



2018

CQI YEARLY REPORT

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ONE HOPE UNITED PROGRAMS

COMMUNITY BASED FAMILY SERVICES

The Community Based Family Services (CBFS) Line of Service is comprised of three program categories: Behavioral Health; Family Support; and Youth Services.

Behavioral Health

Screening Assessment and Support Services
Intensive Placement Stabilization
Extensive Community Home Outreach
Outpatient Counseling

Family Support

Intact Family Services
Supplemental Services
Respite

Youth Services

Comprehensive Community-Based Youth Services
Foster Grandparent
Youth Diversion Program
Multi-Systemic Therapy
Intensive Family Services
SPARCS

EARLY LEARNING & CHILD DEVELOPMENT

The Early Learning and Child Development (ELCD) Line of Service is comprised of two program categories: Child Development Centers and Home Visiting Programs.

Child Development Centers

Aurora Early Learning Center
Bridgeport Child Development Center I
Bridgeport Child Development Center II
Busy Bee Children's Center
Des Plaines Child Development Center
Elgin Child & Family Resource Center
Edgewater Early Learning Center
Glenview School Age Program
Joliet Early Learning Center
O'Hare Child Development Center
Sprouted Child Care & Early Education
Waukegan Early Learning Center

Home Visiting Programs

Healthy Families
Wings – CPS
Success by Six®

PLACEMENT & RESIDENTIAL CARE

The Placement Line of Service operates in two States: Florida and Illinois.

Florida Placement

In-Home Services
Foster Care Services
Adoption
Licensing
Wendy's Wonderful Kids

Illinois Placement & Residential Care

Foster Care/Specialized Foster Care
Foster Care & Specialized Foster Care Counseling
Centralia Residential & Group Home
CARE Residential
CARE Therapeutic Day School
Rebound

REPORT CONTENTS

Below is a description of the featured data of this report. The CQI department collects other data not presented in what follows. For additional information on the types of data CQI collects please contact Kimberly Clark – Manager of Outcomes and Performance.

Client Satisfaction - CQI conducts an annual Client Satisfaction Survey to assess OHU clients' impressions of the quality of services provided. The results from these surveys are used by programs to make improvements in service delivery. Overall client satisfaction is provided in this report.

Outcomes - 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 create a culture of accountability. Outcomes are utilized throughout the year by CQI and operations to: improve service delivery; inform stakeholders of the agency's performance; obtain new funding through grants based upon performance; and provide information to the community on OHU's social impact for advocacy efforts. Key outcomes (primary outcomes identified by CQI and operations) are presented in this report.

Record Review - A Record Review is the practice by which a reviewer (either CQI staff or program staff) examines 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.

IMPACT COLLABORATIVES: THE OUTCOME IMPROVEMENT LOOP

Impact Collaboratives occur quarterly for all programs/teams throughout OHU. Information from the Impact Collaborative process flows from direct service staff through leadership levels up to the Executive Leadership Team and the Board of Directors. The purpose of the Impact Collaborative process is to understand that looking at results collaboratively provides a method for being accountable for evaluating and modifying practices to meet client needs. The Impact Collaborative process helps staff understand that being engaged in outcomes helps them learn how data can drive improvement and recognize how their individual and team efforts contributes to OHU's success.

During the Impact Collaborative meetings teams:

- Review data that CQI reports, which includes: outcomes; record review; client satisfaction; and significant event trends
- Celebrate success and identify areas of improvement
- Develop action plans to improve results and sustain success

After the Impact Collaborative meeting teams:

- Implement action plans

At the next Impact Collaborative meeting teams:

- Review the updated CQI report
- Discuss whether improvement was made based on implementing the action plan
- Decide to continue, modify, add to, or terminate any action plans

If you wish to explore individual team's Impact Collaborative action plans to see how data is being used to drive improvement please contact the CQI department.

A photograph of a person with dark skin and short, curly hair, seen from the back and side. They are wearing a bright red jacket. The background is a blurred city street with brick buildings and bare trees, suggesting an urban environment. A red banner is overlaid on the top right, and large white text is at the bottom.

3,614

CLIENTS & FAMILIES SERVED

**COMMUNITY BASED
FAMILY SERVICES**

SCREENING ASSESSMENT & SUPPORT SERVICES

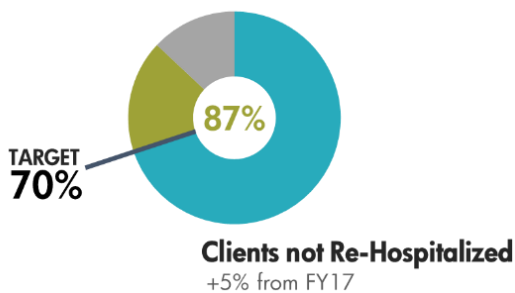
Screening Assessment and Support Services (SASS) is an intensive mental health program designed to provide crisis stabilization, pre-admission screening, assessment, and treatment of any child who may be at risk of psychiatric hospitalization and who is eligible for public funding under any program funded by one of three collaborating departments (IDHS, IHFS, and IDCFS). The program is offered in Mt. Vernon, Effingham, & Olney, Illinois. Services are child-centered, family-focused, community-based, culturally competent, and occur in the least-restrictive setting. SASS provides services 24 hours a day, 365 days a year. Services include: screening; assessment; and follow up services, including case management, linkages to community supports, and counseling/therapy to youth.

1,090 CLIENTS SERVED

CLIENT SATISFACTION

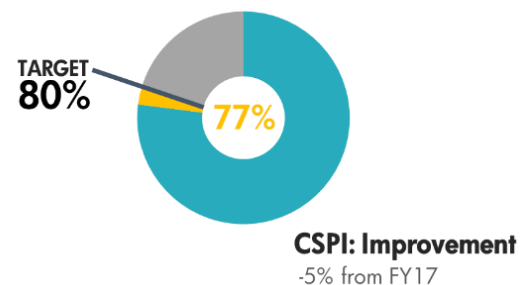
4.58/5.00 Overall Client Satisfaction (a 0.22% decrease from FY17). A total of 52 surveys were returned. ***“Services are fantastic.” – Client***

KEY OUTCOMES



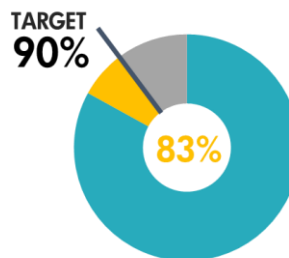
Highlights: SASS measures 2 key outcomes at the time of case closure. The first outcome measures the percentage of clients who did not experience a re-hospitalization (a second hospitalization or more) during the service period. It is important to note that there are many factors that determine whether a client is hospitalized and at times for the safety of the client, hospitalization is the appropriate intervention. In FY18 this measure was achieved.

The final outcome assesses the well-being of clients served utilizing the Childhood Severity of Psychiatric Illness (CSPI) version of the Child and Adolescent Needs and Strengths (CANS) assessment. Specifically, SASS uses the assessment to determine the percentage of clients who improved (defined as a change in actionable items – items rated as a 2 or 3 changing to a rating of 0 or 1) across all items of the CSPI. (CSPI domains include items related to: Risk Behaviors, Behavioral/Emotional Symptoms, Functioning Problems, Juvenile Justice Risk, Child Protection, and Caregiver Needs & Strengths). This measure was not achieved in FY18 and there was a decrease from FY17. In FY19, the program will begin using a new version of the tool called Illinois Medicaid – Crisis Assessment Tool. All staff will be re-trained and re-certified which will assist in increasing the fidelity and use of the tool in service delivery.



RECORD REVIEW

Overall, SASS achieved an **83%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

INTENSIVE PLACEMENT STABILIZATION

Intensive Placement Stabilization (IPS) provides intensive support to high-risk children in Foster Care to stabilize placements and prevent entry into higher levels of care. Services are offered in Charleston, Chicago, Collinsville, Effingham, and Mt. Vernon, Illinois. Services offered include: individual and family counseling for foster and biological families; placement stabilization services; crisis intervention; community linkages; foster parent support; school intervention and tutoring; court advocacy; mentoring services; and enrichment activities.

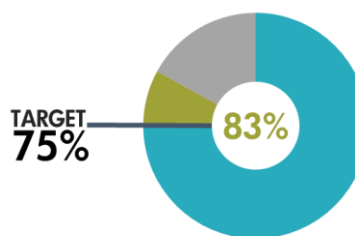
295 CHILDREN AND YOUTH SERVED

CLIENT SATISFACTION

4.51/5.00 Overall Client Satisfaction (a 3.84% decrease from FY17). A total of 59 surveys were returned. *"I'm glad to have an OHU worker help me."* – **Client**

KEY OUTCOMES

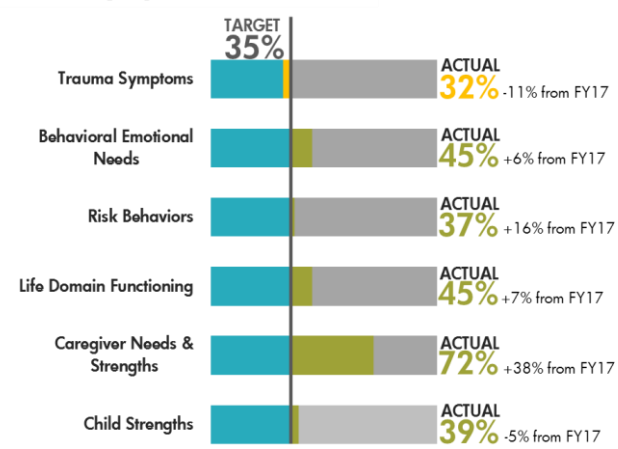
Highlights: IPS measures 7 key outcomes at the time of case closure. The first outcome measures the stability of the client's current placement. This measure exceeded its target in FY18.



Children did not have a Placement Change
-2% from FY17

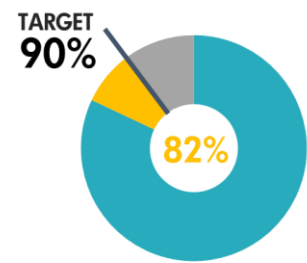
The final six outcomes assess the well-being of the children and youth served. IPS uses the Child and Adolescent Needs and Strengths (CANS) assessment which is a multi-purpose tool developed for children’s services to support decision making including level of care and service planning, to facilitate quality improvement initiatives, and to allow for the monitoring of outcomes of services. Specifically the IPS program uses the assessment to measure symptom abatement (defined as a 35% reduction in actionable items – items rated as a 2 or 3 changing to a rating of 0 or 1 across all clients in the service population who have closed). Symptom abatement is measured across six of the CANS domains: Trauma Symptoms; Behavioral Emotional Needs; Risk Behaviors; Life Domain Functioning; Caregiver Needs & Strengths; and Child Strengths. Five domains achieved the target in FY18. Trauma Symptoms did not achieve the target. Currently a workgroup is assessing how the CANS is being implemented throughout the organization in order to determine the current state of fidelity of the tool. When the CANS is used with fidelity it is a reliable tool to measure client progress. Additional training and support to staff to increase the levels of fidelity is an identified area of need.

CANS: Symptom Abatement



RECORD REVIEW

Overall, IPS achieved an **82%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

EXTENSIVE COMMUNITY HOME OUTREACH

Extensive Community Home Outreach (ECHO) provides intensive home-based support to at-risk families to prevent children from entering more intensive placement services such as Foster Care or the Department of Corrections. Services are provided to parents, families, and children who are at risk of being removed from their homes due to abuse or neglect. ECHO is a family-focused, child-centered, in-home treatment service working with Title XX intact families residing in Cook County, Illinois. The target population is children ages 0 – 18 who are not in state care. Services offered include: individual and family counseling; effective parenting techniques; and community service linkages.

