

A photograph of a man with a beard and glasses, wearing a blue hoodie, leaning over a young boy with dark skin and curly hair. The boy is wearing a black t-shirt with a colorful graphic. They are both looking down at a book the man is holding. The background shows a brick wall and some greenery.

# CQIR ANNUAL REPORT 2015



## Placement

### REPORT SNAPSHOTS

**2,652** children and youth  
served

**81%** of outcomes achieved

**77%** rating on Peer Record  
Reviews

**A** on overall satisfaction with  
OHU Services

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## Letter from the CQIR Team

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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.

<b>Ruann Barack – Executive Vice President</b> <b>Shannon Stokes – Director of Special Projects</b>				
<b>Child Development &amp; Early Learning</b>	<b>Placement</b>	<b>Community Based Family Services</b>	<b>Medicaid</b>	<b>Research</b>
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 Placement annual report is organized by these CQIR Core Tasks:

- |  |  |   |
|--|--|---|
| <ul style="list-style-type: none"> <li>▪ Outcome Management</li> <li>▪ Client Satisfaction</li> <li>▪ Peer Record Reviews</li> </ul> | <ul style="list-style-type: none"> <li>▪ Supervisory Reviews</li> <li>▪ Residential Home Reviews</li> <li>▪ Case Consultations &amp; Priority Reviews</li> </ul> | <ul style="list-style-type: none"> <li>▪ Incident Reports</li> <li>▪ Employee Recognition</li> <li>▪ Quality Improvement Teams</li> </ul> |
|--|--|---|

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.

## Placement Leadership









The Placement Line of Service is comprised of five program categories: Foster Care, In-Home Services, Residential, Day Treatment, and Transitional Living Programs (Rebound). The Line of Service is led by an Executive Vice President, Deputy Director, 3 Senior Vice Presidents, and 8 Directors of Programs.

<b>Barbara Moss – Executive Vice President</b> <b>Ann Percy – Deputy Director</b>				
Neika Berry – Senior Vice President ( <i>Florida Foster Care and In-Home Services</i> ) Rachel Gubbins – Senior Vice President ( <i>Illinois Foster Care</i> ) Becky Newcomer – Senior Vice President ( <i>Residential, Day Treatment, and Rebound</i> )				
Ann Deuel – Director of Programs ( <i>Day Treatment &amp; Rebound</i> ) Brigitte Brown – Director of Programs ( <i>Florida Foster Care &amp; In-Home Services in Circuit – 9</i> ) David Fox – Director of Programs ( <i>Northern IL Licensing and Gurnee, IL Foster Care</i> ) Jennifer Kotek-Brown – Director of Programs ( <i>Florida Foster Care &amp; In-Home Services in Circuit – 13</i> ) Karen Powell – Director of Programs ( <i>Chicago &amp; Joliet, IL Foster Care</i> ) Melissa Webster – Director of Programs ( <i>Hudelson Residential</i> ) Dr. Michelle Progar – Director of Programs ( <i>CARE Residential</i> ) Michelle Ramirez – Director of Programs ( <i>Florida Foster Care &amp; In-Home Services in Circuit – 10</i> )				
Foster Care	In-Home Services	Residential	Day Treatment	Transitional Living Program
Foster Care, Licensing, & Adoption – Circuit 9 Foster Care & Adoption – Circuit 10 Foster Care – Circuit 13 Foster Care, Specialized Foster Care, Foster Care, & Licensing – Charleston Foster Care & Licensing – Chicago Foster Care & Licensing – Gurnee Foster Care & Licensing – Joliet	In-Home Services – Circuit 9 In-Home Services – Circuit 10 In-Home Services – Circuit 13	CARE Residential Hudelson Residential	CARE Day Treatment	Rebound



## Executive Summary

One Hope United served **2,652** children and youth in the Placement Line of Service in FY15. The Compliance & Quality of service and record documentation overall was **77%**. The efforts of Placement resulted in **81%** of all outcome goals being achieved.

 <h3>OUTCOME MEASUREMENT</h3> <p>Across all programs, <b>81%</b> of Outcome goals were achieved in FY15 (a 5% increase from FY14).</p>	 <h3>CLIENT SATISFACTION</h3> <p>In FY15, the Placement Line of Service scored a <b>4.52</b> in overall client satisfaction, which is a 3% increase from FY14 (this is in the “<b>A</b>” range, which represents scores above <b>4.50</b>).</p>
 <h3>PEER RECORD REVIEWS</h3> <p>Out of 582 files reviewed in FY15, Placement achieved a Compliance &amp; Quality rating of <b>77%</b> on service documentation (a 1% decrease from FY14).</p>	 <h3>RESIDENTIAL HOME REVIEWS &amp; SUPERVISORY REVIEWS</h3> <p>In FY15, Residential Homes achieved a <b>95%</b> on the Home Systems review (a 1% increase from FY14).</p> <p>In FY15, Placement achieved an <b>82%</b> in Supervisory Systems Compliance (a 2% decrease from FY14).</p>
 <h3>CASE CONSULTATIONS &amp; PRIORITY REVIEWS</h3> <p>There were <b>13 Case Consultations</b> (down 6 from FY14) &amp; <b>6 Priority Reviews</b> (down 4 from FY14) conducted in FY15.</p>	 <h3>INCIDENT REPORTS</h3> <p>The Placement Line of Service experienced a <b>23.8% decrease</b> in the number of incidents in FY15 compared to FY14.</p>
 <h3>EMPLOYEE RECOGNITION</h3> <p>There were <b>31 STAR</b> awards and <b>3 GALAXY</b> awards distributed this year.</p>	 <h3>QUALITY IMPROVEMENT TEAMS</h3> <p>The QIT attendance rate in the Placement Line of Service was <b>95.2%</b>.</p>

## Goals and Priorities for FY16

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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. To increase the rate of timely permanency for children in out of home care.
2. To increase compliance across all Foster Care contract measures.
3. To increase record documentation scores from the Peer Record Review process in Foster Care programs.
4. To continue to decrease the use of restraints in Residential programs.
5. To increase the percentage of employee evaluations completed and reviewed with staff on time as measured by the Supervisory Review process.



## Children and Youth Served

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In fiscal year 2015, One Hope United served **2,652** children and youth in the Placement Line of Service. The table below provides a summary of the number of clients served in each program category.

	<b>FY15</b>	<b>FY14</b>
<b>Foster Care</b>	1,959	2,946
<b>In-Home Services</b>	560	1,064
<b>Residential</b>	77	85
<b>Day Treatment</b>	28	37
<b>Rebound</b>	28	22
<b>Placement (ALL)</b>	<b>2,652</b>	<b>4,154</b>

At first glance it appears that in FY15 there was 36% decrease in the number of children and youth served from FY14; however, due to changes in the method of counting clients, this comparison cannot be made. In FY14, Florida Foster Care Services and In-Home Services included children, youth, and caregivers in their client totals. In order to be consistent with operations in Illinois, Florida began reporting numbers for children and youth only.

Other explanations for the increases and decreases in the number of clients served are explained below.

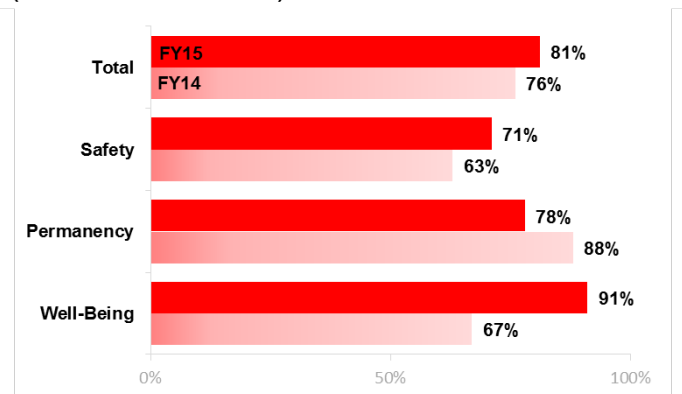
- Day Treatment (-24.32%) had a decrease in community referrals and an increase in the number of Residential youth that attended the district's school.
- Residential (-9.41%) had a decrease in the number of children and youth served in the CARE program due to children and youth having longer stays with the program.
- Rebound (+27%) had an increase in the number of referrals to the program.

# 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 through research from similar programs. In FY15, Placement Services achieved **81%** of their outcomes (this is a 5% increase from FY14).

**Placement Services Achieved 81% of their Outcomes in FY15 (a 5% Increase from FY14)**



In the pages that follow, the outcomes for Foster Care, In-Home Services, Residential, Day Treatment, and Rebound will be described in more detail. Appendices A-E provides a summary of outcomes for FY15 by individual program/office/location.

## Foster Care

Foster Care programs report on outcomes that fall under 3 categories: Safety, Permanency, and Well-Being. In FY15, across Foster Care Programs in Illinois and Florida, **79%** of outcomes were achieved (a 1% decrease from FY14). The outcomes for Foster Care are summarized below for Florida and Illinois.

### Florida Foster Care

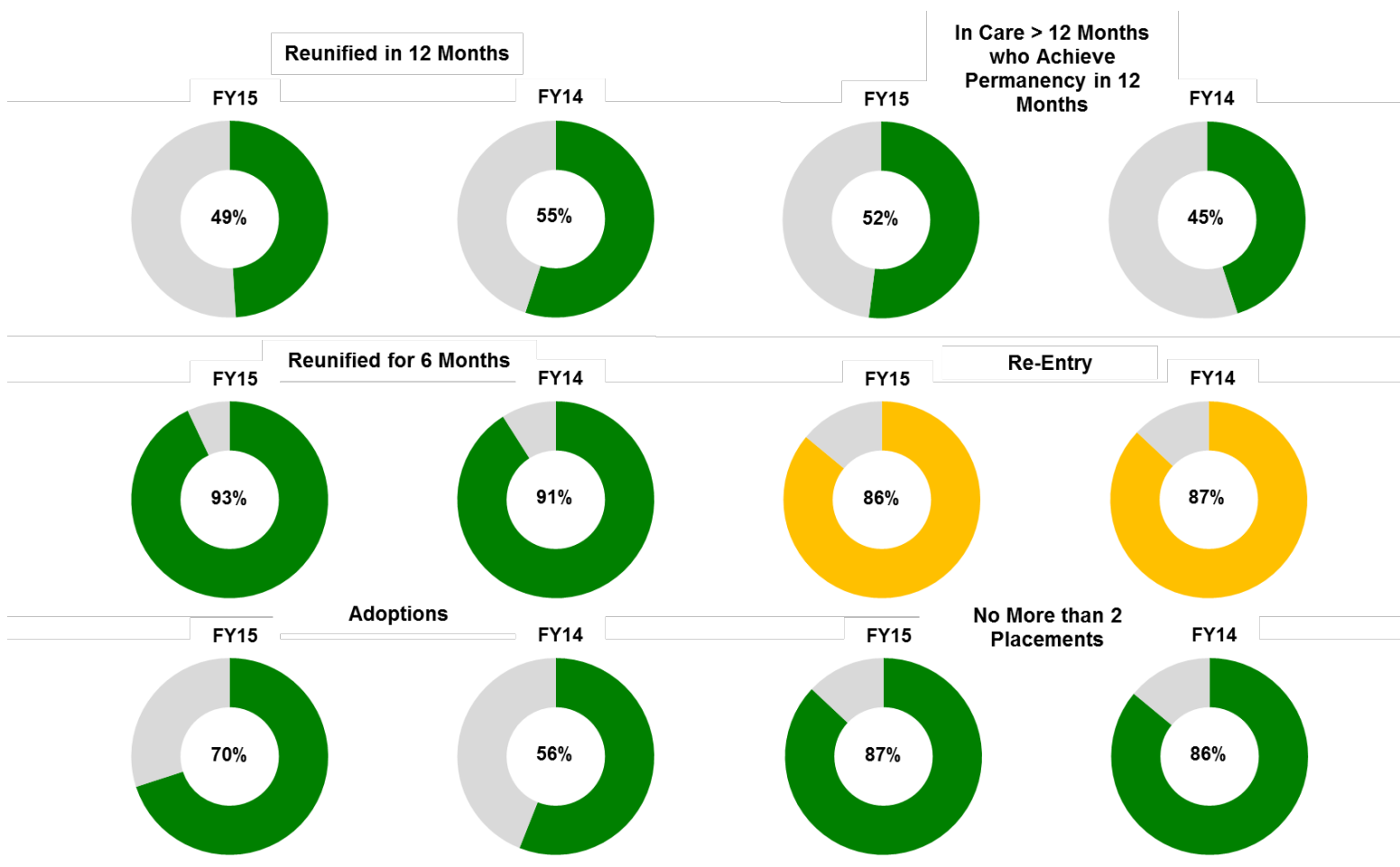
In FY15, Florida Foster Care achieved **88%** of their outcomes – no change from FY14.

The Safety outcome for Florida Foster Care measures that there are no verified reports of maltreatment within 6 months of termination from Foster Care services (the target for this outcome is 95%). In FY15, **98%** of children/youth had no reports of maltreatment 6 months following services (a 2% decrease from FY14).

Florida Foster Care measures 6 Permanency outcomes.

1. 46% of children will be reunified within 12 months of the latest removal.
2. 32% of children in out of home care 12 months or more will achieve permanency within 12 months.
3. 91% of children will remain reunified for a period of 6 months without re-entry into foster care.
4. 91% of children will not be removed within 12 months of a prior reunification (Re-Entry).
5. 32% of adoptions will be finalized within 24 months of the latest removal.
6. 85% of children in out of home care 8 days to 12 months will experience no more than 2 placements.

Below are the results from FY15 along with comparative data from FY14.



There is one Well-Being outcome for Florida, which measures whether separated siblings are having visits with each other (the target is 50%). In FY15, **75%** of children had visits with their siblings in situations where they were not placed in the same home (this is a 14% decrease from FY14).

### Illinois Foster Care

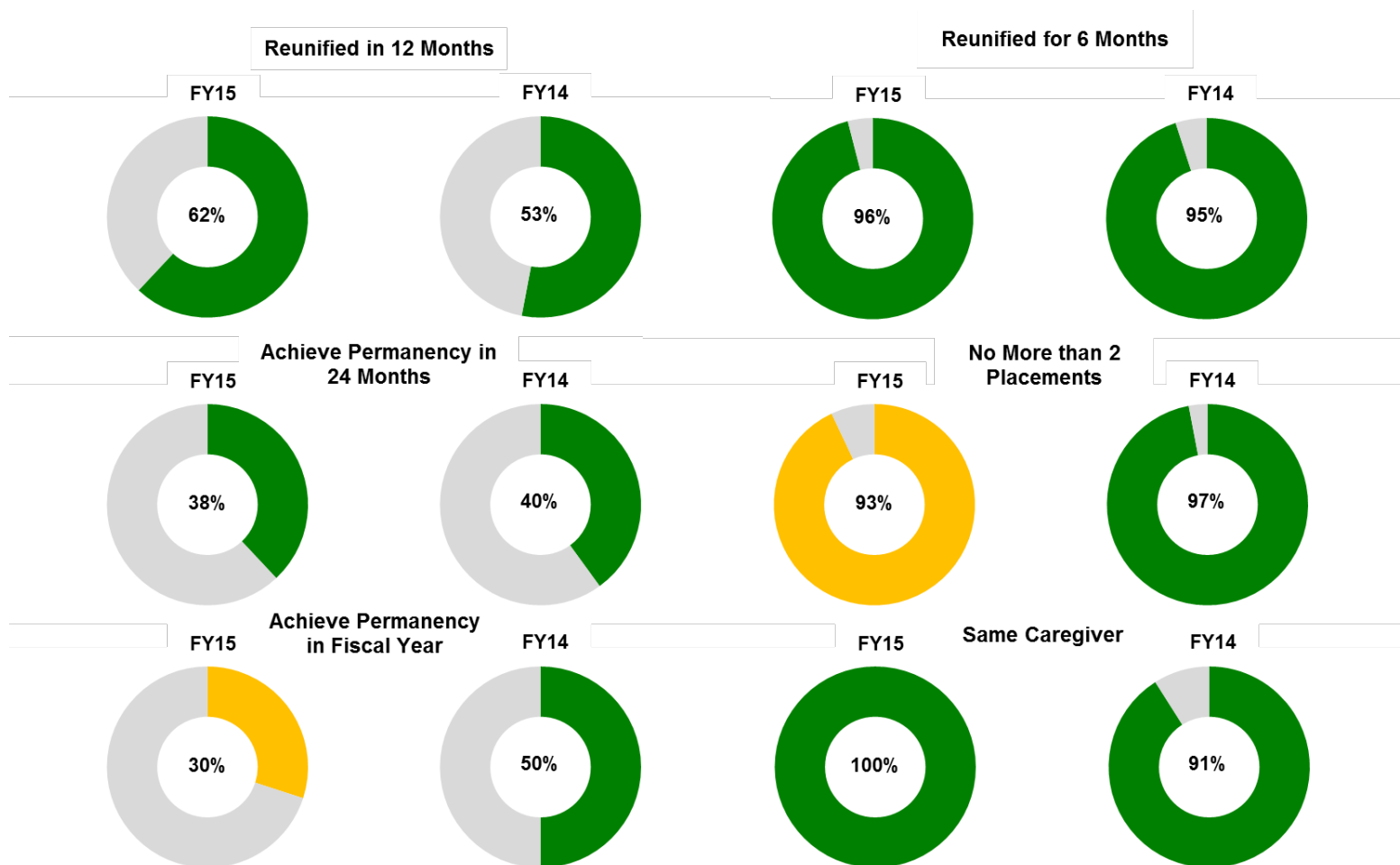
In FY15, Illinois Foster Care achieved **73%** of their outcomes. This is a 2% decrease in the percentage of outcomes that were achieved in FY14.

There are 2 Safety outcomes that were tracked in FY15 for Illinois Foster Care (there was a 3<sup>rd</sup> outcome tracked in FY14 pertaining to no reports of maltreatment 6 months after permanency was achieved for Specialized Foster Care clients; however, in FY15 there were no cases that met the criteria). The first outcome in FY15 measures that children are not abused and/or neglected by a substitute caregiver while in traditional foster care (target = 100%). In FY15, **99.6%** of children in Traditional Foster Care were not the subjects of abuse/neglect reports (within .04% of the target). In FY14, this outcome was also not achieved (it was within .07% of the target). The second outcome measures that children are not abused and/or neglected by a substitute caregiver while in specialized foster care (target = 100%). In FY15, **100%** of children in Specialized Foster Care were not subjects of abuse/neglect reports (no change from FY14).

Illinois Foster Care measures 6 Permanency outcomes. The first four are measured in Traditional Foster Care. The last two are measured in Specialized Foster Care.

