



# **Performance and Quality Improvement -Quarterly Report-**

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*2020 Quarter 3*

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## Section One – Introduction

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Welcome to our first PQI Quarterly Report! This report is part of YouthCare's PQI (Performance and Quality Improvement) Program that we are piloting in Fall 2020. Our goal is to regularly use data to promote efficient, effective service delivery and achievement of the organization's mission and strategic goals and ultimately, to provide the most excellent services we can to young people. Check out YouthCare's **DRAFT PQI Plan** for more information.

Moving forward, a PQI Report will be compiled and shared quarterly by YouthCare's PQI Team. This report is intended for all stakeholders, including clients, staff, community members, board members, funders and any individual who is interested in the great work that we do. In this report, we will provide information on both our accomplishments and opportunities for improvement. YouthCare strives to model a growth mindset, seeking to learn from our experiences and grow. As you read through this report, when you see progress that is not up to our expectations, there will always be a plan for how to address the challenge. It is important that we acknowledge and take ownership of our shortcomings and work to improve them.

This is the beginning of making PQI an integral part of our organization. We hope this report demonstrates our commitment to the clients we serve, our transparency for when things don't go as well as planned, and desire to receive feedback from others. If you have ideas on how this document can be improved or feedback about this report, please contact us at [PQI@youthcare.org](mailto:PQI@youthcare.org).

In appreciation & collaboration,

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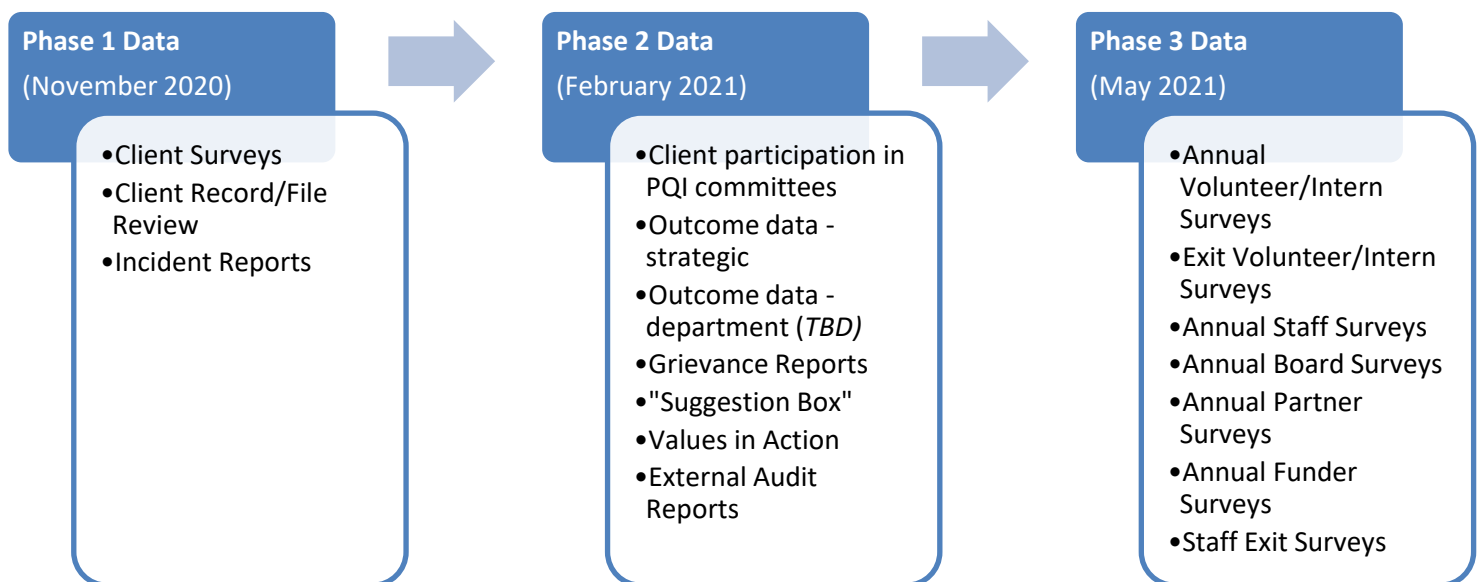
## Section 2 – Indicators of Quality

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As YouthCare builds out our PQI Program, there will be several indicators of quality that will be collected. In our first report, there are three areas where YouthCare collected data, analyzed and aggregated that data, and summarized results. Included in this report are graphs and data along with themes for where we are successful and areas for improvement. The three areas reviewed for this report and in Q3 of 2020 are:

- Client Satisfaction & Experience Surveys
- Incident Reports
- Client File Reviews

Over time, YouthCare will continue to add to and refine the data we collect from both services and administrative practices. Below is a chart to provide an example of some of the indicators that may be added over the next year. The indicators will be decided on in collaboration with YouthCare staff across departments and positions to ensure we're collecting and reviewing what is most impactful to our young people. The Director of PQI will work with Department PQI Committees and Leadership to define the indicators and different measures that each program/department collects. These will be finalized by Q1 2021.

