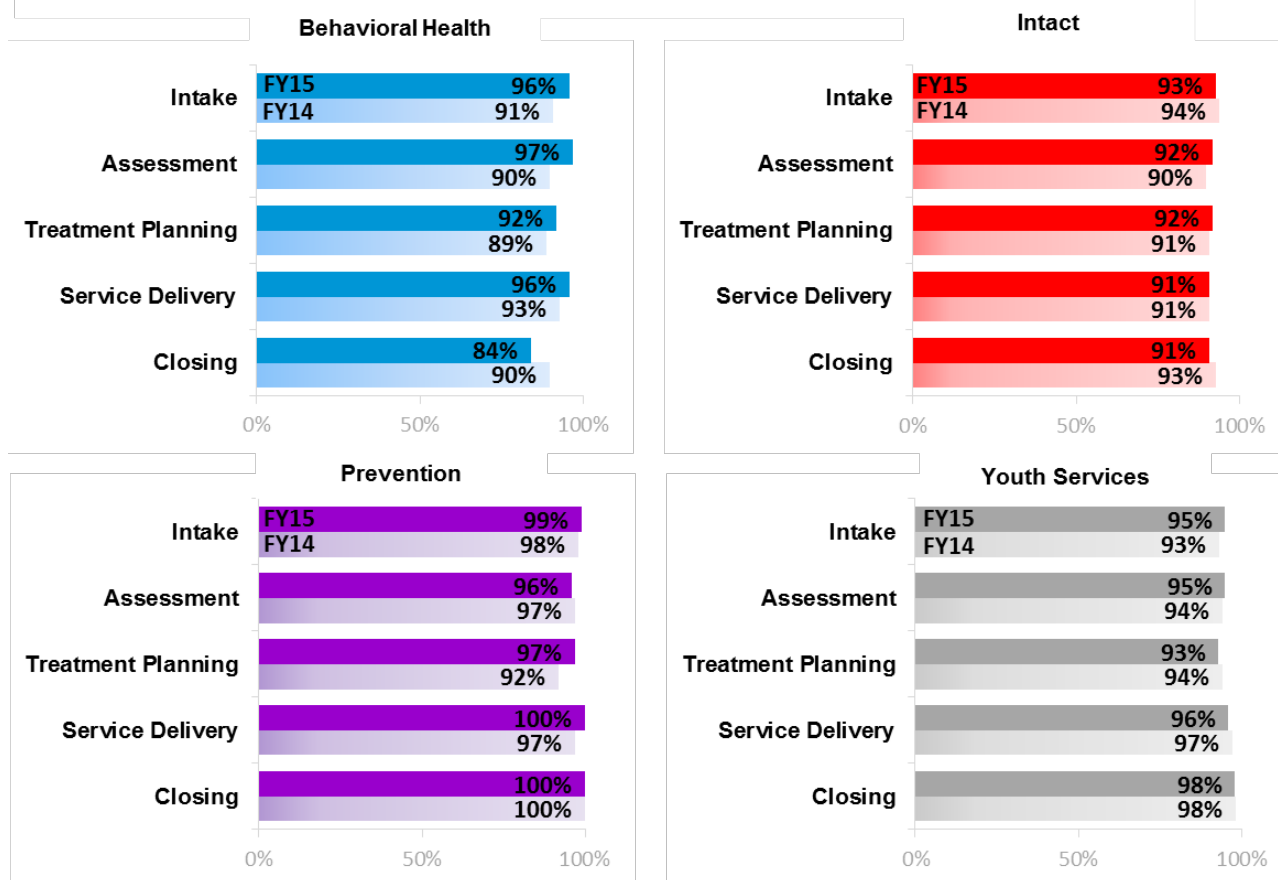
In FY15, CBFS exceeded the agency's 90% target in all areas measured across the case life cycle. This marks two consecutive years that the CBFS Line of Service has exceeded this target. Overall, across all programs and all areas measured CBFS has a **95%** Compliance and Quality rating on Peer Record Reviews in FY15 (up 3% from FY14).

Community Based Family Services Achieved a 95% Compliance & Quality Rating in FY15



When looking at each Program Category separately, Behavioral Health programs have a **95%** overall Compliance and Quality rating, Intact Family Services has a **92%** overall Compliance and Quality rating, Prevention programs have a **98%** overall Compliance and Quality rating, and Youth Services has a **95%** overall Compliance and Quality rating. “Closing” in Behavioral Health programs is the only area across the case life cycle in all Program Categories that did not achieve the agency’s 90% target in FY15. Appendices A-D provides more detailed record review information for FY15 by individual program.

Behavioral Health, Intact, Prevention, and Youth Services all Achieved Overall Compliance & Quality Ratings of over 90% in FY15



During fiscal year 2015 there were **53** case managers, therapists, supervisors, and directors who assisted in reviewing **478** files as a part of the CQIR peer record review process. These champions of quality serve as an integral part of the continual process of assessing the quality of our files and work, providing feedback on how to improve, and ensuring that plans of correction are being completed on time.

Peer Record Reviewers				
Bonita Porter	Latonya Hale	Felicia Foster	Dawn White	Kristy Hardwick
TeNnile Ray	Carolina Rodriguez	Tamika Cox	Deborah Packman	Lauren Kessler-Schott
Shirley Hawkins	Mary Mann	Ramona Dixon	Heather Kelly	Melissa Webster
Ana Bermudez	Beth Ericksen	Latonya Hale	Howard Coon	Olivia Buttram
Mallory Gamer	Terry Kean	Afthan Reents	Jen Malee	Penny Hanks
Joanna Zakhem	Katie Jackson	Ashley Linkey	Jenna Tedrick	Rebecca Chavez
Linsay Heimberg	Laura Oddi	Brigette Spelbring	Jennifer D. Shook	Sara Richardson
Michael Williams	Kelly McGee	Brionne Rhodes	Jennifer Witzel	Sarah Downen
Jasmin Weaver	Reneva Lane	Chanta Love	Jessica Perry	Tabitha Reaney
Renata Waters	Denise Herron	Cindy Rotman	Kara Lowry	Tawnya Hackler
Michelle Lonzo	Jakkia Booth	Kristen Kinnear		
Total = 53				

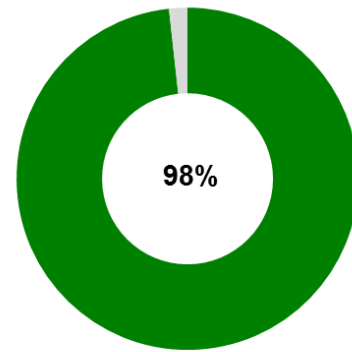
Thank you for your time, efforts, and commitment to quality service delivery.

Supervisory Systems Review

On an annual basis CQIR conducts an assessment of supervision provided by each direct service supervisor in the organization. The importance of regular supervision is critical in ensuring that clients and families are receiving quality services and it also plays a role in employee satisfaction and retention. The review uses a standardized form and involves a check of a number of supervision tasks. Although there are several items addressed, there is a concentration on the frequency of supervision and quality documentation of supervisory activities. One Hope United has a 90% target for Supervisory Systems Compliance.

Fifteen Supervisory Systems Reviews were completed in the Community Based Family Services Line of Service. In FY15, Community Based Family Services achieved a **98%** in Supervisory Systems Compliance (a 1% increase from FY14).

Community Based Family Services Achieved a 98% in Supervisory Systems Compliance



Case Consultations & Priority Reviews

A priority review is a practice that examines the quality of services provided to a client or family and compliance with program policies and procedures. Priority reviews are conducted in the event of a serious injury to a client, a client commits a crime/charged with a felony, there is a client death, or suicide attempt. Case Consultations are voluntary and can be conducted on any case upon the request of a Supervisor or Director. Case Consultations usually occur on challenging cases where an objective viewpoint is needed in order to move treatment forward or make treatment recommendations.

FY15 Case Consultations and Priority Reviews			
Program Category	Case Consultations	Priority Reviews	TOTAL
Behavioral Health	1	1	2
Intact	3	7	10
Prevention	0	1	1
Youth Services	0	2	2
TOTAL	4	11	15

Case Consultations are preventative in nature and are meant to be used as a method to share thoughts and ideas about a case that may be challenging. Community Based Family Services conducted 4 Case Consultations in FY15 (down 2 from FY14).

There were 11 Priority Reviews conducted in FY15 (up 3 from FY14). There were 5 Priority Reviews conducted due to suicide attempts made by clients, 3 Priority Reviews were conducted due to investigations conducted by the Office of the Inspector General due to deaths of previous clients, 2 were conducted due to deaths of current clients, and 1 was conducted due to a client being the victim of a shooting in the community.

Below are the lessons learned from the Priority Reviews conducted this year:

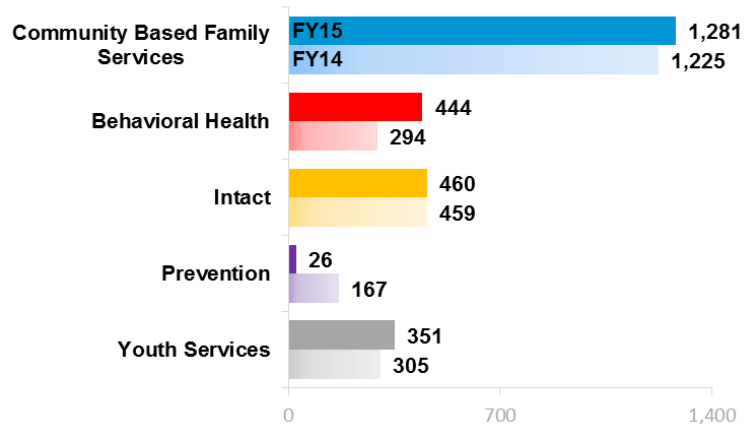
- There needs to be a response from a parent whose child is on run. Staff can reinforce the normal expectations of what to do when their child's whereabouts are unknown and express concerns and dangers of a child being on run.
- For those clients that are chronic runners, staff should develop a plan of locations where the child frequents and the places the client might go when not at home which can assist in locating the child when on run.
- It is important to have a clear idea of a client's mental health diagnosis to assist in treatment and stabilizing the client.
- Barriers such as insurance impede a client from receiving sufficient and appropriate services.
- Staff would benefit from additional training in working with clients who have serious mental health issues who are not agreeable to obtaining necessary treatment.
- A long term plan would be to develop a suicide protocol across CBFS programs.
- Improve record documentation for supervised visits; generating more detailed notes.
- Ensure case notes are completed and entered prior to case closure.
- Even with good work, sometimes things happen that cannot be foreseen.
- Ensure documentation in SACWIS reflects the documentation within the record.
- Once a case is closed and a death occurs in a family, a note and/or card can be sent to provide condolences to the family.
- When closing a case, there needs to a clear discharge process in place.

Incident Reports

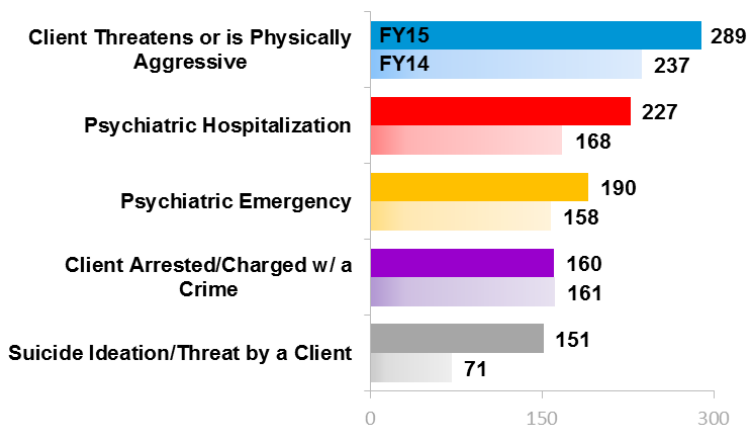
An incident is any occurrence that falls outside of what would typically be identified as common or ordinary events for clients, staff or facilities. These incidents may have the potential for increased risk for clients and the liability of the agency. CQIR provides quarterly and monthly reports on incident trends. Annually, this report summarizes the number of incidents for the fiscal year and the most common incidents experienced in the agency over the past two fiscal years.

Community Based Family Services experienced a 4.6% increase in the number of incidents in FY15. Behavioral Health programs had the largest percent increase in the number of incidents (+51.0%) followed by Youth Services (+15.1%), and Intact (+0.2%). Prevention programs had the largest percent decrease in the number of incidents (-84.4%).

Community Based Family Services Experienced an Increase in the Number of Incidents in FY15



Top 5 Most Common Incident Types



In FY15, Clients Threatening/Being Physically Aggressive, Psychiatric Hospitalizations, Psychiatric Emergencies, Clients being Arrested/Charged w/ Crimes, and Clients having Suicidal Ideations/Threatening Suicide were the 5 most common incident types. All of these incident types with the exception of Clients being Arrested/Charged with Crimes, occurred at greater frequencies than they did in FY14. Increases ranged from a 22% increase (in Clients Threatening/Being Physically Aggressive) to a 113% increase (in Clients having Suicidal Ideations/Threatening Suicide).

Employee Recognition

Two methods of awarding staff excellence are supported by CQIR. The first is the STAR Award for individual excellence, and the second is the GALAXY Award for team excellence. The awards recognize staff that have gone above and beyond “normal” work duties, exhibited exemplary performance and done their job under circumstances that are “out of the ordinary”. There were 4 STAR awards and 2 GALAXY awards distributed in the Community Based Family Services Line of Service this year.



In FY15, we were proud to recognize these Community Based Family Services employees with a STAR award.

STAR Award Recipients	
Liza Simon-Roper – Supervisor (Gurnee)	Mallory Gamer – Therapist (St. Charles)
Jill Novacek – Director (St. Charles)	Laura Oddi – Therapist (Chicago)

In FY15, we were proud to recognize these Community Based Family Services teams with a GALAXY award.

GALAXY Award Recipients	
Counseling Programs (Gurnee)	Youth Diversion Program, Supplemental Services, & Functional Family Therapy (St. Louis)

Quality Improvement Teams

Community Based Family Services assemble into Quality Improvement Teams (QITs) by program and leadership functions. This gives each employee the power to implement improvement within their own program or team. The QIT is focused on improving the quality of service at the local level using data, effective problem solving, and action planning.

Across the agency, there was an overall attendance rate of **96.1%** in FY15. The attendance rate in the Community Based Family Services Line of Service was **99.8%**. The following Local, Director and Line of Service Quality Improvement Teams were assembled three times this year in the Community Based Family Services Line of Service.

Quality Improvement Teams		
Local	Director	Line of Service
The Eclectics The Facilitators Connect 6 OHU Advocates Social Works for Justice – KIT Super Crew Behavioral Health South The Chain Links WIN3 Youth Encouragers and Stabilizers Spiritual Warriors Youth Empowerment Program Super Glue Sticks The Big Ten The Behavior Busters The Pioneers	The Wanderers The Warriors Exception Eight ASAP Intact Southern	Community Based Family Services

Appendix A – Behavioral Health

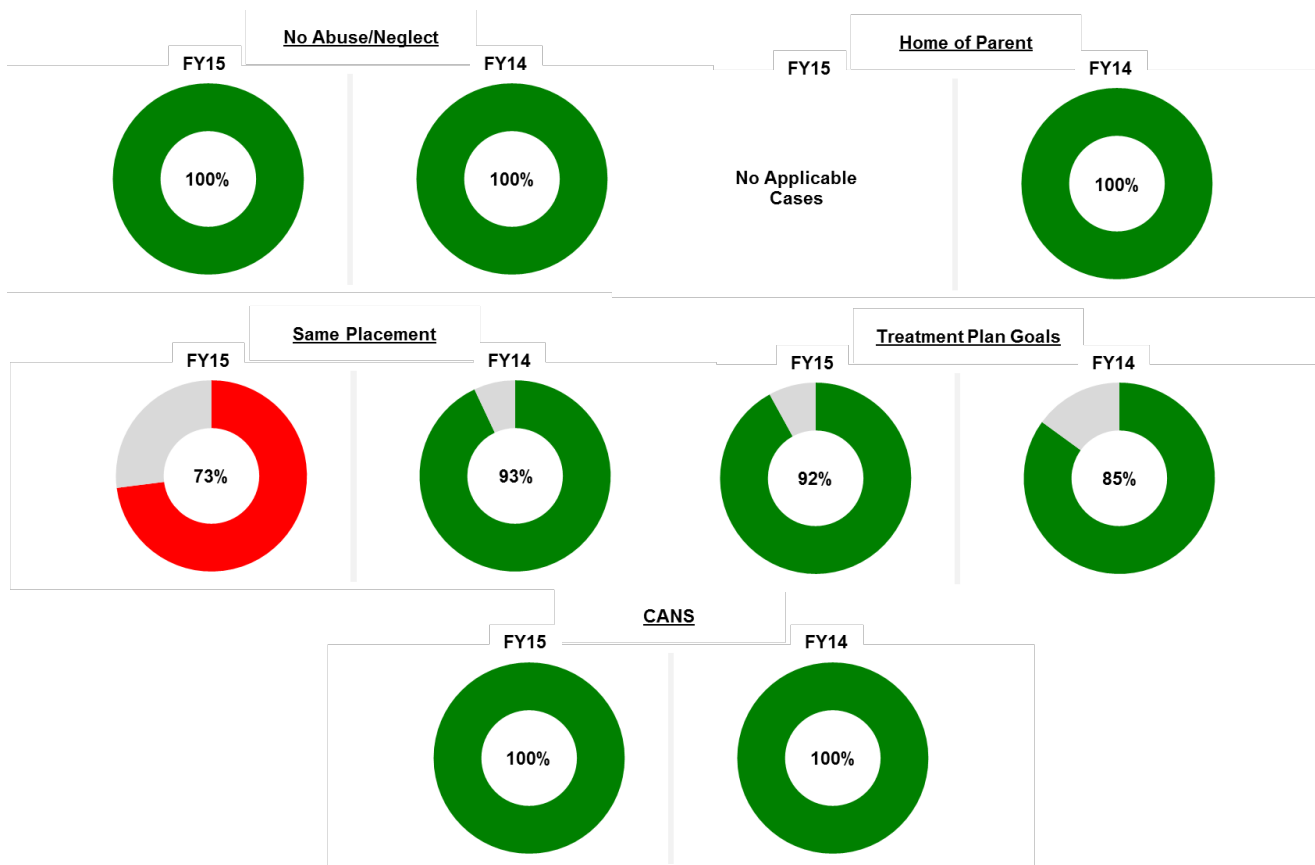
Child Welfare Counseling – Charleston (Foster Care Counseling, Specialized Foster Care Counseling & Comprehensive Counseling)

Outcomes

Child Welfare Counseling has five programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of clients who reside in the home of a parent will remain at home.
3. **Permanency** – 90% of clients who reside in foster care or other out of home placement will remain in the placement or achieve permanency.
4. **Well-Being** – 80% of clients will achieve at least 75% of their treatment plan goals.
5. **Well-Being** – 80% of clients will show an overall improvement between initial and closing CANS.

In FY15, Child Welfare Counseling – Charleston achieved **75%** of their outcome goals.



Peer Record Reviews

Overall Child Welfare Counseling – Charleston achieved a **98%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) Child Welfare Counseling – Charleston exceeded the agency's 90% target in all areas measured.