1. 46% of children in traditional foster care will be reunified within 12 months.
2. 91% of children in traditional foster care will remain reunified for 6 months without re-entry into care.
3. 32% of children in traditional foster care will achieve permanency within 24 months of coming into care (all permanencies outside of reunifications).
4. 95% of children in traditional foster care will experience two or fewer placement settings within a 12 month period.
5. 40% of children in specialized foster care will achieve permanency during the fiscal year.
6. 90% of children in specialized foster care will remain with the same caregiver during the year.

Below are the results from FY15 along with comparative data from FY14.



Illinois Foster Care measures 3 Well-Being outcomes. The outcomes are listed below with their results presented in parenthesis.

1. 80% of children in traditional foster care will demonstrate an overall improvement in well-being between initial and closing CANs ratings. (97% - no change from FY14)
2. 80% of children in specialized foster care will demonstrate an overall improvement in well-being between initial and closing CANs ratings. (100% - no change from FY14)
3. 85% of children in specialized foster care will not require a higher level of care (i.e. psychiatric hospitalization, residential care, etc...). (100% - up 20% from FY14)

Additionally, Foster Care programs in Illinois measure permanency achievement each Fiscal Year. Below are the permanency outcomes for both Specialized Foster Care and Traditional Foster Care. The state of Illinois has established a 40% target of permanencies achieved during the fiscal year based on the program's starting caseload.

### FY15 Illinois Permanencies

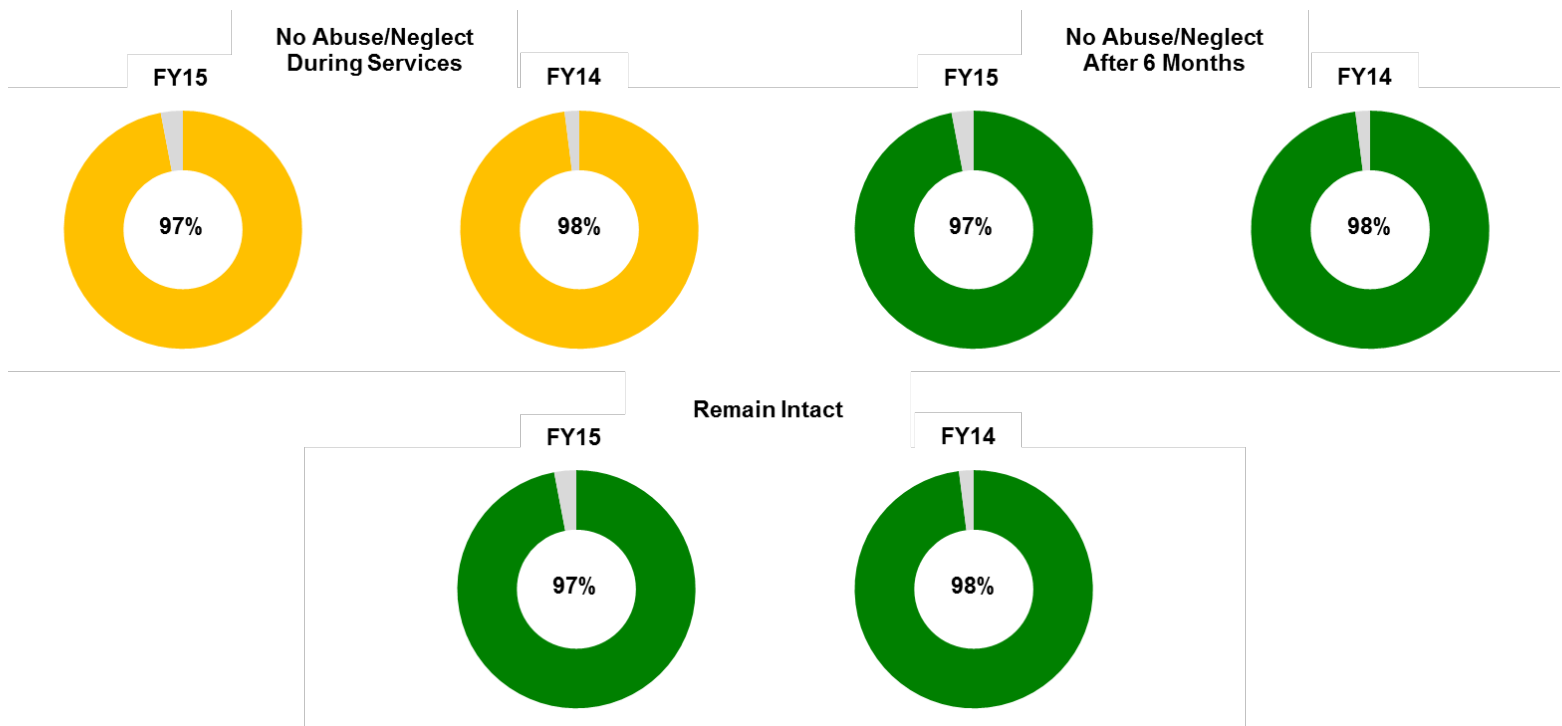
	# of Permanencies	Rate	Return Home	Adoption	Guardianship	Other
<b>Northern – Traditional</b>	119	29.82%	50	48	20	1
<b>Southern – Traditional</b>	23	43.40%	14	9	0	0
<b>Southern – Specialized</b>	3	30%	1	0	1	1

### In-Home Services

In-Home Services report on outcomes that fall under 2 categories: Safety and Permanency. There are a total of 3 outcomes.

1. **Safety** – 99% of children will not be subjects of indicated reports of abuse/neglect during the service period.
2. **Safety** – 95% of children will not be subjects of indicated reports of abused/neglected 6 months after the termination of supervision.
3. **Permanency** – 95% of children served will remain intact.

In FY15, In-Home Services achieved **67%** of its outcomes (no change from FY14).



## Residential

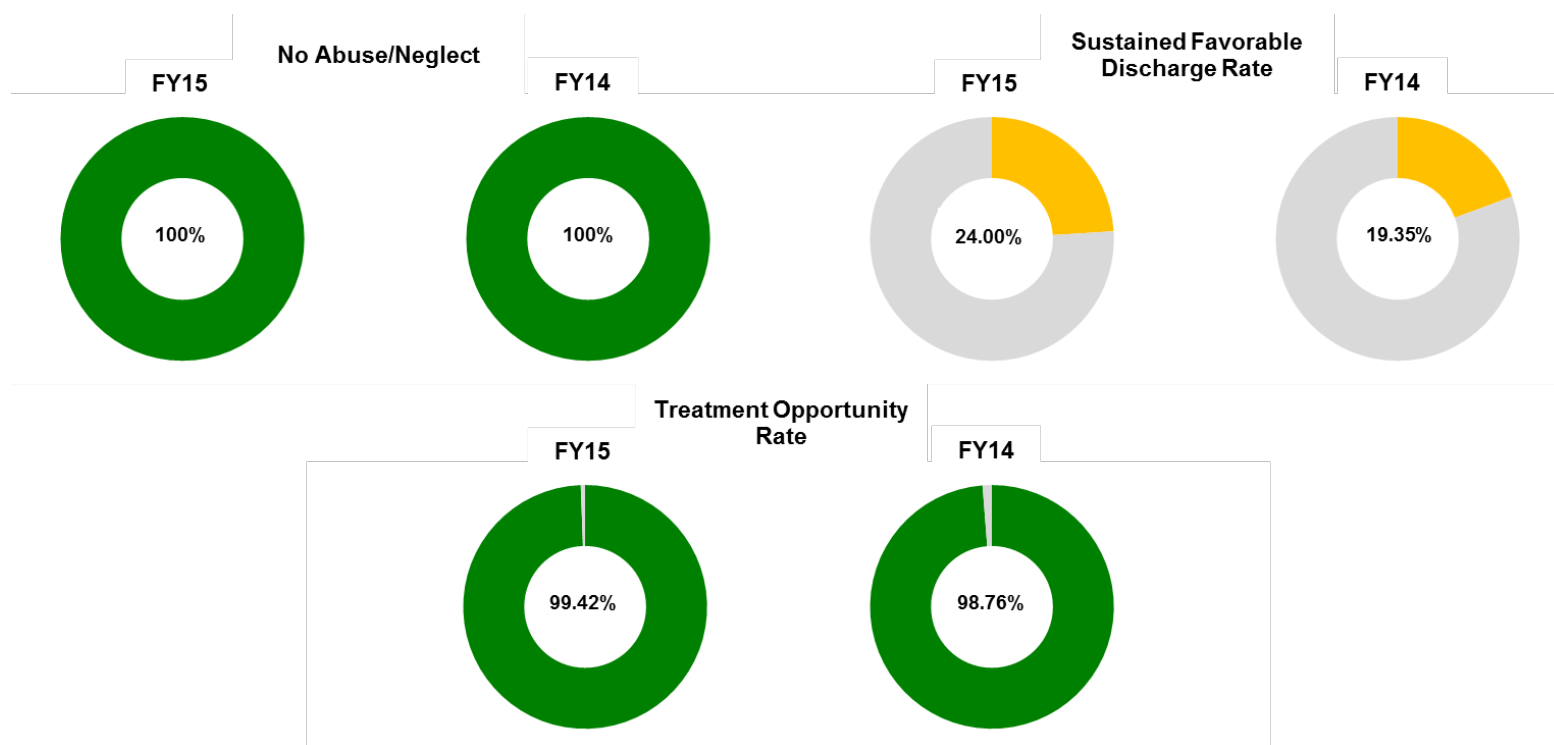
In FY15, across both Residential programs, **67%** of outcomes were achieved (down 13% from FY14). The outcomes for the Residential programs are summarized below.

### CARE Residential

CARE Residential measures 3 outcomes.

1. **Safety** – 95% of children/youth will not be subjects of indicated reports of abuse/neglect while physically present in the residential treatment program.
2. **Permanency** – The program will achieve its sustained favorable discharge rate of 27.04%.
3. **Well-Being** – The program will achieve its treatment opportunity rate of 95.32%.

In FY15, CARE Residential achieved **67%** of its outcomes (no change from FY14).

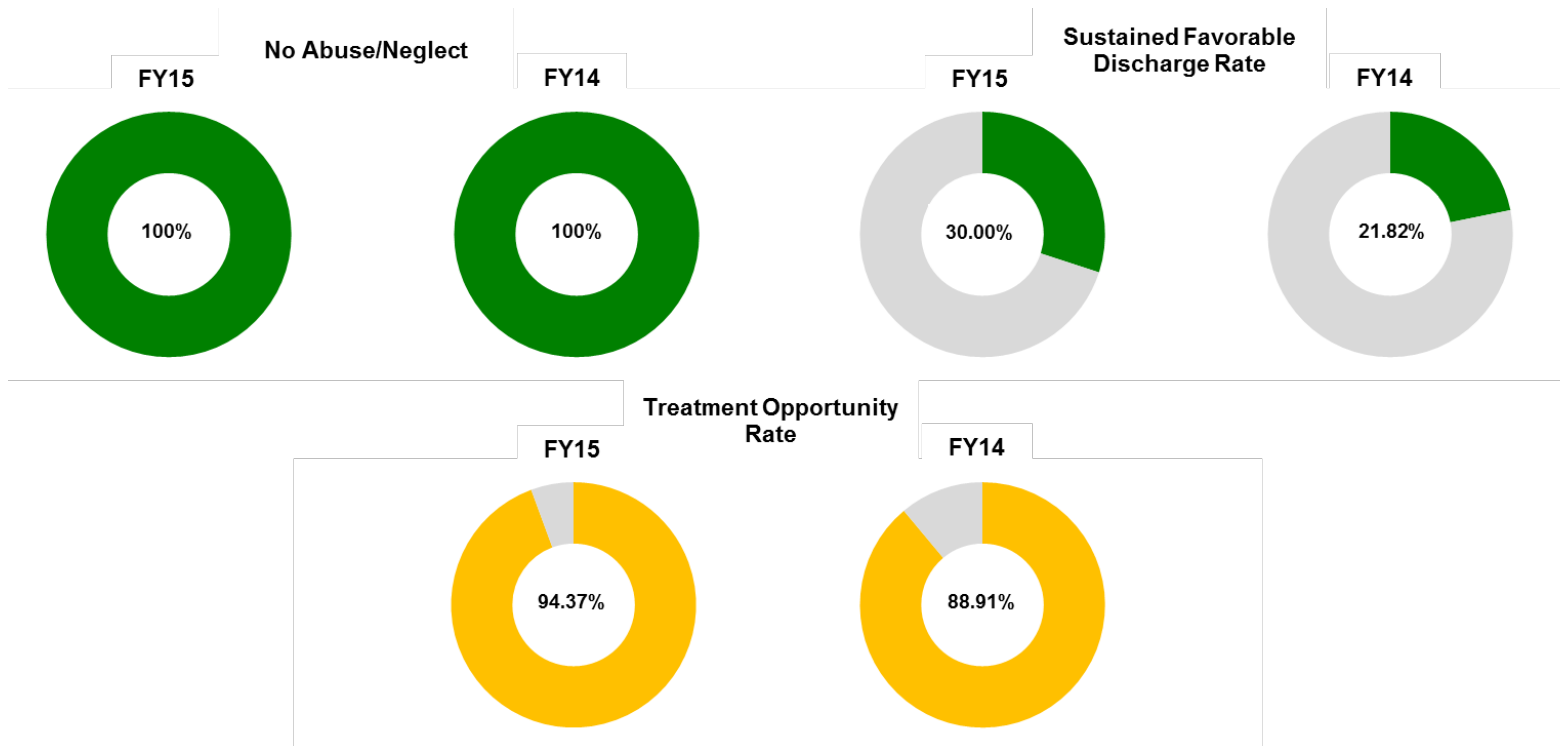


## Hudelson Residential

Hudelson Residential measures 3 outcomes.

1. **Safety** – 95% of children/youth will not be subjects of indicated reports of abuse/neglect while physically present in the residential treatment program.
2. **Permanency** – The program will achieve its sustained favorable discharge rate of 25.00%.
3. **Well-Being** – The program will achieve its treatment opportunity rate of 94.49%.

In FY15, Hudelson Residential achieved **67%** of its outcomes (no change from FY14).



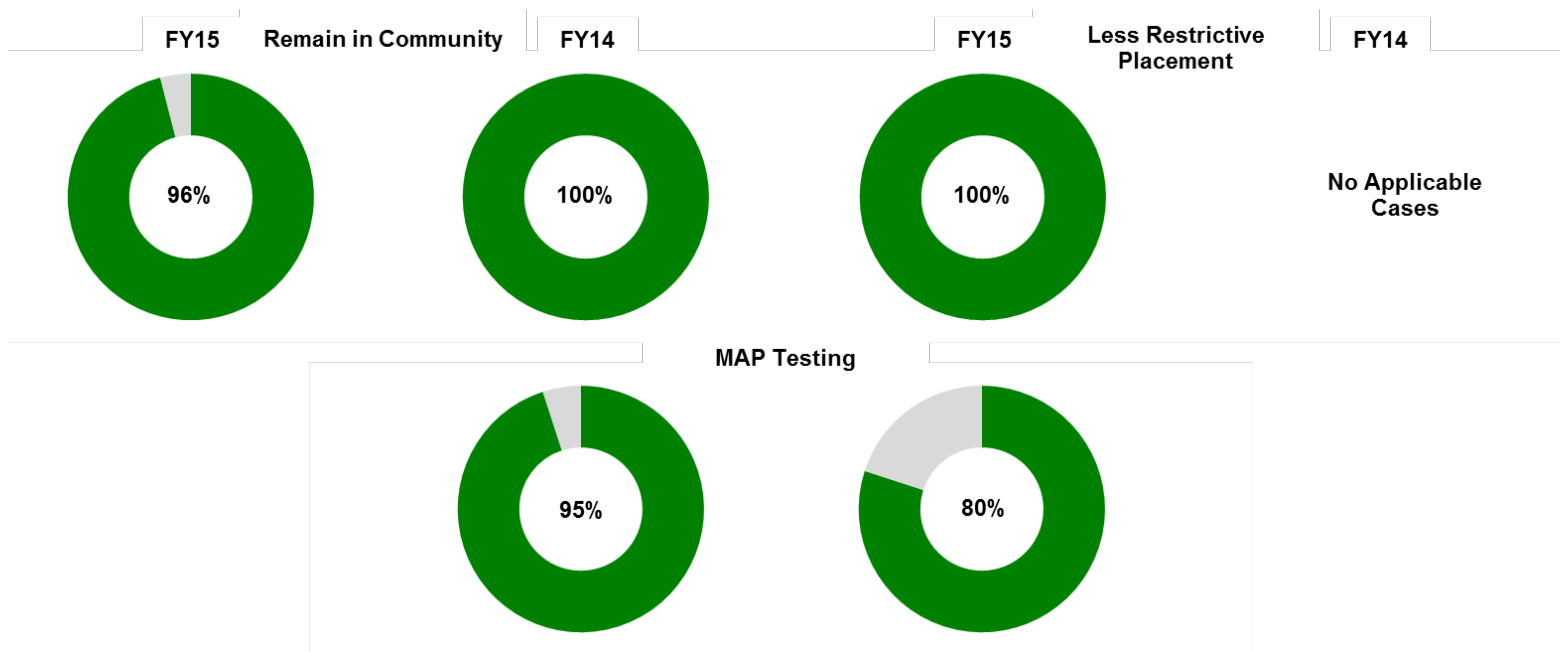


## Day Treatment

CARE Day Treatment measures 3 outcomes.

1. **Permanency** – 90% of youth will remain in the community while enrolled in the program.
2. **Permanency** – 80% of youth will maintain their less restrictive placement 6 months after being discharged.
3. **Well-Being** – 80% of youth will experience an increase in one academic grade during the academic year, as evidenced by the results of the MAP testing.

In FY15, CARE Day Treatment achieved **100%** of its outcomes (no change from FY14).