135 CLIENTS SERVED

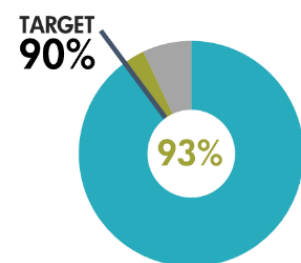
CLIENT SATISFACTION

Twenty-one surveys were returned (16 more surveys than FY17). ECHO did not have enough surveys returned to be considered valid in FY18. Below are some comments from the surveys that were received, which highlights the levels of satisfaction clients have with the ECHO program.

"Our family is truly benefiting from the services we are receiving." – Client

KEY OUTCOMES

Highlights: ECHO measures 5 key outcomes at the time of case closure. The first outcome pertains to the placement stability of children served. This measure was achieved in FY18.

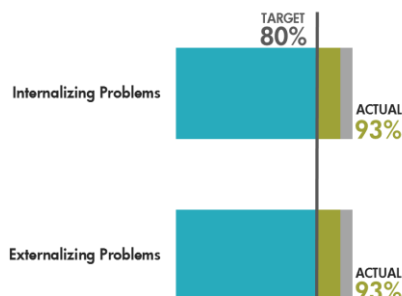


Remain in Home of Parent/Guardian
-5% from FY17

The next four outcomes measure whether the client (adult or child) has improved well-being as measured by the Child Behavior Checklist (for children) or the Adult Self Report (for adults). Both assessments are part of the Achenbach System of Empirically Based Assessment. They are supported by extensive research on service needs and outcomes. Specifically, ECHO uses this assessment to determine if there is a reduction (reduced T score) in the Internalizing (anxious/depressed, withdrawn/depressed, & somatic complaints) & Externalizing (rule breaking behavior & aggressive behavior) Problems scales. In FY18, the target was achieved in all areas. These are new outcomes in FY18 and the population reported below is low. Some challenges that have arisen with the new assessment is ensuring that closing (or post-test) assessments are collected.

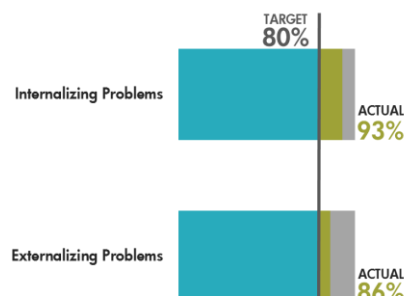
Child Behavior Checklist

New outcome in FY18



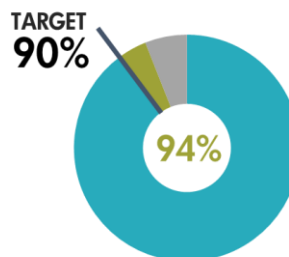
Adult Self Report

New outcome in FY18



RECORD REVIEW

Overall, ECHO achieved a **94%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

OUTPATIENT COUNSELING

One Hope United's Outpatient Counseling services assist children, adults, and families in a time of need. Services are offered both in home and through a more traditional outpatient approach. One Hope United therapists encourage families to identify and solve problems using the internal strengths of each person as well as available support systems within their communities. Clinical specialties include working with issues of acute stress reactions and reactions to trauma, depression, anxiety, post-traumatic stress disorder, school problems, behavioral problems, parenting, and family conflict. In addition, the clinical staff focuses on the systemic issues that are inherent in cases involving children and families. Services offered include: individual counseling for parents, children, and adolescents; counseling services for foster parents to provide support and guidance; family counseling services; group counseling; and trauma focused services.

Additionally, some therapists are licensed and certified to provide services to victims and perpetrators of sexual abuse. The Adult Sex Offender Treatment Program is a specialized, outpatient program that offers a comprehensive psychosexual evaluation and on-going individual, family, and group therapy. The therapists function as part of the larger containment team and therapists work closely with probation and parole staff and report to the court as needed. Child and Adolescent Sexual Abuse Counseling services provide support and therapy to children and adolescents who have experienced or witnessed sexual abuse, as well as children/youth who have displayed sexually inappropriate behavior, aiming to divert further incidents of abuse. Both programs adhere to standards and guidelines for treatment provided by the Illinois Sex Offender Management Board and the Association for the Treatment of Sexual Abusers.

Funding/referrals come from a variety of sources including: the Department of Children and Family Services, local counties, grants, Medicaid, 3rd party insurance reimbursement, and fee for services. Services are provided in Charleston, Chicago, Gurnee, and St. Charles, Illinois.

459 CLIENTS SERVED

CLIENT SATISFACTION

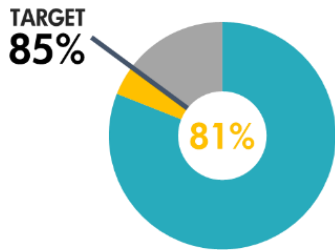
4.67/5.00 Overall Client Satisfaction (a 0.65% increase from FY17). A total of 191 surveys were returned.

"My therapist helps me communicate, helps with my coping skills, and helps me understand my problems." – Client

"My therapist is great to work with. She listens attentively to my concerns. My child really looks forward to visits" – Client

KEY OUTCOMES

Highlights: Outpatient Counseling measures 9 key outcomes at the time of case closing. The final two outcomes are only measured for clients being served by the Child/Adolescent/Adult Sexual Abuse Counseling programs.



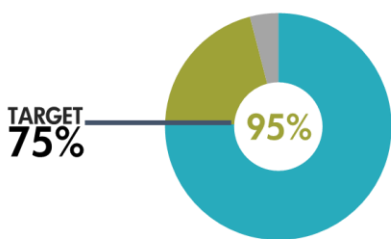
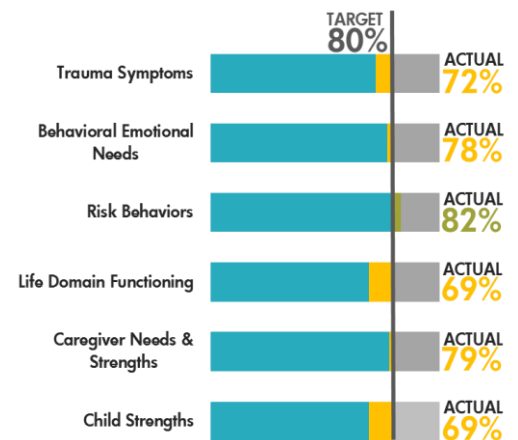
Adults Reduce Mental Health Symptoms

The first outcome measures the percentage of adult clients with a reduction in mental health symptoms as measured by the appropriate tool. Since there are a number of precipitating factors that bring a client to counseling, the appropriate assessment tool needs to be used to measure client progress. Some of the tools used by these programs include: age appropriate Trauma Symptoms Checklist/Inventory; Goldberg Depression Inventory; Parent Relationship Questionnaire; and the Adult Self Report. (Adult Sexual Abuse Counseling clients are not included in the outcome.) This measure was just below the target

in FY18. Comparative data from FY17 is not available because the measure was re-defined in FY18 for some of the programs included.

The next six key outcomes look at the well-being of children served by the program. The program uses the Child and Adolescent Needs and Strengths (CANS) assessment which is a multi-purpose tool developed for children's services to support decision making including level of care and service planning, to facilitate quality improvement initiatives, and to allow for the monitoring of outcomes of services. Specifically, Outpatient Counseling programs use the assessment to determine the percentage of clients who improved (defined as a change in actionable items – items rated as a 2 or 3 changing to a rating of 0 or 1) in six domains: Trauma Symptoms; Behavioral Emotional Needs; Risk Behaviors; Life Domain Functioning; Caregiver Needs & Strengths; and Child Strengths. Five of the domains are slightly below the 80% target, and Risk Behaviors exceeded the target. Comparative data from FY17 is not available because the measures were re-defined in FY18 for some of the programs included. Currently a workgroup is assessing how the CANS is being implemented throughout the organization in order to determine the current state of fidelity of the tool. When the CANS is used with fidelity it is a reliable tool to measure client progress. Additional training and support to staff to increase the levels of fidelity is an identified area of need.

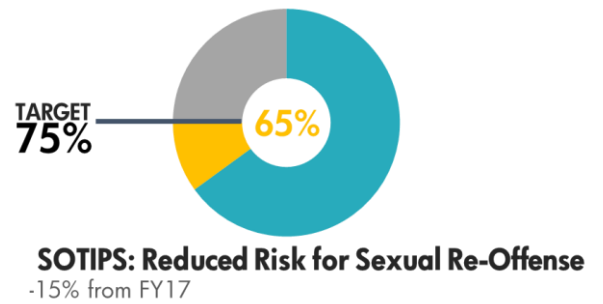
CANS: Improvement



ERASOR: Reduced Risk for Sexual Re-Offense
-1% from FY17

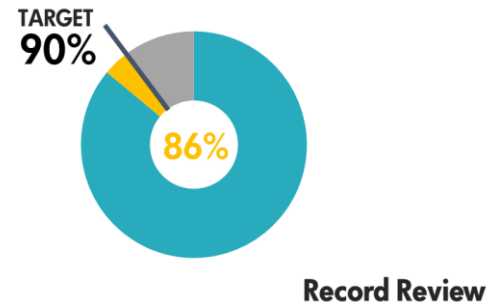
Child & Adolescent Sexual Abuse Counseling measures 1 additional outcome at the time of case closure. The outcome assesses the percentage of clients who reduced their risk for sexual re-offense as measured by the Estimate of Risk of Adolescent Sexual Offense Recidivism (ERASOR). The ERASOR is an empirically-guided approach to estimating the risk of sexual re-offense for an adolescent. A risk level of "high", "moderate", or "low" is determined based on the presence of a combination of risk factors assessed by the tool. This measure was achieved in FY18.

The Adult Sex Offender Treatment Program measures 1 key outcome at the time of case closure. The program utilizes the Sex Offender Treatment Intervention and Progress Scale (SOTIPS) which is a statistically-derived dynamic measure designed to aid clinicians in assessing risk, treatment and supervision needs, and progress of adult males who have been convicted of qualifying sexual offenses after their 18th birthday. The outcome assesses the percentage of clients who improved in their overall level of risk for re-offense. This measure was not achieved in FY18 and there was a decrease from FY17; however, this is not significant due to the low number of cases that closed in FY18.



RECORD REVIEW

Overall, Outpatient Counseling achieved an **86%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



INTACT FAMILY SERVICES

Intact Family Services maintain and strengthen family units, by providing in-home services designed to prevent children from entering the foster care system. This program works with family strengths, monitors the family dynamics, provides linkages to community resources, assists with housing or school issues, and provides information regarding child development/age appropriate behavior and discipline as well as general case management services. Emphasis is on child safety and keeping the family together. The program provides intensive in-home case management as well as 24 hour response to emergencies. Additional services include linkage with substance abuse treatment programs and in-home counseling. Services are offered in Charleston, Chicago, Collinsville, Effingham, Gurnee, Mt. Vernon, Springfield, and Olney, Illinois.