Child Welfare Counseling - Charleston Exceeded the Agency's 90% in all Areas Measured



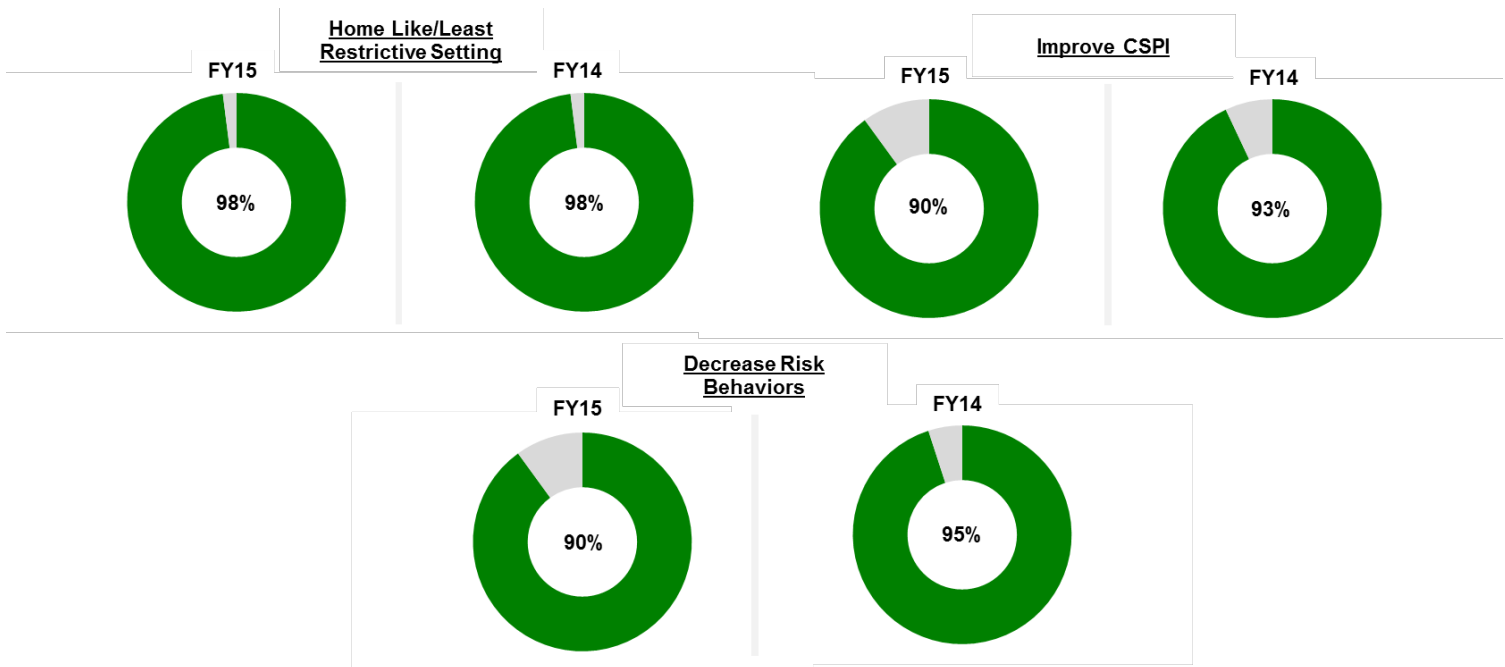
SASS (Mt. Vernon and Effingham)

Outcomes

SASS has three programmatic outcomes.

1. **Permanency** – 90% of youth will remain in a home like setting or least restrictive setting at time of discharge.
2. **Well-Being** – 85% of youth who completed services will improve or maintain their CSPI score from initial screen to closing screen.
3. **Well-Being** – 85% of youth will decrease their risk behaviors as evidence by a reduction in the risk behavior domain on the CSPI at time of discharge.

In FY15, SASS achieved **100%** of their outcome goals.

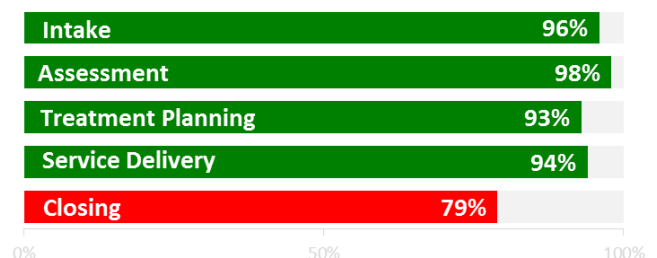


Peer Record Reviews

Overall SASS achieved a **95%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) SASS exceeded the agency's 90% target in Intake, Assessment, Treatment Planning, and Service Delivery. Closing did not meet the agency's target (within 11%). The item that most affected Closing from meeting the target was:

- In preparing for termination, was the need for follow up/aftercare services determined with the client/family?

SASS Exceeded the Agency's 90% Target in Intake, Assessment, Treatment Planning, and Service Delivery



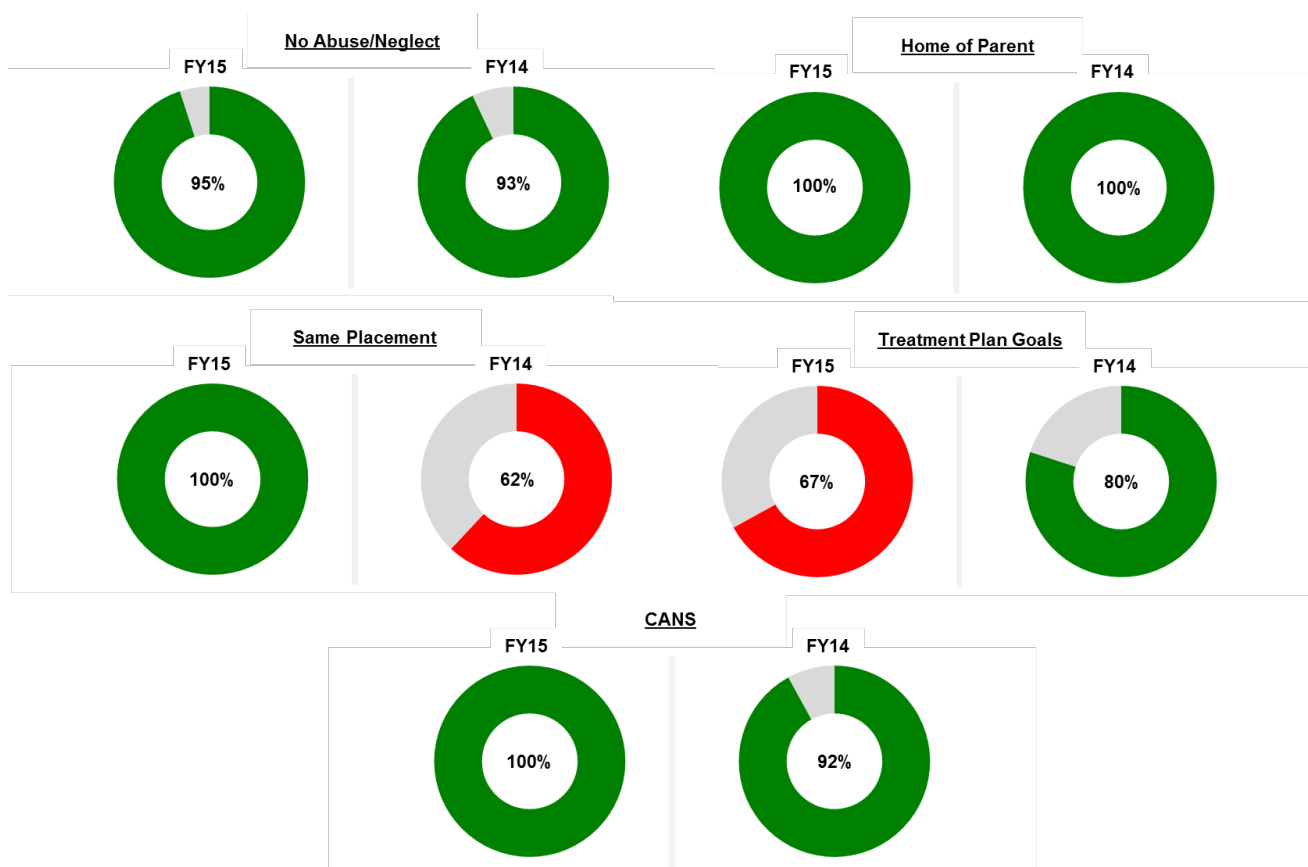
Child Welfare Counseling – Gurnee (Foster Care Counseling & Comprehensive Counseling)

Outcomes

Child Welfare Counseling has five programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of clients who reside in the home of a parent will remain in the home at the time of discharge.
3. **Permanency** – 90% of clients who reside in foster care or other out of home placement will remain in the placement or achieve permanency.
4. **Well-Being** – 80% of clients will achieve at least 75% of their treatment plan goals.
5. **Well-Being** – 80% of clients will show an overall improvement between initial and closing CANS.

In FY15, Child Welfare Counseling – Gurnee achieved **80%** of their outcome goals.



Peer Record Reviews

Overall Child Welfare Counseling – Gurnee achieved a **99%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, and Service Delivery) Child Welfare Counseling – Gurnee exceeded the agency's 90% target in all areas measured.

Child Welfare Counseling - Gurnee Exceeded the Agency's 90% Target in all Areas Measured



0% 50% 100%

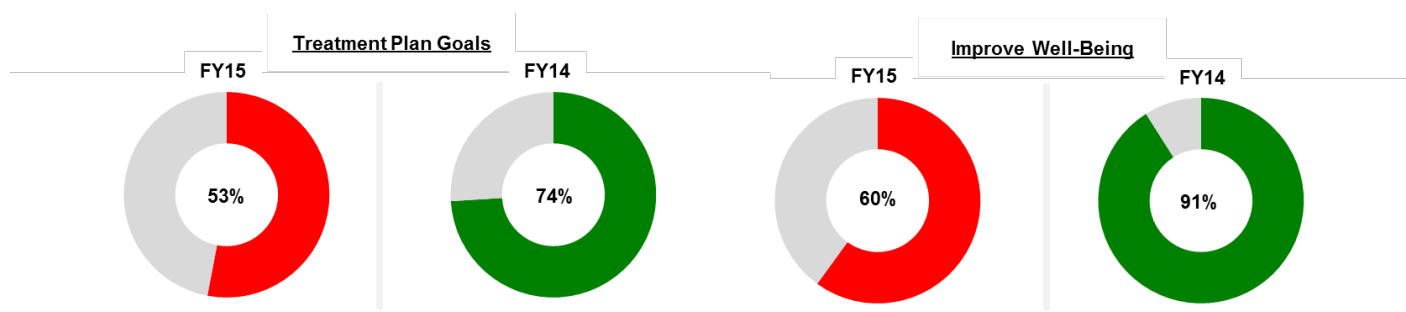
Community Counseling – Gurnee

Outcomes

Community Counseling has two programmatic outcomes.

1. **Well-Being** – 70% of clients will achieve at least 75% of their treatment plan goals.
2. **Well-Being** – 75% of clients will demonstrate improved well-being as measured by a standardized instrument, pre and post service.

In FY15, Community Counseling – Gurnee achieved **0%** of their outcome goals.



Peer Record Reviews

Overall Community Counseling – Gurnee achieved a **97%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) Community Counseling – Gurnee exceeded the agency's 90% target in all areas measured.

Community Counseling - Gurnee Exceeded the Agency's 90% Target in all Areas Measured



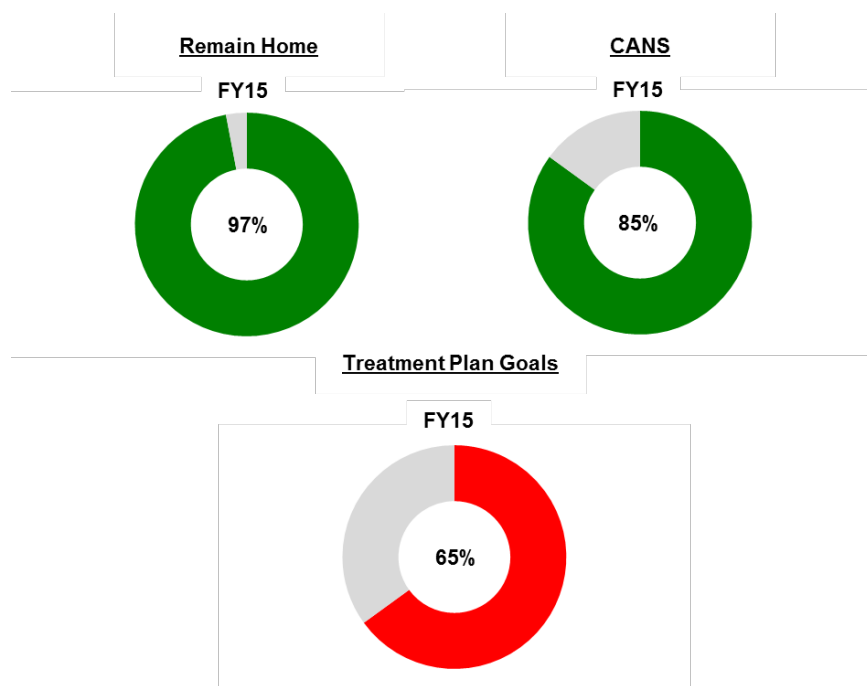
The Healing Path – Gurnee

Outcomes

The Healing Path has three programmatic outcomes.

1. **Permanency** – 90% of children served will remain in their home at discharge
2. **Well-Being** – 80% of clients that have received services for 6 months will demonstrate an improvement on the CANS.
3. **Well-Being** – 80% of clients will achieve at least 75% of their treatment plan goals.

In FY15, The Healing Path achieved **67%** of their outcome goals. (The Healing Path did not collect outcomes in FY14).

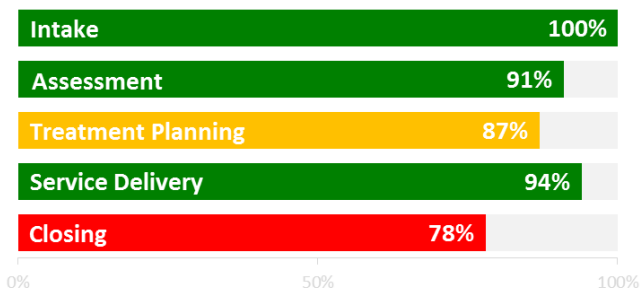


Peer Record Reviews

Overall The Healing Path achieved a **92%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) The Healing Path exceeded the agency's 90% target in Intake, Assessment, and Service Delivery. Treatment Planning and Closing were below the agency's target (within 3% and 12%, respectively). The items that most affected Treatment Planning and Closing from meeting the target were:

- Is the current copy of the service plan/treatment plan/case plan in the file?
- Was the Closing Summary completed within 30 days of the case closing date?
- Did the Case Manager appropriately move towards closure/termination as evidenced by service delivery notes and progress reports?

The Healing Path Exceeded the Agency's 90% in Intake, Assessment, and Service Delivery



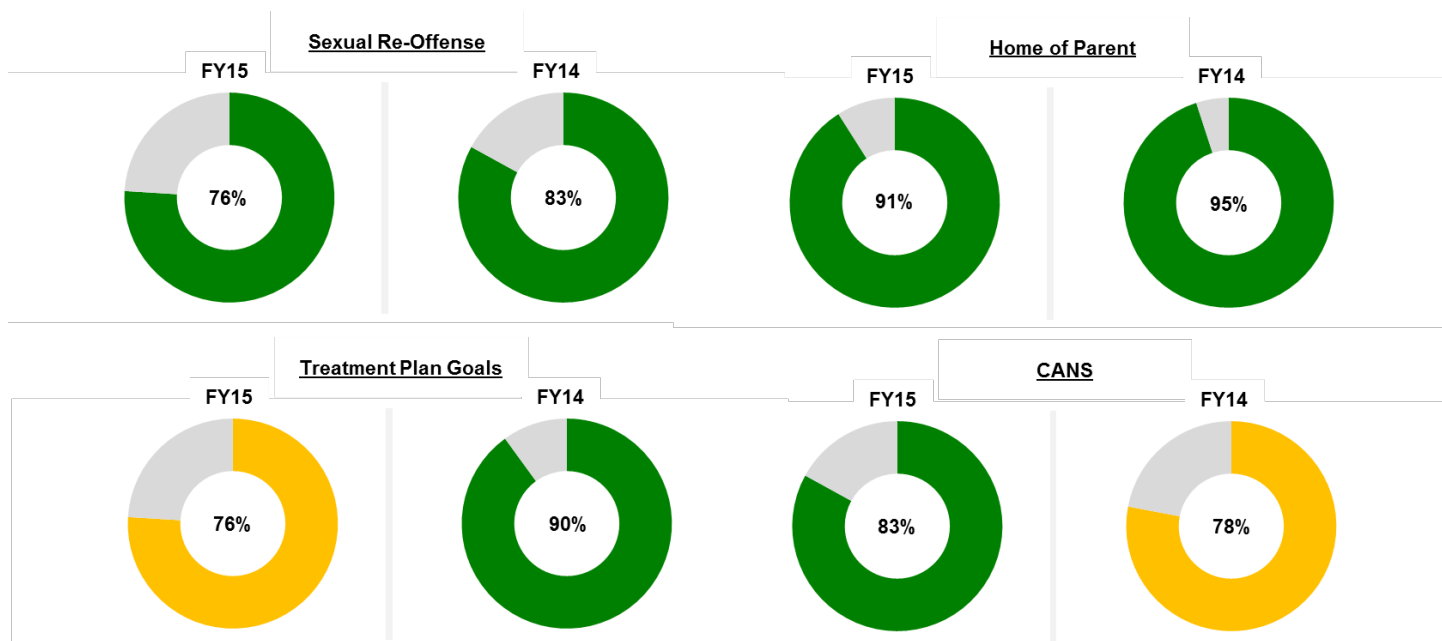
Children/Adolescents with Sexual Behavior Problems – Gurnee/Kenosha

Outcomes

Sexual abuse counseling has four programmatic outcomes.

1. **Safety** – 75% of clients will have a reduced level of risk for sexual re-offense as measured by the ERASOR and JSOAP (adolescents).
2. **Permanency** – 90% of clients who reside in the home of a parent will remain in the home at the time of discharge.
3. **Well-Being** – 80% of clients will achieve at least 90% of their treatment plan goals.
4. **Well-Being** – 80% of clients will show an overall improvement between initial and closing CANS.

In FY15 Children/Adolescents with Sexual Behavior Problems – Gurnee/Kenosha achieved **75%** of their outcome goals.



Peer Record Reviews

Overall Children/Adolescents with Sexual Behavior Problems – Gurnee/Kenosha achieved a **97%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) Children/Adolescents with Sexual Behavior Problems – Gurnee/Kenosha exceeded the agency's 90% target in all areas measured.

Children/Adolescents with Sexual Behavior Problems - Gurnee/Kenosha Exceeded the Agency's 90% Target in all Areas Measured



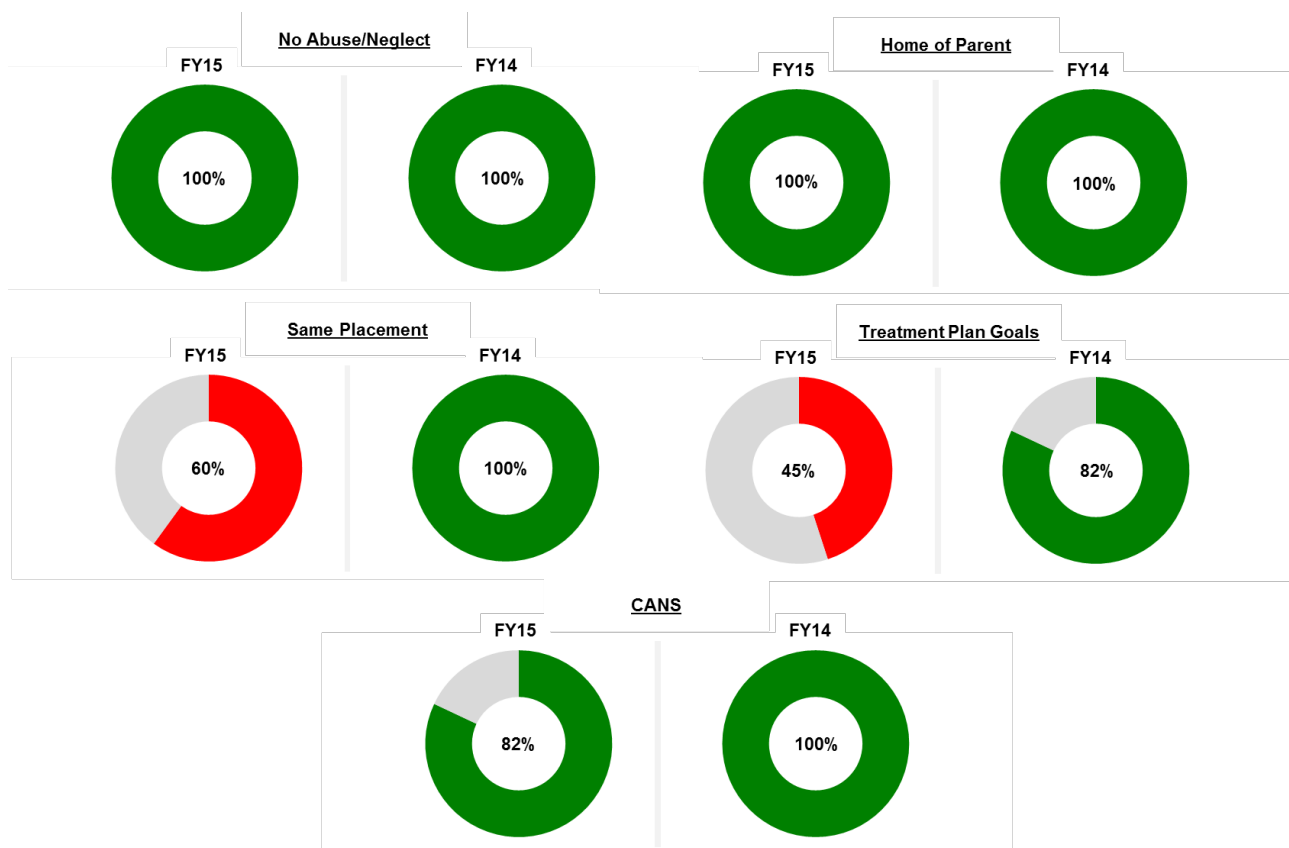
Child Welfare Counseling – River Valley (Foster Care Counseling & Comprehensive Counseling in Joliet and St. Charles)

Outcomes

Child Welfare Counseling has five programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of clients who reside in the home of a parent will remain in the home at the time of discharge.
3. **Permanency** – 90% of clients who reside in foster care or other out of home placement will remain in the placement or achieve permanency.
4. **Well-Being** – 80% of clients will achieve at least 75% of their treatment plan goals.
5. **Well-Being** – 80% of clients will show an overall improvement between initial and closing CANS.