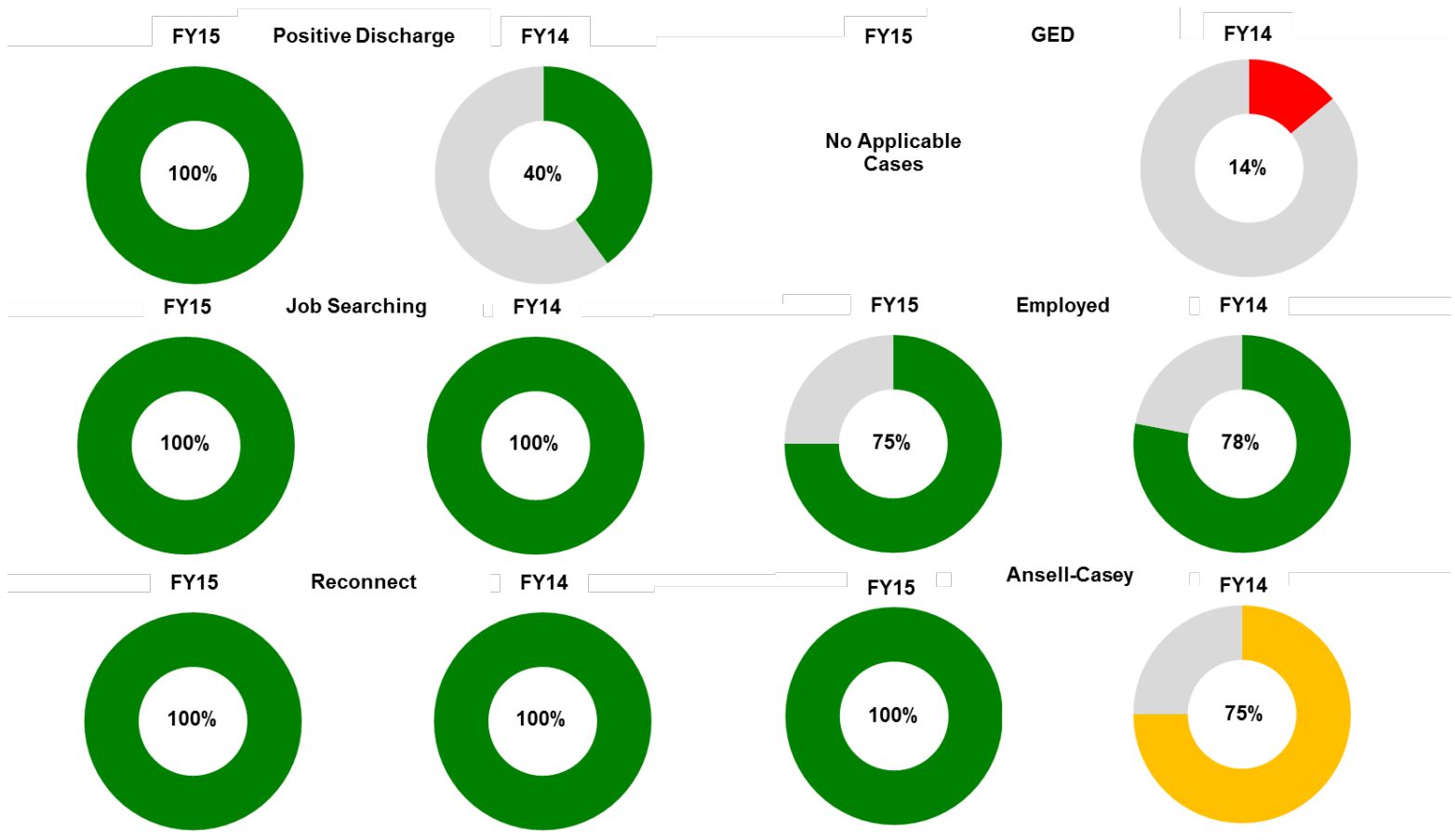


## Rebound

Rebound measures 6 outcomes.

1. **Permanency** – 25% of youth will be discharged into the community in a planned manner. (Positive Discharge)
2. **Well-Being** – 50% of treatment clients will have completed and received their GED at the time of discharge.
3. **Well-Being** – 90% of youth will participate in job searching skill development.
4. **Well-Being** – 50% of youth will be employed while enrolled in the Rebound program.
5. **Well-Being** – 80% of youth will reconnect with family members as visiting resources.
6. **Well-Being** – 80% of youth will improve their life skills as measured by the Ansell-Casey Life Skills Assessment.

In FY15 Rebound achieved **100%** of its outcomes (a 33% increase from FY14).

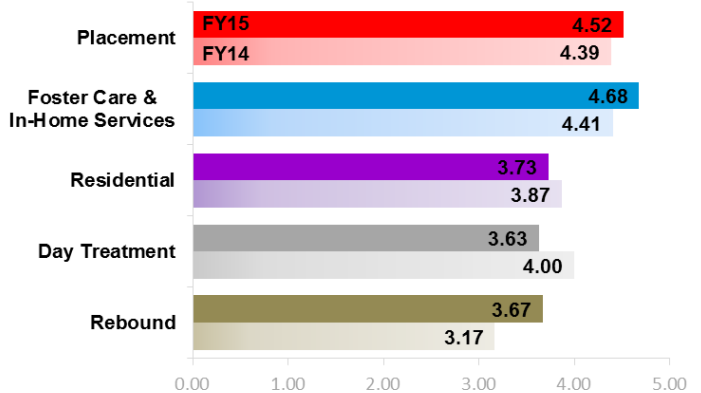


## Client Satisfaction

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.

Placement scored a **4.52** in overall client satisfaction in FY15; this is a 3.0% increase from FY14 and brings Placement into the "A" range (above **4.50**). Foster Care & In-Home Services are the only program category that scored in the "A" range. In FY15, Foster Care & In-Home Services scored a **4.68**, which is a 6.1% increase from FY14. The Rebound program also experienced an increase in overall client satisfaction. In FY15, Rebound scored a **3.67** ("B" range), which is an increase of 15.8%. The Residential and Day Treatment programs experienced a decrease in overall client satisfaction. In FY 15, Residential scored a **3.73** ("B" range), which is a 3.6% decrease and Day Treatment scored a **3.63** ("B" range), which is a decrease of 9.3%.

### Placement Scored an "A" in Overall Satisfaction with OHU in FY15



Number of Surveys Returned in FY15	
Foster Care & In-Home Services	583
Residential	52
Day Treatment	16
Rebound	6
<b>Placement = 657</b>	

In FY15, there were 657 surveys returned in Placement programs. This is a 2.23% decrease from the 672 surveys returned in FY14.

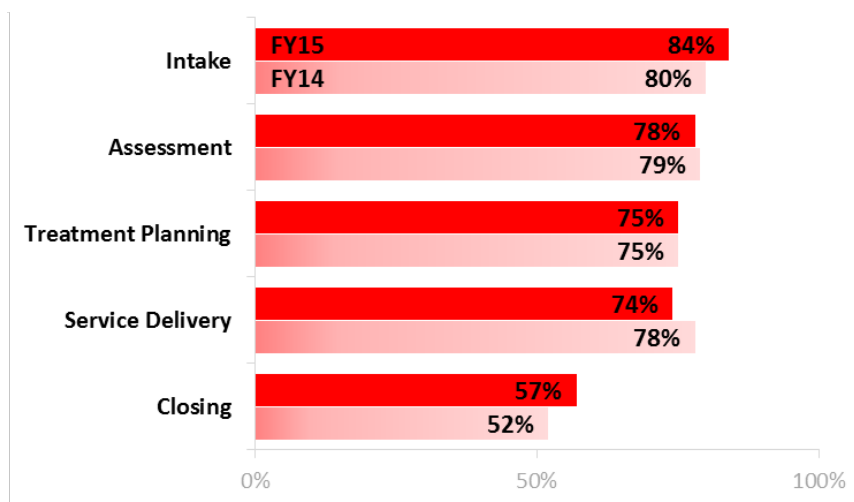
## Peer Record Reviews

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 Coordinators 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 1<sup>st</sup>, 2014 through June 30<sup>th</sup>, 2015. The program categories reviewed for the Placement Line of Service in this report are: Foster Care, In-Home Services, Residential, Day Treatment, and Rebound. In FY15, **582** files were reviewed across these program categories.

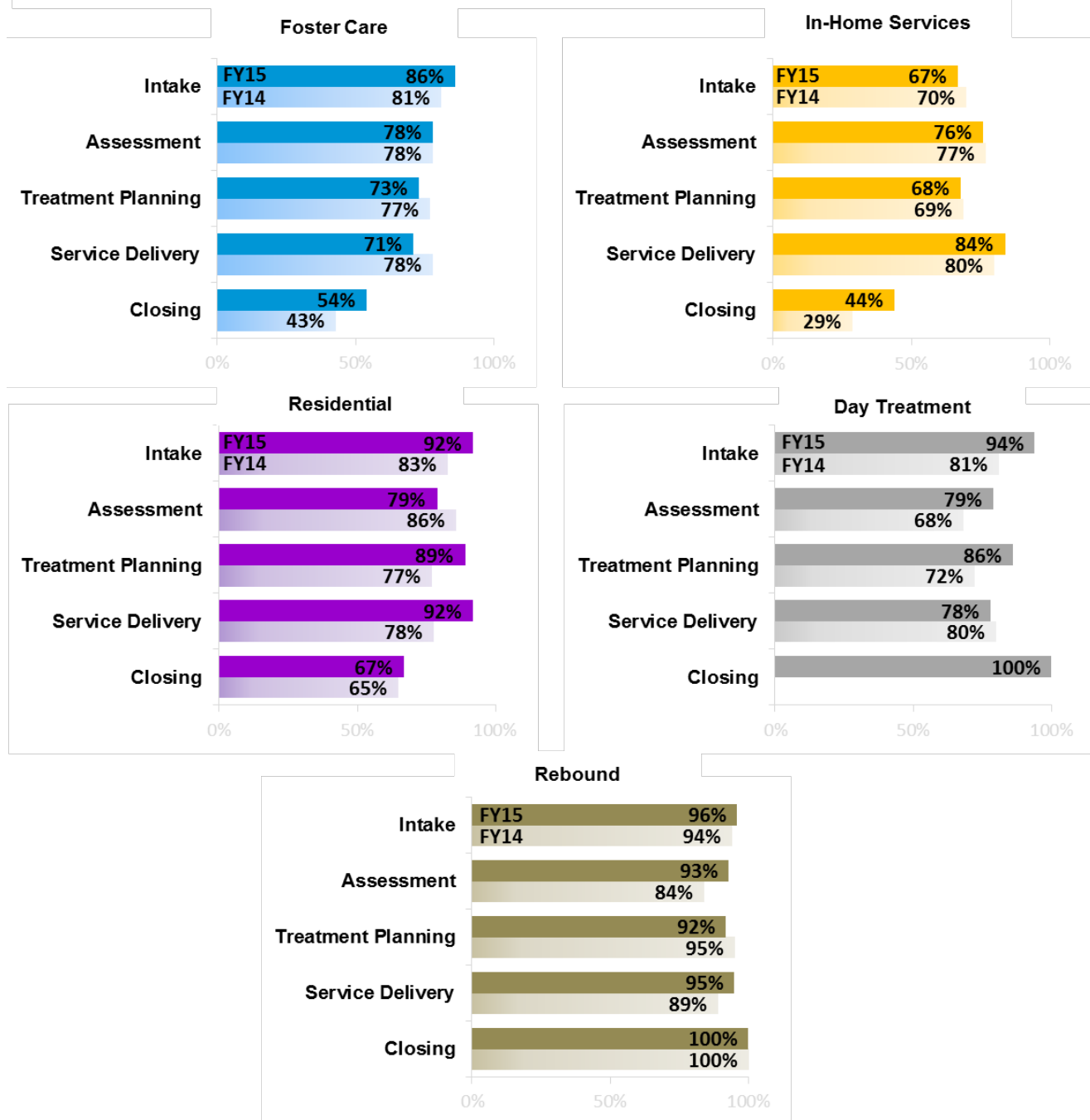
In FY15, Placement was below the agency's 90% target in all areas measured across the case life cycle. This marks two consecutive years that the Placement Line of Service has been below the agency's target. Overall, across all programs and all areas measured Placement has a **77%** Compliance and Quality rating on Peer Record Reviews in FY15 (a 1% decrease from FY14).

### Placement Achieved a 77% Compliance & Quality Rating in FY15 (a 1% Decrease from FY14)



When looking at each Program Category separately, Foster Care programs have a **76%** (a 2% decrease from FY14) overall Compliance and Quality rating, In-Home Services has a **73%** (no change from FY14) overall Compliance and Quality rating, Residential programs have an **87%** (a 6% increase from FY14) overall Compliance and Quality rating, Day Treatment has a **85%** (a 9% increase from FY14) overall Compliance and Quality rating, and Rebound has a **95%** (a 3% increase) overall Compliance and Quality rating. Appendices A-E provides more detailed record review information for FY15 by individual program.

**In FY15, Rebound Achieved a 95% Compliance & Quality Rating, Residential Achieved an 87%, Day Treatment Achieved an 85%, Foster Care Achieved a 76%, and In-Home Services Achieved a 73%**



During fiscal year 2015 there were **103** case managers, therapists, supervisors, and directors who assisted in reviewing **582** 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.

<b>Peer Record Reviewers</b>				
Shirica Flowers	Julius Benjamin	Terri Cummings	Ruby Huntley	Nancy Baker-Guerin
Carla Smith	Dennis Delgado	Lia Rodriguez	Bruce Garver	Chenoa' Baldwin
Natalie Niles	Liza Simon-Roper	Lauren Stevens	Lisa Kinchen	Andre Davis
Paula Williams	Tamara Ambre	Kahdijah Hakeem	Kathleen Whaley	Anna Richard
Letitia Bates	Michelle Progar	Sarah Raper	Sherie Mixon	Melissa Black
Karen Powell	Erin Berry	Christina Beam	Pam Barack	Julie Rodriguez
Amirah Brown	Deborah Holmes	Barbara Hester	Arlina Howard	Kimberly Newton
Lisa Gregory	Aimee Edmondson	Pamela Evans	JC Gonzalez	Sarah Heston
Ron Smith	Lacey Norton	Ernestine Frazier	Breanna Seright	Tabitha Reaney
Tanya Lovings	Paula Williams	Ana Cruz	Maia Faulk	Tawnya Hackler
Andrew Hamlyn	David Fox	Rebecca Kampman	Gail Werley	Maria Cruz-Morgan
Lindsay Bass	Ashley Vaughan	Monica Sanders	Anna Hofer	Kimberly Ridgeway
Jamarcus Allen	Crystal Johnson	Monica Wright	Morgan Schmoyer	Sharon Mattison-Reid
Yolanda Walker	Amanda Hybers	Cal Walton	Oviette Salinas	Danielle Vinson-Tucker
Tauquia Ponder	Amanda Kilwein	Leslie Maysonet	Deondra Milton	Stephanie Covarrubias
Rebecca Smith	Jennifer Carmin	Brandy Davis	Brenda Smith	Raven Drayton
Mary Ann Miller	Lasonja Houston	Amy Clarke	Jasmine Catledge	Cynthia Hess-Jaffe
Joshua Stamps	Nikki Riggsbee	Laurie Vincent	Genevie DeZayas	Nydia Davilla
Jacki Tabor	Danna Brown	Adrienne Johnson	Sharica Smalls	Anne Marie Johnson
Gloria Doyle	Jeanine Powell	Amy Overmyer	Emily Owen	Jayme Godoyo
Rachel Gubbins	Thomas Youngberg	Stephanie Bowdler		
<b>Total = 103</b>				

## Supervisory Systems Review

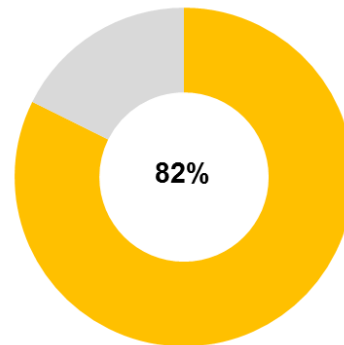
On an annual basis CQIR conducts an assessment of supervision provided by each direct service supervisor in the organization. The importance of regular supervision is critical in ensuring that clients and families are receiving quality services and it also plays a role in employee satisfaction and retention. 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.

**Placement Achieved an 82% in Supervisory Systems Compliance**

Twenty-five Supervisory Systems Reviews were completed in the Placement Line of Service. In FY15, Placement achieved an **82%** in Supervisory Systems Compliance (a 2% decrease from FY14).

The items missed most on the Supervisory Systems Review were:

- The supervisor completes and submits annual staff performance reviews within the month due for review and approval.
- Staff receive annual performance reviews within the month they are due.

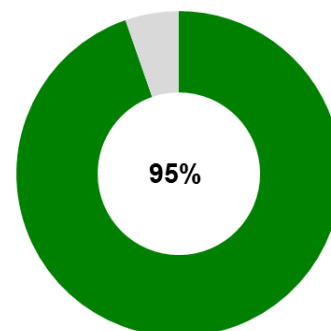


## Residential Home Systems Review

The Residential Home Systems Review is a process to determine if a Residential Home is meeting agency and licensing standards. This includes professional appearance, maintaining client confidentiality, and following health, safety, and risk management procedures. CQIR conducts OHU Residential Home Systems Reviews annually. One Hope United has a 90% target for compliance. (CQIR also conducts Office Systems Reviews. Since One Hope United Offices provide services for all Lines of Service, Office Systems Reviews are only recorded in the Cross-Lines of Service Annual Report.)

Eight Residential Home Systems Reviews were conducted (the two CARE homes were reviewed twice). In FY15, Residential Homes achieved a **95%** on the Home Systems review (a 1% increase from FY14).

**Residential Homes Achieved a 95% in Residential Home 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
Foster Care	13	5	18
In-Home Services	0	0	0
Residential	0	1	1
Day Treatment	0	0	0
Rebound	0	0	0
TOTAL	13	6	19

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. Placement conducted 13 Case Consultations in FY15 (down 6 from FY14).

Placement conducted 6 Priority Reviews in FY15 (down 4 from FY14). There were 4 Priority Reviews conducted due to the deaths of natural parents, 1 due to an investigation from the Office of the Inspector General, and 1 due to alleged physical abuse of a client.

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

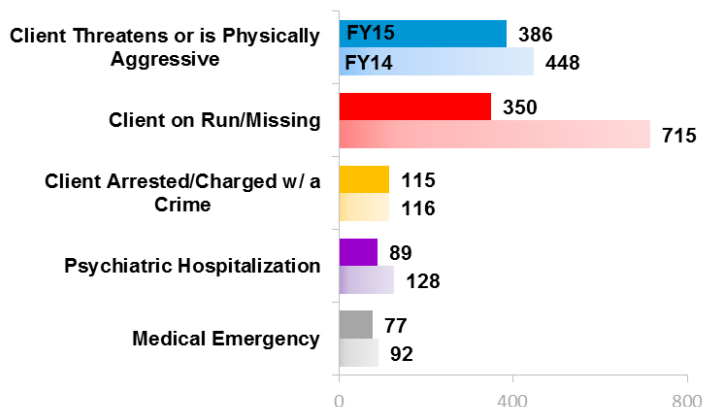
- Regular reminders about operational procedures such as not closing client's bedroom doors when in their room are very important for staff. All staff should feel empowered to speak up about something they see that is against policy and procedure.
- Staff should seek immediate medical evaluation of clients who are injured (or who report being injured) while in our care (e.g. restraints, abuse allegations, etc.).
- In Florida, non-family members can petition the court to request a Marchman Act to be ordered for clients that are unwilling to comply with treatment services. A Marchman Act is a means of providing an individual in need of substance abuse services with emergency services and temporary detention for substance abuse evaluation and treatment when required, either on a voluntary or involuntary basis.