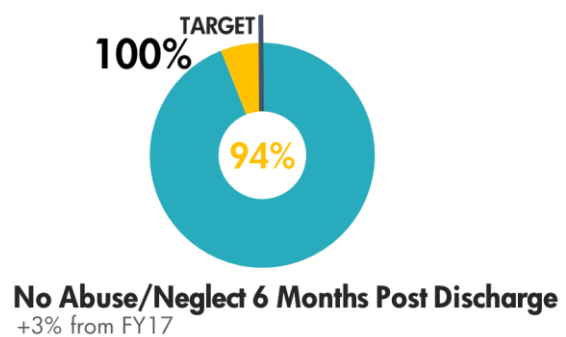
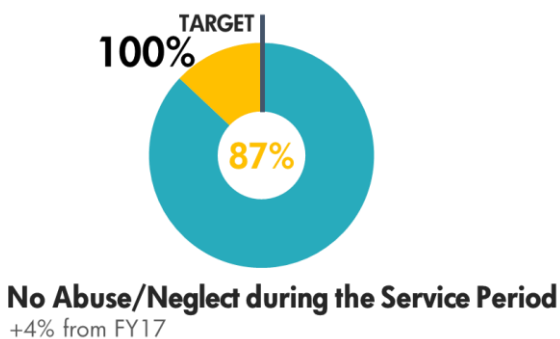
972 FAMILIES SERVED

CLIENT SATISFACTION

4.82/5.00 Overall Client Satisfaction (a 1.26% increase from FY17). A total of 182 surveys were returned. *“Our case manager was the first person who showed us compassion and true care. We are thankful for her treating us like people and not automatically assuming the worst as many did. We truly believe your services are a godsend for those in need.”* – Client

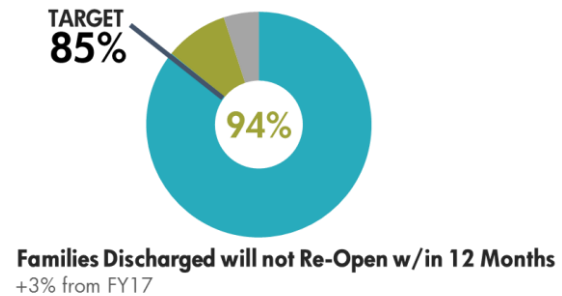
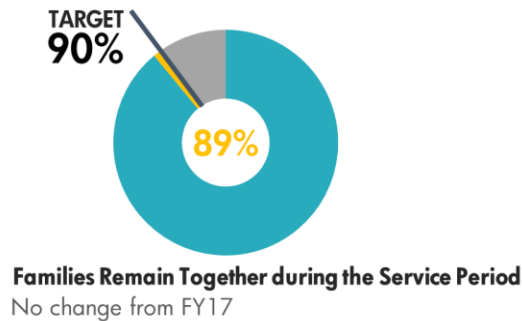
KEY OUTCOMES

Highlights: Intact Family Services measured 4 key outcomes in FY18. The first outcome pertains to the safety of all families served by the program during the fiscal year and whether a family had a substantiated report of abuse/neglect. This outcomes was not achieved this year because there are times that even with the resources and supports that families receive, instances of abuse and neglect still occur and therefore it needs to be reported. The second outcome measures whether discharged families had a substantiated abuse/neglect report 6 months after being discharged.¹ This outcome also was not achieved this year due to abuse/neglect that occurred after the case had closed.



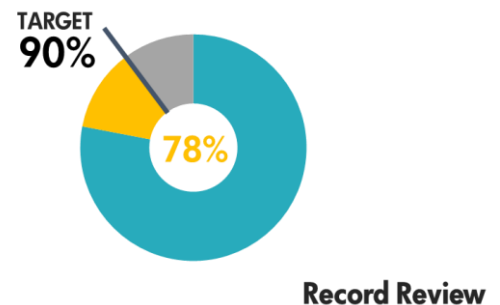
¹ This outcome may change throughout FY19, as there are families who have not been discharged for a full 6 months – it will be reflected in the FY19 Impact Report.

The next two outcomes measure whether families remained together at certain time periods. The first one measures whether families remained together at the time of discharge. This measure was just below the target in FY18. When additional reports of abuse/neglect occur, the decision is sometimes made to remove children from the home for their safety. The second one measures whether the families who remained together at discharge, did not re-open within 12 months of being discharged.² Currently, this measure is exceeding its target.



RECORD REVIEW

Overall, Intact Family Services achieved a **78%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



² This outcome may change throughout FY19, as there are families who have not been discharged for a full 12 months – it will be reflected in the FY19 Impact Report.

SUPPLEMENTAL SERVICES

Supplemental Services aims to strengthen families who are preparing for reunification following the out-of-home placement of at least one child. The program improves, supports, and maintains the functioning of each family member while strengthening the family as a whole. The program also seeks to support parents' efforts to provide a safe and nurturing environment for their children, reduce the occurrence of out-of-home placements, and assist with the reunification of the family with their children. Services offered include: in-home training, including appropriate child care and home management designed to improve daily living; and supervision of visits between parents and children who are placed in out-of-home care – these visits proactively support the goal of reunification of children with parents. Additionally, the Nurturing Parenting Program® is a potential intervention that can be utilized for parenting training. The Nurturing Parenting Program® is a family-centered trauma-informed initiative designed to build nurturing parenting skills as an alternative to abusive and neglecting parenting and child-rearing practices. The Supplemental Services program operates in St. Louis, Missouri and serves clients from St. Louis City and St. Louis County.

97 FAMILIES SERVED

CLIENT SATISFACTION

4.78/5.00 Overall Client Satisfaction (a 1.27% increase from FY17). A total of 50 surveys were returned. ***"Staff have been great helping me with my visits with my kids."** – Client*

KEY OUTCOMES

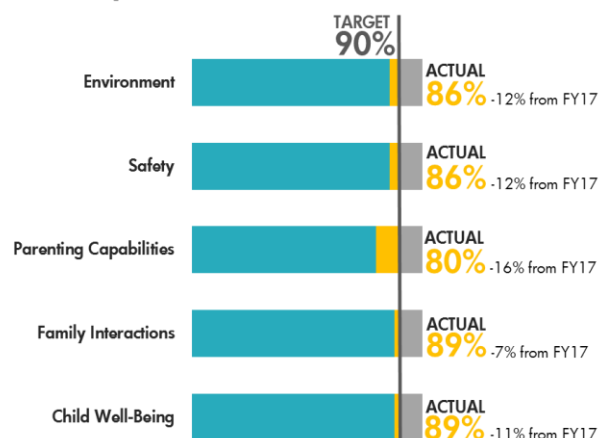
Highlights: Supplemental Services measures 6 outcomes at case closure. The first outcome pertains to the permanency of children served and whether they return home to their families of origin or remain in their current placement. This measure exceeded its target in FY18.



Children will Return Home or Remain in their Current Placement
No change from FY17

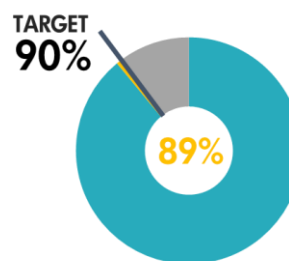
The next five outcomes pertain to the safety and well-being of families who have been discharged from the program during the fiscal year. Supplemental Services utilizes the North Carolina Family Assessment Scale (NCFAS) version 2.0 which measures family functioning across 5 domains: Environment; Parental Capability; Family Interactions; Family Safety; and Child Well-Being. The outcome assesses the percentage of parents who improved in each of the 5 domains. All domains fell below the target in FY18.

NCFAS: Improvement



RECORD REVIEW

Overall, Supplemental Services achieved an **89%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

In FY18 there were 2 additional Family Support programs: Respite, which served 6 families and Family Support Services which, served 4 families.

COMPREHENSIVE COMMUNITY-BASED YOUTH SERVICES

Comprehensive Community-Based Youth Services (CCBYS) is designed to divert youth from the juvenile justice and/or the child welfare systems. The program provides 24-hour crisis responses to homeless, runaway and “locked out” youth. Home-based counseling is offered to help reduce the home/community issues that have precipitated the crisis. In addition to crisis services, staff works closely with local schools and community agencies to maximize resources available to at-risk youth. Short-term outreach-based counseling is available to families in the community where the youth is at risk of out-of-home placement. Aggression Replacement Training (ART), an evidence-based anger management and life skills group process, is provided as a component of services. Services offered include: in-home family counseling; assessment of family’s strengths and needs; assistance in accessing community resources; coordination with school/community resources; and around-the-clock emergency response. The program is located in Effingham, Gurnee, Mt. Vernon, and Olney, Illinois.

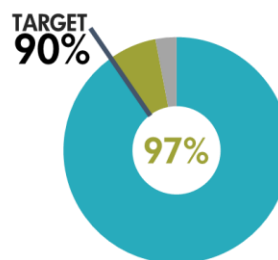
121 YOUTH SERVED

CLIENT SATISFACTION

4.66 / 5.00 Overall Client Satisfaction (a 7.62% increase from FY17). A total of 53 surveys were returned.

KEY OUTCOMES

Highlights: CCBYS measures 3 key outcomes at the time of case closure. The first outcome assesses the permanency of the youth’s living situation at the time of discharge – i.e. whether the youth is living in a home-like setting. This measure was achieved in FY18.



Youth are Living in a Home-Like Setting
-1% from FY17

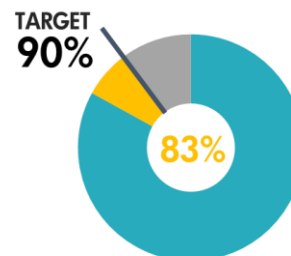
The final two key outcomes are assessed by the Youth Assessment and Screening Instrument (YASI). The YASI is an instrument that assesses risks, needs, and protective factors in youth populations. The assessment includes static and dynamic content across 10 domains including: Legal History; Family & Environment; School; Community & Peer Relationships; Alcohol & Drugs; Physical & Mental Health; Aggression; Attitudes; Social/Cognitive Skills; and Employment. The outcomes assessed by CCBYS look at the percentage of youth with increased protective factors and decreased risk factors in dynamic content across the entire assessment. Both of these measures exceeded the target in FY18.

YASI: Overall



RECORD REVIEW

Overall, CCBYS achieved an **83%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

MULTI-SYSTEMIC THERAPY

Multi-Systemic Therapy (MST) is a program for juvenile offenders that intensively addresses the multidimensional nature of behavior problems in troubled youth. This evidence-based treatment focuses on those factors in each youth's social network that are contributing to his or her antisocial behavior. The primary goals of MST are to decrease rates of antisocial behavior and other clinical problems, improve functioning (e.g., family relations, school performance), and achieve these outcomes at a cost savings by reducing the use of out-of-home placements such as incarceration, residential treatment, and hospitalization. The ultimate goal of MST is to empower families to build a healthy environment through the mobilization of existing child, family, and community resources. The program operates in Chicago, Effingham, Mt. Vernon, and St. Charles Illinois.

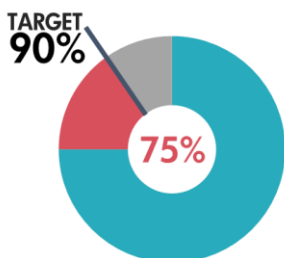
98 YOUTH SERVED

CLIENT SATISFACTION

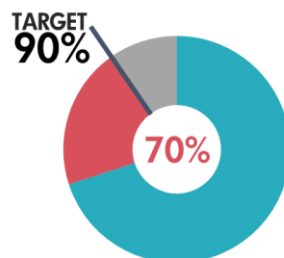
4.55/5.00 Overall Client Satisfaction (a 2.71% increase from FY17). A total of 37 surveys were returned.

KEY OUTCOMES

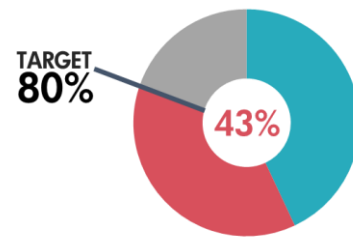
Highlights: MST measures 3 key outcomes, which are part of the indicators they are responsible for as an evidence based practice, at the time of case closure. The MST therapists report on these 3 outcomes based on the knowledge gained from the close therapeutic relationship he/she has with the youth and families served. All of these measures were below their targets in FY18. There is currently a plan in place to improve these outcomes where staff are focusing on increasing engagement with families, increasing the home/school link and vocational opportunities, and increasing the use of community supports.