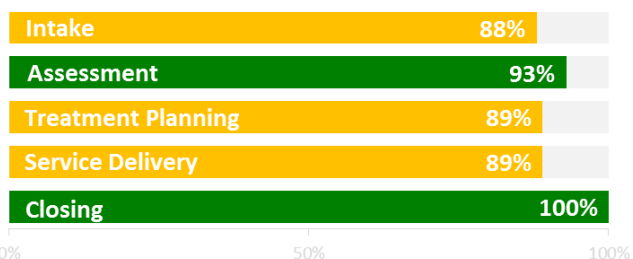
In FY15, Child Welfare Counseling – River Valley achieved **60%** of their outcome goals.



Peer Record Reviews

Overall Child Welfare Counseling – River Valley achieved a **90%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) Child Welfare Counseling – River Valley exceeded the agency’s 90% target in Assessment and Closing. Intake, Treatment Planning, and Service Delivery were below the agency’s target (within 2%, 1%, and 1%, respectively). The items that most affected Intake, Treatment Planning, and Service Delivery from reaching the target were:

Child Welfare Counseling - River Valley Exceeded the Agency's 90% Target in Assessment and Closing



- Is there documentation in the record of written correspondence with the funding/referral source indicating the actual date of case opening and/or case closing?
- Consent for Mental Health Services
- Was the current service plan/treatment plan/case plan written, signed and dated by the Case Manager/therapist and supervisor within the required timeframe of the program contract?
- Is there evidence in the record that the family participated in the development of the service/treatment plan?
- Is there a signed staff statement indicating the client and parent/guardian, as applicable, has been given a copy of the ITP?
- Case note documentation reflects the level of client contact per program requirements?

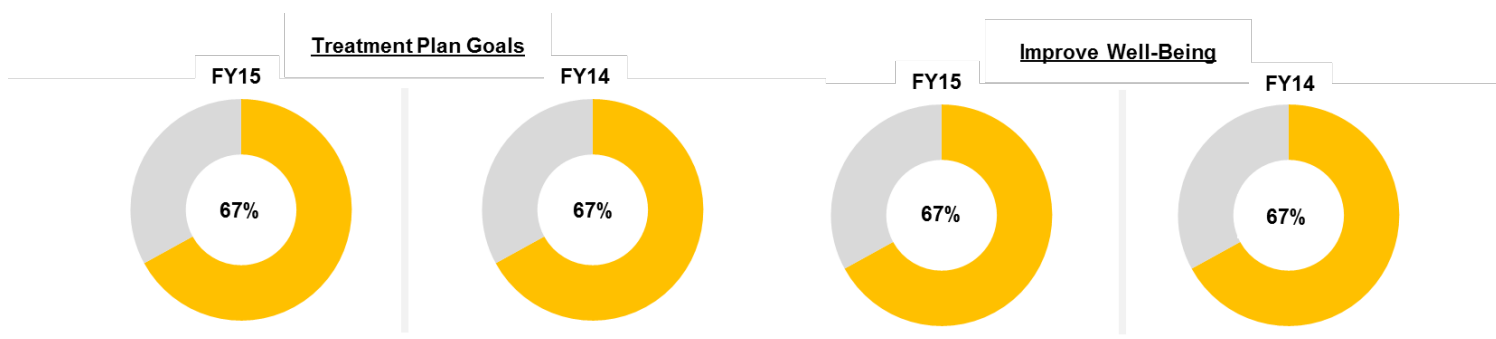
Community Counseling – St. Charles (Community Counseling & Anger Management)

Outcomes

Community Counseling has two programmatic outcomes.

1. **Well-Being** – 70% of clients will achieve at least 75% of their treatment plan goals.
2. **Well-Being** – 75% of clients will demonstrate improved well-being as measured by a standardized instrument, pre and post service.

In FY15, Community Counseling – St. Charles achieved **0%** of their outcome goals.



Peer Record Reviews

Overall Community Counseling – St. Charles achieved a **100%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) Community Counseling – St. Charles exceeded the agency's 90% target in all areas measured.

Community Counseling- St. Charles Exceeded the Agency's 90% in all Areas Measured



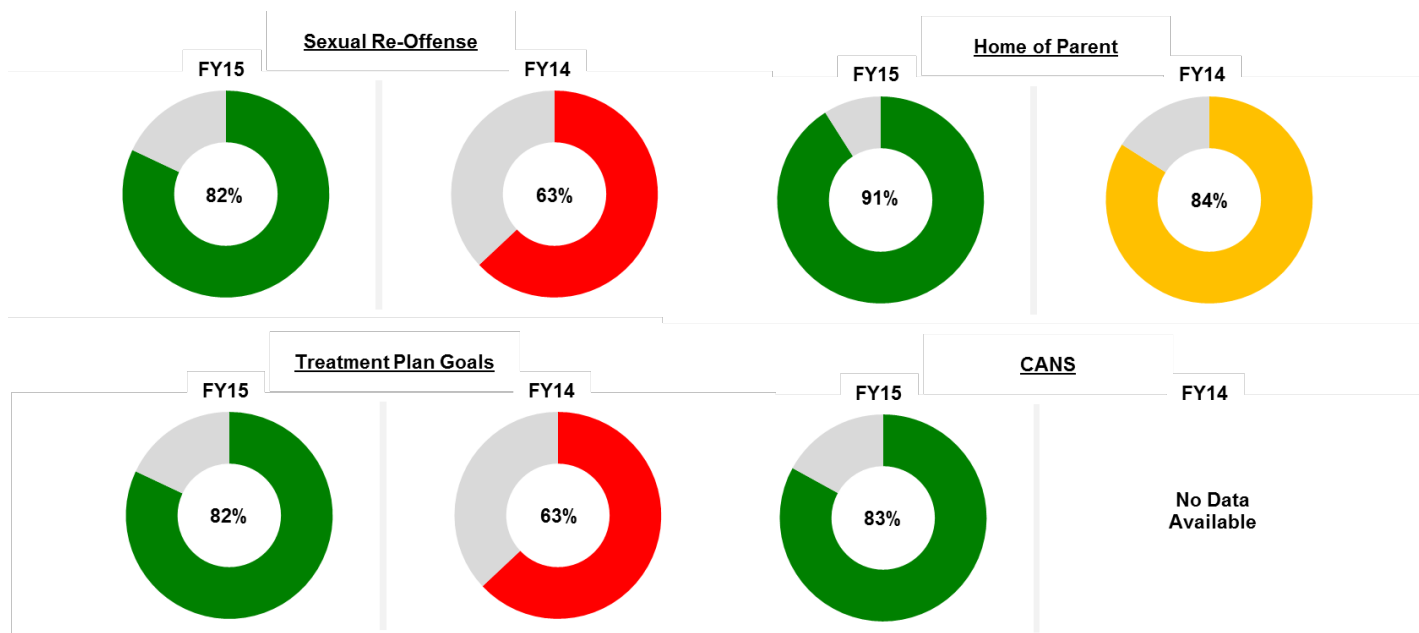
Adolescents with Sexual Behavior Problems – St. Charles

Outcomes

Sexual abuse counseling has four programmatic outcomes.

1. **Safety** – 75% of clients will have a reduced level of risk for sexual re-offense as measured by the ERASOR and JSOAP (adolescents).
2. **Permanency** – 90% of clients who reside in the home of a parent will remain in the home at the time of discharge.
3. **Well-Being** – 80% of clients will achieve at least 90% of their treatment plan goals.
4. **Well-Being** – 80% of clients will show an overall improvement between initial and closing CANS.

In FY15 Adolescents with Sexual Behavior Problems – St. Charles achieved **100%** of their outcome goals.

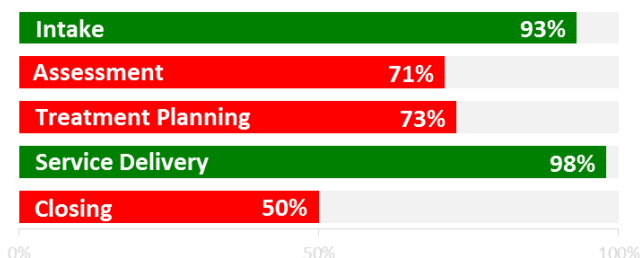


Peer Record Reviews

Adolescents with Sexual Behavior Problems – St. Charles achieved an **86%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) Adolescents with Sexual Behavior Problems – St. Charles exceeded the agency's 90% target in Intake and Service Delivery. The items that affected Assessment, Treatment Planning, and Closing from meeting the target were:

- Is a copy of the Initial Assessment Report in the record?
- Is the current copy of the service plan/treatment plan/case plan in the file?
- Is the Closing Summary in the record?

Adolescents with Sexual Behavior Problems - St. Charles Exceeded the Agency's 90% Target in Intake and Service Delivery



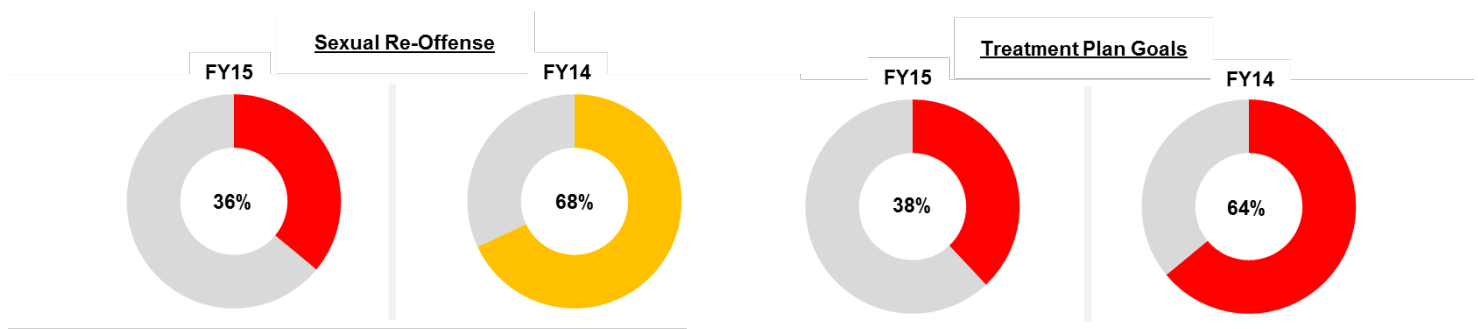
Adult Sexual Abuse Treatment – St. Charles

Outcomes

Sexual abuse counseling has two programmatic outcomes.

1. **Safety** – 75% of clients will have a reduced level of risk for sexual re-offense as measured by the Static 99 and Vermont (adults).
2. **Well-Being** – 80% of clients will achieve at least 90% of their treatment plan goals.

In FY15 Adult Sexual Abuse Treatment achieved **0%** of their outcome goals.

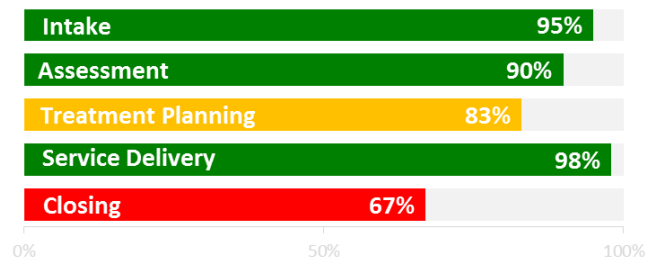


Peer Record Reviews

Overall Adult Sexual Abuse Treatment achieved a **91%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) Adult Sexual Abuse Treatment exceeded the agency's 90% target in Intake, Assessment, and Service Delivery. The items that affected Treatment Planning and Closing from meeting the target were:

- Was the current service plan/treatment plan/case plan written, signed and dated by the Case Manager/therapist and supervisor within the required timeframe of the program contract?
- Is the Closing Summary in the record?

Adult Sexual Abuse Treatment Exceeded the Agency's 90% Target in Intake, Assessment, and Service Delivery



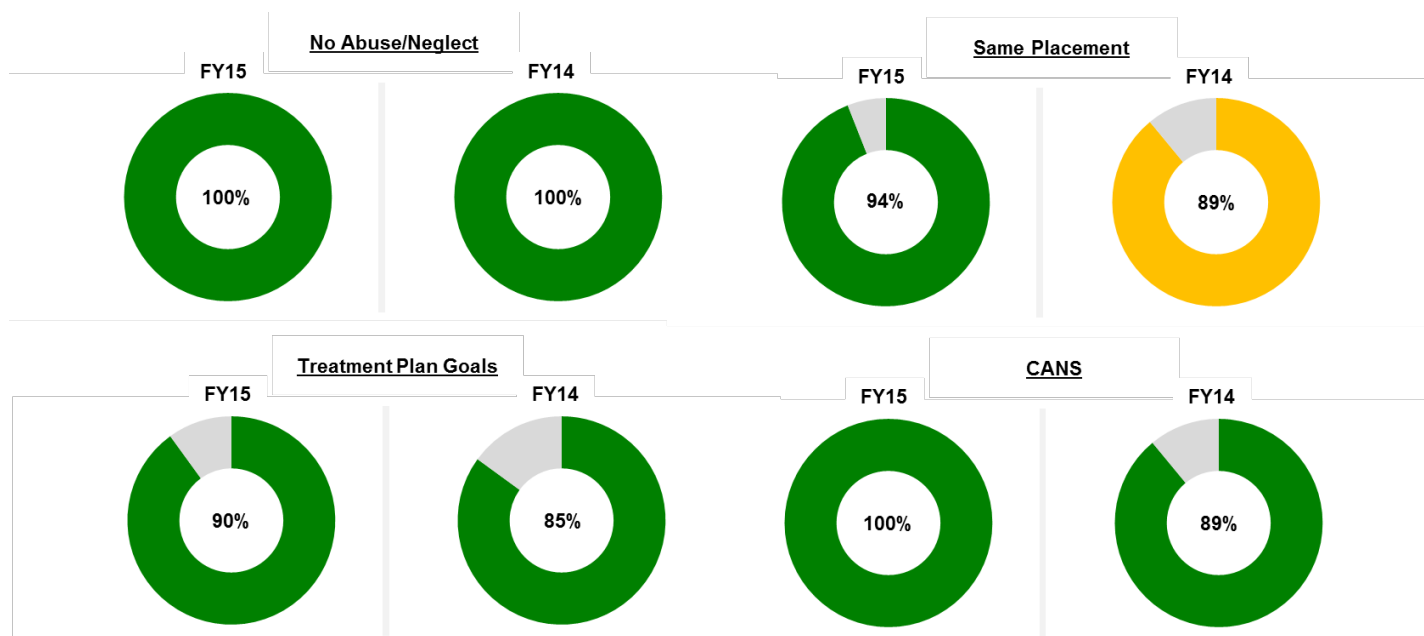
Foster Care Counseling – Cook County

Outcomes

Foster Care Counseling – Cook County has four programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of clients who reside in foster care or other out of home placement will remain in the placement or achieve permanency.
3. **Well-Being** – 80% of clients will achieve at least 75% of their treatment plan goals.
4. **Well-Being** – 80% of clients will show an overall improvement between initial and closing CANS.

In FY15, Foster Care Counseling – Cook County achieved **100%** of their outcome goals.



Peer Record Reviews

Overall Foster Care Counseling – Cook County achieved a **98%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, and Service Delivery) Foster Care Counseling – Cook exceeded the agency's 90% target in all areas measured.

Foster Care Counseling - Cook County Exceeded the Agency's 90% Target in all Areas Measured



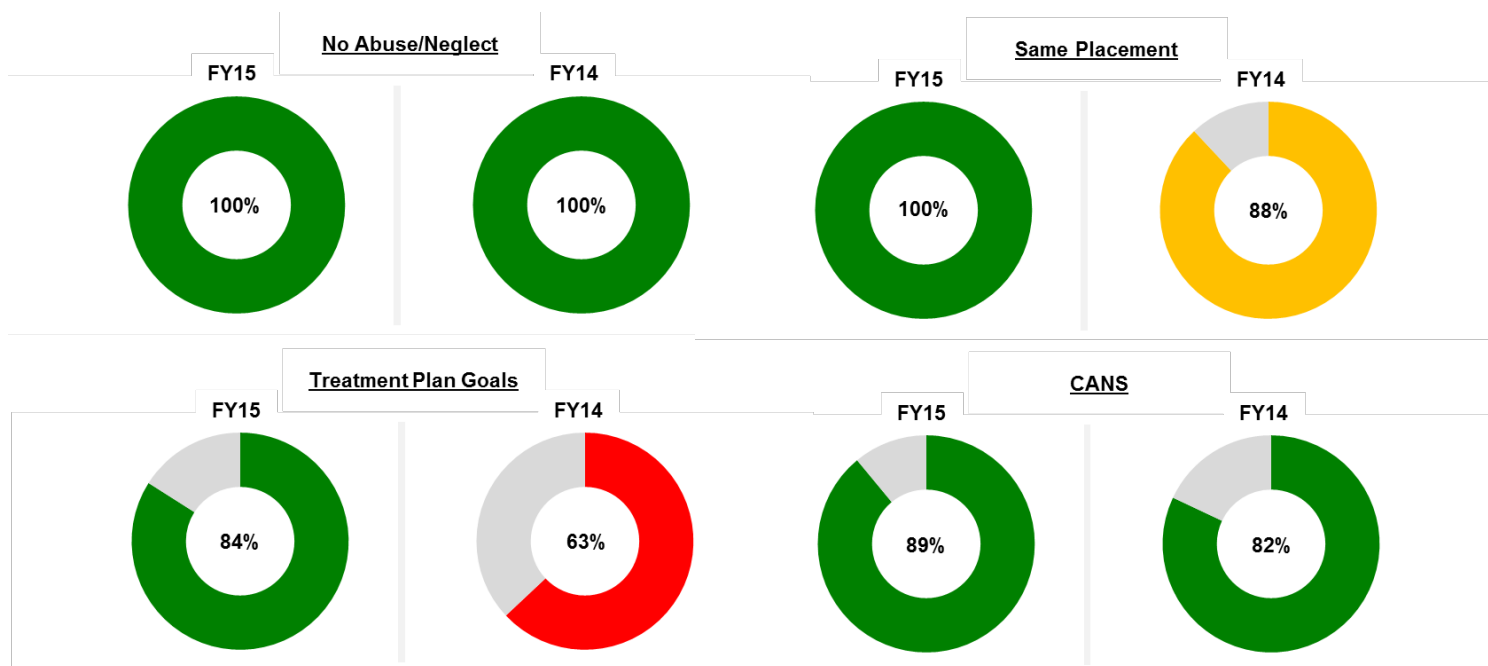
DCFS Counseling – Cook County

Outcomes

DCFS Counseling – Cook County has four programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of clients who reside in foster care or other out of home placement will remain in the placement or achieve permanency.
3. **Well-Being** – 80% of clients will achieve at least 75% of their treatment plan goals.
4. **Well-Being** – 80% of clients will show an overall improvement between initial and closing CANS.

In FY15, DCFS Counseling – Cook County achieved **100%** of their outcome goals.



Peer Record Reviews

Overall DCFS Counseling – Cook achieved a **96%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) DCFS Counseling – Cook exceeded the agency's 90% target in Intake, Assessment, Treatment Planning, and Service Delivery. Closing was below the agency's target (within 10%). The item that most affected Closing from meeting the target was:

- Is the Closing Summary in the record?