# 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.

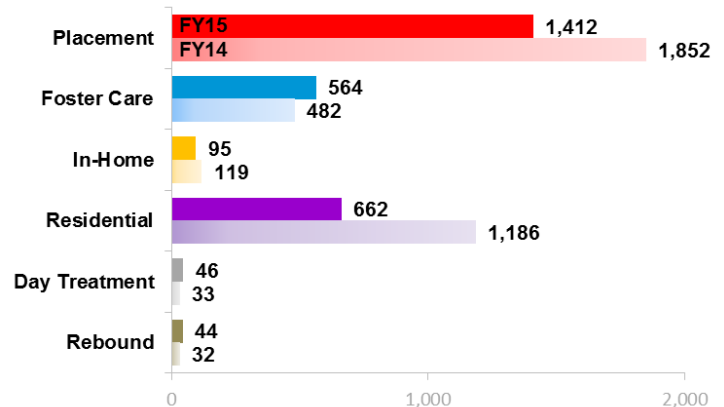
Placement experienced a 23.8% decrease in the number of incidents in FY15. Day Treatment had the largest percent increase in the number of incidents (+39.4%), followed by Rebound (+37.5%), and Foster Care (+17.0%). Residential programs had the largest percent decrease in the number of incidents (-44.2%) followed by In-Home Services (-20.2%).

## Top 5 Most Common Incident Types (not including Restraints)



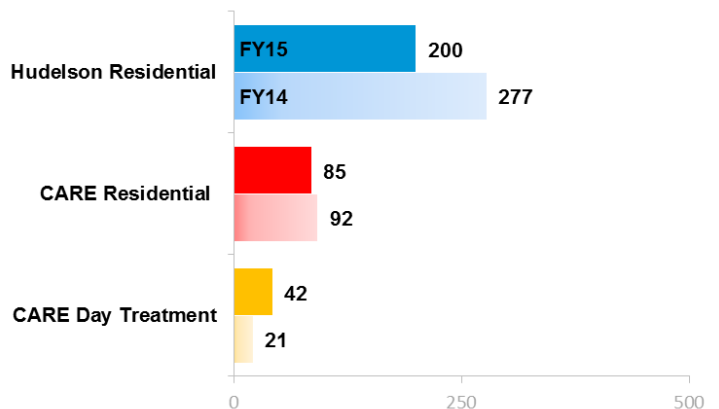
In the Residential Programs (Hudelson and CARE) and the CARE Day Treatment Program an intervention known as a Restraint is used in extreme circumstances when a client is a danger to him/herself or to others. Staff members are trained under what circumstances a Restraint can be used (including other de-escalation strategies to perform prior to a restraint) and how to implement a restraint to minimize client and staff injury. All restraints are documented and reported as an incident through the agency's reporting process. In FY15, Hudelson and CARE Residential both experienced decreases in the number of restraints (-27.80% and -7.61%, respectively). CARE Day Treatment experienced a 100% increase in the number of restraints in FY15.

## Placement Experienced a 23.8% Decrease in the Number of Incidents in FY15



In FY15, Clients Threatening/Being Physically Aggressive, Clients being on Run/Missing, Clients being Arrested/Charged with a Crime, Psychiatric Hospitalizations, and Medical Emergencies were the 5 most common incident types. All of these incident types experienced percent decreases in FY15 ranging from -0.86% to -51.05%.

## Hudelson and CARE Residential Experienced a Decrease in the Number of Restraints in FY15



## 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 **31 STAR** awards and **3 GALAXY** awards distributed in the Placement Line of Service this year.



In FY15, we were proud to recognize these Placement employees with a STAR award.

### STAR Award Recipients

Stephanie Bowdler – Coordinator (Centralia)	Melissa Black – Case Manager (Sebring)
Anna Richard – Crisis Clinician (Sebring)	Jassemine Johnson – Youth Care Worker (Centralia)
Cal Walton – Lead Case Manager (Orlando)	Rebecca Smith – Case Manager (Orlando)
Monica Wright – Adoption Case Manager (Sebring)	Terri Breechen – Case Manager (Gurnee)
Rebecca Bromwell – Administrative Assistant (Sebring)	Stacey Garner – Youth Care Worker (Centralia)
Madeline Holmes – Case Manager (Gurnee)	Sherie Mixon – Case Manager (Wauchula)
Brandon Duhon – Youth Care Worker (Centralia)	Rachel Stransky – Activity Specialist (Centralia)
Kimberly Newton – Case Manager (Sebring)	Kimberly Ridgeway – Lead Case Manager (Sebring)
Garlene Frezin – Case Manager (Tampa)	Gregory Phoenix – Residential Specialist (Centralia)
Dylan Taylor – Youth Care Worker (Centralia)	Francois Gatimu – Youth Care Worker (Centralia)
Rebecka Burgos – Residential Specialist (Centralia)	Amanda Land – Case Manager (Wauchula)
Morgan Schmoyer – Case Manager (Orlando)	Anna Hofer – Case Manager (Orlando)
Crystal Raullerson – Adoption Counselor (Orlando)	Jackie Tabor – Case Manager (Tampa)
Maia Faulk – Case Manager (Sebring)	Darby Barwick – Training Coach (Sebring)
James Webster – Coordinator (Centralia)	Michael Snow – Youth Care Worker (Centralia)
Jessica Perry – Therapist (Centralia)	

In FY15, we were proud to recognize these Placement teams with a GALAXY award.

### GALAXY Award Recipients

Foster Care Programs (Gurnee)
Baker Home Staff (Centralia)
CARE Residential and Day Treatment (Lake Villa)

## Quality Improvement Teams

Placement assembles 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 Placement Line of Service was **95.2%**. The following Local, Director and Line of Service Quality Improvement Teams were assembled three times this year in the Placement Line of Service.

Quality Improvement Teams		
Local	Director	Line of Service
Educaneers Old School Rebounders CC Seeds of Change 24-7 Crew Team Extreme EBT The River Valley Responders Team Unity All Stars KFC Guardian Angels The Casenote Queens Gibbs-Baker Heroes Wilson Heroes Clinical Heroes Sassy Soldiers Steller Seven Elite Six Advocates The "A" Team Quality Squirrel Squad The Best and Brightest Perfect Stars The Renegades Everyday Heroes Team Backbone Warriors of Quality Quality Commanders Quality Queens Improvement Seekers Quality Avengers	Northern FC/Lic Management CARE Leadership Super Heroes Super Sups ASAP No Worries Quality Angels	Hopes Heroes

## Appendix A

### Foster Care – Florida Circuit 9

#### Outcomes

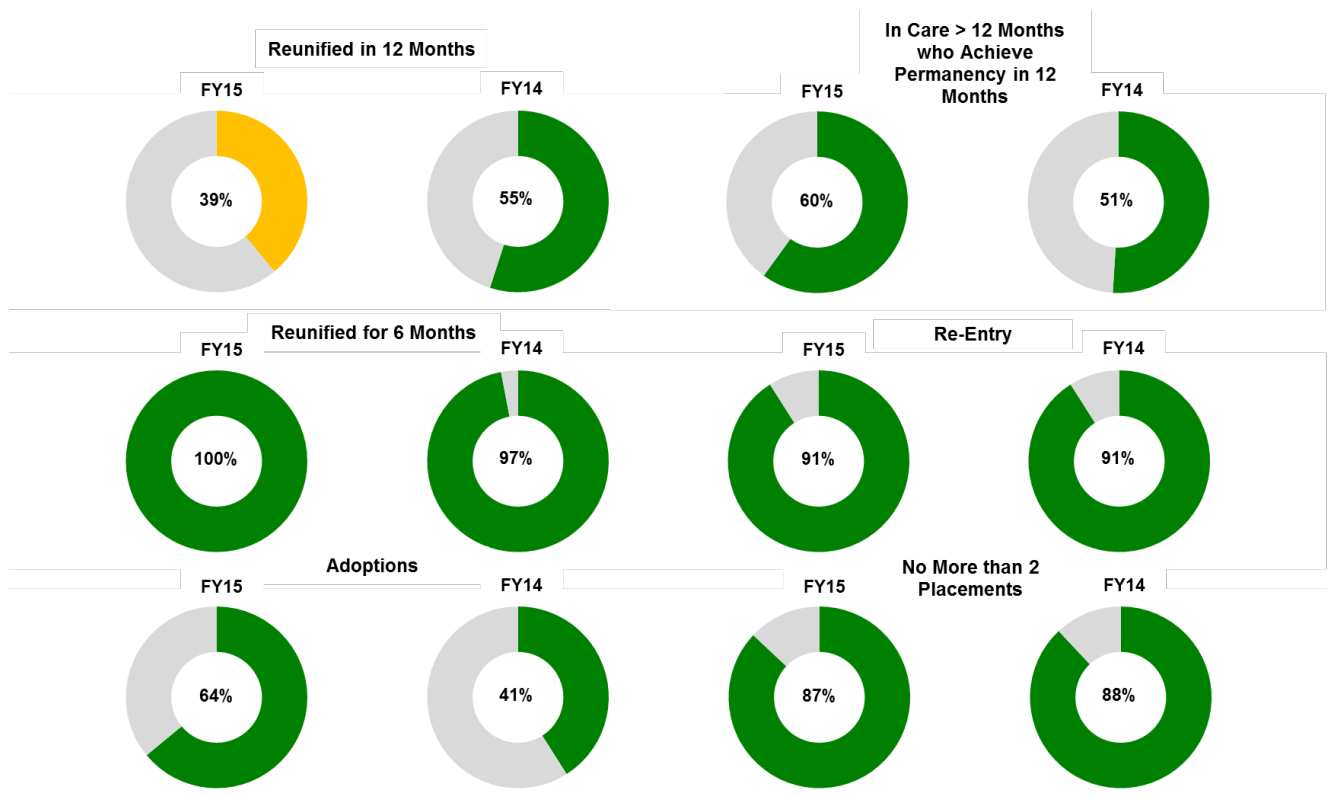
In FY15, Circuit 9 achieved **88%** of their outcomes.

The Safety outcome for Florida Foster Care measures that there are no verified reports of maltreatment within 6 months of termination from Foster Care services (the target for this outcome is 95%). In FY15, **99%** of children/youth had no reports of maltreatment 6 months following services (a 1% decrease from FY14).

Florida Foster Care measures 6 Permanency outcomes.

1. 46% of children will be reunified within 12 months of the latest removal.
2. 32% of children in out of home care 12 months or more will achieve permanency within 12 months.
3. 91% of children will remain reunified for a period of 6 months without re-entry into foster care.
4. 91% of children will not be removed within 12 months of a prior reunification (Re-Entry).
5. 32% of adoptions will be finalized within 24 months of the latest removal.
6. 85% of children in out of home care 8 days to 12 months will experience no more than 2 placements.

Below are the results from FY15 along with comparative data from FY14.



There is one Well-Being outcome for Florida, which measures whether separated siblings are having visits with each other (the target is 50%). In FY15, **89%** of children had visits with their siblings in situation where they were not placed in the same home (this is a 3% decrease from FY14).

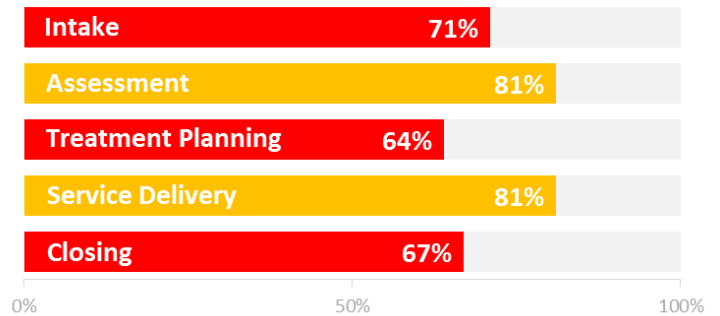
## Peer Record Review

Overall Foster Care – Circuit 9 achieved a **76%** 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) Foster Care – Circuit 9 was below the agency's 90% target in all areas measured. The items that most affected Intake, Assessment, Treatment Planning, Service Delivery and Closing from reaching their targets were:

- Is the Client's Rights & Responsibilities (within 1 year) receipt in the record & signed by all clients involved in the service (youth age 12 & older must sign in addition to their legal guardian)?
- Has the Functional Family Assessment been updated every 6 months?
- Is a copy of the Child Study in the record? (Adoption)
- Has the supervisor completed quarterly case reviews on this case as evidenced by FSFN notes?
- Has the supervisor completed monthly case reviews on this case as evidenced by FSFN notes?
- Supervisor ensured and documented completed tasks from previous supervisor reviews?
- The case manager communicated with service providers about the appropriateness and effectiveness of services for involved case participants (appropriateness and effectiveness of services refers to the continuity between the CBHA recommendations and recommendations made by service providers)?
- Is there documentation in FSFN that the Case Manager visited or attempted face to face contact with biological parents every 30 days when the goal of the case was reunification: For the Mother & Father?
- Is the case closure summary in the record?

Overall Foster Care Licensing – Circuit 9 achieved a **99%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, and Service Delivery) Foster Care – Circuit 9 exceeded the agency's 90% target in all areas measured.

### Foster Care & Adoption - Circuit 9 was Below the Agency's 90% Target in All Areas Measured



### Foster Care Licensing - Circuit 9 Exceeded the Agency's Target in All Areas Measured



## Foster Care – Florida Circuit 10

### Outcomes

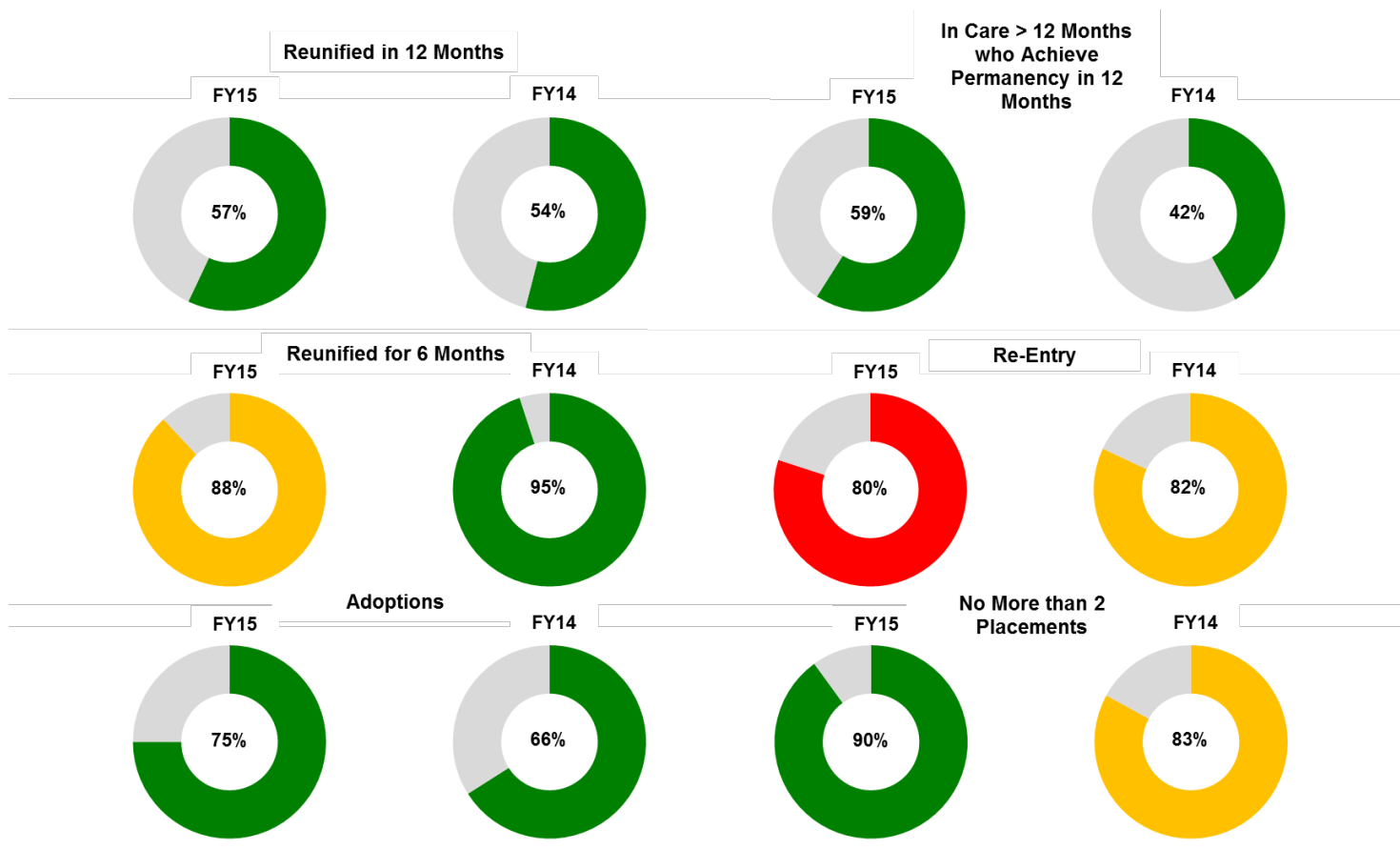
In FY15, Circuit 10 achieved **75%** of their outcomes.

The Safety outcome for Florida Foster Care measures that there are no verified reports of maltreatment within 6 months of termination from Foster Care services (the target for this outcome is 95%). In FY15, **100%** of children/youth had no reports of maltreatment 6 months following services (no change from FY14).

Florida Foster Care measures 6 Permanency outcomes.

1. 46% of children will be reunified within 12 months of the latest removal.
2. 32% of children in out of home care 12 months or more will achieve permanency within 12 months.
3. 91% of children will remain reunified for a period of 6 months without re-entry into foster care.
4. 91% of children will not be removed within 12 months of a prior reunification (Re-Entry).
5. 32% of adoptions will be finalized within 24 months of the latest removal.
6. 85% of children in out of home care 8 days to 12 months will experience no more than 2 placements.

Below are the results from FY15 along with comparative data from FY14.



There is one Well-Being outcome for Florida, which measures whether separated siblings are having visits with each other (the target is 50%). In FY15, **88%** of children had visits with their siblings in situation where they were not placed in the same home (this is a 1% decrease from FY14).