Youth are Living in a Home-Like Setting
+4% from FY17



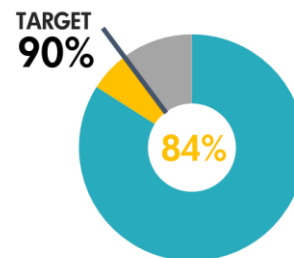
Youth are not Arrested
-6% from FY17



Youth Show Success in School, Vocational Training, or Job
-10% from FY17

RECORD REVIEW

Overall, MST achieved an **84%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

INTENSIVE FAMILY SERVICES

The Intensive Family Services (IFS) program is an intensive based treatment model designed to address multiple determinates of serious anti-social behavior in juvenile offenders by working with the youth in individual sessions which are supported by weekly parent meetings. This treatment approach views individuals being nested within a complex network of interconnected systems that encompass individual, family and extra familial (school, neighborhood, peer) factors. The ultimate objective of this program is to stabilize the youth and his/her family so that out-of-home care is prevented through the formal state child welfare and/or juvenile justice system. There is an individual counseling and family meeting component to the program. The individual counseling program works from a strength based perspective assisting the youth to identify and eliminate barriers that inhibit him/her from consistently engaging in pro-social behaviors. By assisting the youth in learning skills that will allow him or her to interact with other adolescents and adults through a pro-social manner, the client is more likely to discontinue or at least reduce time spent engaging in anti-social behaviors. In addition, the therapist will work with the adolescent in increasing his/her participation in pro-social activities in order to reduce the time the client has that is unstructured. The program operates in Chicago, IL.

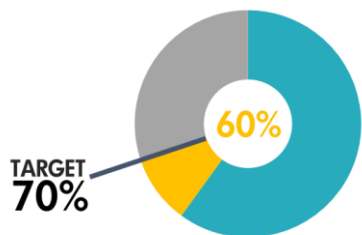
36 YOUTH SERVED

CLIENT SATISFACTION

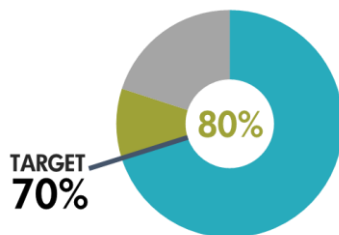
Seven surveys were returned (6 more surveys than FY17). Intensive Family Services did not have enough surveys returned to be considered valid in FY18.

KEY OUTCOMES

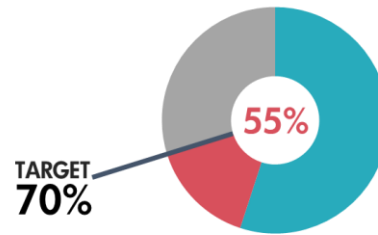
Highlights: IFS measures 3 key outcomes at the time of case closure. The IFS therapists report on these outcomes based on the knowledge gained from the close therapeutic relationship he/she has with the youth and families served. Youth not being arrested while receiving services exceeded the target in FY18. Youth remaining in a home like setting and youth showing success in school/vocational training/or employment did not achieve its targets. There is currently a plan in place to improve these outcomes where staff are focusing on increasing engagement with families, increasing the home/school link and vocational opportunities, and increasing the use of community supports.



Youth are Living in a Home-Like Setting
-15% from FY17



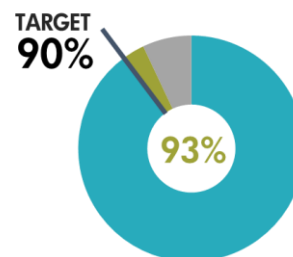
Youth are not Arrested
+10% from FY17



Youth Show Success in School, Vocational Training, or Job
No Change from FY17

RECORD REVIEW

Overall, IFS achieved a **93%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

YOUTH DIVERSION PROGRAM

The One Hope United Youth Diversion Program (YDP) provides community-based counseling to youth at risk of out-of-home placement because of incorrigible behavior, including runaway and truancy situations. The in-home services are child-centered but family-focused. Supportive services are provided to youth/families over a period of 3 – 6 months. Services offered include: a comprehensive risk and needs assessment before developing an individualized treatment plan; solution-based in-home weekly family meetings; collaboration, networking, and advocacy for early intervention; referrals to community resources; parent education; crisis intervention; and advocacy. The Youth Diversion Program is available to youth ages 10–17 who reside in the city of St. Louis, Missouri.

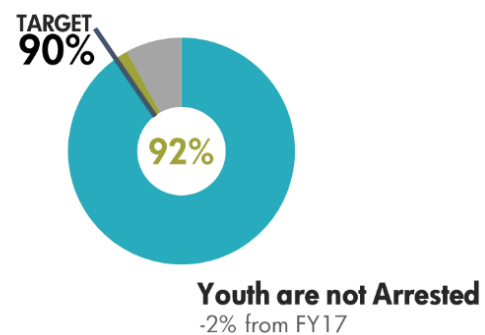
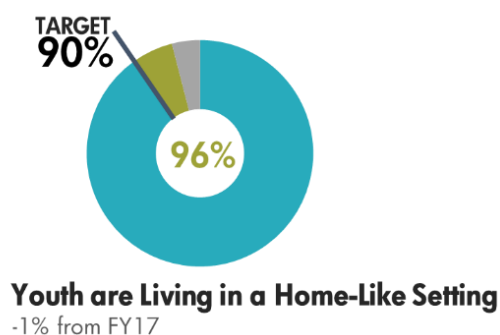
51 YOUTH SERVED

CLIENT SATISFACTION

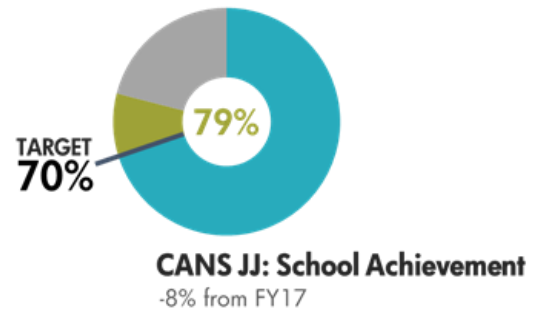
4.60/5.00 Overall Client Satisfaction (a 3.14% increase from FY17). A total of 23 surveys were returned. *“This program is very helpful. I feel staff is doing a great job.”* – Client

KEY OUTCOMES

Highlights: YDP measures 3 outcomes at the time of case closure. The first 2 outcomes pertain to the permanency and well-being of youth served. Both of these measures exceeded their targets in FY17.

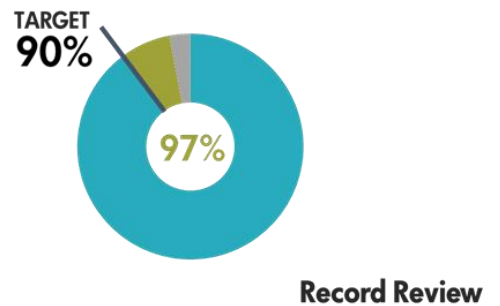


The final key outcome also pertains to the well-being of youth served. The outcome is measured by utilizing the Juvenile Justice version of the Child and Adolescent Need and Strengths (CANS JJ) assessment, which is a multi-purpose tool developed for children's services to support decision making including level of care and service planning, to facilitate quality improvement initiatives, and to allow for the monitoring of outcomes of services. Specifically, YDP uses the assessment to determine the percentage of clients who improved (defined as a change in actionable items – items rated as a 2 or 3 changing to a rating of 0 or 1) in the School Achievement item. This measure exceeded its target in FY18.



RECORD REVIEW

Overall, YDP achieved a **97%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



FOSTER GRANDPARENT PROGRAM

The One Hope United Foster Grandparent Program offers seniors age 55 and older the opportunity to serve as mentors, tutors and loving caregivers for children and youth. Volunteers serve in a variety of locations throughout the community, including schools, after-school programs, Head Start, child care centers, and youth centers. The personal attention offered by the Foster Grandparents helps youth grow, gain confidence, and succeed as productive members of society. In return, Foster Grandparents receive the joy of being needed within their communities. The program operates in Mt. Vernon and Springfield, Illinois.

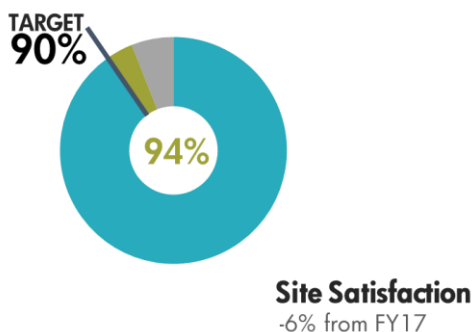
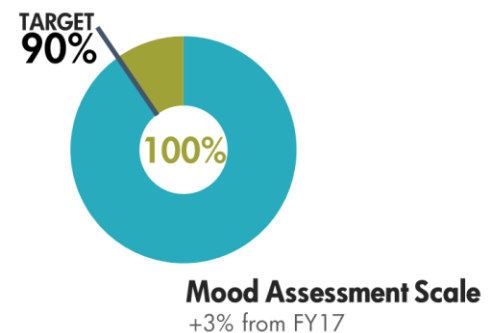
78 FOSTER GRANDPARENTS

CLIENT SATISFACTION

4.93/5.00 Overall Client Satisfaction (a 1.23% increase from FY17). A total of 64 surveys were returned. *"I enjoy this program, it keeps me active, focused, and helps to keep me moving working with students and teachers."* – **Foster Grandparent**

KEY OUTCOMES

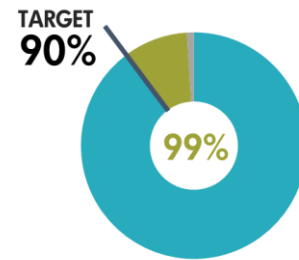
Highlights: The Foster Grandparent program measures 2 key outcomes. The first outcome assesses the percentage of Foster Grandparents who report improved well-being as measured by the Mood Assessment Scale. The Mood Assessment Scale is implemented twice per year. This measure exceeded its target in FY18.



The second outcome asks whether volunteer sites are satisfied with the Foster Grandparent as measured by the Volunteer Performance Survey. This measure exceeded its target in FY18.

RECORD REVIEW

Overall, FGP achieved a **99%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

In FY18 there was 1 additional Youth Services Program (SPARCS), which served 172 youth. SPARCS has not identified any key outcomes and did not participate in record review or client satisfaction surveys. There is a work-group underway which is focusing on streamlining SPARCS including standardizing the outcomes reported across the groups and standardizing the group records.



2,561

CHILDREN & FAMILIES SERVED

**EARLY LEARNING &
CHILD DEVELOPMENT**

CHILD DEVELOPMENT CENTERS

One Hope United Child Development Centers cater to the individual needs of each community, child, and family in OHU's care. They nurture children's growth and partner with parents to help children become independent, self-confident, inquisitive learners. Centers use the Creative Curriculum, through which teachers design a classroom environment that includes learning centers such as blocks, dramatic play, art, library, math, science, sand and water, music and movement, cooking, literacy, and computers. Through active involvement with this environment, children learn to understand the world around them, make choices, and explore through hands-on activities. Other enrichment curriculums including Healthy Lifestyles and Science, Technology, Engineering, and Mathematics (STEM), provide additional learning opportunities for children served. All centers take a holistic approach in nurturing each child's mind, body, and soul. One Hope United operates 12 Child Development Centers in the Chicagoland area and surrounding suburbs.