DCFS Counseling - Cook County Exceeded the Agency's 90% Target in Intake, Assessment, Treatment Planning, and Service Delivery

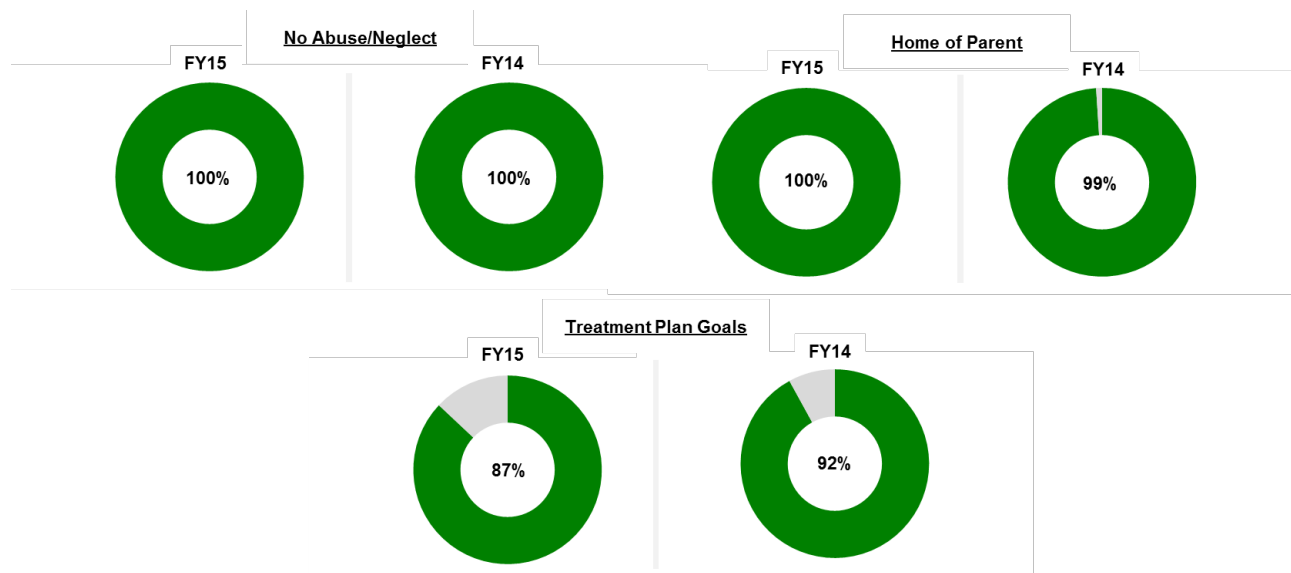


ECHO – Cook County

ECHO – Cook County has three programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of clients who reside in the home of a parent will remain in the home at the time of discharge.
3. **Well-Being** – 80% of clients will achieve at least 75% of their treatment plan goals.

In FY15, ECHO – Cook County achieved **100%** of their outcome goals.



Peer Record Reviews

Overall ECHO – Cook County achieved a **95%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) ECHO – Cook County exceeded the agency's 90% target in all areas measured.

ECHO - Cook County Exceeded the Agency's 90% Target in all Areas Measured

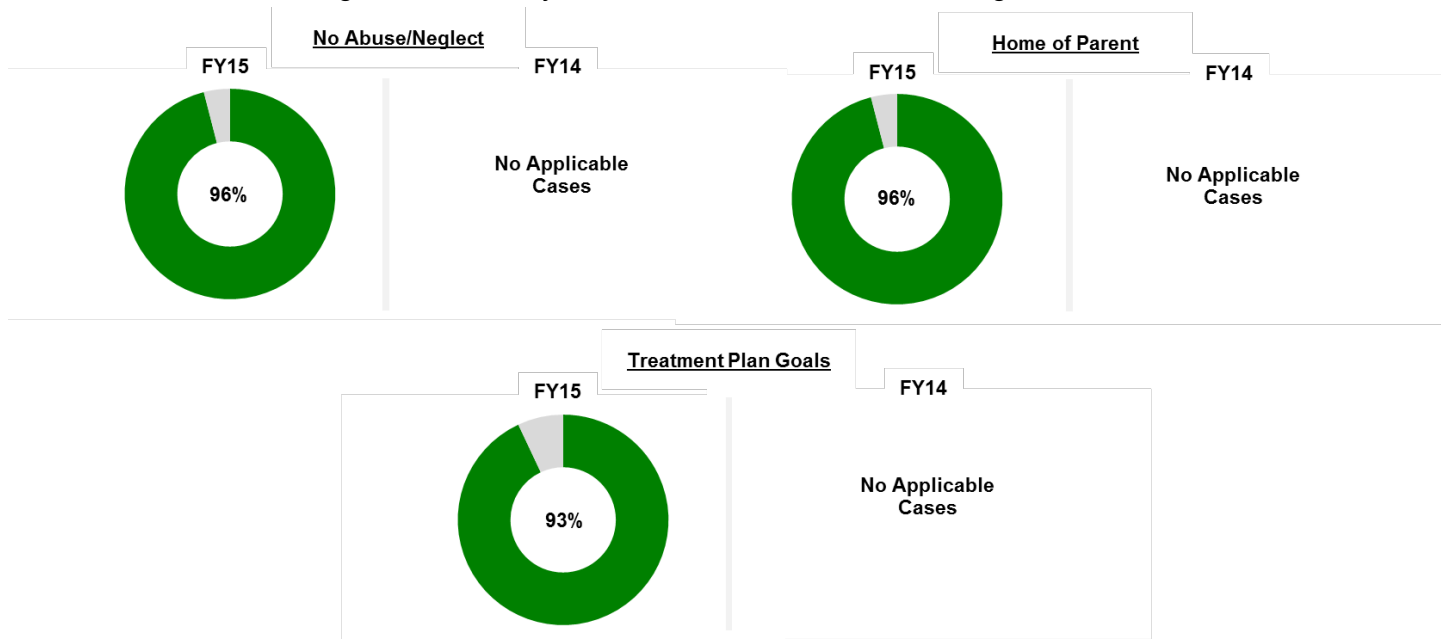


Intact Counseling – Cook County

Intact Counseling – Cook County has three programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of clients who reside in the home of a parent will remain in the home at the time of discharge.
3. **Well-Being** – 80% of clients will achieve at least 75% of their treatment plan goals.

In FY15, Intact Counseling – Cook County achieved 100% of their outcome goals.



Peer Record Reviews

Overall Intact Counseling – Cook achieved a **91%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, and Service Delivery) Intact Counseling – Cook exceeded the agency's 90% target in Intake, Assessment, and Service Delivery. Treatment Planning was below the agency's target (within 9%). The items that most affected Treatment Planning were:

- Is the current copy of the service plan/treatment plan/case plan in the file?
- Does the treatment plan address goals, objectives & expected outcomes for the specific services provided to client and/or family?
- Is there evidence in the record that the family participated in the development of the service/treatment plan?

Intact Counseling Exceeded the Agency's 90% Target in Intake, Assessment, and Service Delivery



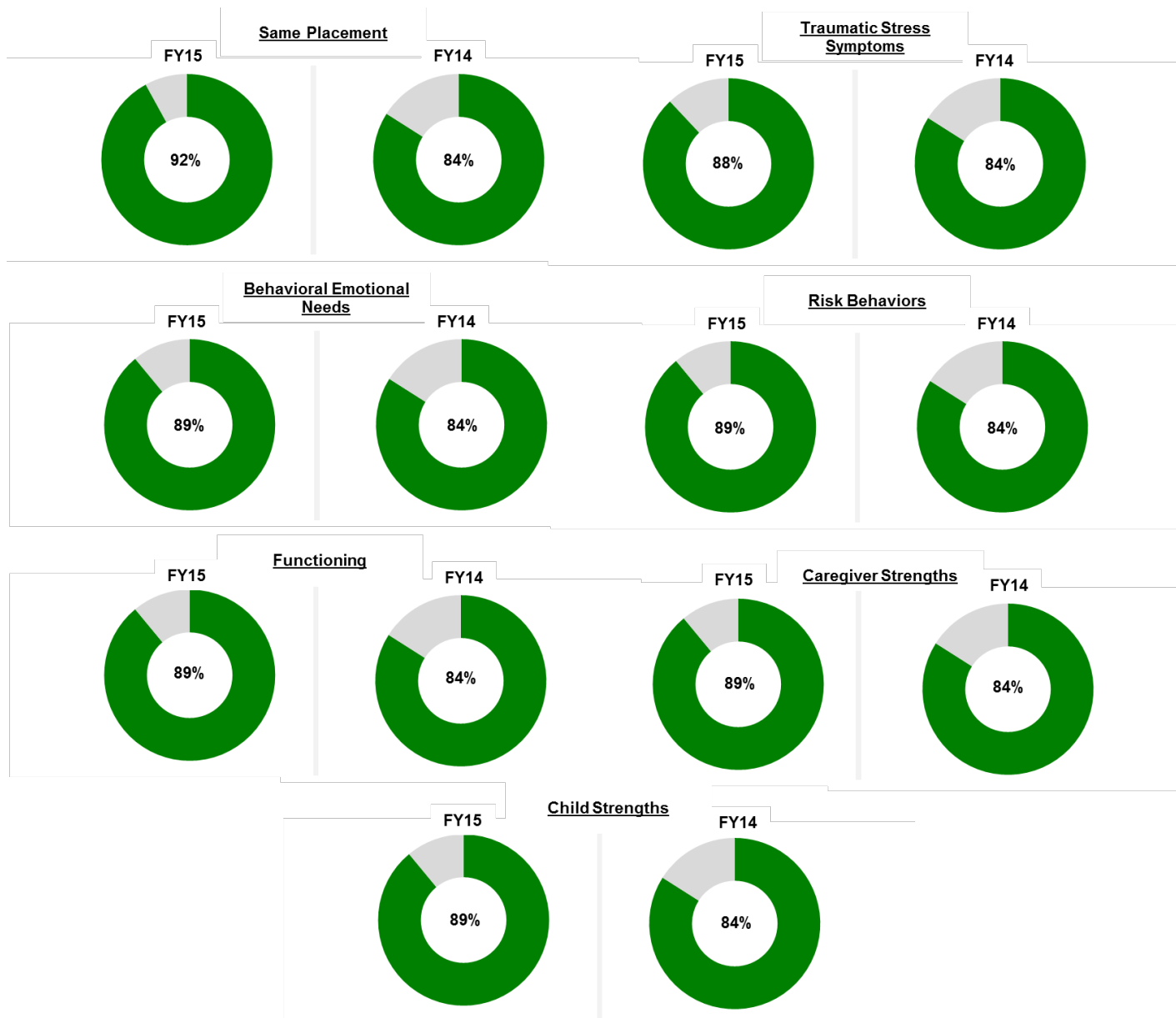
SOC – Cook County

Outcomes

SOC has seven programmatic outcomes.

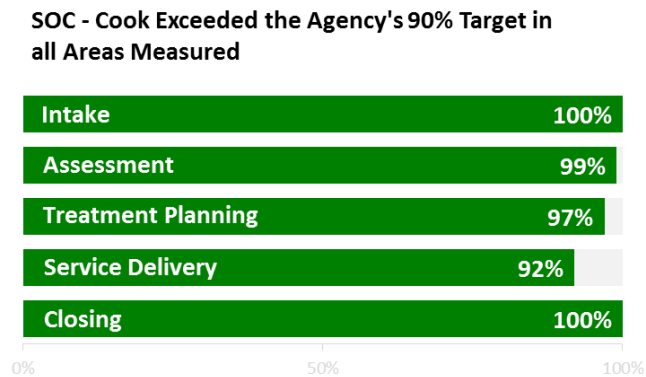
1. **Permanency** – 60% of clients will remain in their same placement during SOC enrollment.
- 2-7. **Well Being** – 70% of clients will demonstrate improvement in “actionable” items in the CANS domain of: Traumatic Stress Symptoms, Behavioral/Emotional Needs, Risk Behaviors, Functioning, Caregiver Strengths, and Client Strengths.

In FY15 SOC – Cook County achieved **100%** of their outcome goals.



Peer Record Reviews

SOC – Cook achieved a **97%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, and Service Delivery) SOC – Cook exceeded the agency's 90% target in all areas measured.



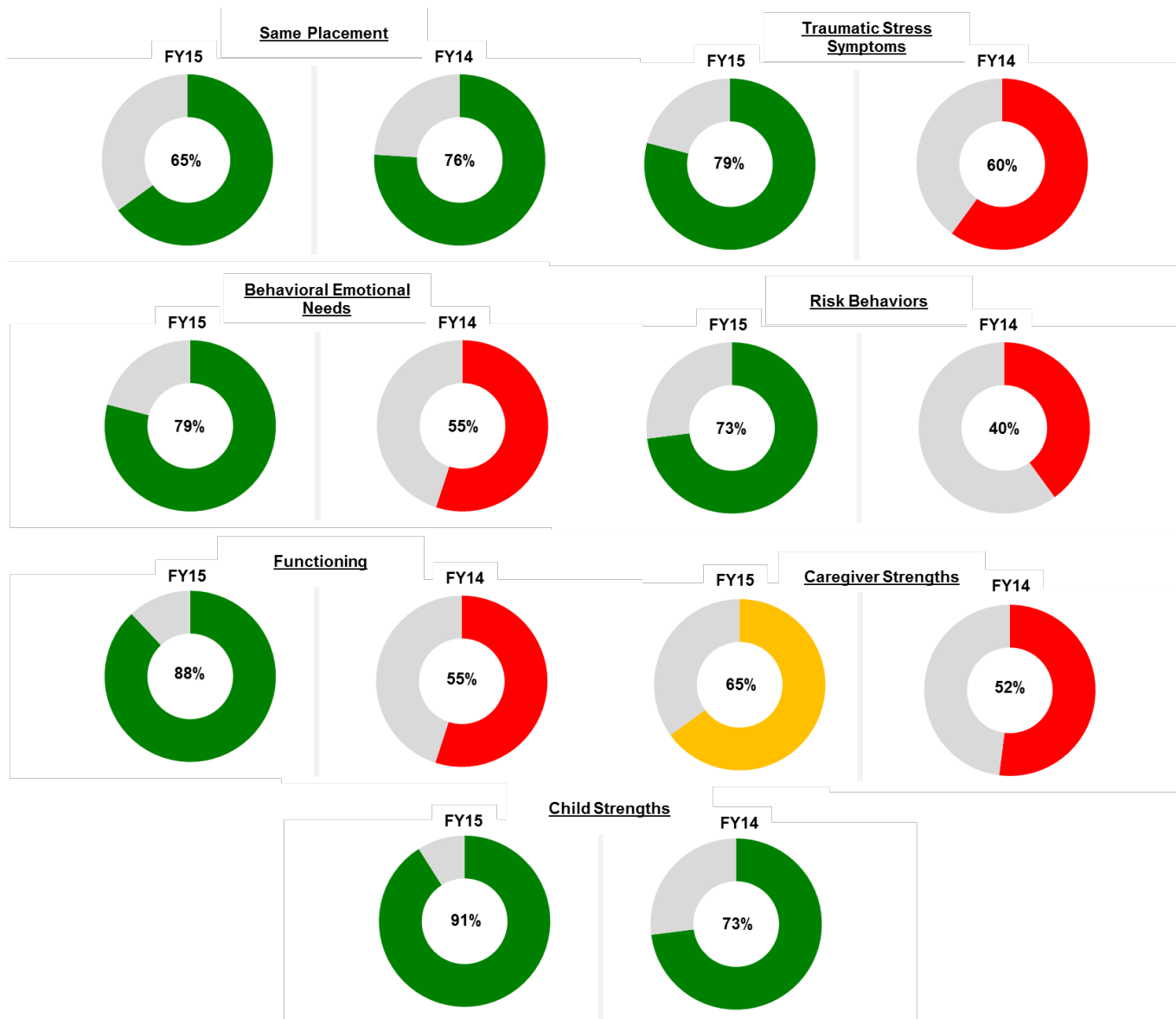
SOC – Southern

Outcomes

SOC has seven programmatic outcomes.

1. **Permanency** – 60% of clients will remain in their same placement during SOC enrollment.
- 2-7. **Well Being** – 70% of clients will demonstrate improvement in “actionable” items in the CANS domain of: Traumatic Stress Symptoms, Behavioral/Emotional Needs, Risk Behaviors, Functioning, Caregiver Strengths, and Client Strengths.

In FY15 SOC – Southern achieved **86%** of their outcome goals.

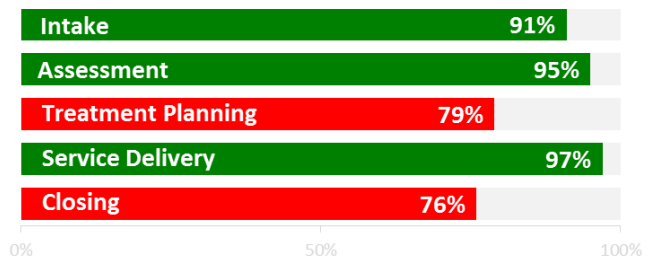


Peer Record Reviews

SOC – Southern achieved a **92%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, and Service Delivery) SOC - Southern exceeded the agency's 90% target in Intake, Assessment, and Service Delivery. Treatment Planning and Closing were below the agency's target (within 11% and 14 % respectively). The items that most affected Treatment Planning and Closing were:

- Was the current service plan/treatment plan/case plan written, signed and dated by the Case Manager/therapist and supervisor within the required timeframe of the program contract?
- Is the current service/treatment/case plan signed and dated by the client and parent/guardian?
- Is the Closing Summary in the record?
- Was a CANS completed at the time of the client's discharge from the SOC program?

SOC - Southern Exceeded the Agency's 90% Target in Intake, Assessment, and Service Delivery



Appendix B – Intact Family Services

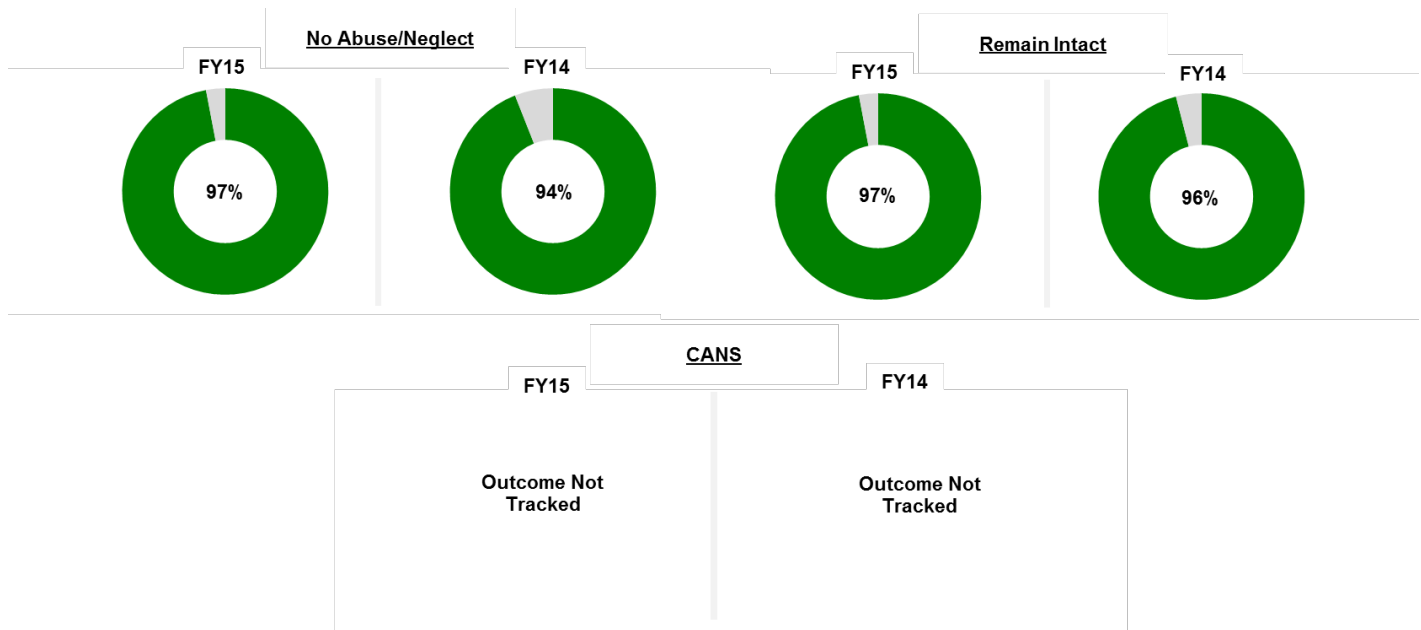
Intact Family Services – Cook County

Outcomes

Intact Family Services – Cook County has two programmatic outcomes.

1. **Safety** – 85% of clients served will not be subjects of indicated reports of abuse and neglect
2. **Permanency** – 90% of families will remain intact.
3. **Well-Being** – 80% of families will demonstrate an overall improvement between initial and closing CANS.