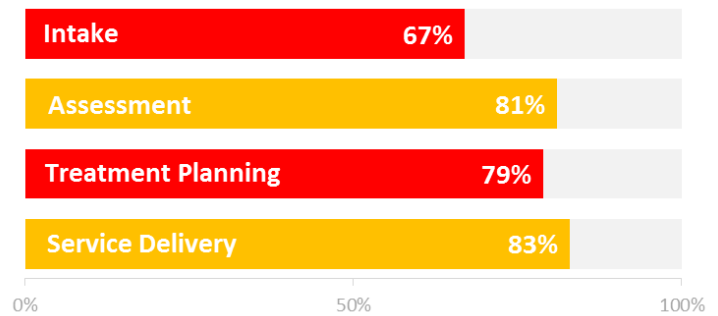


## Peer Record Reviews

Overall Foster Care – Circuit 10 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, and Service Delivery) Foster Care – Circuit 10 was below the agency's 90% target in all areas measured. (No closed files were reviewed.) The items that most affected these areas from reaching their targets were:

- Is the Client's Rights & Responsibilities (within 1 year) receipt in the record & signed by all clients involved in the service (youth age 12 & older must sign in addition to their legal guardian)?
- Was the FFA, completed and approved by the supervisor in FSFN within 15 business days of the intake staffing?
- Is a copy of the Child Study in the record? (Adoption)
- Is the current copy of the Case Plan in the record (Per Program Contract)?
- Did the Case Manager arrange for preventive dental care, twice yearly?
- Is there documentation in FSFN and case file that the Case manager monitored educational needs?
- Is there documentation of age specific health services being provided in the file?

### Foster Care & Adoption - Circuit 10 was Below the Agency's 90% Target in All Areas Measured



## Foster Care – Florida Circuit 13

### Outcomes

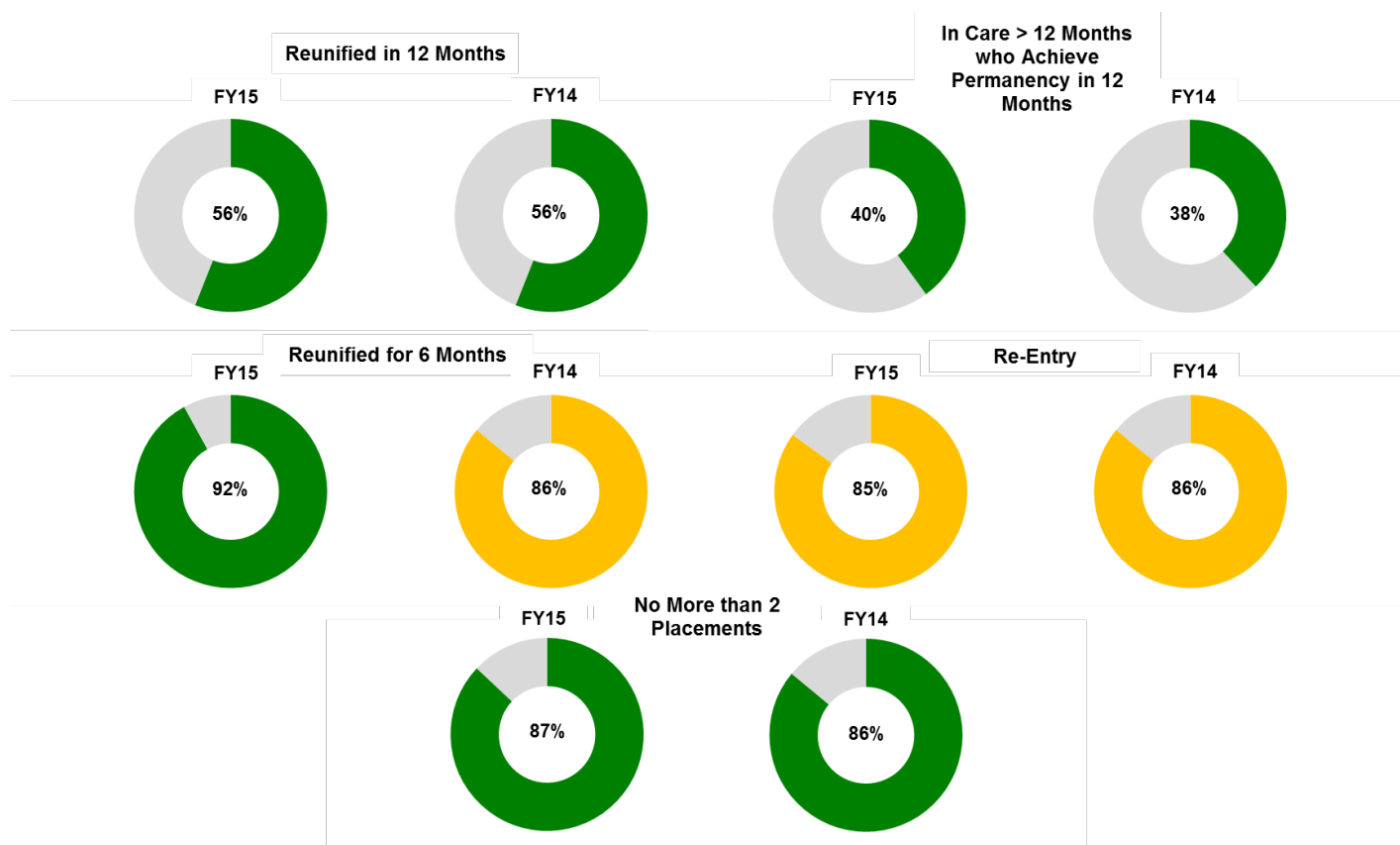
In FY15, Circuit 13 achieved **86%** of their outcomes.

The Safety outcome for Florida Foster Care measures that there are no verified reports of maltreatment within 6 months of termination from Foster Care services (the target for this outcome is 95%). In FY15, **96%** of children/youth had no reports of maltreatment 6 months following services (a 4% decrease from FY14).

Florida Foster Care measures 5 Permanency outcomes.

1. 46% of children will be reunified within 12 months of the latest removal.
2. 32% of children in out of home care 12 months or more will achieve permanency within 12 months.
3. 91% of children will remain reunified for a period of 6 months without re-entry into foster care.
4. 91% of children will not be removed within 12 months of a prior reunification (Re-Entry).
5. 85% of children in out of home care 8 days to 12 months will experience no more than 2 placements.

Below are the results from FY15 along with comparative data from FY14.



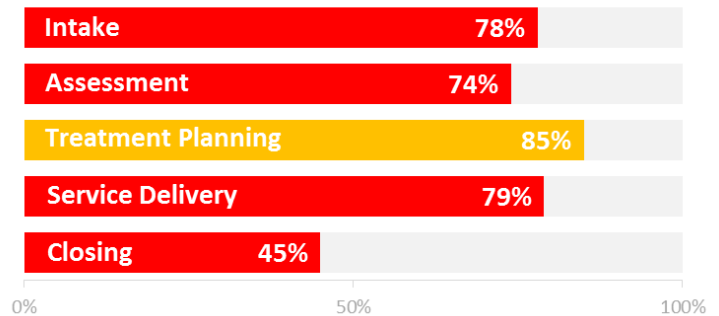
There is one Well-Being outcome for Florida, which measures whether separated siblings are having visits with each other (the target is 50%). In FY15, **53%** of children had visits with their siblings in situation where they were not placed in the same home (this is a 34% decrease from FY14).

## Peer Record Reviews

Overall Foster Care – Circuit 13 achieved a **78%** 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 – Circuit 13 was below the agency's 90% target in all areas measured. The items that most affected Intake, Assessment, Treatment Planning, and Service from reaching their targets were:

- Is the Client's Rights & Responsibilities (within 1 year) receipt in the record & signed by all clients involved in the service (youth age 12 & older must sign in addition to their legal guardian)?
- Was the FFA, completed and approved by the supervisor in FSFN within 15 business days of the intake staffing?
- Has the Functional Family Assessment been updated every 6 months?
- Was the current Case Plan completed w/in 30 days from shelter?
- Is there documentation in FSFN and case file that the Case manager monitored educational needs?
- Did the Case Manager arrange for preventive dental care, twice yearly?
- Does the record contain a case closure letter to the family regarding additional resources for continued assistance (e.g. aftercare plan)?

### Foster Care - Circuit 13 was Below the Agency's 90% Target in All Areas Measured



## Foster Care – Charleston

### Outcomes

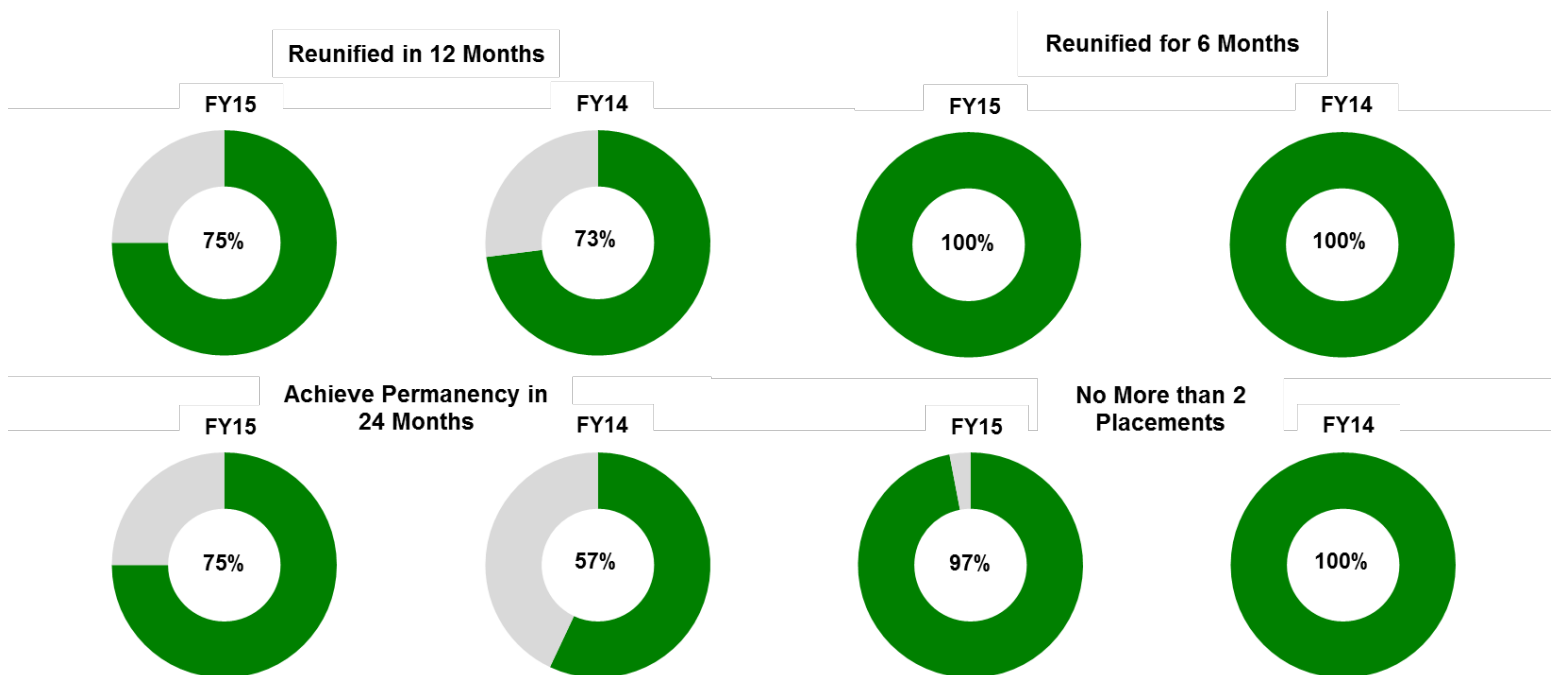
In FY15, Foster Care – Charleston achieved **100%** of their outcomes.

The Safety outcome for Foster Care – Charleston measures that children are not abused and/or neglected by a substitute caregiver while in foster care (target = 100%). In FY15, **100%** of children were not the subjects of abuse/neglect reports (no change from FY14).

Foster Care measures 4 Permanency outcomes.

1. 46% of children in traditional foster care will be reunified within 12 months.
2. 91% of children in traditional foster care will remain reunified for 6 months without re-entry into care.
3. 32% of children in traditional foster care will achieve permanency within 24 months of coming into care (all permanencies outside of reunifications).
4. 95% of children in traditional foster care will experience two or fewer placement settings within a 12 month period.

Below are the results from FY15 along with comparative data from FY14.



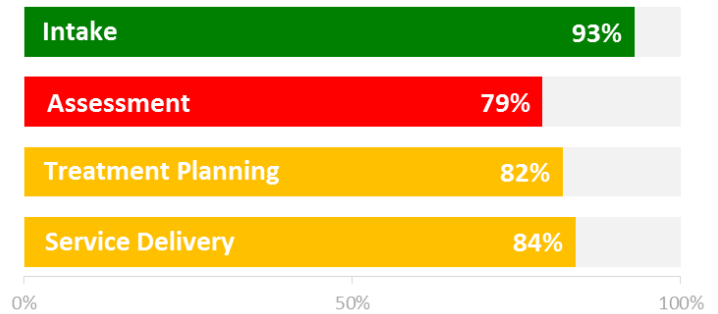
The Well-Being outcome measures that children will demonstrate and overall improvement in well-being between initial and Closing CANs ratings (target = 80%). In FY15, **90%** of children improved their CANs rating (a 6% decrease from FY14).

## Peer Record Reviews

Overall Foster Care – Charleston achieved an **84%** 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 – Charleston was below the agency's 90% target in Assessment, Treatment Planning, and Service Delivery. (No closed files were reviewed.) The items that most affected these areas from reaching their targets were:

- Was a CANS-Risk Assessment completed within five working days of case opening?
- Is the current service/treatment/case plan signed and dated by the client and parent/guardian?
- Are there monthly supervision notes in the case record?
- A photograph of the child annually?
- Educational Profile (CFS 407-4) Updated every 6 months (Completed on all children in DCFS care)?
- If the case opened within the past 12 months, did the second Family Meeting occur during the first 35 days of case assignment?

### Foster Care - Charleston Exceeded the Agency's 90% Target in Intake



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

### Foster Care Licensing - Charleston Exceeded the Agency's 90% Target in All Areas Measured



## Specialized Foster Care – Charleston

### Outcomes

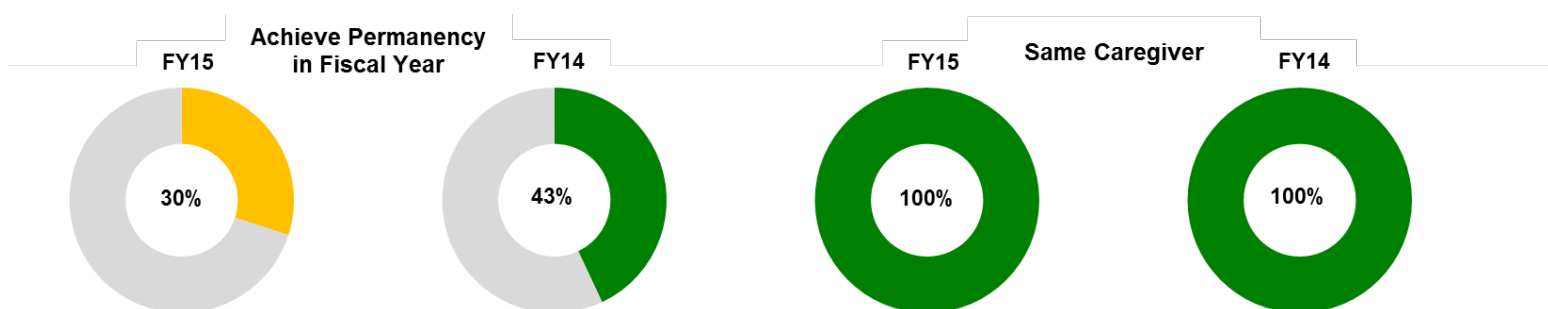
In FY15, Specialized Foster Care – Charleston achieved **80%** of their outcomes.

There is one Safety outcome for Specialized Foster Care, which measures that children are not abused and/or neglected by a substitute caregiver while in care (target = 100%). In FY15, **100%** of children were not the subjects of abuse/neglect reports (no change from FY14).

Specialized Foster Care measures 2 Permanency outcomes.

1. 40% of children served will achieve permanency during the fiscal year.
2. 90% of children served will remain with the same caregiver during the year (12 months).

Below are the results from FY15 along with comparative data from FY14.



Specialized Foster Care measures 2 Well-Being outcomes. The outcomes are listed below with their results presented in parenthesis.

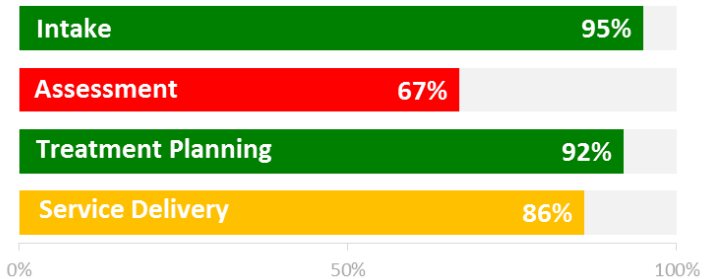
1. 80% of children in specialized foster care will demonstrate an overall improvement in well-being between initial and closing CANs ratings. (**100%** - no change from FY14)
2. 85% of children in specialized foster care will not require a higher level of care (i.e. psychiatric hospitalization, residential care, etc...). (**100%** - no change from FY14)

## Peer Record Reviews

Overall Specialized Foster Care – Charleston 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, and Service Delivery) Specialized Foster Care – Charleston was below the agency's 90% target in Assessment and Service Delivery. (No closed files were reviewed.) The items that most affected Assessment and Service Delivery from reaching their targets were:

- Is a copy of the Initial Assessment Report in the record?
- Case note documentation reflects the level of client contact per program requirements?