2,276 CHILDREN SERVED

CLIENT SATISFACTION

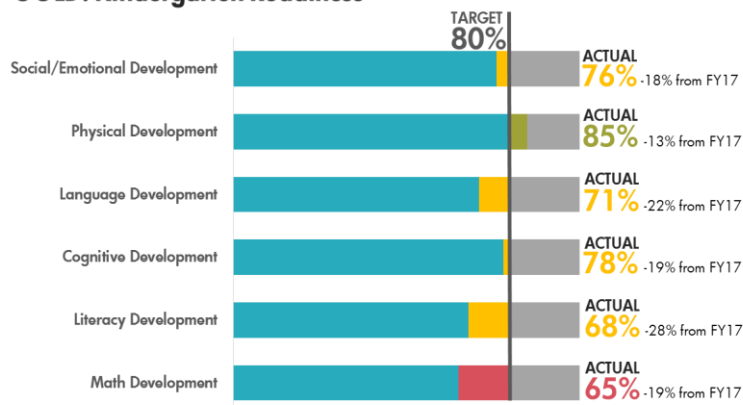
4.65 / 5.00 Overall Client Satisfaction (a 0.87% increase from FY17). A total of 689 surveys were returned. *"My child enjoys interacting with his peers. My child loves reading time and learning new things. The stations in my child's classroom are Hands-On and help him to engage in each one. My child has learned better listening skills, writing has improved, and my child loves the teachers. We are very happy with all the services and activities that are offered."* – Parent

KEY OUTCOMES

Highlights: All Child Development Centers use Teaching Strategies Gold to measure client progress. Overall, FY18 performance is lower than FY17 performance. Throughout FY18, program leadership and CQI have been updating the procedures on collecting and entering quality data into the Teaching Strategies Gold system and have streamlined how each center is reporting the data to ensure consistency across all the sites. This course correction will more accurately capture children's progress and needs. Additionally, exploring other assessments with higher reliability and validity in the future is a consideration so that results are not solely based on teacher interpretation, but rather a more bounded system.

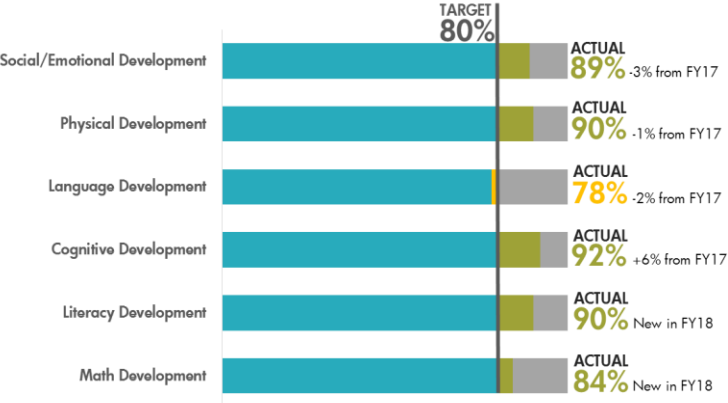
Specifically, to measure Kindergarten Readiness, achieving benchmarks across the competencies of Social Emotional, Physical, Language, Cognitive, Literacy, and Math Development determine whether children have the necessary skills to succeed in Kindergarten.

GOLD: Kindergarten Readiness

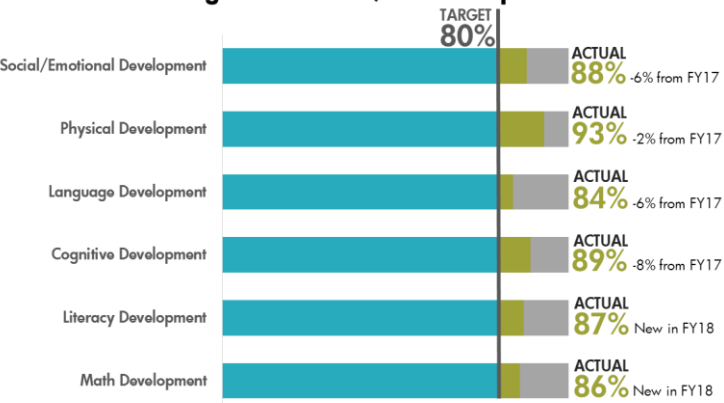


Child Development Centers also use Teaching Strategies Gold to measure whether children are meeting widely held expectations in the developmental areas of: Social Emotional Development; Physical Development; Cognitive Development; and Language Development. Children’s progress in these competencies is measured for two age groups: Infants, Toddler’s, & Twos and Pre-Kindergarteners.

GOLD: Infants, Toddler's & Two's Meet/Exceed Expectations

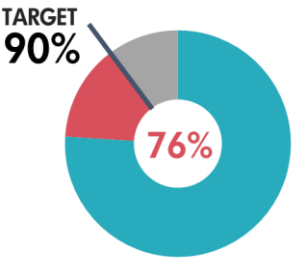


GOLD: Pre-Kindergarteners Meet/Exceed Expectations

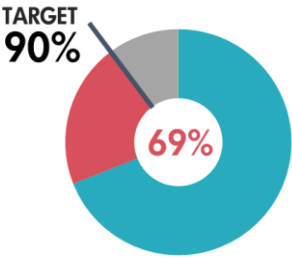


RECORD REVIEW

Overall, OHU’s Child Development Centers achieved a **76%** on the Client File Review which checks for the completion of required forms, releases, and permissions. They achieved a **69%** on the Teaching Strategies Gold Reivew which assesses the quality of teacher observations of children’s developmental progress.



Client File Review



Teaching Strategies GOLD Review

HOME VISITING

Healthy Families Illinois (HFI) and Doula program works with first-time parents to promote strength-based parenting skills and family bonds. Services begin during pregnancy or within two weeks after the birth of a child. The programs provide valuable information on parenting issues, educational opportunities, child development, parent-child bonding, teen parenting, and family goals/support plans. Doulas work with pregnant teens. Doulas are trained and experienced childbirth coaches who provide physical, emotional, and research based educational support throughout the last trimester of pregnancy, during labor/delivery, and for the first two months postpartum. HFI serves families in Lake County, Illinois.

WINGS – CPS services help new parents adjust to the responsibilities of parenthood. Targeted for new and expecting parents, WINGS – CPS works to build trusting relationships, teach problem-solving skills, and enhance family dynamics as a preventative measure against child abuse and neglect. The program serves families in Cook County, Illinois.

Success by Six® prepares children for bright futures through promoting good health, proper development and growth, and a sound education. The Success by Six® program uses a unique learning-by-doing approach, allowing children to explore and build an understanding of the world while helping parents learn how to become their child's first teacher. Developing a love for reading and learning these skills prepare children for success in kindergarten. Home visitors teach new activities to parents that engage parents with children at each stage of their development and share information about accessing community resources. The program provides services in Lake County, Illinois.

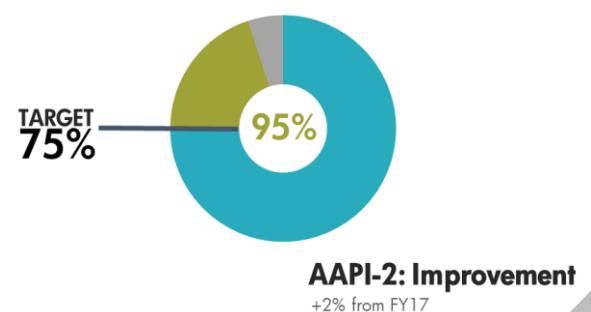
285 FAMILIES SERVED

CLIENT SATISFACTION

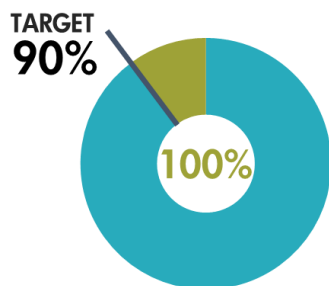
4.75 / 5.00 Overall Client Satisfaction (a 2.66% decrease from FY17). A total of 109 surveys were returned. ***"One Hope United has brought me support in my life. They make me feel important as well as my child. They guide me to do better as a parent."*** – **Client**

KEY OUTCOMES

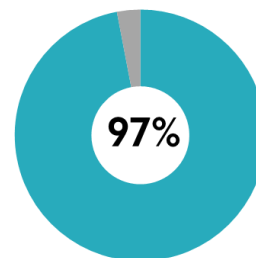
Highlights: The primary assessment tool used to measure client progress in Home Visiting programs is the Adult Adolescent Parenting Inventory – version 2 (AAPI-2). The AAPI-2 is an inventory designed to assess the parenting and child rearing attitudes of adolescent and adult parents. Responses to the inventory provide an index of risk for practicing behaviors known to contribute to child abuse and neglect. Risk is assessed in five specific child rearing behaviors: Expectations of Children; Parental Empathy towards Children's Needs; Use of Corporal Punishment, Parent Child Family Roles; and Children's Power and Independence. Parents need to improve in one of these areas to be considered successful. This measure exceeded its target in FY18.



A main focus of Home Visiting programs is to ensure that children in need of further intervention (ex. Early Intervention Services or Special Education Services) receive the referrals to such services as needed. To that end, the program measures whether developmental screenings are completed on time, which assists in determining if further assessment is needed and if the appropriate referrals are made when warranted. These are new outcomes in FY18.

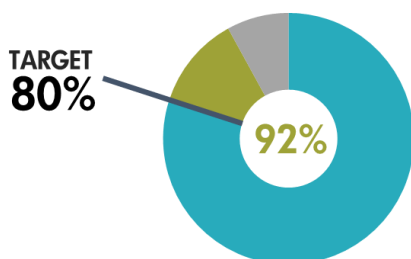


On-Time Developmental Screenings
New in FY18

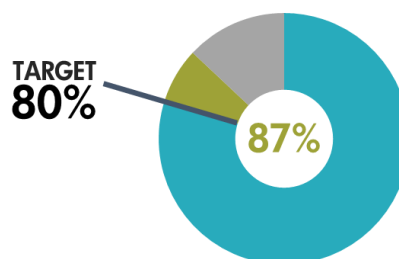


Referrals to EI or Special Ed. Services
New in FY18

Finally, the Success by Six program uses the Kindergarten Readiness Observation Form, which measures children's competencies in Communication & Language Usage (ex. recognizing the letters in the alphabet and writing his/her first name) and Cognition & General Knowledge (ex. recognizing shapes and colors). These skills gauge whether children have the skills needed to be successful in Kindergarten. In FY18, these measures exceeded their targets.



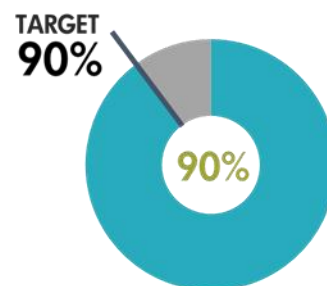
Kindergarten Readiness: Communication & Language Skills
-1% from FY17



Kindergarten Readiness: Cognition & General Knowledge
-6% from FY17

RECORD REVIEW

Overall, Home Visiting achieved a **90%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review



2,369

CHILDREN AND YOUTH
SERVED

**FLORIDA
PLACEMENT**

FLORIDA CASE MANAGEMENT SERVICES

One Hope United operations in Florida serves families who have been referred by the state's child welfare system due to child neglect and/or abuse. In FY18, One Hope United provided case management services in Orlando, Sebring, Bartow, & Wauchula and Licensing services in Kissimmee.

Child Welfare Case Management provides services for children and families. Some children remain home with their parents and services are provided to maintain and strengthen the family unit. Other children live with relatives or in licensed foster or group homes. When a child is placed outside of their home, reunification with their family is the desired outcome and effort focuses on returning the child home as soon as is safely possible. If a child cannot return to their family of origin efforts turn to finding another legally permanent family for the child. Other permanent families may include relatives or other individuals who become legal guardians or adoptive parents. The program uses two models. First, the Family Team Conferencing Model is used to engage families. The effectiveness of using this approach is being studied. Second, the State of Florida has adopted a new practice model called Safety Decision Making Methodology.

In addition to case management services provided to the children and families referred to One Hope United, licensing and support services are also provided to the foster families and relatives caring for children while they are placed outside of their home.