In FY15 Intact Family Services – Cook County achieved **100%** of their outcome goals.



Peer Record Reviews

Intact Family Services – Cook County achieved a **95%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing), Intact Family Services – Cook County exceeded the agency's 90% target in all areas measured.

Intact - Cook Exceeded the Agency's 90% Target in all Areas Measured



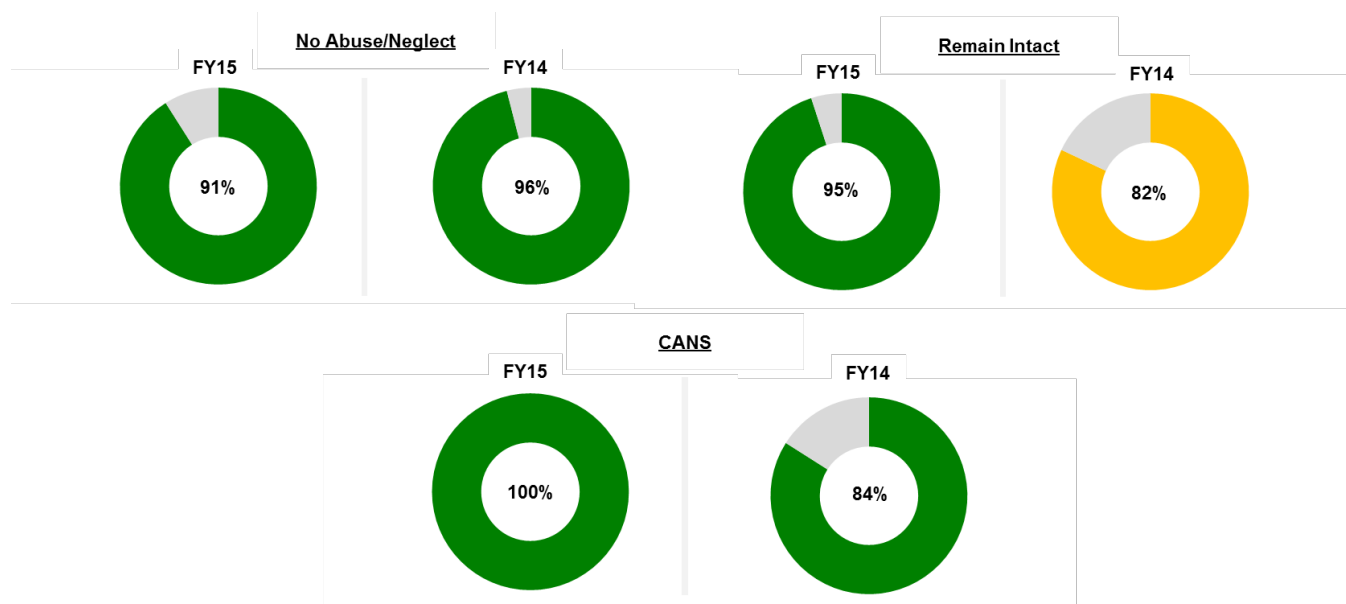
Intact Family Services – Waukegan

Outcomes

Intact Family Services – Waukegan has three programmatic outcomes.

1. **Safety** – 85% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of families will remain intact.
3. **Well-Being** – 80% of families will demonstrate an overall improvement between initial and closing CANS.

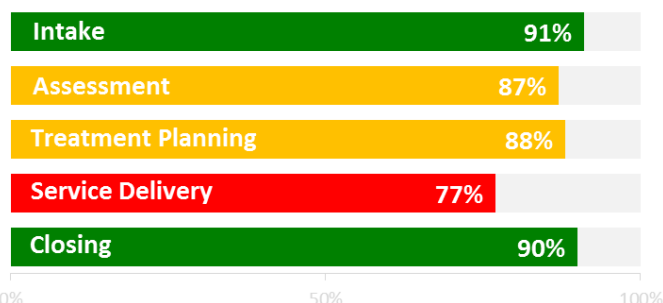
In FY15 Intact Family Services – Waukegan achieved **100%** of their outcome goals.



Peer Record Reviews

Intact Family Services – Waukegan achieved an **85%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing), Intact Family Services – Waukegan exceeded the agency's 90% target in Intake and Closing. Assessment, Treatment Planning, and Service Delivery were below the agency's target (within 3%, 2% and 13%, respectively). The items that most affected Assessment, Treatment Planning, and Service Delivery were:

Intact - Waukegan Exceeded the Agency's 90% Target in Intake and Closing



- Were the Home Safety Checklists updated every 90 days during the life of the case?
- Was a CERAP completed every 90 days?
- Was the service plan reviewed and updated every 90 days?
- Was there at least one unannounced contact occurring a minimum of once per month?
- Are Quarterly case reviews completed by the supervisor?
- Are there supervision notes in the case record at least monthly?

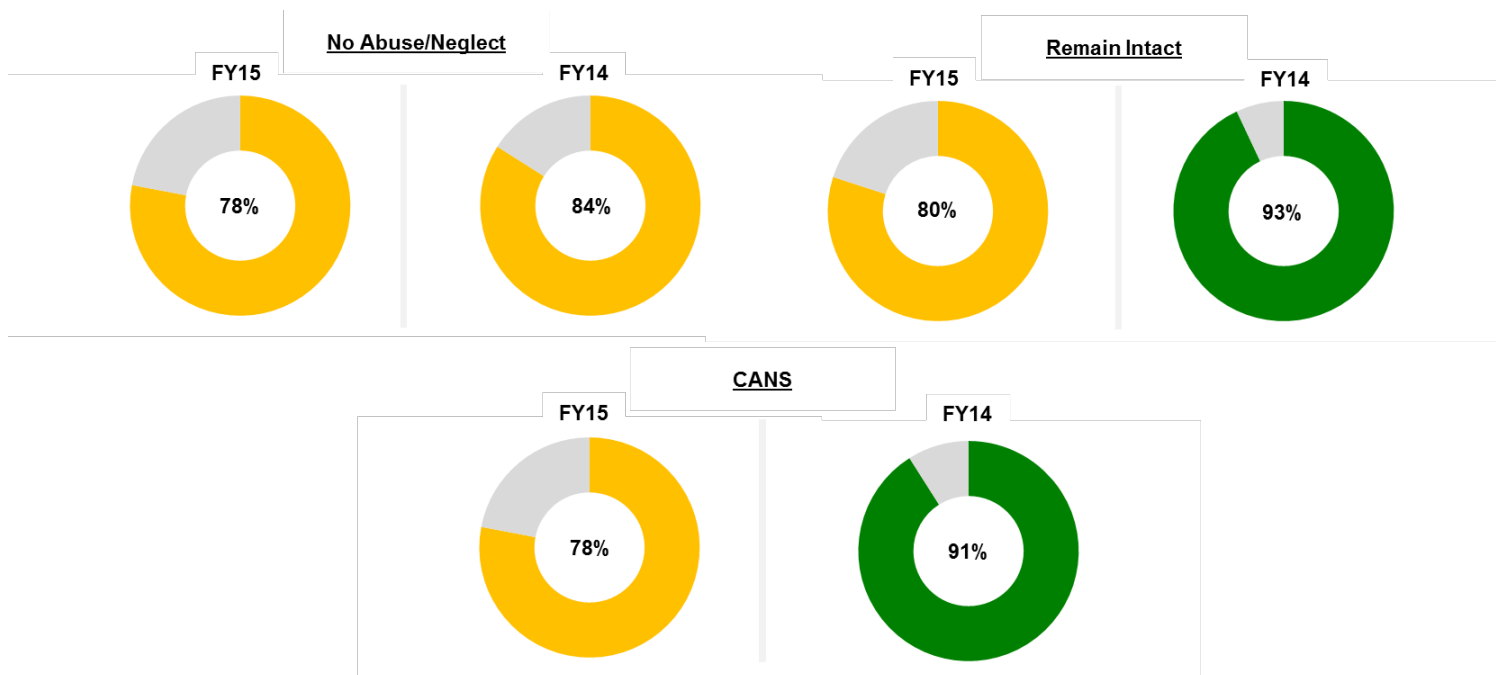
Intact Family Counseling

Outcomes

Intact Family Counseling has three programmatic outcomes.

1. **Safety** – 85% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of families will remain intact.
3. **Well-Being** – 80% of families will demonstrate an overall improvement between initial and closing CANS.

In FY15 Intact Family Counseling achieved **0%** of their outcome goals.



Peer Record Reviews

Intact Family Counseling achieved a **97%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing), Intact Family Counseling exceeded the agency's 90% target in all areas measured.

Intact Family Counseling Exceeded the Agency's 90% Target in all Areas Measured



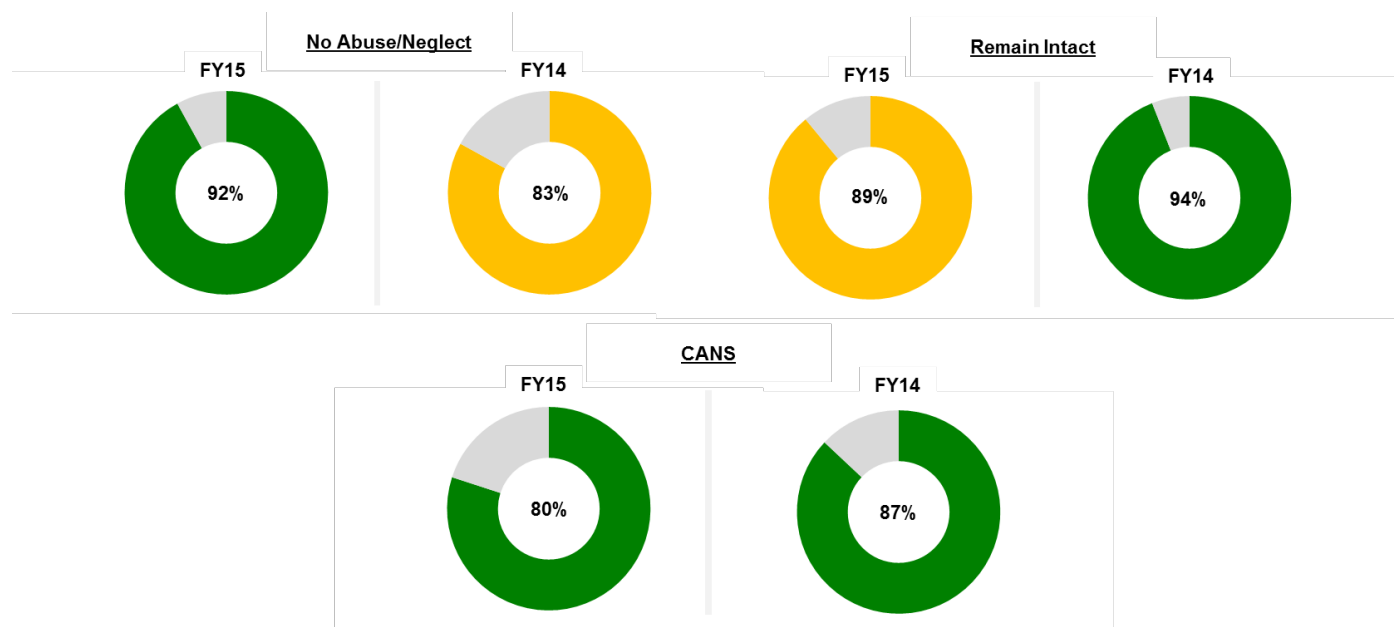
Intact Family Services – Eastern

Outcomes

Intact Family Services – Eastern has three programmatic outcomes.

1. **Safety** – 85% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of families will remain intact.
3. **Well-Being** – 80% of families will demonstrate an overall improvement between initial and closing CANS.

In FY15 Intact Family Services – Eastern achieved **67%** of their outcome goals.

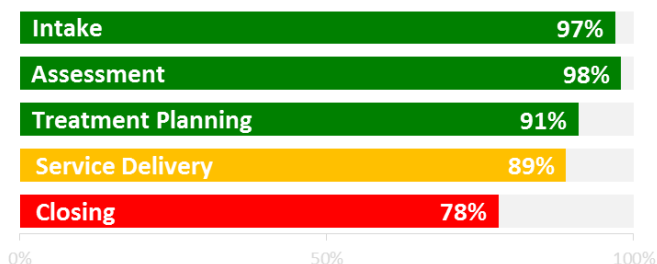


Peer Record Reviews

Intact Family Services – Eastern achieved a **94%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing), Intact Family Services – Eastern exceeded the agency's 90% target in Intake, Assessment, and Treatment Planning. Service Delivery and Closing were below the target (within 1% and 12% respectively). The items that most affected Service Delivery and Closing from reaching their targets were:

- Was there at least one unannounced contact occurring a minimum of once per month?
- Were all children seen and interviewed, apart from their caretaker, 5 business days prior to case closing?
- Was a CANTS/LEADS check completed for all adult members of the household, youth age 13 and older, and all adults that are frequently in the home, prior to case closing?
- Is there evidence of supervision prior to the critical decision to close the case?
- Was a CFS1425 Status Form completed as the closing summary?

Intact - Eastern Exceeded the Agency's 90% Target in Intake, Assessment, and Treatment Planning



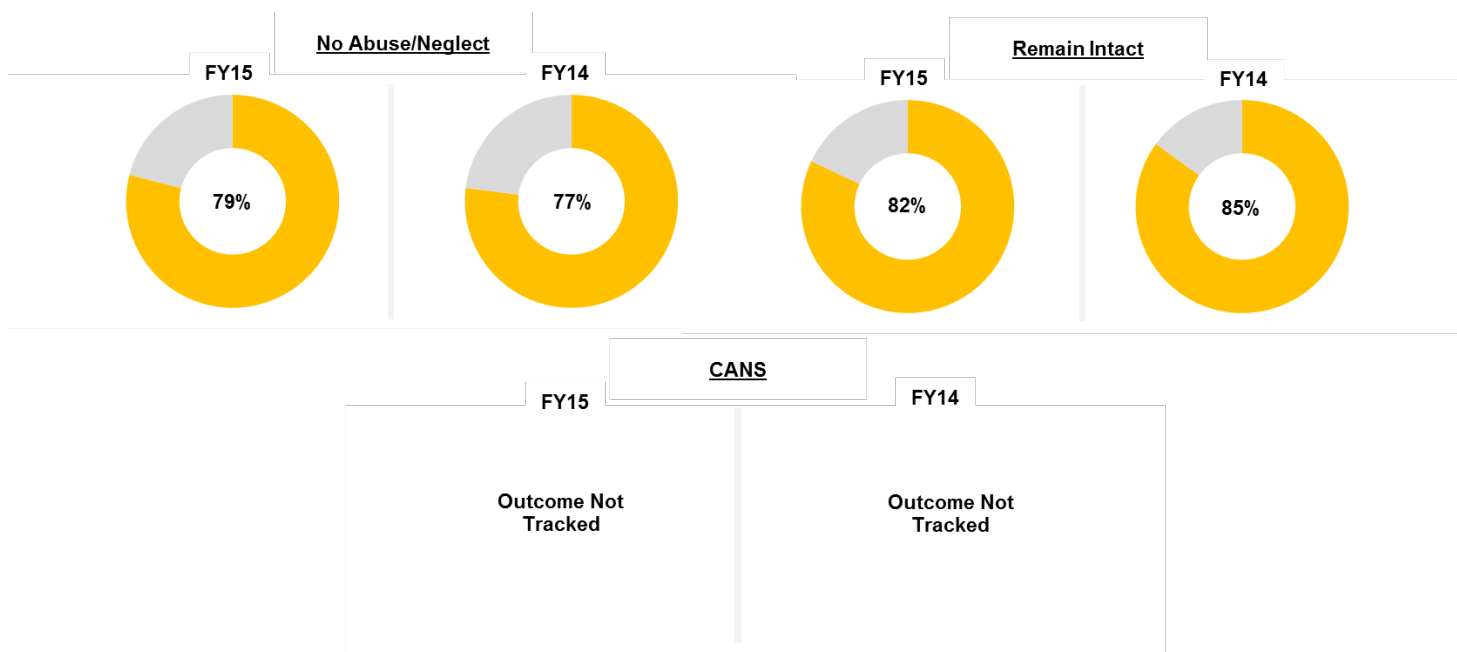
Intact Family Services – Southern A

Outcomes

Intact Family Services – Southern A has three programmatic outcomes.

1. **Safety** – 85% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of families will remain intact.
3. **Well-Being** – 80% of families will demonstrate an overall improvement between initial and closing CANS.

In FY15 Intact Family Services – Southern A achieved **0%** of their outcome goals.

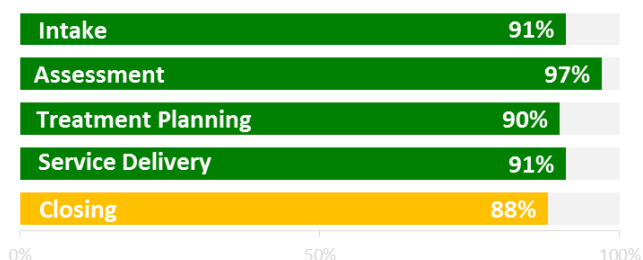


Peer Record Reviews

Intact Family Services – Southern A achieved a **93%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing) Intact Family Services – Southern A met/exceeded the agency's 90% target in Intake, Assessment, Treatment Planning, and Service Delivery. Closing was below the target (within 2%). The items that most affected Closing from reaching its target were:

- Were all children seen and interviewed, apart from their caretaker, 5 business days prior to case closing?
- Was a CFS1425 Status Form completed as the closing summary?

Intact - Southern A Met/Exceeded the Agency's 90% Target in Intake, Assessment, Treatment Planning and Service Delivery



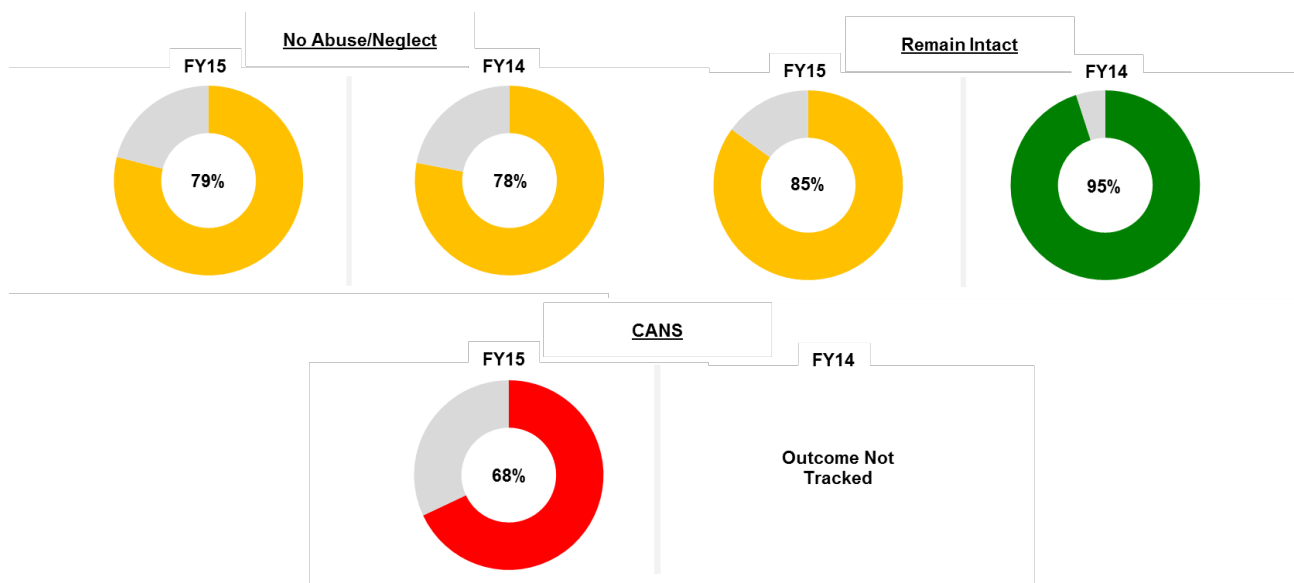
Intact Family Services – Southern B

Outcomes

Intact Family Services – Southern B has three programmatic outcomes.

1. **Safety** – 85% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of families will remain intact.
3. **Well-Being** – 80% of families will demonstrate an overall improvement between initial and closing CANS.