### Specialized Foster Care - Charleston Exceeded the Agency's 90% Target in Intake and Treatment Planning





## Foster Care – Cook

### Outcomes

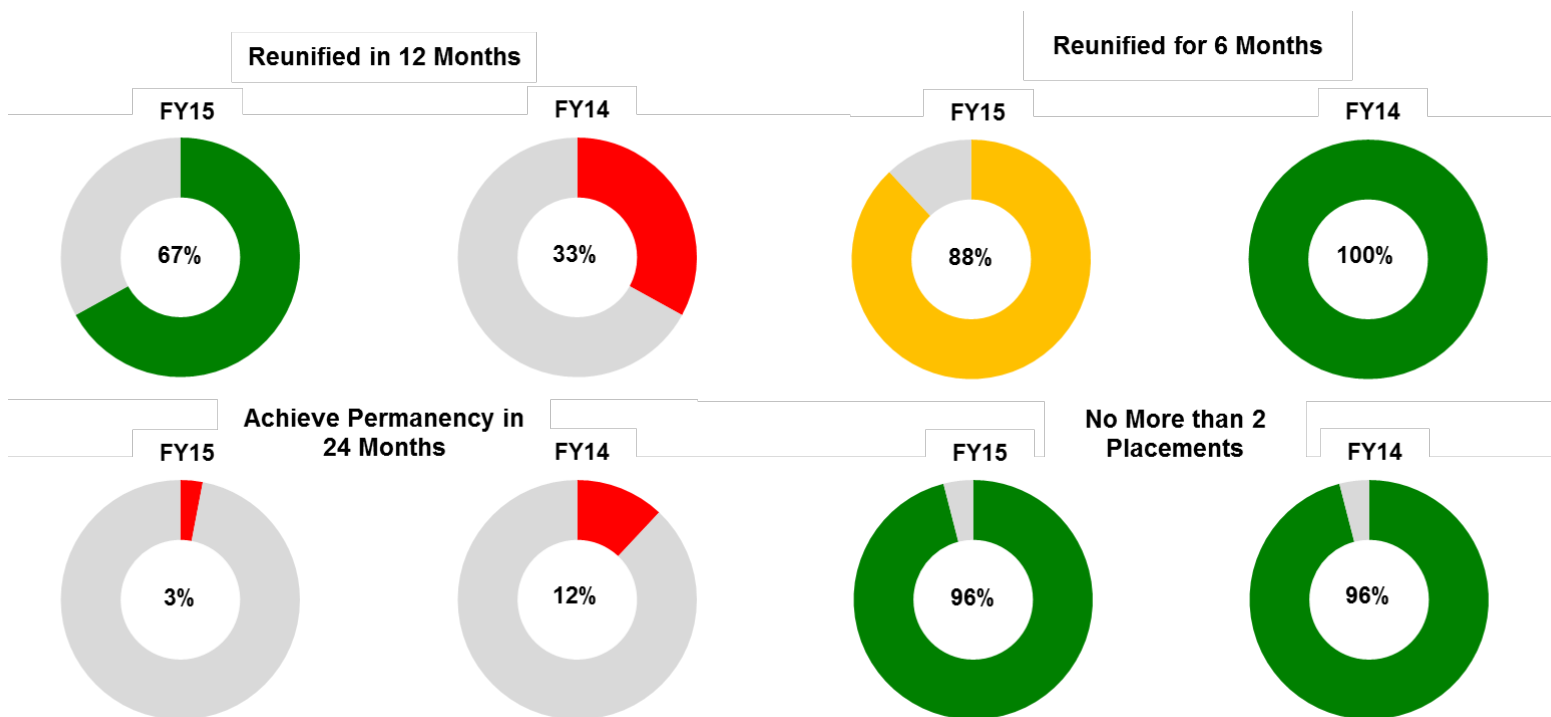
In FY15, Foster Care – Cook achieved **50%** of their outcomes.

The Safety outcome for Foster Care measures that children are not abused and/or neglected by a substitute caregiver while in foster care (target = 100%). In FY15, **99.3%** of children were not the subjects of abuse/neglect reports (a 1% increase from FY14).

Foster Care measures 4 Permanency outcomes.

1. 46% of children in traditional foster care will be reunified within 12 months.
2. 91% of children in traditional foster care will remain reunified for 6 months without re-entry into care.
3. 32% of children in traditional foster care will achieve permanency within 24 months of coming into care (all permanencies outside of reunifications).
4. 95% of children in traditional foster care will experience two or fewer placement settings within a 12 month period.

Below are the results from FY15 along with comparative data from FY14.



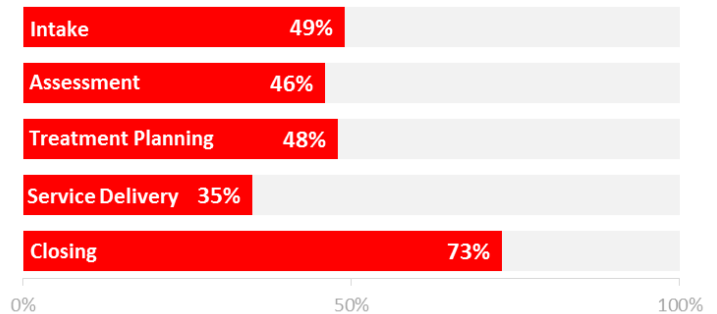
The Well-Being outcome measures that children will demonstrate an overall improvement in well-being between initial and Closing CANs ratings (target = 80%). In FY15, **100%** of children improved their CANs rating (no change from FY14).

## Peer Record Reviews

Overall Foster Care – Cook achieved a **38%** 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) Foster Care – Cook was below the agency's 90% target in all areas measured. The items that most affected these areas from reaching their targets were:

- Are the Client's Rights and Responsibilities in the record & signed by all relevant parties?
- Is a copy of the Initial Assessment Report in the record?
- Was a CANS-Risk Assessment completed within five working days of case opening?
- Is the current copy of the service plan/treatment plan/case plan in the file (Per Program Contract/Plan)?
- Is the current service/treatment/case plan signed and dated by the client and parent/guardian?
- Has a current written visiting plan (in the 497) been developed for all siblings in substitute care?
- Case note documentation reflects the level of client contact per program requirements?
- Are there monthly supervision notes in the case record?
- Do the case notes document the progress according to the Service Plan?
- Do supervision notes reflect ongoing efforts to ensure that the family is making timely and progressive movement towards permanency and case closure?
- Did Child and Family Team meetings occur quarterly and included others that support the family with the current permanency goal?
- Did the Closing Summary include: Progress in accomplishing the service plan; Suggestions for future services?; Was the Change of Status (CFS 1425) completed?

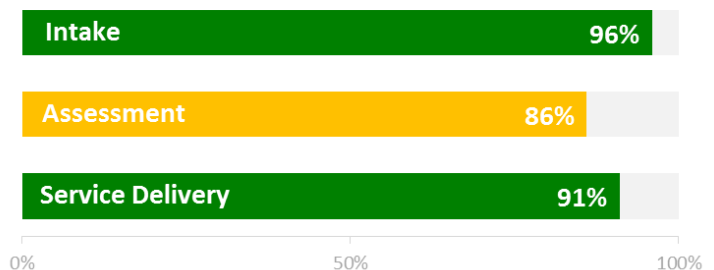
### Foster Care - Cook was Below the Agency's 90% Target in All Areas Measured



Overall Foster Care Licensing – Cook achieved a **93%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, and Service Delivery) Foster Care Licensing – Cook was below the agency's 90% target in Assessment. The item that most affected Assessment from reaching its target was:

- License Compliance Record on Foster Family Homes: Annual?

### Foster Care Licensing - Cook Exceeded the Agency's 90% Target in Intake and Service Delivery



## Foster Care – Gurnee

### Outcomes

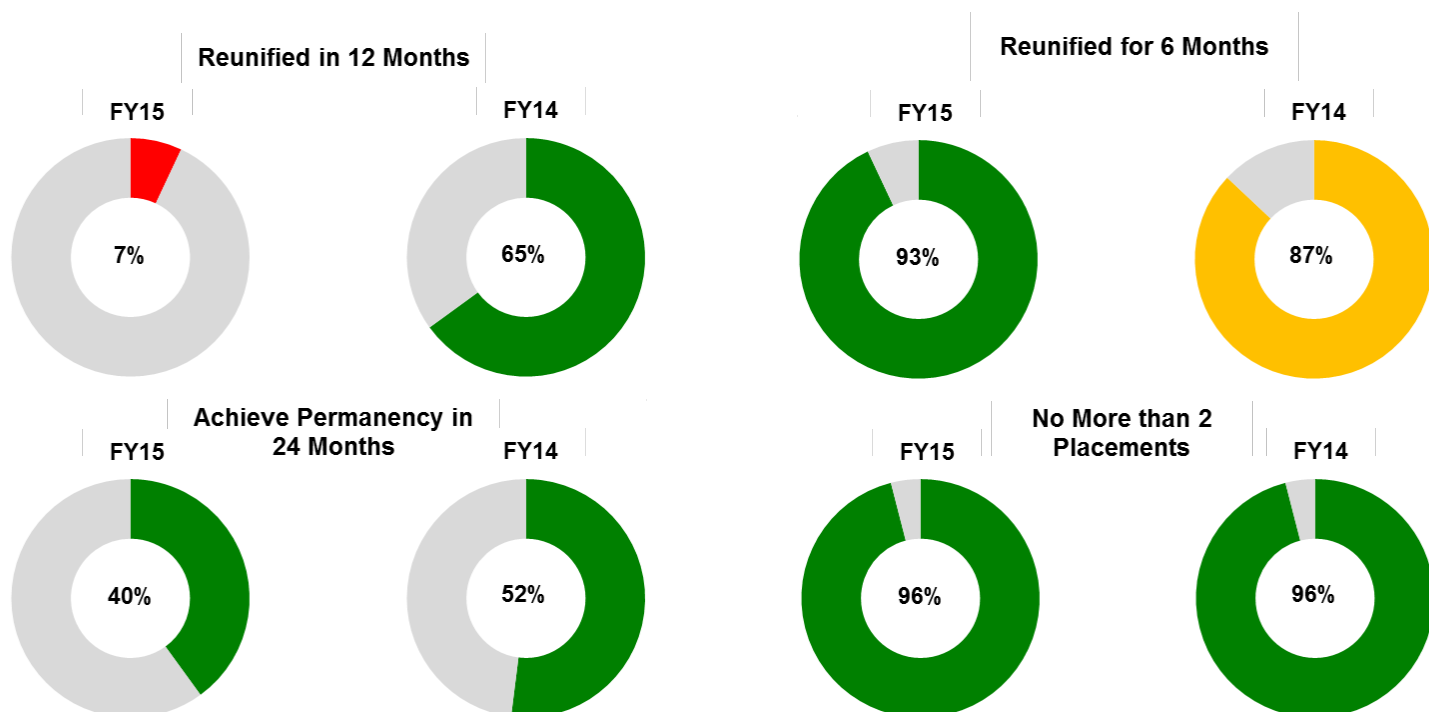
In FY15, Foster Care – Gurnee achieved **80%** of their outcomes.

The Safety outcome for Foster Care measures that children are not abused and/or neglected by a substitute caregiver while in foster care (target = 100%). In FY15, **100%** of children were not the subjects of abuse/neglect reports (no change from FY14).

Foster Care measures 4 Permanency outcomes.

1. 46% of children in traditional foster care will be reunified within 12 months.
2. 91% of children in traditional foster care will remain reunified for 6 months without re-entry into care.
3. 32% of children in traditional foster care will achieve permanency within 24 months of coming into care (all permanencies outside of reunifications).
4. 95% of children in traditional foster care will experience two or fewer placement settings within a 12 month period.

Below are the results from FY15 along with comparative data from FY14.



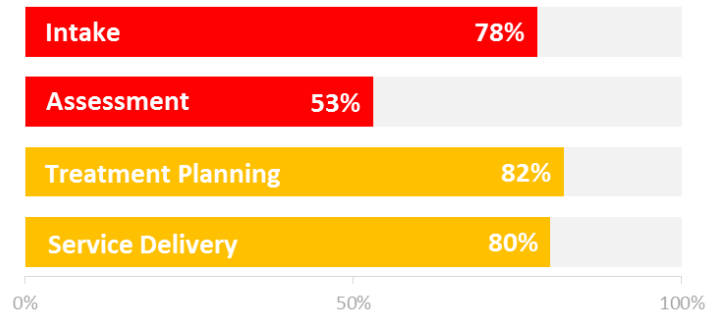
Foster Care Gurnee did not measure the Well-Being outcome in FY15.

## Peer Record Reviews

Overall Foster Care – Gurnee achieved a **78%** 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 – Gurnee was below the agency's 90% target in all areas measured. (No closed files were reviewed.) The items that most affected these areas from reaching their targets were:

- Are the Client's Rights and Responsibilities in the record & signed by all relevant parties?
- Was the Initial Assessment Report completed within the required timeframe of the program contract?
- Was a CANS-Risk Assessment completed within five working days of case opening?
- Is the current copy of the service plan/treatment plan/case plan in the file (Per Program Contract/Plan)?
- Is the youth, age 14 or older, receiving services and/or guidance that support the acquisition of self-sufficiency skills?
- Does the service plan address ALL the needs identified in the assessment for the: Father?
- If the children have been reunified with the biological family, has the service plan been revised with new objectives and tasks?
- Is there evidence of quarterly case supervision in which the case is reviewed at least quarterly and includes an evaluation of the client's progress toward achieving his/her service goals?
- Are there monthly supervision notes in the case record?
- Did Child and Family Team meetings occur quarterly and included others that support the family with the current permanency goal?
- Fingerprints for all children age 6 months and older?

### Foster Care - Gurnee was Below the Agency's 90% Target in All Areas Measured



Overall Foster Care Licensing – Gurnee achieved a **94%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, and Service Delivery) Foster Care Licensing – Gurnee exceeded the agency's target in all areas measured.

### Foster Care Licensing - Gurnee Met/Exceeded the Agency's 90% Target in All Areas Measured



## Foster Care – Joliet

### Outcomes

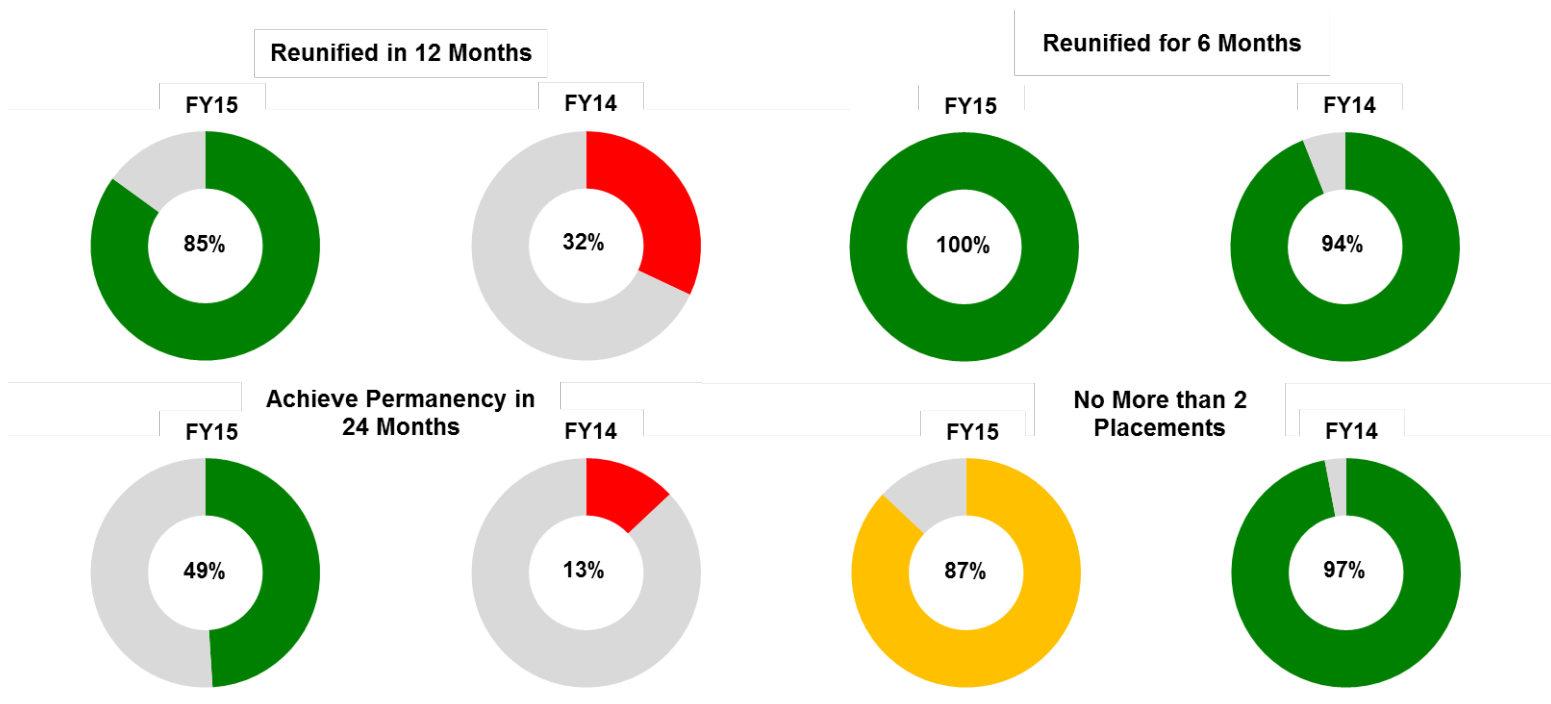
In FY15, Foster Care – Joliet achieved **83%** of their outcomes.

The Safety outcome for Foster Care measures that children are not abused and/or neglected by a substitute caregiver while in foster care (target = 100%). In FY15, **100%** of children were not the subjects of abuse/neglect reports (no change from FY14).

Foster Care measures 4 Permanency outcomes.

1. 46% of children in traditional foster care will be reunified within 12 months.
2. 91% of children in traditional foster care will remain reunified for 6 months without re-entry into care.
3. 32% of children in traditional foster care will achieve permanency within 24 months of coming into care (all permanencies outside of reunifications).
4. 95% of children in traditional foster care will experience two or fewer placement settings within a 12 month period.

Below are the results from FY15 along with comparative data from FY14.



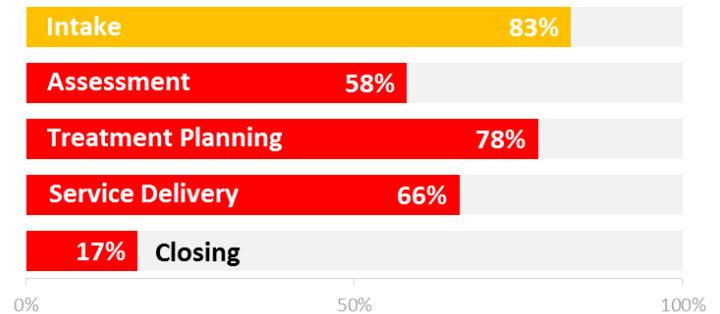
The Well-Being outcome measures that children will demonstrate an overall improvement in well-being between initial and Closing CANs ratings (target = 80%). In FY15, **95%** of children improved their CANs rating (a 5% decrease from FY14).

## Peer Record Reviews

Overall Foster Care – Joliet achieved a **68%** 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) Foster Care – Joliet was below the agency's 90% target in all areas measured. The items that most affected these areas from reaching their targets were:

- Are the Client's Rights and Responsibilities in the record & signed by all relevant parties?
- Was the Initial Assessment Report completed within the required timeframe of the program contract?
- Was a CANS-Risk Assessment completed within five working days of case opening?
- Is the current service/treatment/case plan signed and dated by the client and parent/guardian?
- Has a current written visiting plan (in the 497) been developed for all siblings in substitute care?
- Case note documentation reflects the level of client contact per program requirements?
- Are there monthly supervision notes in the case record?
- Do supervision notes reflect ongoing efforts to ensure that the family is making timely and progressive movement towards permanency and case closure?
- Did Child and Family Team meetings occur quarterly and included others that support the family with the current permanency goal?
- Fingerprints for all children age 6 months and older?
- Was a Closing Summary completed with 15 working days of closing?