2,296 CHILDREN AND YOUTH SERVED

CLIENT SATISFACTION

4.46 / 5.00 Overall Client Satisfaction (no change from FY17). A total of 421 surveys were returned. *"I am pleased with One Hope United and have found it a good organization to work with."* – Client

KEY OUTCOMES

IN FY18, ONE HOPE UNITED – FLORIDA ASSISTED WITH:

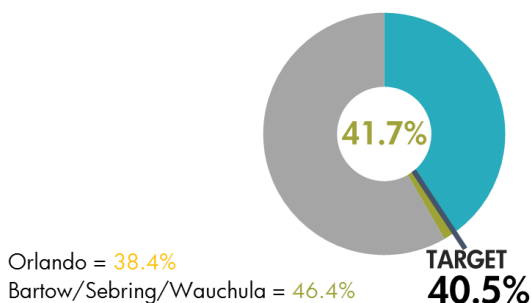
- ✓ RETURNING **237** CHILDREN HOME
- ✓ **91** ADOPTIONS
- ✓ **116** GUARDIANSHIPS

In-Home Services: In-Home Services measures 1 key outcome pertaining to the safety of the children receiving services. This outcome was achieved this year in both Orlando and Bartow/Sebring/Wauchula.

Out-of-Home Services: Out-of-Home Services measures 4 key outcomes. The first outcome pertains to the safety of children after they have been discharged from services. Particularly, that children are not subjects of abuse/neglect 6 months after leaving services. Both Orlando and Bartow/Sebring/Wauchula achieved the target in FY18.

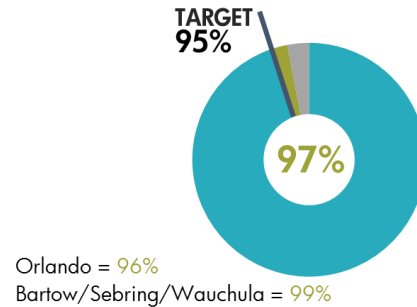
The next two key outcomes pertain to achieving timely permanency within specified timeframes. Specifically the percentage of children who achieve permanency within 12 months and the percentage of children who have adoptions finalized within 24 months. Overall, Florida achieved these targets in FY18. Orlando was below the target in achieving permanency within 12 months and Bartow/Sebring/Wauchula was below the target in timely adoptions.

Children Achieve Permanency within 12 Months
-0.4% from FY17

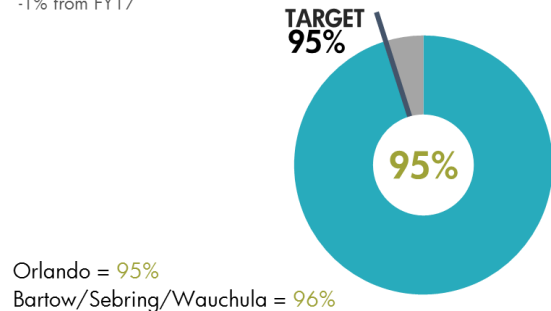


The final key outcome measures whether children who exit foster care to a permanent home do not re-enter the foster care system. This is measured 12 months after achieving permanency. Orlando exceeded the target in FY18 whereas Bartow/Sebring/Wauchula was below the target. There are times that children re-enter the Foster Care system due to failed reunifications with their parents. Strong after-care services would be one solution that could prevent this from occurring.

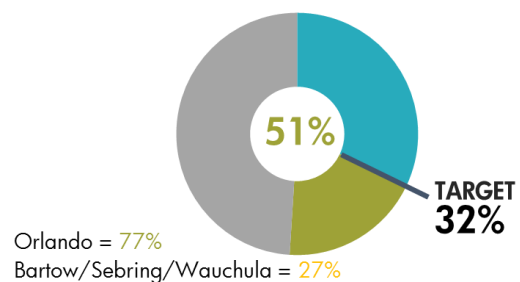
No Substantiated Abuse/Neglect
No change from FY17



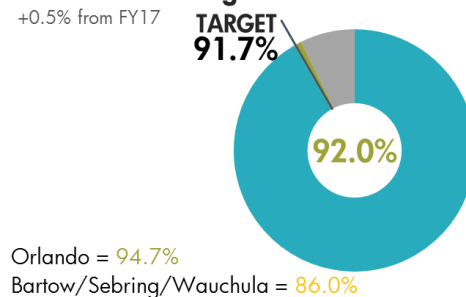
No Substantiated Abuse/Neglect 6 Months Post Discharge
-1% from FY17



Adoptions Finalized within 24 Months
-16% from FY17

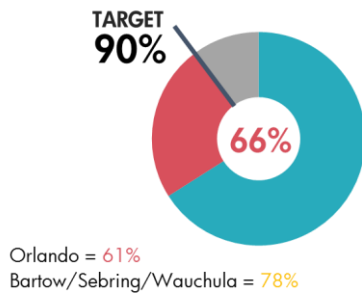


Children do not Re-Enter Foster Care within 12 Months of Moving to a Permanent Home
+0.5% from FY17

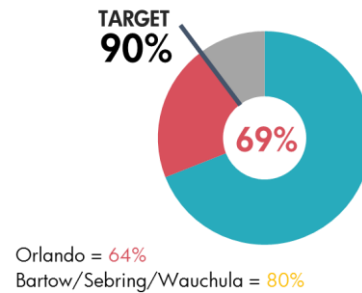


RECORD REVIEW

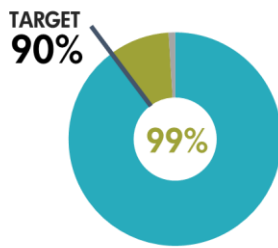
Overall, In-Home Services achieved a **66%** on their Record Review, Foster Care achieved a **69%** on their Record Review, Adoption achieved an **84%** on their Record Review, and Licensing achieved a **99%** on their Record Review.



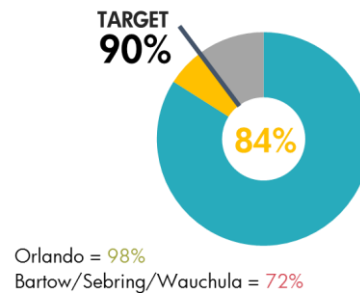
**In-Home
Record Review**



**Foster Care
Record Review**



**Licensing
Record Review**



**Adoption
Record Review**

WENDY'S WONDERFUL KIDS

In 2011, One Hope United operations in Florida received the Wendy's Wonderful Kids grant from the Dave Thomas Foundation for Adoption in 2011. This grant allowed Florida to hire 2 Adoption Recruiters who implement a proactive, child-focused recruitment program targeted on moving children from foster homes into adoptive families. Oftentimes, the children One Hope United serves are children with significant or complex medical needs, extreme challenging behaviors, sibling groups, and older youth. These children are typically the hardest children to move from foster care to adoption. The recruiters implement aggressive practices focused on finding the best home for a child through identifying and reaching out to family, friends, neighbors, and the communities in which they live. Additionally, the recruiters remain in consistent contact with the other agencies, Guardian ad Litem (GAL), and service providers who are also involved in the child's case. The recruiters work with families by helping them prepare for adoption by hosting a monthly pre-adoptive preparation group, advocating on behalf of the child and adoptive family for the necessary services to ensure a successful adoption, and by remaining available to stabilize situations when an issue arises. In FY18: 73 children were served by Wendy's Wonderful Kids and 15 children were adopted.



795

CHILDREN AND YOUTH
SERVED

**ILLINOIS
PLACEMENT &
RESIDENTIAL CARE**

ILLINOIS FOSTER CARE

Foster Care services provide safe, secure, and nurturing homes for children who have been separated from the care of their biological families. While many of these children are victims of neglect and abuse, they have great potential to thrive in a nurturing environment. Collaboratively, foster families and One Hope United provide safe homes for these vulnerable children and youth and provide the appropriate level of care based on the children's/youth's individual needs. One Hope United provides services to the biological parents as they work to resolve the issues that led to the families need for out of home care. Additionally, One Hope United recruits, trains, and licenses homes of individuals wishing to become foster parents.

When a child is placed outside of their home into foster care, reunification with their family is the desired outcome and effort focuses on returning the child home as soon as is safely possible. If a child cannot return to their family of origin efforts turn to finding another legally permanent family for the child. Other permanent families may include relatives or other individuals who become legal guardians or adoptive parents.

Relative and Traditional Foster Care – Children are placed with a relative in order to lessen the traumatic impact of leaving their home. One Hope United works with the relative caregivers to become licensed foster parents and provides them with the training, support, and services they need while caring for the children of an extended family member. When a relative placement is not a viable option for a child or sibling group, the child is placed with a licensed foster family in or near their home community whenever possible. Traditional foster caregivers are families from the community that open their heart and home to comfort children who require out of home placement. One Hope United operates Relative and Traditional Foster Care in Charleston, Chicago, Joliet, and Lake Villa, Illinois.

Specialized Foster Care – Some foster children have special needs that extend beyond common emotional or behavioral issues. Foster children who have suffered severe trauma, have extreme behavioral, or severe medical issues require specialized care. More importantly, foster families coping with these children need intensive support. The One Hope United program provides services and support for physically, behaviorally and emotionally challenged children and the foster families caring for them. The program works toward permanency by providing intensive case management and comprehensive mental health services along with medical, dental, optometric, developmental, and educational services specific to the child's needs. Specialized Foster Care services are provided in Charleston, Illinois

618 CHILDREN AND YOUTH SERVED

CLIENT SATISFACTION

4.43/5.00 Overall Client Satisfaction (a 2.78% increase from FY17). A total of 110 surveys were returned. ***"Time and time again we have had employees not directly involved with our case step in and help us get information and resources we need. Staff have made life long impact on our kids and us. Staff have gone way above and beyond to help us succeed as foster parents."*** – **Foster Parent**

KEY OUTCOMES

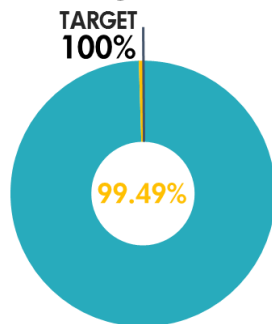
IN FY18, ONE HOPE UNITED – ILLINOIS FOSTER CARE ASSISTED WITH:

- ✓ RETURNING **71** CHILDREN HOME
- ✓ **32** ADOPTIONS
- ✓ **22** GUARDIANSHIPS

Foster Care measured 5 key outcomes in FY18. The first key outcome pertains to the safety of children while they are receiving services. Specifically, that the child is not the subject of substantiated abuse/neglect while under the supervision of One Hope United. The abuse/neglect can be at the hands of the child's biological parent, the substitute caregiver, or another individual that has contact with the child. Joliet, Lake Villa, and Specialized Foster Care achieved the target in FY18. Charleston and Chicago did not achieve the target due to substantiated cases of abuse/neglect. The second outcome measures whether the child is not the subject of substantiated abuse/neglect 6 months after being discharged (achieving permanency). Chicago, Joliet and Lake Villa achieved the target in FY18. (This outcome is not measured in Specialized Foster Care.)