In FY15 Intact Family Services – Southern B achieved **0%** of their outcome goals

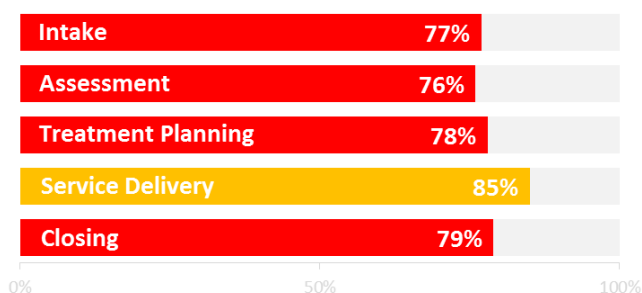


Peer Record Reviews

Intact Family Services – Southern B achieved a **79%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, Service Delivery, and Closing), Intact Family Services – Southern B was below the agency's 90% target in all areas measured. The items that most affected areas from reaching their targets were:

- Is the DCFS Client's Rights and Responsibilities (CFS 496) in the file, signed and dated by the parents and appropriate family members, including youth over the age of 12?
- Was the Initial Integrated Assessment completed within 45 days of the transitional visit?
- Is the current service plan signed and dated by the client and parent/guardian?
- Did the Intact Family Case Manager maintain the required in-home face-to-face contacts with the family (parent/caregiver and children)?
- Were all children seen and interviewed 5 business days prior to case closing?

Intact - Southern B was Below the Agency's 90% Target in all Areas Measured



Appendix C – Prevention

Adoptive Family Support

Outcomes

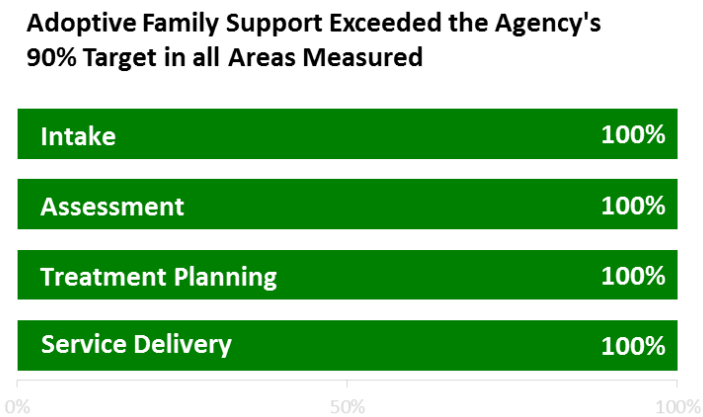
Adoptive Family Support has three programmatic outcomes.

- 1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
- 2. **Permanency** – 95% of families will remain intact.
- 3. **Well-Being** – 90% of families served will show an improvement in perceived stress as measured by the Caregiver Strain Questionnaire.

Adoptive Family Support did not have any closures in FY15; therefore, no outcomes were reported.

Peer Record Reviews

Adoptive Family Support achieved a **100%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, and Service Delivery), Adoptive Family Support exceeded the agency’s 90% target in all areas measured.



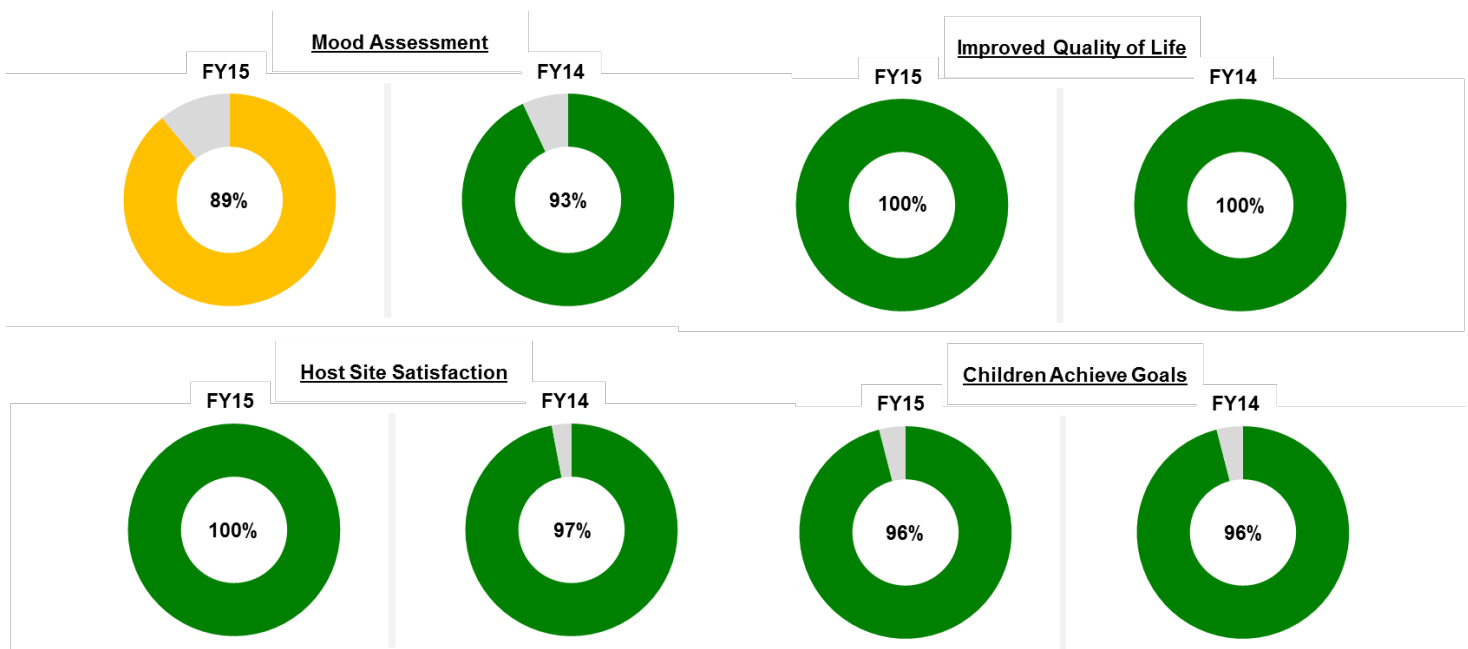
Foster Grandparent Program – Mt. Vernon

Outcomes

The Foster Grandparent Program (FGP) has four programmatic outcomes.

1. **Well-Being** – 90% of the Foster Grandparent volunteers will score a 5 or below on the Mood Assessment Scale (Short-form) on a bi-annual basis.
2. **Well-Being** – 90% of the Foster Grandparent volunteers will report that participating in the program has improved the overall quality of their life as surveyed on an annual basis.
3. **Well-Being** – 90% of the Foster Grandparent volunteer sites will report that they are satisfied with Foster Grandparent's over-all ability to perform tasks with individual children and/or groups of children as assigned by the site supervisor.
4. **Well-Being** – 80% of the children receiving one on one mentoring and/or tutoring by a Foster Grandparent volunteer will achieve academic, social, or behavioral goal(s) indicated on the individual childcare plans.

In FY15, Foster Grandparent – Mt. Vernon achieved **75%** of their outcome goals.

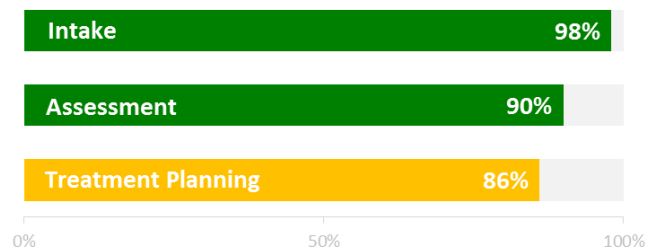


Peer Record Reviews

Foster Grandparent – Mt. Vernon achieved a **96%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, and Treatment Planning), Foster Grandparent – Mt. Vernon met/exceeded the agency's 90% target in Intake and Assessment. Treatment Planning was below the agency's target (within 4%). The item that most affected Treatment Planning was:

- Signed Individual Assignment Plan

Foster Grandparent - Mt. Vernon Met/Exceeded the Agency's 90% Target in Intake and Assessment



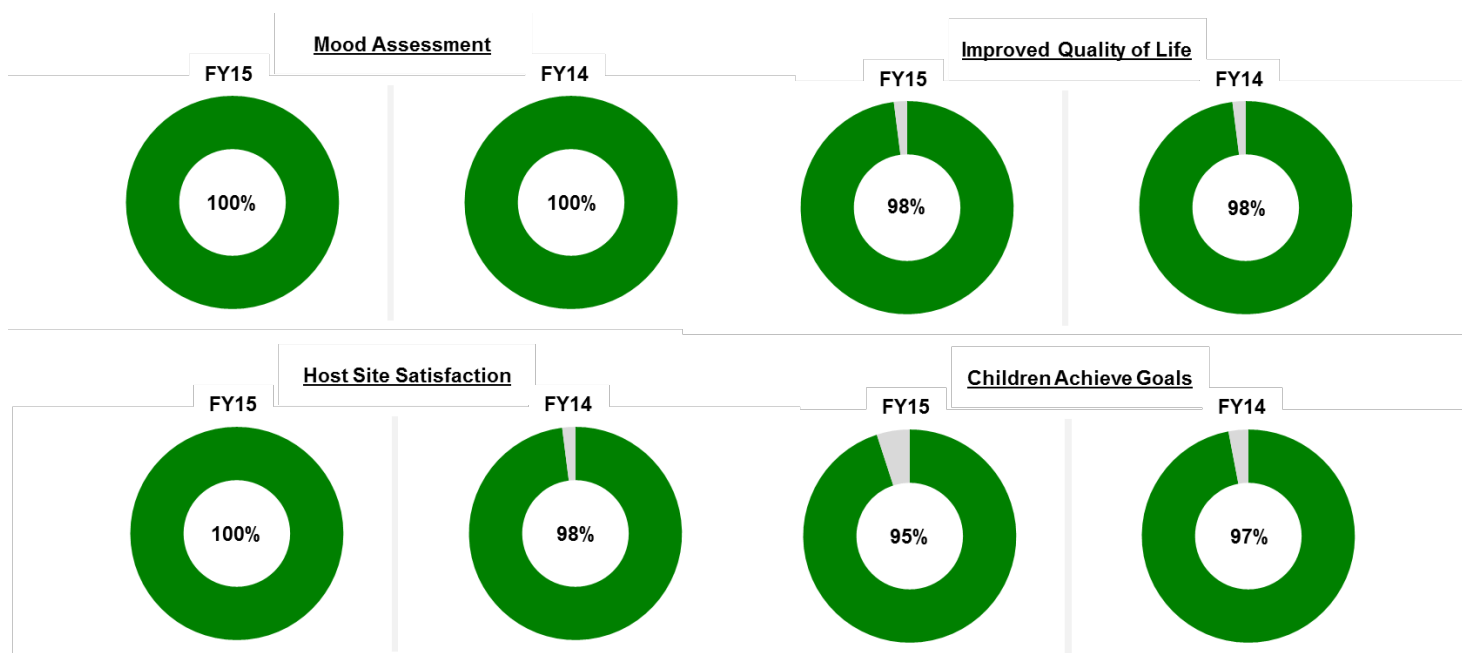
Foster Grandparent Program – Springfield

Outcomes

The Foster Grandparent Program (FGP) has four programmatic outcomes.

1. **Well-Being** – 90% of the Foster Grandparent volunteers will score a 5 or below on the Mood Assessment Scale (Short-form) on a bi-annual basis.
2. **Well-Being** – 90% of the Foster Grandparent volunteers will report that participating in the program has improved the overall quality of their life as surveyed on an annual basis.
3. **Well-Being** – 90% of the Foster Grandparent volunteer sites will report that they are satisfied with Foster Grandparent's over-all ability to perform tasks with individual children and/or groups of children as assigned by the site supervisor.
4. **Well-Being** – 80% of the children receiving one on one mentoring and/or tutoring by a Foster Grandparent volunteer will achieve academic, social, or behavioral goal(s) indicated on the individual childcare plans.

In FY15, Foster Grandparent – Springfield achieved **100%** of their outcome goals.



Peer Record Reviews

Foster Grandparent – Springfield achieved a **99%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning, and Service Delivery), Foster Grandparent – Springfield exceeded the agency's 90% target in all areas measured.

Foster Grandparent - Springfield Exceeded the Agency's 90% Target in all Areas Measured



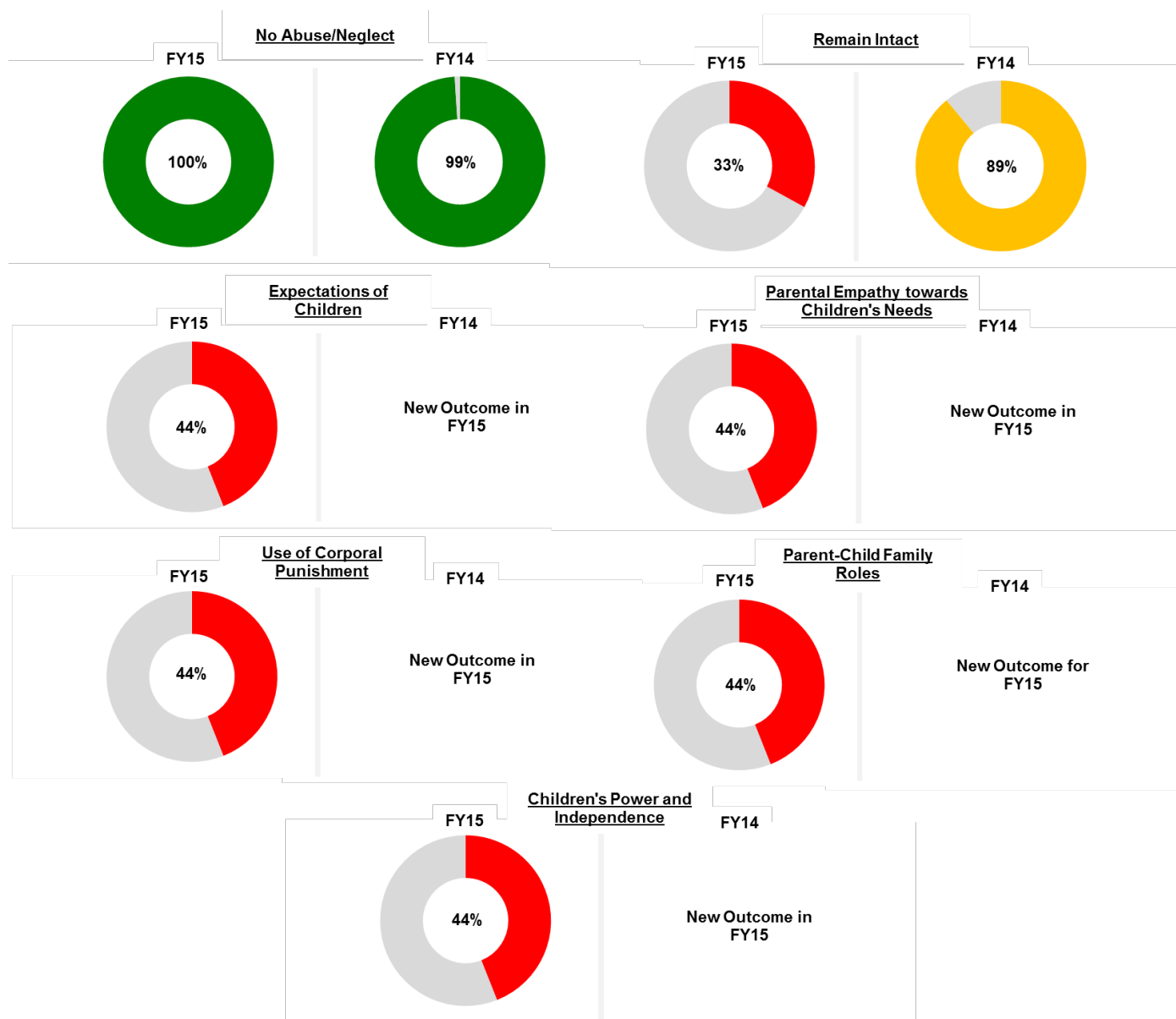
Family Support Services (FSS) – Private Contract

Outcomes

FSS - Private has seven programmatic outcomes.

1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of families will remain intact.
- 3-7. **Well-Being** – 85% of parents will demonstrate improvement in the constructs of Expectations of Children, Parental Empathy towards Children's Needs, Use of Corporal Punishment, Parent-Child Family Roles, and Children's Power and Independence as measured by the AAPI – II.

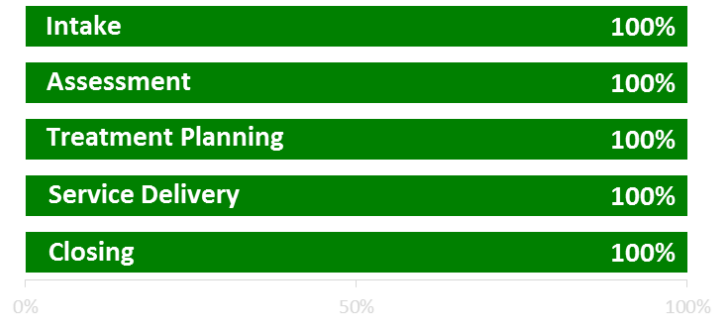
In FY15, FSS – Private achieved **14%** of their outcome goals.



Peer Record Reviews

FSS – Private achieved a **100%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), FSS - Private exceeded the agency's 90% target in all areas measured.

FSS - Private Exceeded the Agency's 90% Target in all Areas Measured



Supplemental Services

Outcomes

Supplemental Services has seven programmatic outcomes.

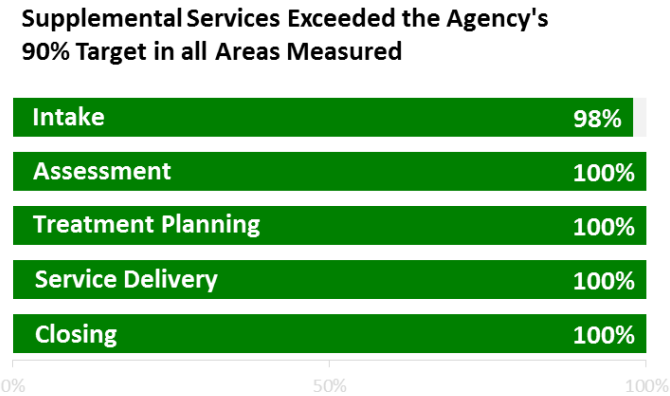
1. **Safety** – 90% of clients served will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% of families will remain intact.
- 3-7. **Well-Being** – 70% of parents will demonstrate improvement in the domains of Environment, Parenting Capabilities, Family Interactions, Safety, and Child Well-Being as measured by the NCFAS.

In FY15, Supplemental Services achieved **100%** of their outcome goals.



Peer Record Reviews

Supplemental Services achieved a 99% Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), Supplemental Services exceeded the agency’s 90% target in all areas measured.



Parent Group

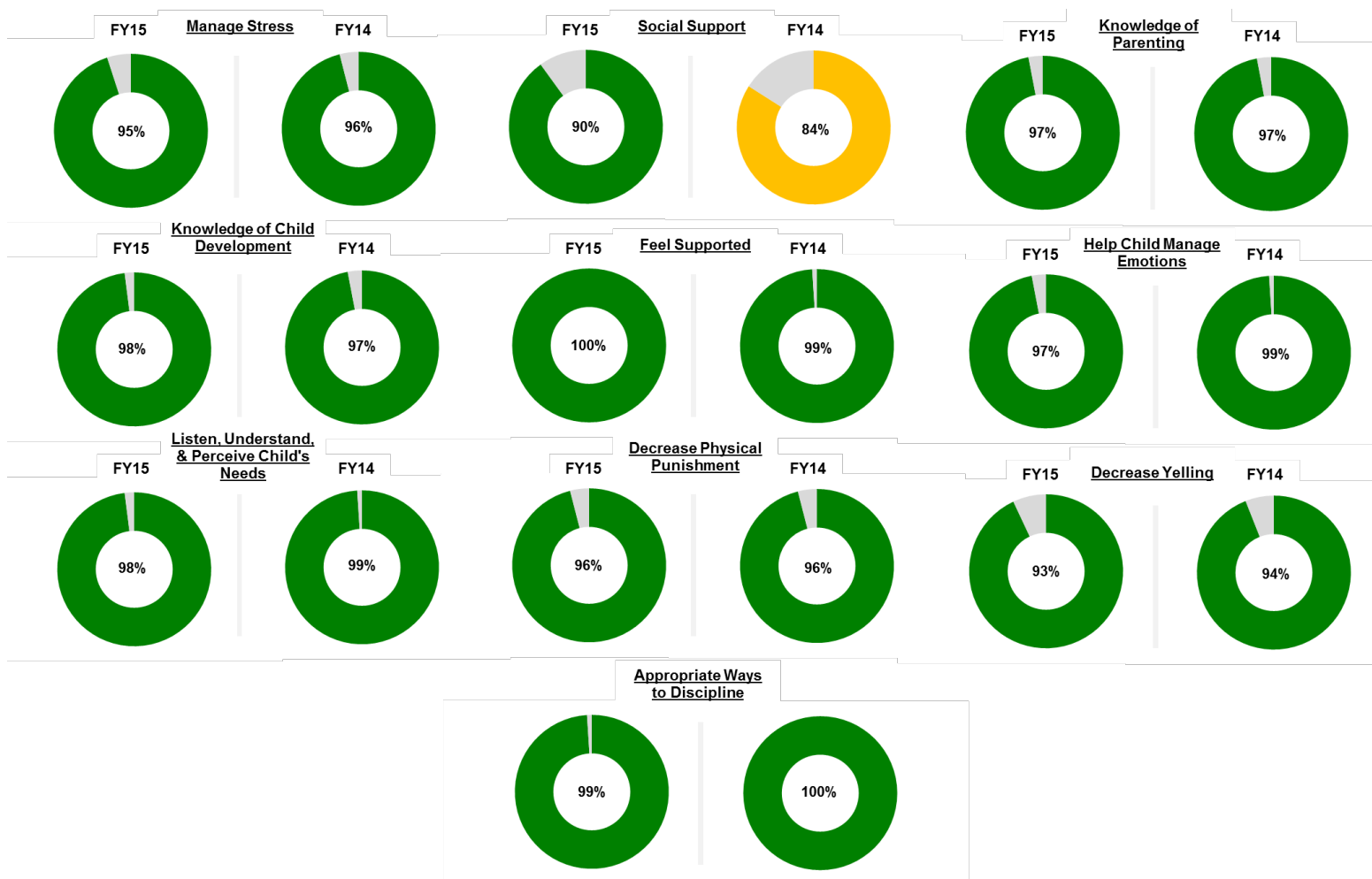
Outcomes

Parent Group has ten programmatic outcomes.