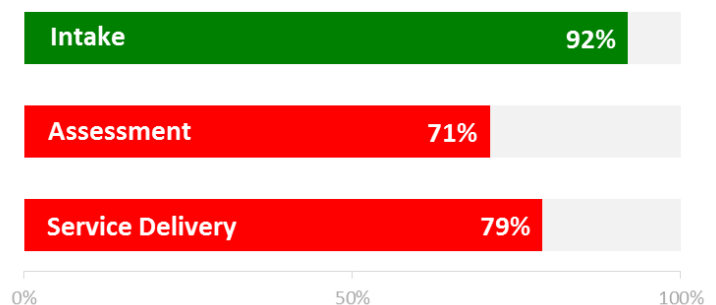
### Foster Care - Joliet was Below the Agency's Target in All Areas Measured



Overall Foster Care Licensing – Joliet achieved an **86%** Compliance and Quality Rating across all areas measured. When looking at each part of the case life cycle separately (Intake, Assessment, and Service Delivery) Foster Care Licensing – Joliet was below the agency's 90% target in Assessment and Service Delivery. The items that most affected Assessment and Service Delivery from reaching its target were:

- Did the Initial Home Study include: Physical environment of the home, both inside and outside; Community systems such as school, medical, recreation, churches, ethnicity, etc.; Family information, such as history, structure, parenting skills, motivation, attitudes toward childhood, etc.; Knowledge and skill of foster parents such as, understanding of child development, attitude toward natural parents, educational level, communication skills, etc. and; Background information on members of household 13 and older?
- Case Recording Notes within the past 6 Months?
- Current Medical Report on All Others Living in the Home (Excluding foster children)?

### Foster Care Licensing - Joliet Exceeded the Agency's Target in Intake



## Appendix B – In-Home Services

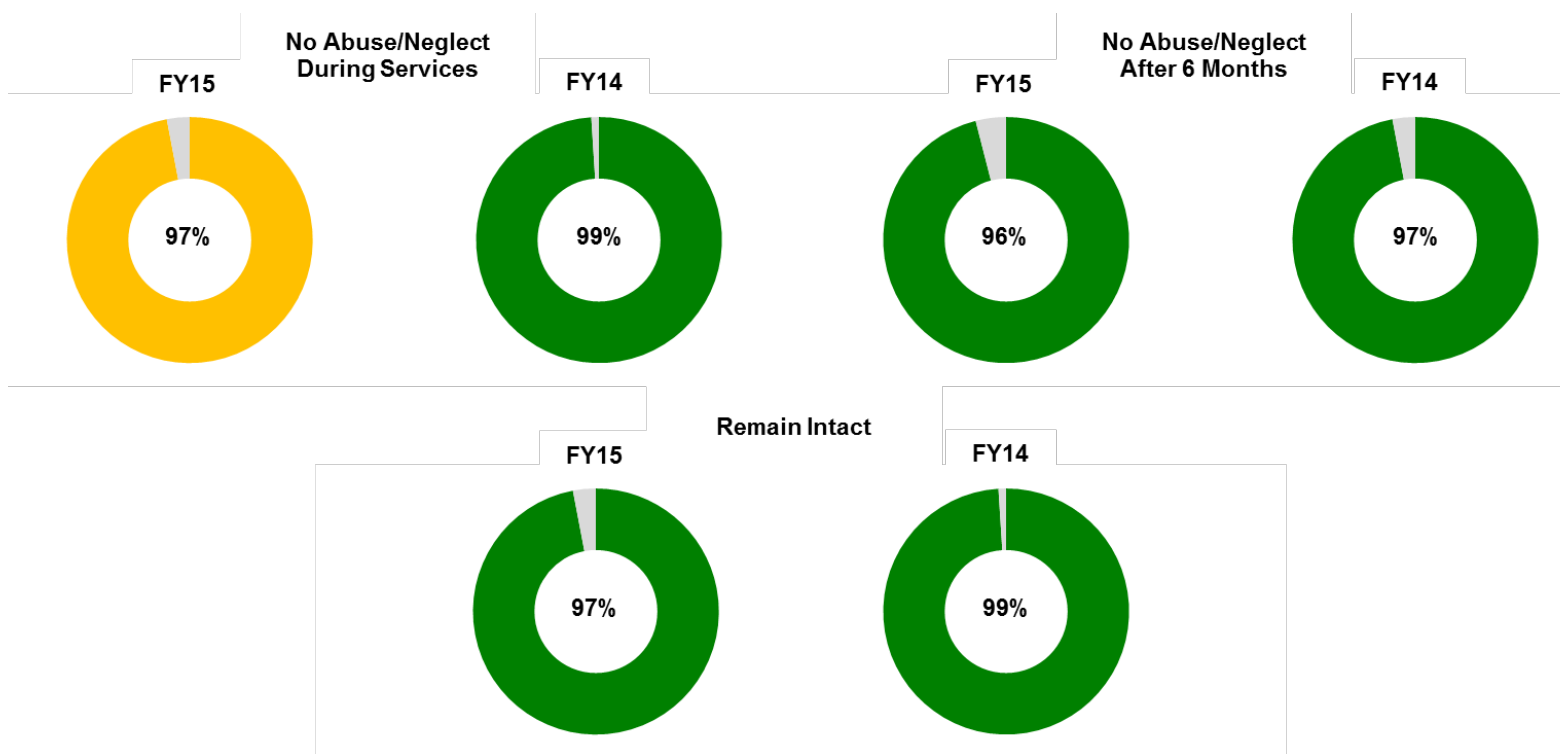
### Circuit 9

#### Outcomes

In-Home Services – Circuit 9 reports on outcomes that fall under 2 categories: Safety and Permanency. There are a total of 3 outcomes.

1. **Safety** – 99% of children will not be subjects of indicated reports of abuse/neglect during the service period.
2. **Safety** – 95% of children will not be subjects of indicated reports of abused/neglected 6 months after the termination of supervision.
3. **Permanency** – 95% of children served will remain intact.

In FY15, In-Home Services – Circuit 9 achieved **67%** of its outcomes.

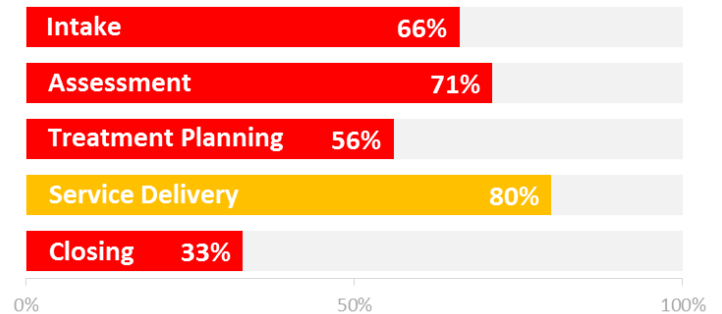


## Peer Record Reviews

Overall In-Home Services – Circuit 9 achieved a **67%** 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) In-Home Services – Circuit 9 was below the agency's 90% target in all areas measured. The items that most affected these areas from reaching their targets were:

- Is the Client's Rights and Responsibilities (current within 1 year) receipt in the record & signed by all clients involved in the service (youth age 12 & older must sign in addition to their legal guardian)?
- Is a copy of the Initial Family Assessment (IFA) or Fuctional Family Assessment in the record?
- Was the Initial Family Assessment (IFA) or Functional Family Assessment completed within 15 business days of intake staffing?
- Has the supervisor completed face to face monthly case reviews on this case as evidenced by FSNF notes in the file?
- The case manager communicated with service providers about the appropriateness and effectiveness of services for involved case participants (appropriateness and effectiveness of services refers to the continuity between the CBHA recommendations and recommendations made by service providers)?
- Case note documentation reflects Home Visit contact with the child/ren every 30 days with signed visitation logs?
- Is the case closure packet in the record?
- Does the record contain a case closure letter to the family regarding additional resources for continued assistance (aftercare plan)?

### In-Home Services - Circuit 9 was Below the Agency's 90% Target in All Areas Measured





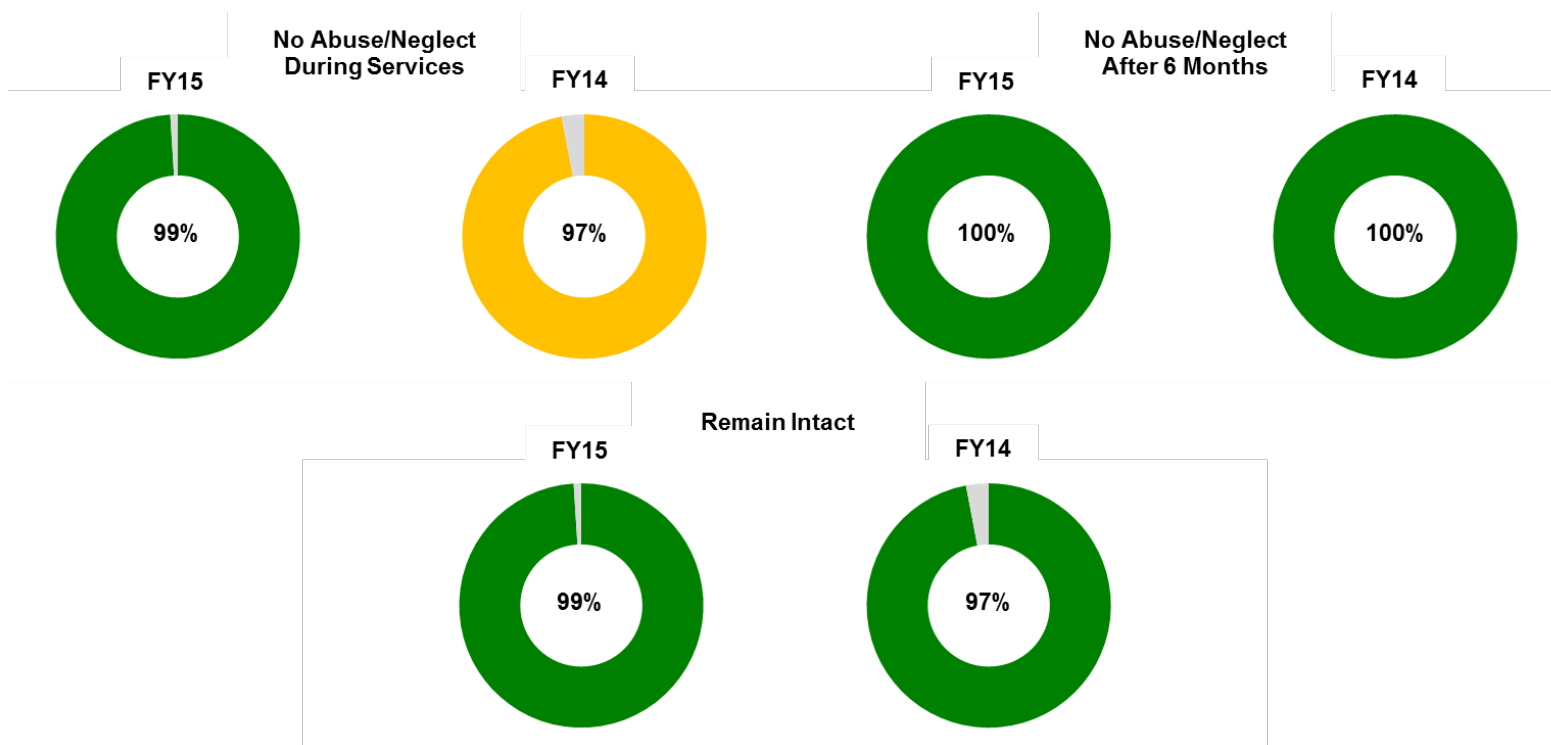
## Circuit 10

### Outcomes

In-Home Services – Circuit 10 reports on outcomes that fall under 2 categories: Safety and Permanency. There are a total of 3 outcomes.

1. **Safety** – 99% of children will not be subjects of indicated reports of abuse/neglect during the service period.
2. **Safety** – 95% of children will not be subjects of indicated reports of abused/neglected 6 months after the termination of supervision.
3. **Permanency** – 95% of children served will remain intact.

In FY15, In-Home Services – Circuit 10 achieved **100%** of its outcomes.

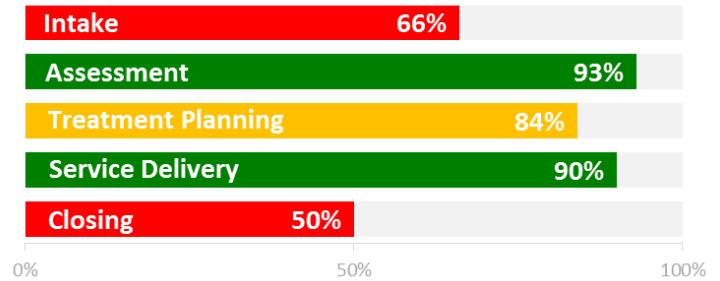


## Peer Record Reviews

Overall In-Home Services – Circuit 10 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) In-Home Services – Circuit 10 was below the agency's 90% target in Intake, Treatment Planning, and Closing. The items that most affected these areas from reaching their targets were:

- Is the Client's Rights and Responsibilities (current within 1 year) receipt in the record & signed by all clients involved in the service (youth age 12 & older must sign in addition to their legal guardian)?
- Is the current copy of the Case Plan in the record?
- Is the case closure packet in the record?
- Does the record contain a case closure letter to the family regarding additional resources for continued assistance (aftercare plan)?

### In-Home Services - Circuit 10 Met/Exceeded the Agency's 90% Target in Assessment and Service Delivery



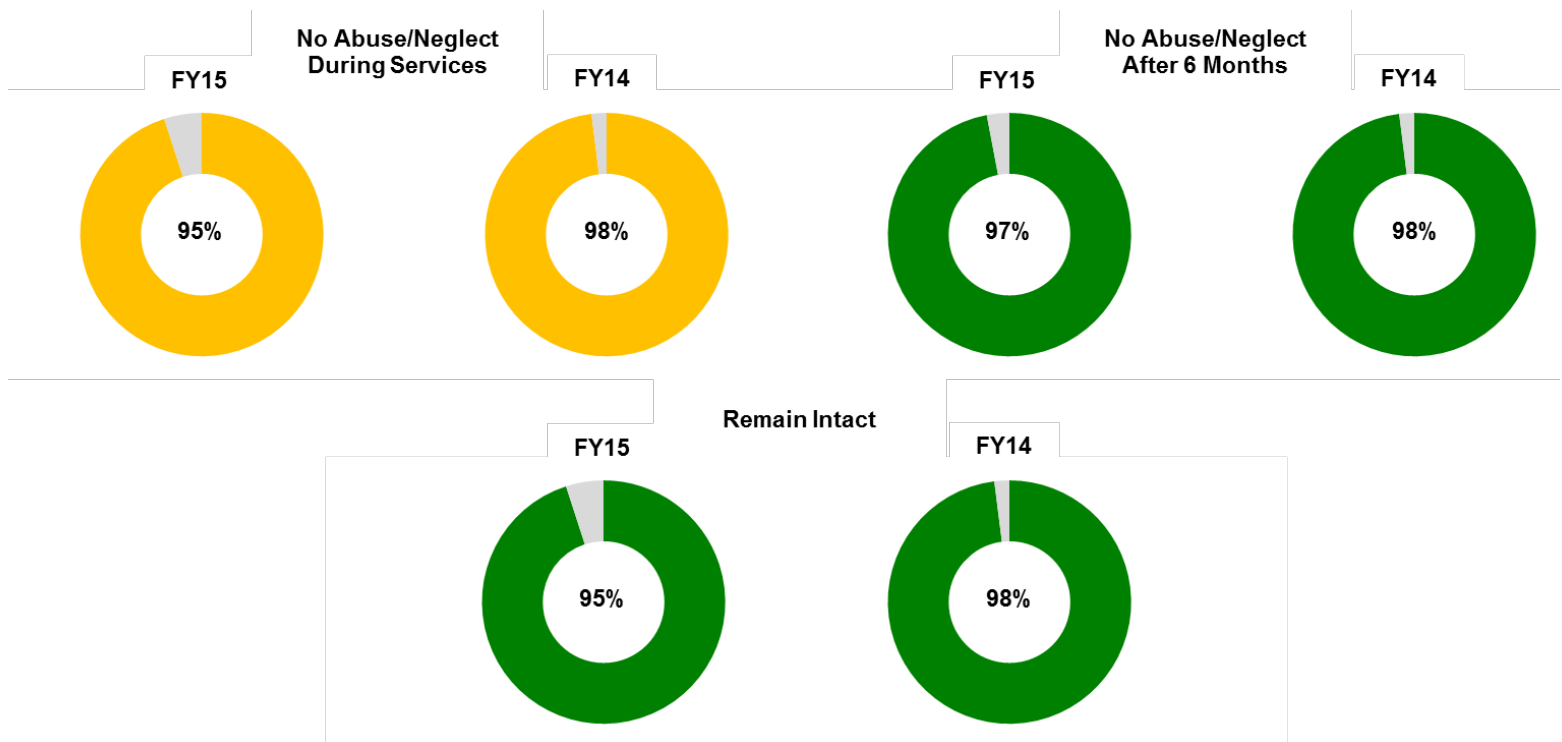
## Circuit 13

### Outcomes

In-Home Services – Circuit 13 reports on outcomes that fall under 2 categories: Safety and Permanency. There are a total of 3 outcomes.

1. **Safety** – 99% of children will not be subjects of indicated reports of abuse/neglect during the service period.
2. **Safety** – 95% of children will not be subjects of indicated reports of abused/neglected 6 months after the termination of supervision.
3. **Permanency** – 95% of children served will remain intact.

In FY15, In-Home Services – Circuit 13 achieved **67%** of its outcomes.