No Substantiated Abuse/Neglect

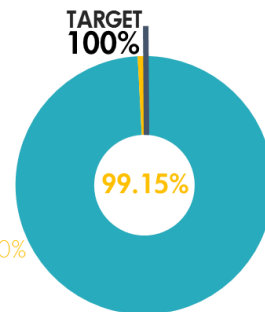
-0.32% from FY17



Charleston = 99.19%
Chicago = 99.18%
Joliet = 100%
Lake Villa = 100%
Specialized = 100%

No Substantiated Abuse/Neglect 6 Months Post Discharge

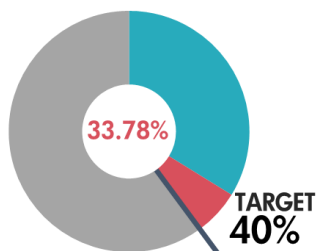
-0.85% from FY17



Charleston = 96.30%
Chicago = 100%
Joliet = 100%
Lake Villa = 100%

Permanency Rate

-1.74% from FY17



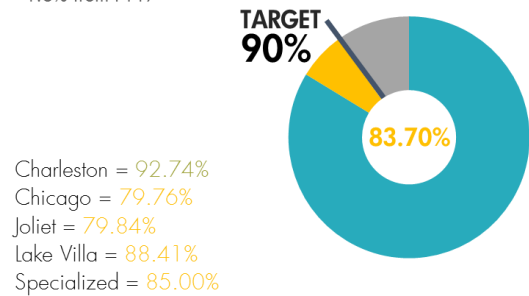
Charleston = 45.00%
Chicago = 28.05%
Joliet = 42.39%
Lake Villa = 17.78%
Specialized = 55.56%

A primary goal of Foster Care is for children to exit foster care by returning home or being legally placed in an adoptive home or a legal guardianship arrangement. In Illinois, permanency achievement is measured by determining One Hope United's starting caseload at the beginning of the fiscal year (July, 1) and seeing if 40% of children on the caseload achieve permanency. (Ex. If the starting caseload is 100, the goal would be for 40 to achieve permanency.) In FY18, this goal was achieved in three of five teams. Chicago and Lake Villa did not reach their targets.

The next key outcome pertains to the stability of a child's placement setting. One Hope United makes every effort to ensure that the number of moves from one foster home to another is limited, but there are times when a placement change is in the child's best interest (i.e. if a foster parent can no longer attend to the needs of a child or if the child is placed in an adoptive home). The placement stability metric in Illinois measures that a child is placed with less than 2 paid providers over a 12 month period. This metric does not take into account placement changes that are in the child's best interest. Charleston achieved the target in FY18. All other teams were below the target in FY18.

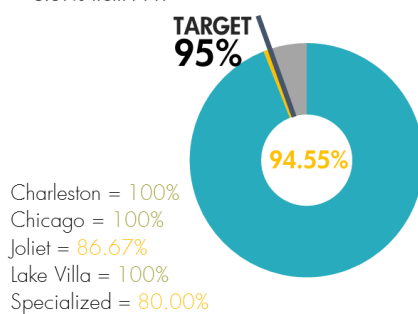
Children are Placed with less than 2 Paid Providers over a 12 Month Period

-1.6% from FY17



Children Remain Reunified for 6 Months

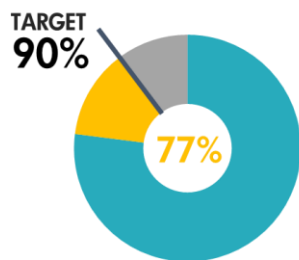
-3.89% from FY17



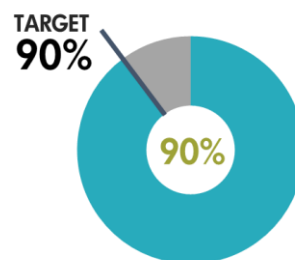
The final key outcome measures whether children who are returned home, remain re-unified with their families without re-entry into Foster Care. This is measured 6 months after returning home. All children who returned home in Charleston, Chicago, and Lake Villa remained reunified with their families. In Joliet, there were 2 children who re-entered the foster care system. In Specialized Foster Care there was 1 child who re-entered the foster care system.

RECORD REVIEW

Overall, Illinois Foster Care achieved a **77%** on their Record Review and Licensing achieved a **90%** on their Record Review.



**Foster Care
Record Review**



**Licensing
Record Review**

FOSTER CARE & SPECIALIZED FOSTER CARE COUNSELING

One Hope United's Foster Care and Specialized Foster Care Counseling services provide a strengths-based approach to improve the symptoms for which the client was referred. One Hope United staff members encourage families to identify and solve problems using the internal strengths of each person as well as available support systems within their communities. Services offered include: individual counseling/therapeutic services for parents, children, and adolescents; counseling/therapeutic services for foster parents to provide support and guidance; family counseling/therapeutic services; group counseling/therapeutic services; and trauma focused services. Services are provided for children and families who receive services from OHU's Foster Care and Specialized Foster Care program in Charleston and Chicago, Illinois.

45 CLIENTS SERVED

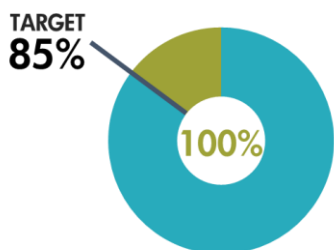
CLIENT SATISFACTION

4.87/5.00 Overall Client Satisfaction (a 4.28% increase from FY17). A total of 13 surveys were returned. *"Our therapist has played a pivotal role in the success of our foster journey, our children who see her have made great strides. As a foster parent we have had tremendous success with One Hope's support."* – **Foster Parent**

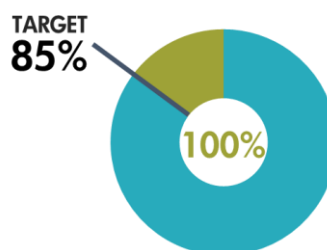
KEY OUTCOMES

Highlights: Foster Care and Specialized Foster Care Counseling measure 8 key outcomes at the time of case closing.

The first two outcomes measure whether adult clients have improved well-being as measured by the Adult Self Report. The Adult Self Report is part of the Achenbach System of Empirically Based Assessment. It is supported by extensive research on service needs and outcomes. Specifically, Foster Care Counseling uses this assessment to determine if there is a reduction (reduced T score) in the Internalizing (anxious/depressed, withdrawn/depressed, & somatic complaints) & Externalizing (rule breaking behavior & aggressive behavior) Problems scales. This is a new outcome in FY18 and the population reported below is low. Some challenges that have arisen with the new assessment is ensuring that closing (or post-test) assessments are collected.



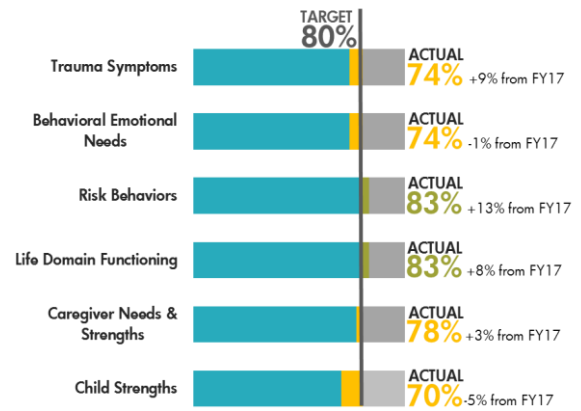
Adult Self Report: Internalizing Problems
New outcome in FY18



Adult Self Report: Externalizing Problems
New outcome in FY18

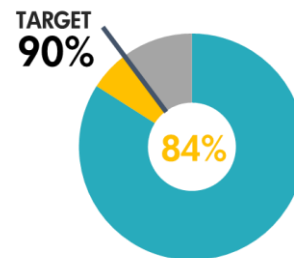
The final six key outcomes look at the well-being of children served by the program. The program uses the Child and Adolescent Needs and Strengths (CANS) assessment which is a multi-purpose tool developed for children's services to support decision making including level of care and service planning, to facilitate quality improvement initiatives, and to allow for the monitoring of outcomes of services. Specifically, the Foster Care Counseling programs use the assessment to determine the percentage of clients who improved (defined as a change in actionable items – items rated as a 2 or 3 changing to a rating of 0 or 1) in six domains: Trauma Symptoms; Behavioral Emotional Needs; Risk Behaviors; Life Domain Functioning; Caregiver Needs & Strengths; and Child Strengths. Currently a workgroup is assessing how the CANS is being implemented throughout the organization in order to determine the current state of fidelity of the tool. When the CANS is used with fidelity it is a reliable tool to measure client progress. Additional training and support to staff to increase the levels of fidelity is an identified area of need.

CANS: Improvement



RECORD REVIEW

Overall, Foster Care and Specialized Foster Care Counseling achieved an **84%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

CENTRALIA RESIDENTIAL & GROUP HOME

There are times when maintaining a youth within a home setting is not possible. Adolescents who have experienced trauma can often have difficulty managing their emotions which can sometimes lead to unsafe behavior. When these issues are present, youth are often referred to a residential program where they receive constant supervision and individualized treatment to address their symptoms and build their capacity for growth and essential life skills. The Centralia Residential program serves males and females ranging in age from 12 to 18 who have moderate to severe emotional and behavioral disorders. The emphasis of treatment is always to assist youth in transitioning into a lower level of care such as returning to their biological home, a relative's home, a foster home, group home, or a transitional living program.

Additionally, One Hope United offers a Group Home placement for girls on the Centralia campus. Group Home care is focused on both the mental health treatment and stabilization of youth, but with an emphasis on preparation for adult living. The focus of care is often on self-care, home maintenance, employment and advanced education. Youth in high school are supported in completing their diploma. Older youth can attend college and all are encouraged to find meaningful employment. Family relationships are supported and encouraged, as are other healthy and meaningful relationships.

The treatment approach of the Centralia Campus is youth-centered, family-focused, and the goal is to work to teach and empower residents and families to solve their own problems whenever possible. The program is located in Centralia, Illinois.

60 YOUTH SERVED

CLIENT SATISFACTION

3.65/5.00 Overall Client Satisfaction (a 2.93% decrease from FY17). A total of 28 surveys were returned. *"They do a fantastic job of meeting our needs and have made great improvements with our needs."* – Caregiver

IN FY18, CENTRALIA RESIDENTIAL ASSISTED WITH:

- ✓ RETURNING 4 YOUTH HOME
- ✓ PLACING:
 - 2 YOUTH IN FOSTER HOMES
 - 1 YOUTH w/ a RELATIVE CAREGIVER
 - 4 YOUTH IN GROUP HOMES
 - 3 YOUTH IN TRANSITIONAL LIVING PROGRAMS

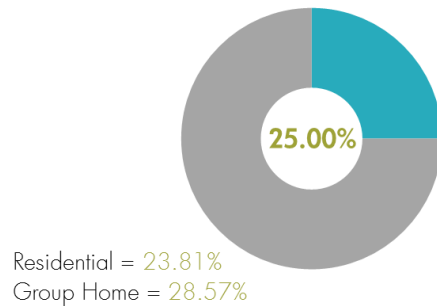
KEY OUTCOMES

In FY18, Centralia Residential and Group Home measured 2 key outcomes.

The first key outcome looks at positive discharges (discharges to a lower level of care). Positive discharges include a youth returning to their biological home, a relative's home, a foster home, group home, or a transitional living program. Specifically the outcome measures whether positive discharges are sustained for at least 90 days. It is calculated as a rate, so it takes into account all youth served by the program, not just the discharged youth. In FY18, there were 14 positive discharges, and all 14 were sustained for at least 90 days. (The rate is determined by dividing 14 by the number of youth served, which was 56³, and then multiplying by 100.) Both Centralia Residential and the Group Home exceeded their targets in FY18.

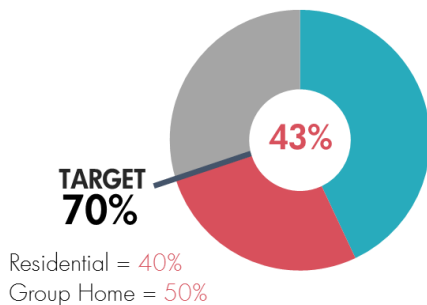
Sustained Favorable Discharge Rate

-4.21% from FY17



Youth will be Discharged within 12 Months

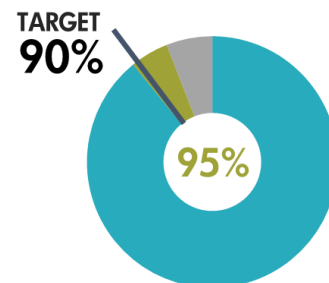
-4% from FY17



The final key outcome pertains to the length of time a youth resides on campus. This measure looks at whether youth leave the program to a lower level of care within 12 months of their admission date. This is an outcome that is challenging to meet. Oftentimes clients have achieved their treatment plan goals and are ready to move to a lower level of care; however, they do not have a placement to go to (i.e. they are not able to return home and there is not a less restrictive placement available).