Well-Being – 85% of parents will report the following as a result of participating in the Parent Group:

1. An increase in their ability to manage stress.
2. That their social support connections outside of the parent group have grown.
3. That their knowledge of parenting has improved.
4. Report that their knowledge of child development has improved.
5. Report that they feel supported by the parent group.
6. That they are better equipped to help their child handle his/her own emotions.
7. That they better listen, understand and perceive the needs of their children.
8. A decrease in the use of physical punishment as a discipline approach.
9. A decrease in the use of yelling as a discipline approach.
10. That they have an understanding of developmentally appropriate ways to discipline children.

In FY15, Parent Group achieved **100%** of their outcome goals.



Appendix D – Youth Services

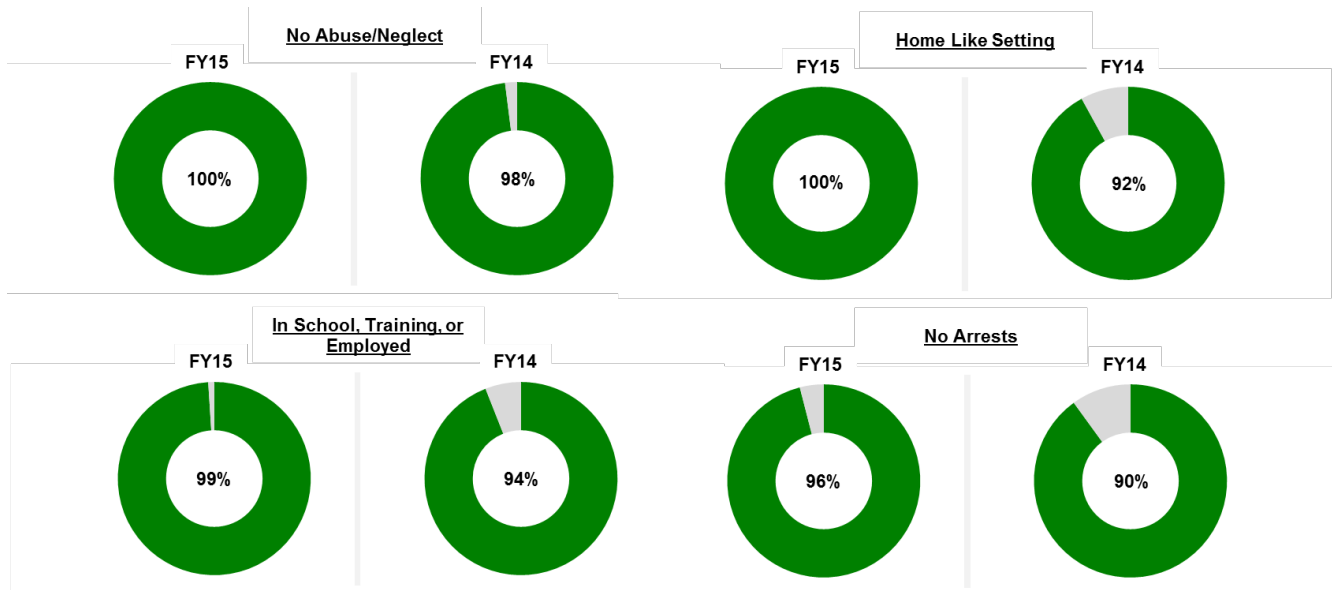
CCBYS – Waukegan

Outcomes

CCBYS has four programmatic outcomes.

1. **Safety** – 90% of youth will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% youth will be maintained in a home like setting.
3. **Well-Being** – 90% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 90% of youth will be deflected from further involvement in the juvenile justice system.

CCBYS – Waukegan achieved **100%** of their outcomes in FY15.

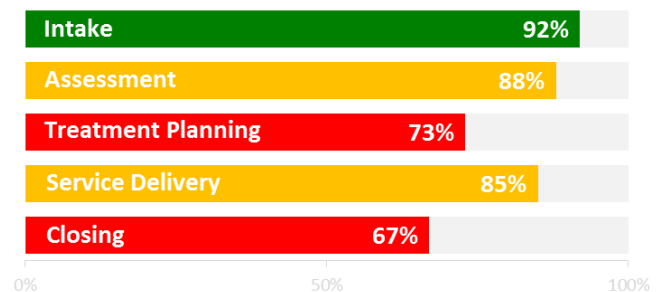


Peer Record Reviews

CCBYS – Waukegan achieved an **83%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), CCBYS – Waukegan exceeded the agency's 90% target in Intake. Assessment, Treatment Planning, Service Delivery, and Closing were below the agency's target. The items that most affected these areas from reaching their target were:

- Was the Initial Assessment Report completed within the required timeframe of the program contract?
- Is there evidence in the record that the family participated in the development of the service/treatment plan?
- Case note documentation reflects the level of client contact per program requirements?
- If follow-up services were recommended were appropriate referrals and linkages made?

CCBYS - Waukegan Exceeded the Agency's 90% Target in Intake



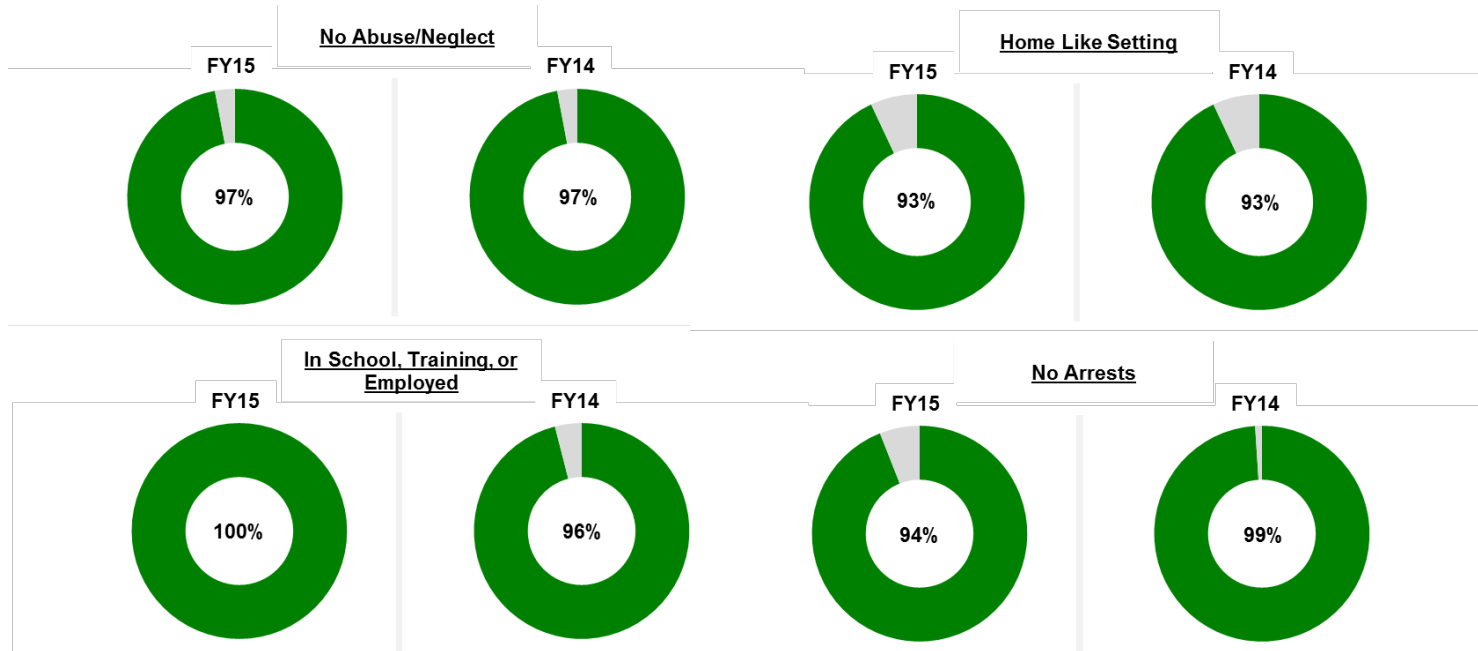
CCBYS – Southern Illinois

Outcomes

CCBYS has four programmatic outcomes.

1. **Safety** – 90% of youth will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 90% youth will be maintained in a home like setting.
3. **Well-Being** – 90% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 90% of youth will be deflected from further involvement in the juvenile justice system.

CCBYS – Southern Illinois achieved **100%** of their outcomes in FY15.



Peer Record Reviews

CCBYS – Southern achieved a **96%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), CCBYS –Southern exceeded the agency's 90% target in all areas measured.

CCBYS - Southern Exceeded the Agency's 90% Target in all Areas Measured



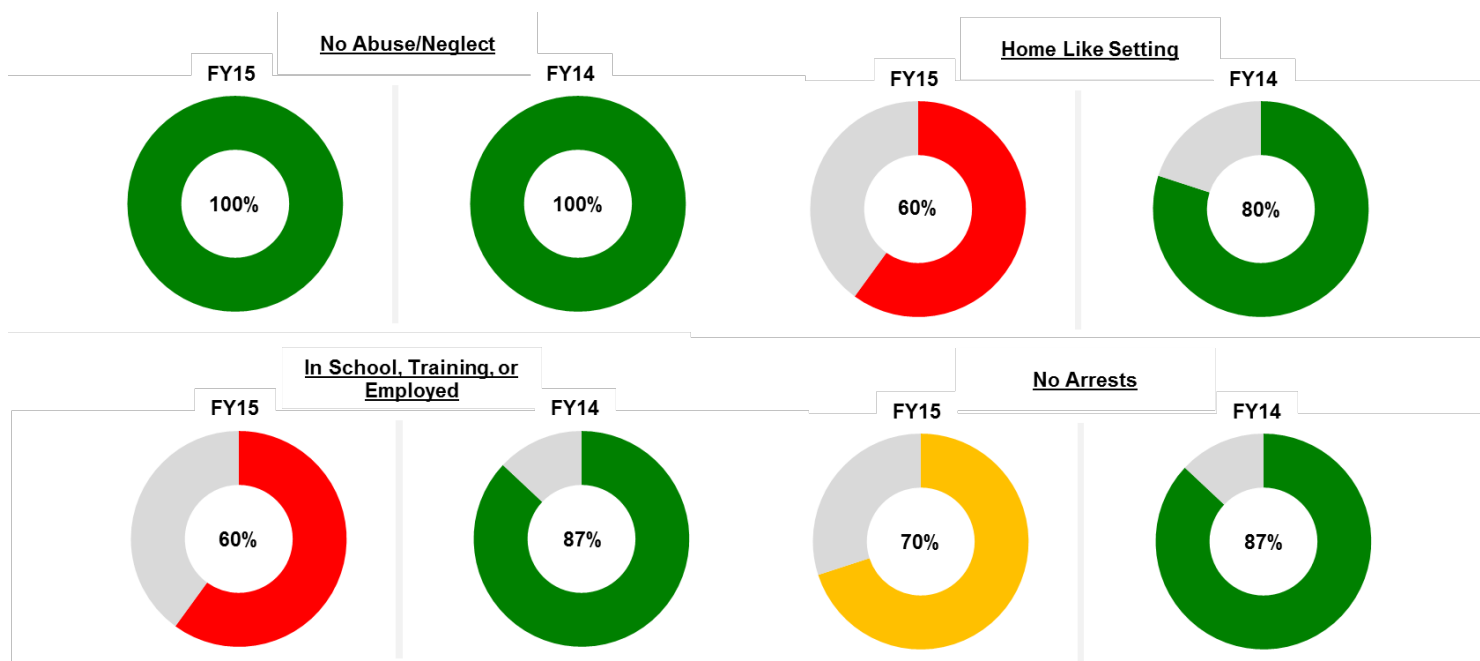
FFT – Madison County Redeploy

Outcomes

FFT has four programmatic outcomes.

1. **Safety** – 90% of youth will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 80% youth will be maintained in a home like setting.
3. **Well-Being** – 80% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 80% of youth will be deflected from further involvement in the juvenile justice system.

FFT – Madison County Redeploy achieved **25%** of their outcomes in FY15.



Peer Record Reviews

FFT – Madison County Redeploy achieved a **99%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), FFT – Madison Co. Redeploy exceeded the agency's 90% target in all areas measured.

FFT - Madison Co. Redeploy Exceeded the Agency's 90% Target in all Areas Measured



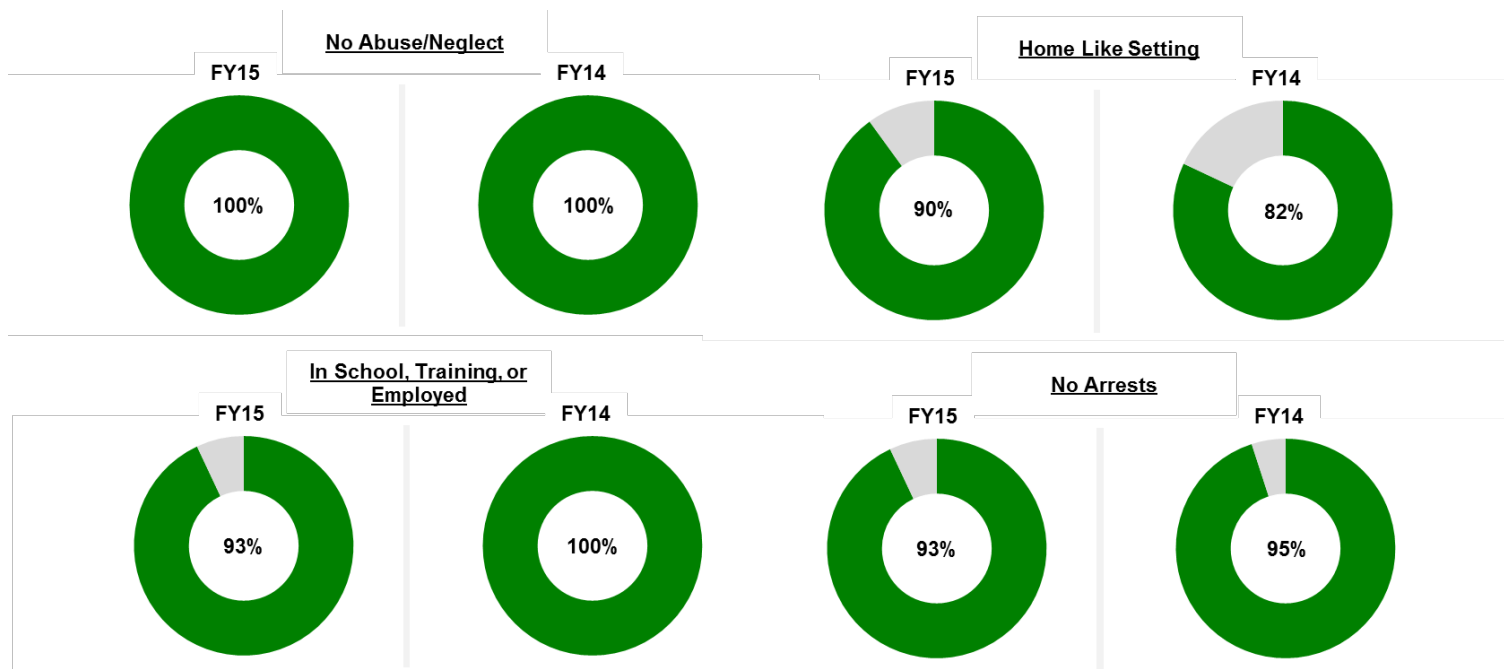
FFT – Missouri

Outcomes

FFT has four programmatic outcomes.

1. **Safety** – 90% of youth will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 80% youth will be maintained in a home like setting.
3. **Well-Being** – 80% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 80% of youth will be deflected from further involvement in the juvenile justice system.

FFT – Missouri achieved **100%** of their outcomes in FY15.



Peer Record Reviews

FFT – Missouri achieved a **100%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), FFT – Missouri exceeded the agency's 90% target in all areas measured.

FFT - Missouri Exceeded the Agency's 90% Target in all Areas Measured



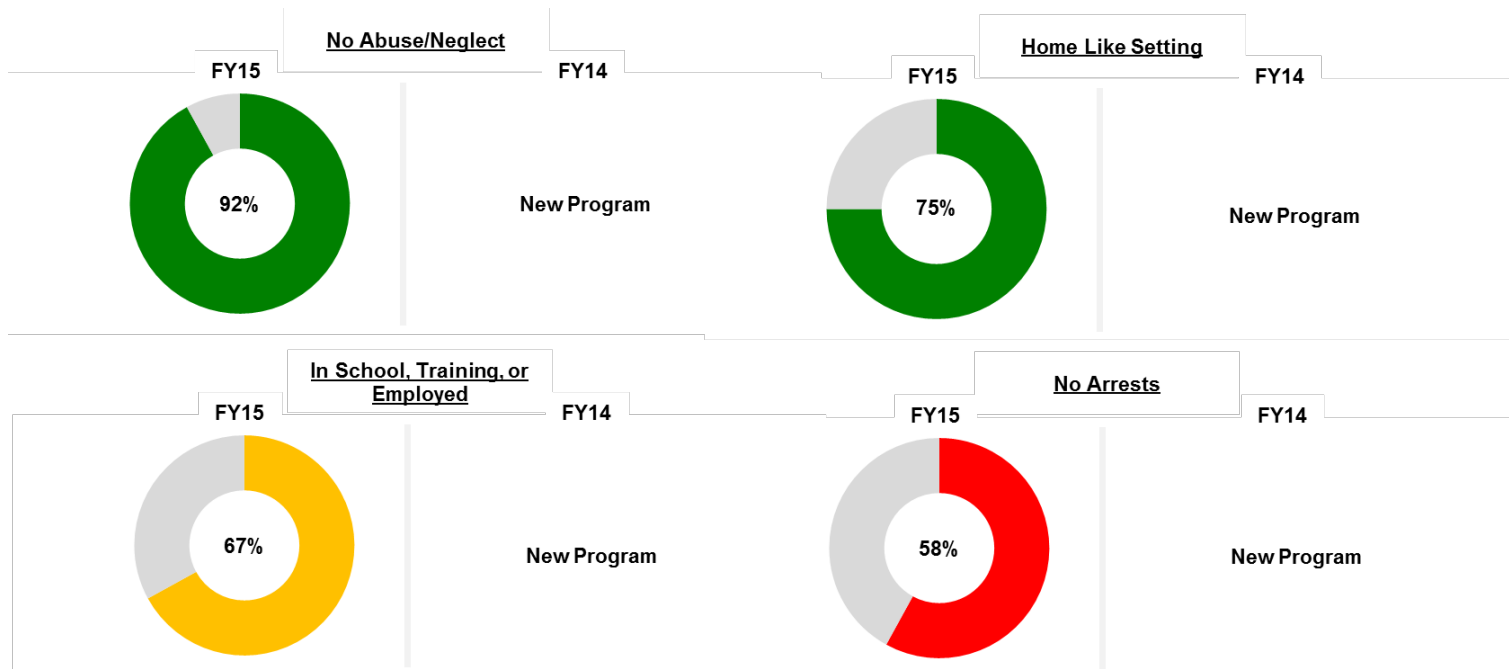
Intensive Family Services

Outcomes

Intensive Family Services has four programmatic outcomes.