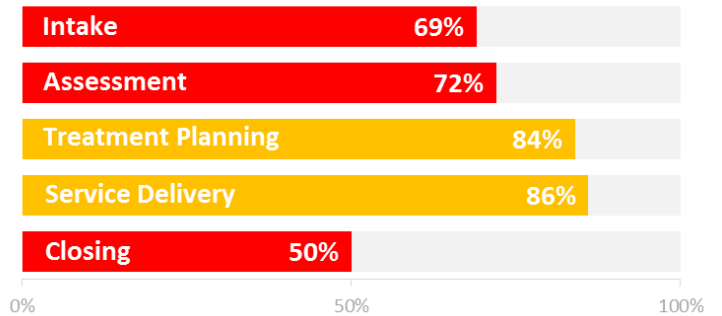


## Peer Record Reviews

Overall In-Home Services – Circuit 13 achieved a **77%** 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) In-Home Services – Circuit 13 was below the agency's 90% target in all areas measured. The items that most affected these areas from reaching their targets were:

- Is the Client's Rights and Responsibilities (current within 1 year) receipt in the record & signed by all clients involved in the service (youth age 12 & older must sign in addition to their legal guardian)?
- Was the Initial Family Assessment (IFA) or Functional Family Assessment completed within 15 business days of intake staffing?
- Is the current copy of the Case Plan in the record?
- The case manager communicated with service providers about the appropriateness and effectiveness of services for involved case participants (appropriateness and effectiveness of services refers to the continuity between the CBHA recommendations and recommendations made by service providers)?
- Does the record contain a case closure letter to the family regarding additional resources for continued assistance (aftercare plan)?

### In-Home Services - Circuit 13 was Below the Agency's 90% Target in All Areas Measured



## Appendix C – Residential

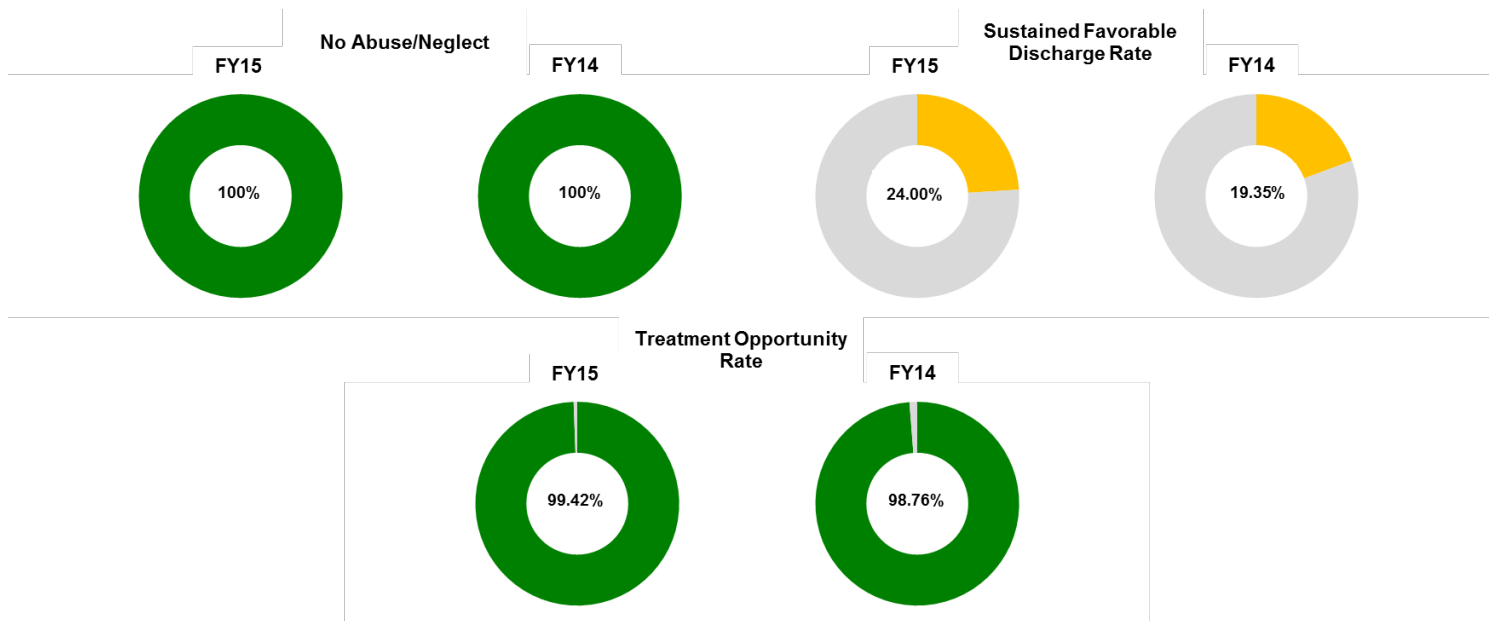
### CARE Residential

#### Outcomes

CARE Residential measures 3 outcomes.

1. **Safety** – 95% of children/youth will not be subjects of indicated reports of abuse/neglect while physically present in the residential treatment program.
2. **Permanency** – The program will achieve its sustained favorable discharge rate of 27.04%.
3. **Well-Being** – The program will achieve its treatment opportunity rate of 95.32%.

In FY15, CARE Residential achieved **67%** of its outcomes.

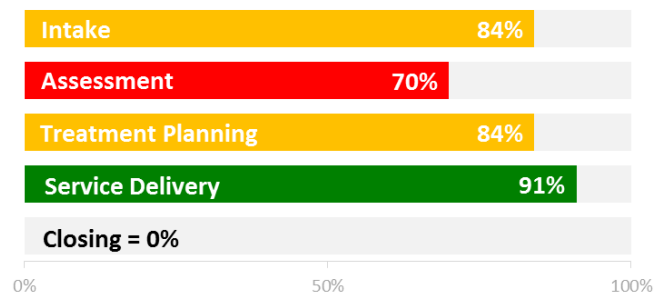


#### Peer Record Reviews

Overall CARE Residential achieved an **81%** 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) CARE Residential was below the agency's 90% target in Intake, Assessment, Treatment Planning, and Closing. The items that most affected these areas from reaching their targets were:

- Are the Release of Information Forms current (within 1 year) for correspondence with ALL entities outside of the agency?
- The Current Mental Health Assessment was missing several of the 30 items on 2 or more files reviewed.
- Is the current service/treatment/case plan signed and dated by the client and parent/guardian? (several marked as "Reasonable Effort")
- In preparing for termination, was the need for follow up/aftercare services determined with the client/family?

#### CARE Residential Exceeded the Agency's 90% Target in Service Delivery



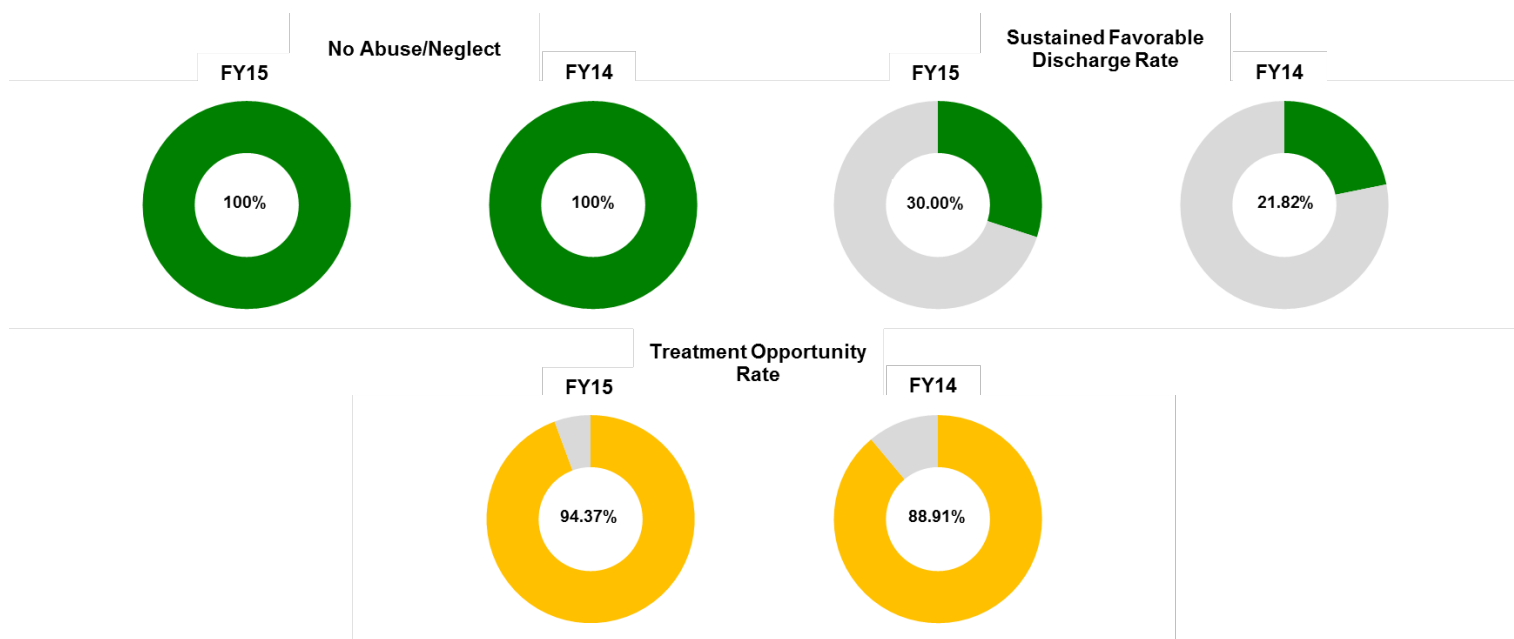
## Hudelson Residential

### Outcomes

Hudelson Residential measures 3 outcomes.

1. **Safety** – 95% of children/youth will not be subjects of indicated reports of abuse/neglect while physically present in the residential treatment program.
2. **Permanency** – The program will achieve its sustained favorable discharge rate of 25.00%.
3. **Well-Being** – The program will achieve its treatment opportunity rate of 95.32%.

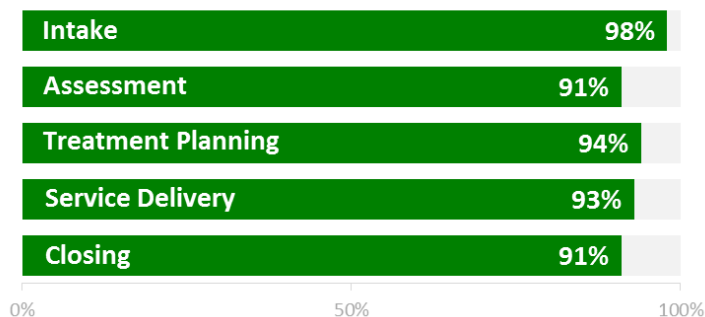
In FY15, Hudelson Residential achieved **67%** of its outcomes.



### Peer Record Reviews

Overall Hudelson Residential 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) Hudelson Residential exceeded the agency's 90% target in all areas measured.

#### Hudelson Residential Exceeded the Agency's 90% Target in All Areas Measured



## Appendix D – Day Treatment

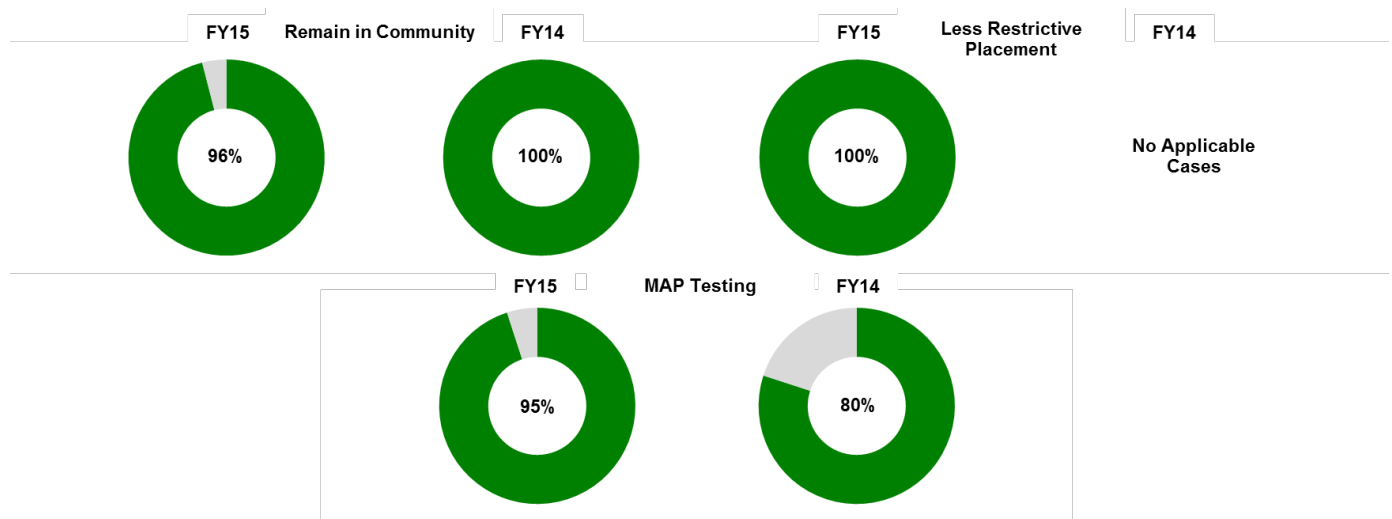
### CARE Day Treatment

#### Outcomes

CARE Day Treatment measures 3 outcomes.

1. **Permanency** – 90% of youth will remain in the community while enrolled in the program.
2. **Permanency** – 80% of youth will maintain their less restrictive placement 6 months after being discharged.
3. **Well-Being** – 80% of youth will experience an increase in one academic grade during the academic year, as evidenced by the results of the MAP testing.

In FY15, CARE Day Treatment achieved **100%** of its outcomes.

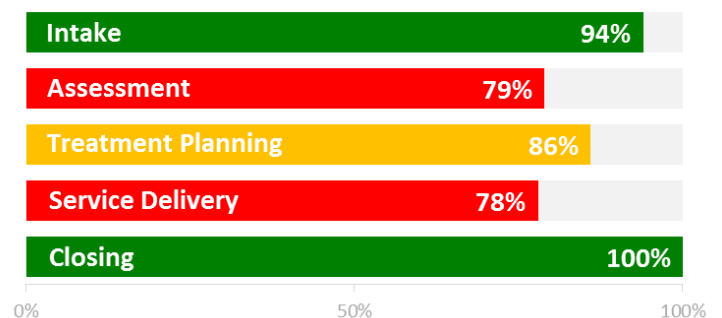


#### Peer Record Reviews

Overall CARE Day Treatment 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) CARE Day Treatment was below the agency's 90% target in Assessment, Treatment Planning, and Service Delivery. The items that most affected these areas from reaching their targets were:

- Was the Initial Assessment Report completed within the required timeframe of the program contract?
- Is the current service/treatment/case plan signed and dated by the client and parent/guardian?
- Case note documentation reflects the level of client contact per program requirements?

#### CARE Day Treatment Exceeded the Agency's 90% Target in Intake and Closing



## Appendix E – Rebound

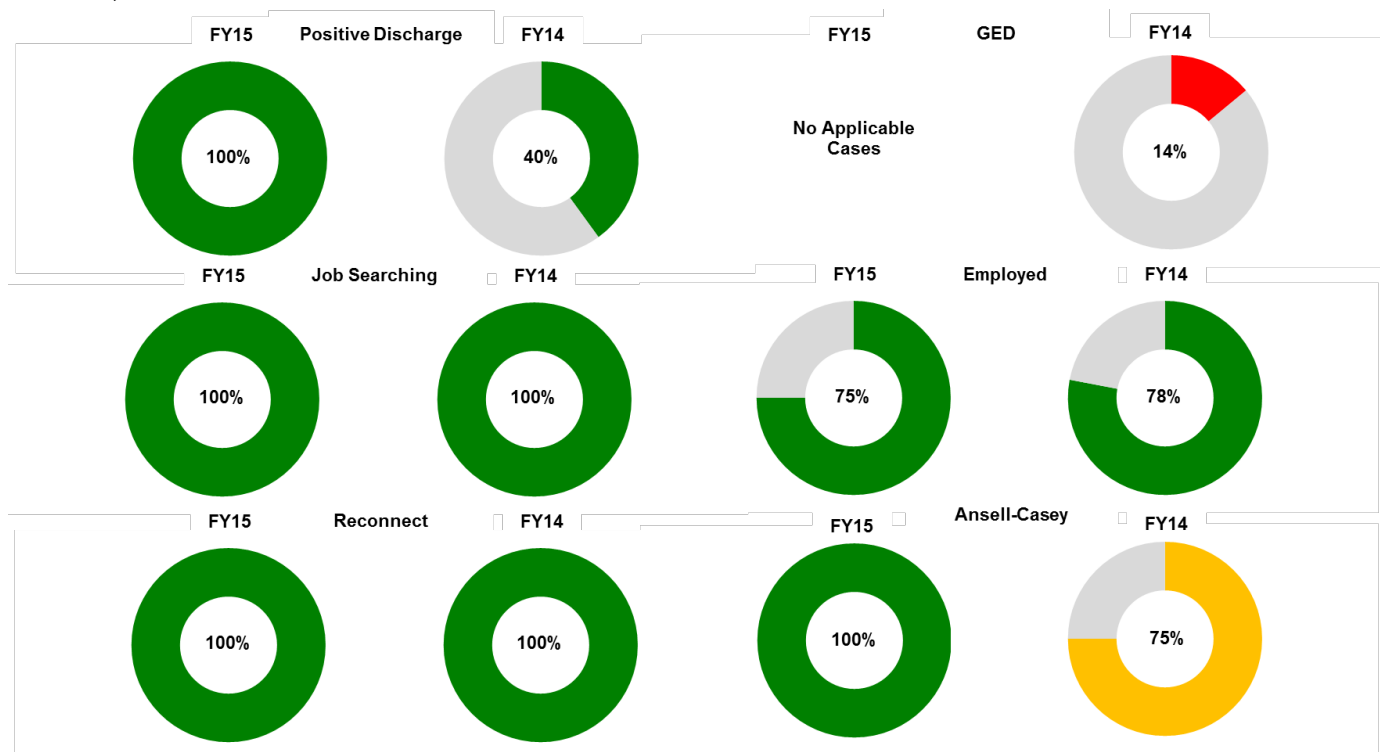
### Rebound

#### Outcomes

Rebound measures 6 outcomes.

1. **Permanency** – 25% of youth will be discharged into the community in a planned manner (Positive Discharge)
2. **Well-Being** – 50% of treatment clients will have completed and received their GED at the time of discharge.
3. **Well-Being** – 90% of youth will participate in job searching skill development.
4. **Well-Being** – 50% of youth will be employed while enrolled in the Rebound program.
5. **Well-Being** – 80% of youth will reconnect with family members as visiting resources.
6. **Well-Being** – 80% of youth will improve their life skills as measured by the Ansell-Casey Life Skills Assessment.

In FY15, Rebound achieved **100%** of its outcomes.



#### Peer Record Reviews

Overall Rebound 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) Rebound exceeded the agency's 90% target in all areas measured.

**Rebound Exceeded the Agency's 90% Target in All Areas Measured**