RECORD REVIEW

Overall, Centralia Residential and Group Home achieved a **95%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Residential = 94%
Group Home = 97%

Record Review

³ There were 4 additional clients served by the Centralia Residential program that are not included in the outcome because they are not DCFS client, but instead are clients from the Department of Juvenile Justice.

CARE RESIDENTIAL

There are times when maintaining a youth within a home setting is not possible. Children and adolescents who have experienced trauma can often have difficulty managing their emotions which can sometimes lead to unsafe behavior. When these issues are present, youth are often referred to a residential program where they receive constant supervision and individualized treatment to address their symptoms and build their capacity for growth and essential life skills. The CARE Residential Program serves males ranging in age from 8 to 18. The program uses a trauma-informed approach to help youth heal from past trauma and increase their capacity to engage in healthy, trusting relationships with adults and caregivers. Clients are provided with a safe, structured environment and individualized treatment to help them gain important life skills. They learn to deal with their emotions in a healthy way and increase their motivation to engage in positive decision making. The CARE Residential Program builds on youth strengths and provides opportunities to increase their competencies. The CARE Residential Program utilizes an evidenced-based program called the CARE model. Cornell University's Children and Residential Experiences (CARE): Creating Conditions for Change is designed to support safe environments, strong programmatic elements and a wide-variety of treatment programs and interventions that are trauma-sensitive and developmentally appropriate. The CARE model focuses on engaging youth in treatment by building relationships and connections, and building their individual strengths. The emphasis of treatment is always to assist youth in transitioning into a lower level of care such as returning to their biological home, a foster home, group home, or a transitional living program. The program is located in Lake Villa, Illinois.

25 YOUTH SERVED

CLIENT SATISFACTION

4.04/5.00 Overall Client Satisfaction (an 8.89% increase from FY17). A total of 23 surveys were returned.

IN FY18, CARE RESIDENTIAL ASSISTED WITH:

- ✓ **RETURNING 3 YOUTH HOME**
- ✓ **PLACING:**
 - **1 YOUTH IN A FOSTER HOME**
 - **2 YOUTH IN GROUP HOMES**
 - **4 YOUTH IN TRANSITIONAL LIVING PROGRAMS**
 - **1 YOUTH IN THE HOME OF FICTIVE KINSHIP**

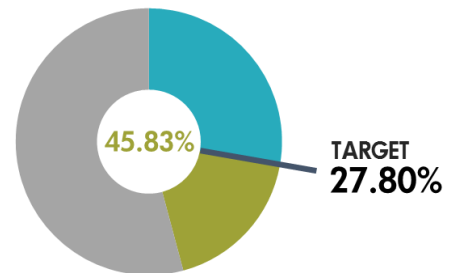
KEY OUTCOMES

In FY18, CARE Residential measured 2 key outcomes.

The first key outcome looks at positive discharges (discharges to a lower level of care). Positive discharges include a youth returning to their biological home, a relative's home, a foster home, group home, or a transitional living program. Specifically the outcome measures whether positive discharges are sustained for at least 90 days. It is calculated as a rate, so it takes into account all youth served by the program, not just the discharged youth. In FY18, there were 11 positive discharges, and all 11 were sustained for at least 90 days. (The rate is determined by dividing 11 by the number of youth served, which was 24⁴, and then multiplying by 100.)

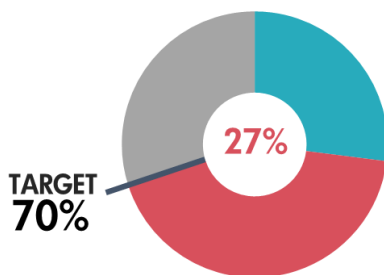
Sustained Favorable Discharge Rate

+11.35% from FY17



Youth will be Discharged within 12 Months

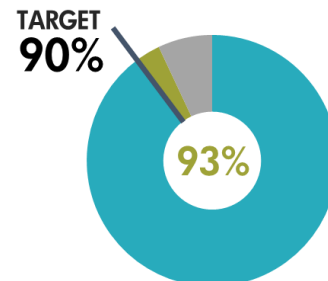
+10% from FY17



The final key outcome pertains to the length of time a youth resides on campus. This measure looks at whether youth leave the program to a lower level of care within 12 months of their admission date. This is an outcome that is challenging to meet. Oftentimes clients have achieved their treatment plan goals and are ready to move to a lower level of care; however, they do not have a placement to go to (i.e. they are not able to return home and there is not a foster home or group home placement available).

RECORD REVIEW

Overall, the CARE Residential achieved a **93%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

⁴ There was 1 additional clients served by the CARE Residential program that is not included in the outcome because they are not a DCFS client.

CARE THERAPEUTIC DAY SCHOOL

The CARE Therapeutic Day School provides a unique learning experience for students who may have difficulties learning in traditional school settings. The Day School offers a trauma-informed approach with students in classrooms with low teacher to student ratios. CARE students are able to develop positive relationships with staff members—thereby increasing their abilities to grow academically, socially and emotionally in a safe and supportive educational environment. The model includes: individual and small group teaching; weekly individual and group counseling sessions; and weekly therapeutic groups focused on a variety of social-emotional, health, and life-skill domains. Many of the youth served are involved in the legal system, use alcohol or drugs, struggle to fit in with their peers, and have trouble with authority figures. Many are dealing with significant family challenges such as divorce or the death of a parent and cannot manage their emotions or behavior without significant support. The school helps students set goals—and meet them. Most students are ready to begin transitioning to a less restrictive academic setting within two semesters. One Hope United works closely with the referring school districts to assess progress and determine the best transitional plan for each student. The program is located in Lake Villa, Illinois.

25 STUDENTS SERVED

CLIENT SATISFACTION

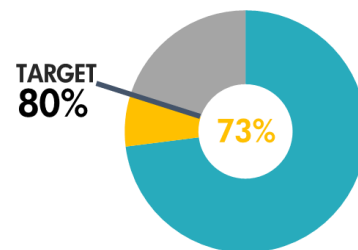
4.01/5.00 Overall Client Satisfaction (a 1.96% decrease from FY17). A total of 13 surveys were returned. *“My life and my child’s life has become less stressful by a great percentage since he began school at OHU. The staff and program are a perfect fit.” – Parent*

KEY OUTCOMES

In FY18, the CARE Therapeutic Day School measured 4 key outcomes.

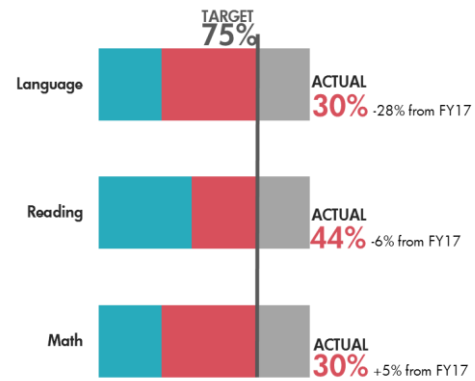
The first key outcome measures whether students are enrolled in school, a vocational program, or employed 6 months after being discharged from the CARE Therapeutic Day School. This outcome was not achieved in FY18. There were three youth that were discharged who afterwards were sent to juvenile detention.

Students are Enrolled in School, a Vocational Program, or Employed 6 Months Post Discharge
-27% from FY17



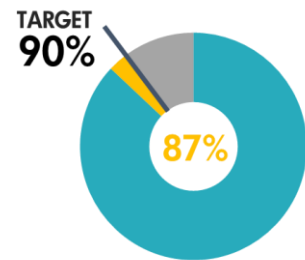
The remaining three outcomes measure academic progress of the students who attend the CARE Therapeutic Day School. The Day School uses an assessment called the Measures of Academic Progress (MAP). MAP assessments are computer adaptive achievement tests in Mathematics, Language, and Reading. The computer adjusts the difficulty of the questions so that each student takes a unique test. The difficulty of each question is based on how well the student has answered previous questions. The outcome measures whether students at the Day School experience academic growth in Language, Reading, and Math. A student must have 3 testing points (a complete academic year) in order to be included in the outcome. The target was not achieved in any of the 3 academic areas in FY18. The transient nature of the students who attend Day School makes it difficult to show long-term growth. The school is focusing on increasing academic rigor at the school.

MAP: Academic Growth



RECORD REVIEW

Overall, the CARE Day School achieved an **87%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review

REBOUND

Rebound is a 24-hour, community-based transitional living facility serving males ages 17 – 20. Rebound works with the youth on employment skills, educational completion, money management, and other life skills needed to become successful adults in the community. Counselors and peers reinforce newly learned acceptable behaviors, while helping clients recognize and deal with unacceptable behaviors. Rebound participants develop their own individual transitional living plans with an ultimate goal of achieving independence by age 21. Services provided include: individual and family counseling; substance abuse treatment; psychiatric assessment; GED preparation; assistance in college enrollment; assistance in seeking employment; budgeting and money management training; conflict resolution; and anger management. The program is located in Waukegan, Illinois.

22 YOUNG ADULTS SERVED

CLIENT SATISFACTION

3.90/5.00 Overall Client Satisfaction (no comparative data from FY17). A total of 8 surveys were returned.

IN FY18, REBOUND ASSISTED WITH:

- ✓ **2** CLIENTS LEAVING THE PROGRAM TO LIVE WITH FAMILY MEMBERS
- ✓ **1** CLIENT LEAVING THE PROGRAM TO LIVE IN AN APARTMENT
- ✓ **2** CLIENTS LEAVING THE PROGRAM TO LIVE WITH APPROVED NON-FAMILY MEMBERS

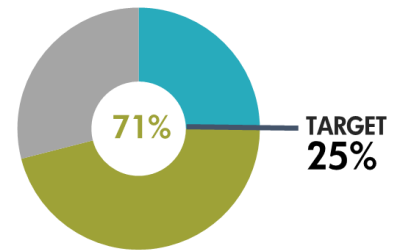
KEY OUTCOMES

Rebound measures 2 key outcomes at the time of case closure.

The first key outcome measures whether clients served are discharged into the community in a planned manner. This means that a client is discharged to an approved location which can include: residing in an independent living arrangement; living with an approved family member; living with an approved non-family member; residing in their own home; or joining the military. Being discharged in an unplanned manner would mean that a client left the program and did not return, was arrested and is now in the custody of the Department of Corrections or the Department of Juvenile Justice, or is living with an un-approved family member or non-family member. This measure exceeded its target in FY18.

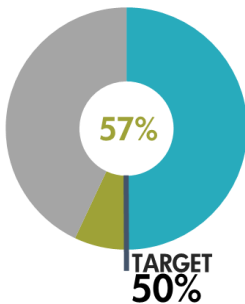
Discharged in a Planned Manner

+21% from FY17



Employed or Participated in Community Service

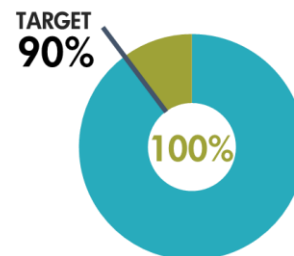
+32% from FY17



The final key outcome measures whether clients were employed or participated in community service while they were enrolled in the program. This measure was achieved in FY18 and significant progress was made from FY17.

RECORD REVIEW

Overall, Rebound achieved a **100%** on their Record Review which checks for the completion of required forms and assesses the quality of service delivery.



Record Review