1. **Safety** – 90% of youth will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 70% youth will be maintained in a home like setting.
3. **Well-Being** – 70% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 70% of youth will be deflected from further involvement in the juvenile justice system.

Intensive Family Services achieved **50%** of their outcomes in FY15.

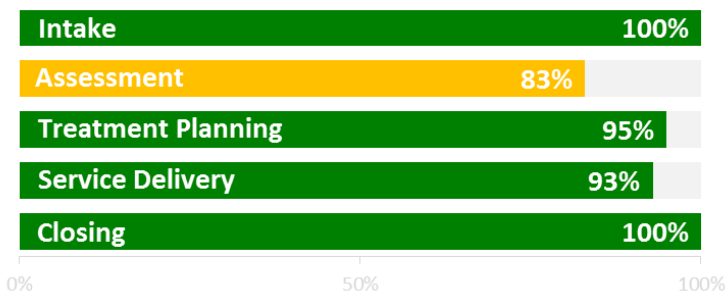


Peer Record Review

Intensive Family Services achieved a **94%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), Intensive Family Services exceeded the agency's 90% target in Intake, Treatment Planning, Service Delivery and Closing. Assessment was below the agency's target. The items that most affected Assessment from reaching the target were:

- Was the Initial Assessment Report completed within the required timeframe of the program contract?
- Is a copy of the Updated Assessment Report, per program contract requirements, in the file?

Intensive Family Services Exceeded the Agency's 90% Target in Intake, Treatment Planning, Service Delivery, and Closing



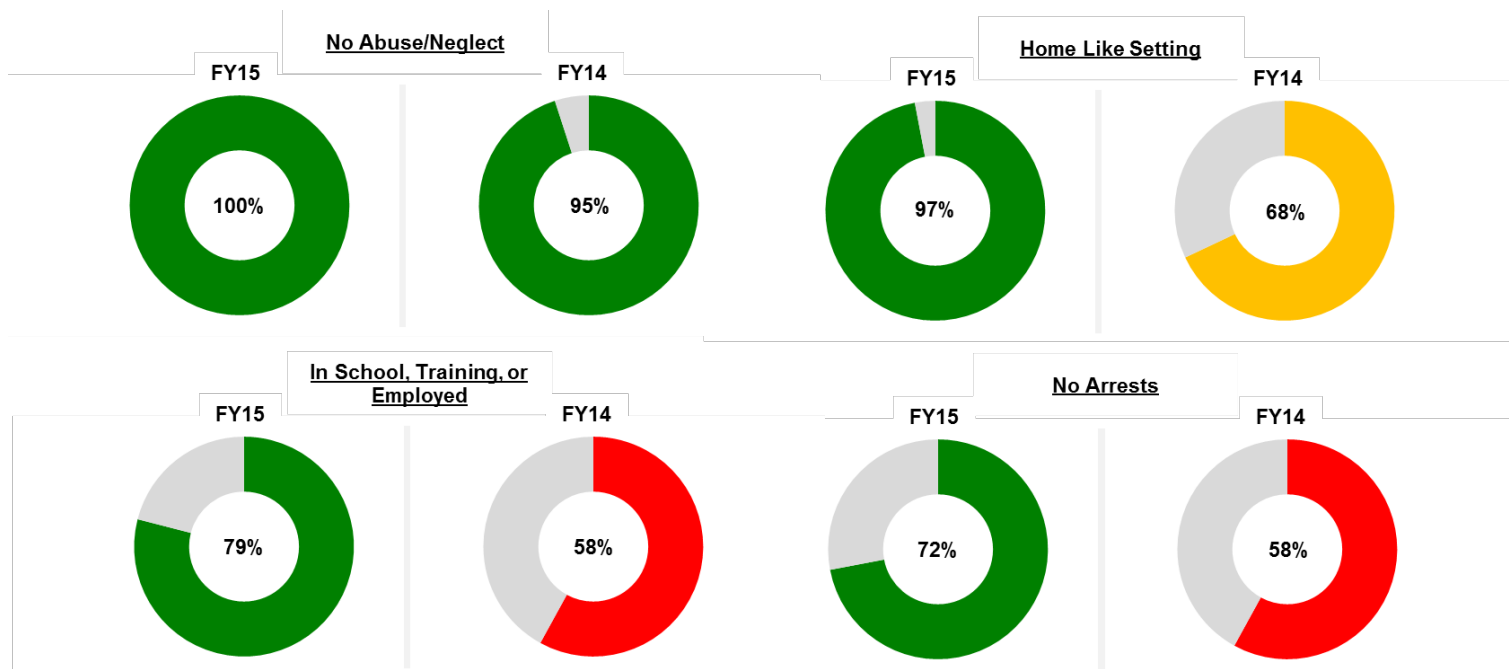
MST 16th Circuit/Kane

Outcomes

MST has four programmatic outcomes.

1. **Safety** – 90% of youth will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 70% youth will be maintained in a home like setting.
3. **Well-Being** – 70% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 70% of youth will be deflected from further involvement in the juvenile justice system.

MST 16th Circuit/Kane achieved **100%** of their outcomes in FY15.



Peer Record Reviews

MST 16th Circuit/Kane achieved a **96%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), MST 16th Circuit/Kane achieved the agency's 90% target in all areas measured.

MST - 16th Circuit/Kane Met/Exceeded the Agency's 90% Target in all Areas Measured



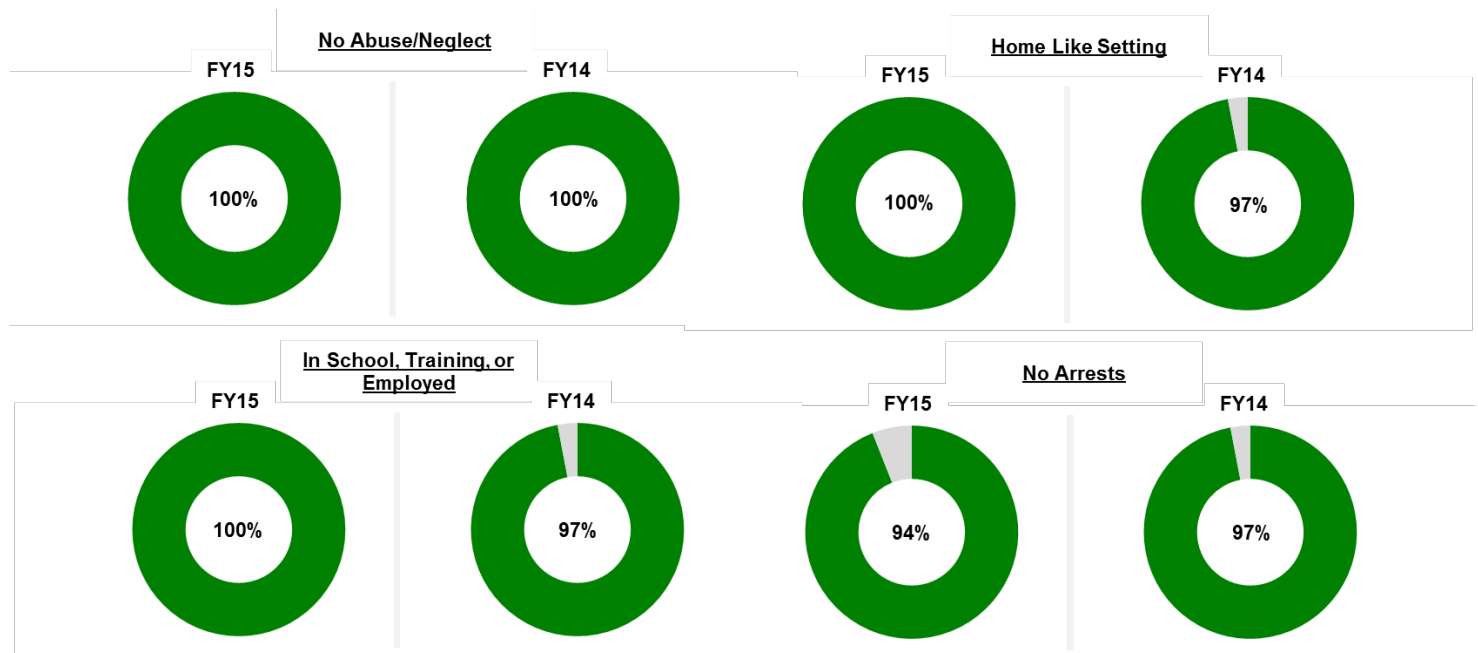
Youth Diversion Program

Outcomes

Youth Diversion Program has four programmatic outcomes.

1. **Safety** – 90% of youth will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 70% youth will be maintained in a home like setting.
3. **Well-Being** – 70% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 70% of youth will be deflected from further involvement in the juvenile justice system.

The Youth Diversion Program achieved **100%** of their outcomes in FY15.



Peer Record Reviews

The Youth Diversion Program achieved a **98%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), the Youth Diversion Program achieved the agency's 90% target in all areas measured.

Youth Diversion Program Exceeded the Agency's 90% Target in all Areas Measured



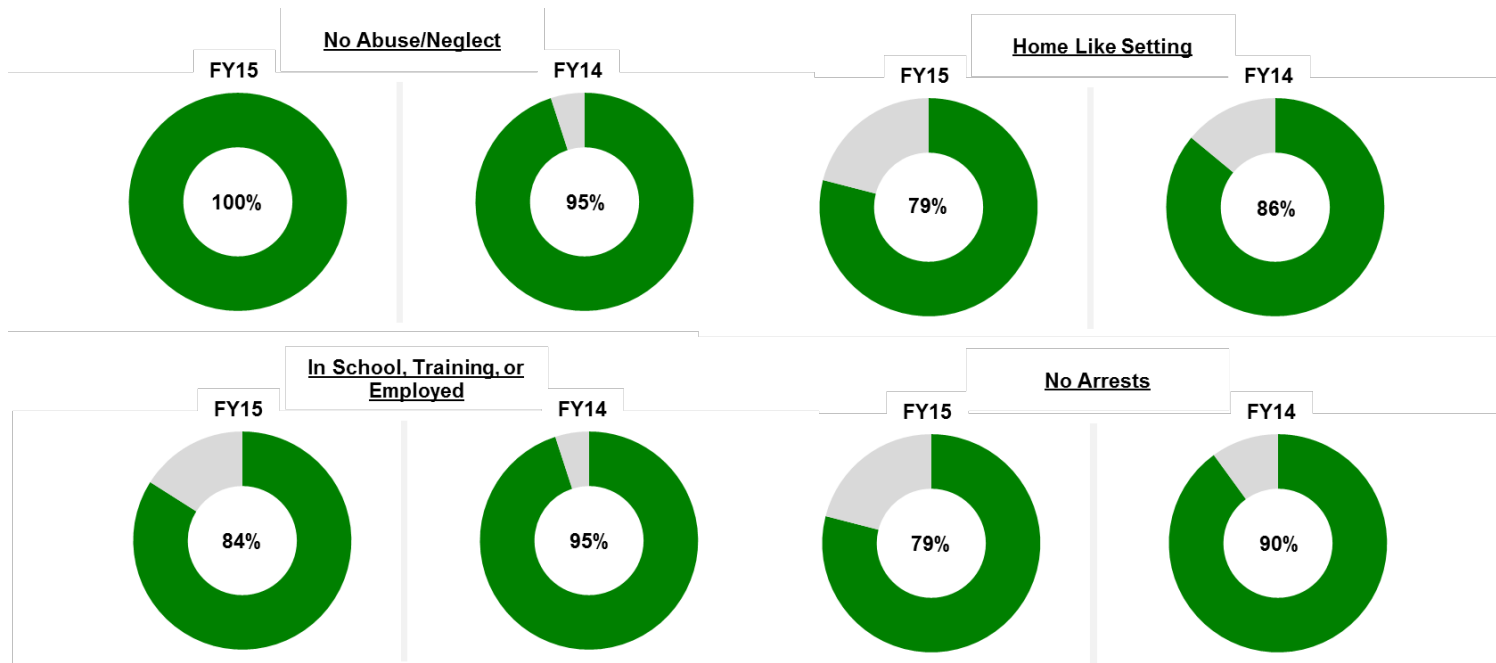
MST – 2nd Circuit Redeploy

Outcomes

MST has four programmatic outcomes.

1. **Safety** – 90% of youth will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 70% youth will be maintained in a home like setting.
3. **Well-Being** – 70% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 70% of youth will be deflected from further involvement in the juvenile justice system.

MST – 2nd Circuit Redeploy achieved **100%** of their outcomes in FY15.



Peer Record Reviews

MST – 2nd Circuit Redeploy achieved a **99%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), MST – 2nd Circuit Redeploy achieved the agency's 90% target in all areas measured.

MST - 2nd Circuit Redeploy Exceeded the Agency's 90% Target in all Areas Measured



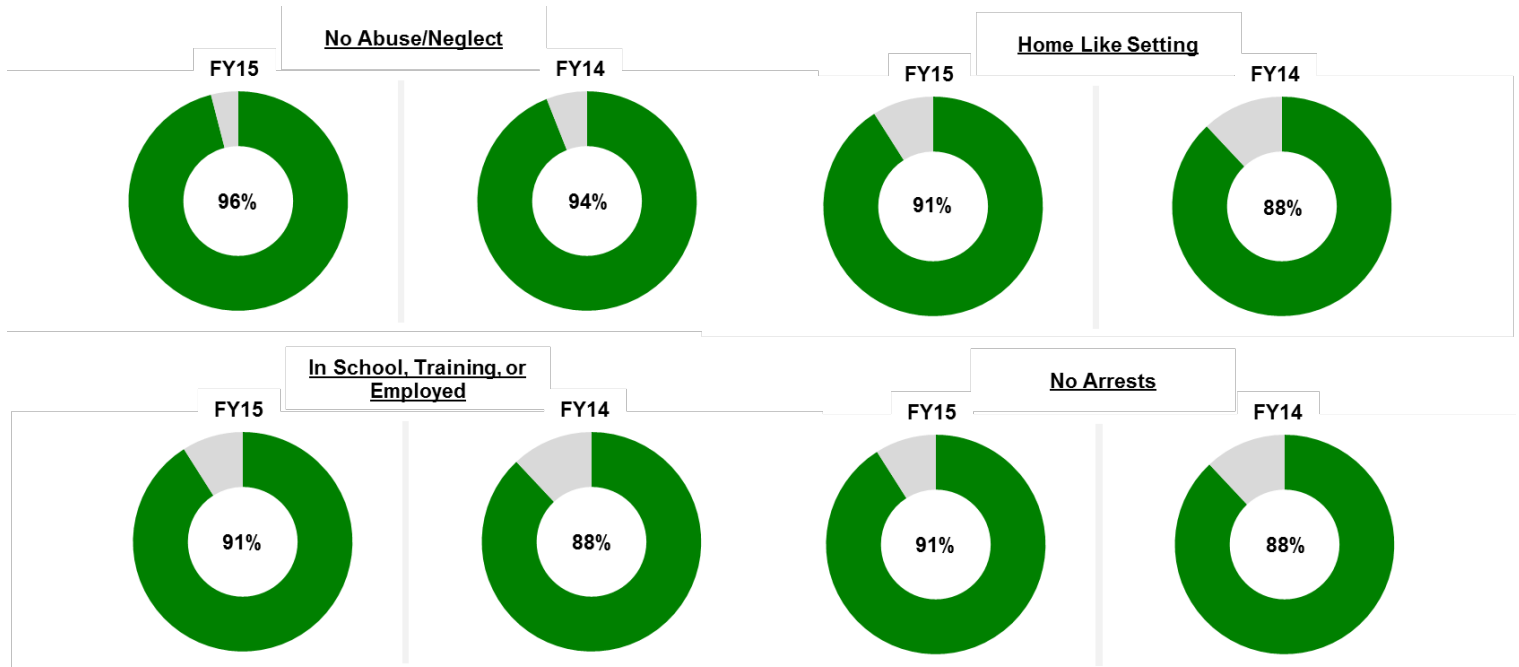
MST – 4th Circuit Redeploy

Outcomes

MST has four programmatic outcomes.

1. **Safety** – 90% of youth will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 70% youth will be maintained in a home like setting.
3. **Well-Being** – 70% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 70% of youth will be deflected from further involvement in the juvenile justice system.

MST – 4th Circuit Redeploy achieved **100%** of their outcomes in FY15.



Peer Record Reviews

MST – 4th Circuit Redeploy achieved a **100%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), MST –4th Circuit Redeploy achieved the agency's 90% target in all areas measured.

MST - 4th Circuit Redeploy Exceeded the Agency's 90% Target in all Areas Measured



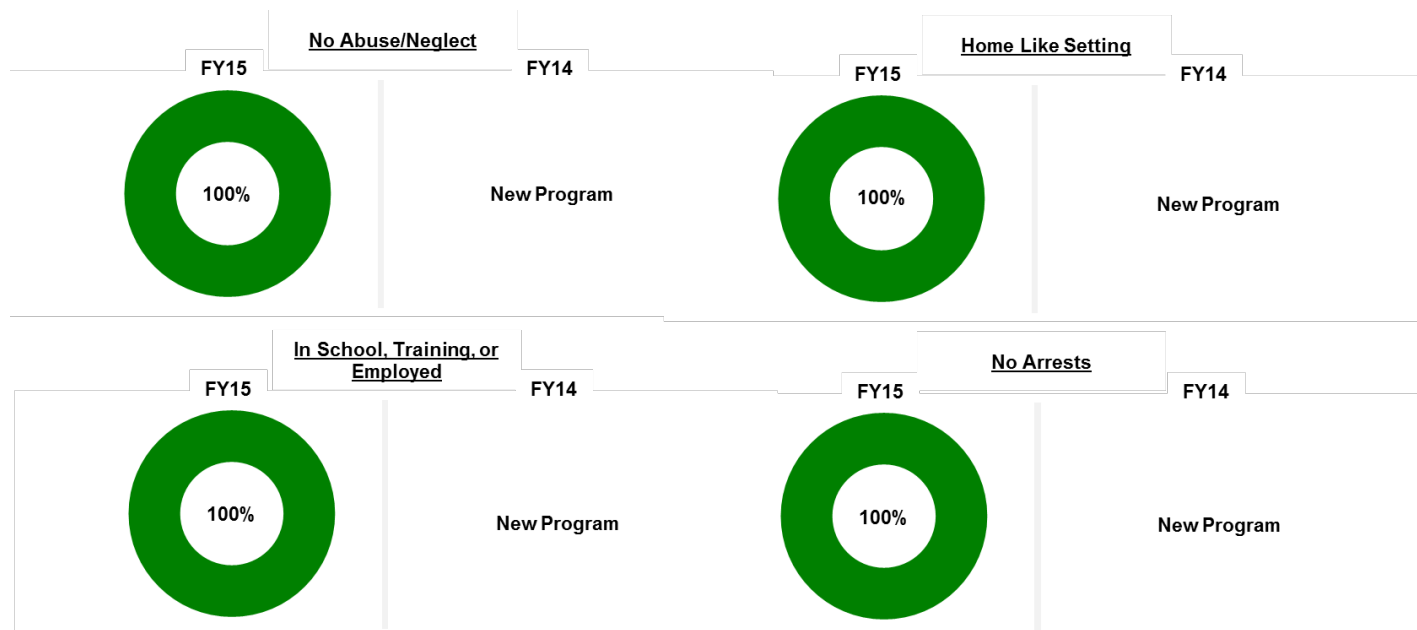
MST – Residential

Outcomes

MST has four programmatic outcomes.

1. **Safety** – 90% of youth will not be subjects of indicated reports of abuse and neglect.
2. **Permanency** – 70% youth will be maintained in a home like setting.
3. **Well-Being** – 70% of youth served will remain in school, alternative education, vocational training, or employed.
4. **Well-Being** – 70% of youth will be deflected from further involvement in the juvenile justice system.

MST – Residential achieved **100%** of their outcomes in FY15.



Peer Record Reviews

MST – Residential achieved a **100%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, Treatment Planning Service Delivery, and Closing), MST – Residential achieved the agency's target in all areas measured.

MST - Residential Exceeded the Agency's 90% Target in all Areas Measured