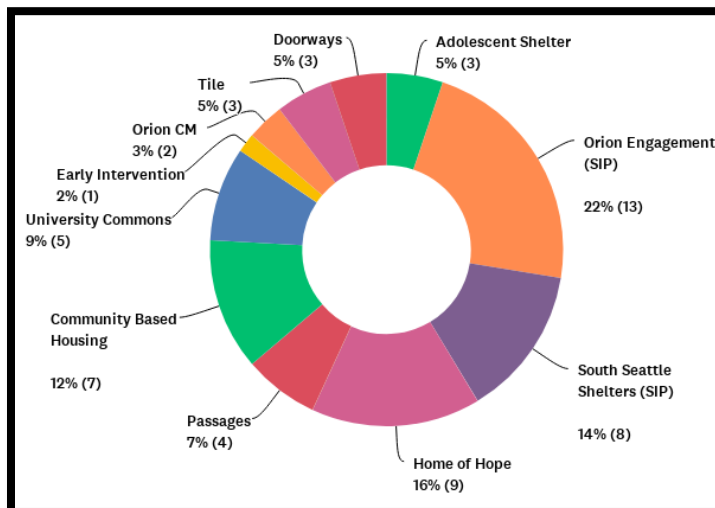


## Section Three – Client Satisfaction & Experience Surveys

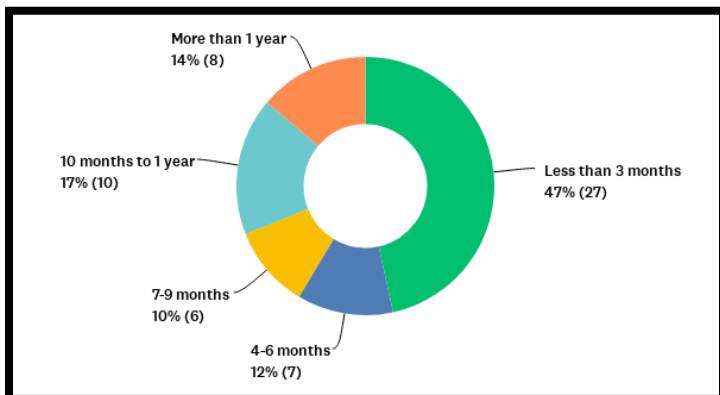
During the month of October, we piloted our new Client Satisfaction & Experience Survey across the agency. This survey is a way to obtain accurate information regarding the experience and level of satisfaction from the participants of YouthCare’s services to identify trends on how services are provided and make program and organization improvements, as necessary. Client satisfaction is critical to the success of YouthCare’s mission.

During this pilot, 62 clients participated in the survey across multiple YouthCare sites. The survey was anonymous and accessible either through a SurveyMonkey link or a paper copy in both English & Spanish. Of the 62 participants, 4 completed the survey in Spanish. Some sites/services were excluded due to length of time clients had been enrolled and/or incidents occurring in program. Some sites were not able to complete surveys with their clients within the time frame. We are setting an ambitious goal for every service/site to have 80% of their clients complete the survey over the next quarter.

**Q: Which program asked you to complete this survey?**



**Q: How long have you been enrolled in this program?**



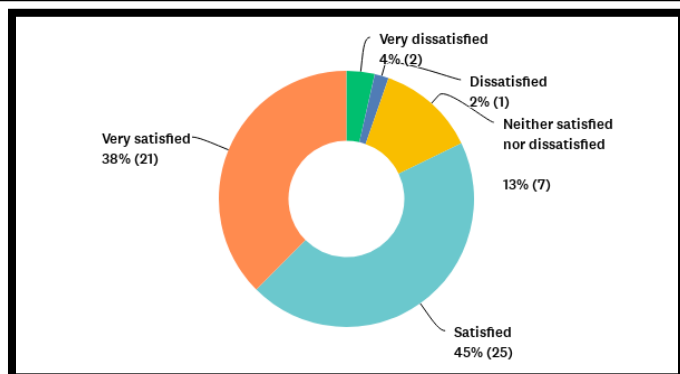
Surveys will continue to be administered in 2021 every quarter and once per cohort for Employment Programs. The graph to the left depicts the length of time a participant was enrolled in the program they completed the survey for. You can see that most clients were enrolled less than 6 months, but we do see a range in length of time.

The graph below shows how clients rated their overall satisfaction in their program. We see here that 83% selected Satisfied or Very Satisfied. Staff

are doing a phenomenal job supporting young people and this is a trend we’ll see throughout the survey.

The survey is divided into 2 sections: (1) Categories of Experience; and (2) Service Delivery. Each section uses a different scale and have different targets.

**Q: Please rate your overall satisfaction with this program**



## Section 1: Categories of Experience

The 19 questions in this section were grouped into 4 different categories of experience:

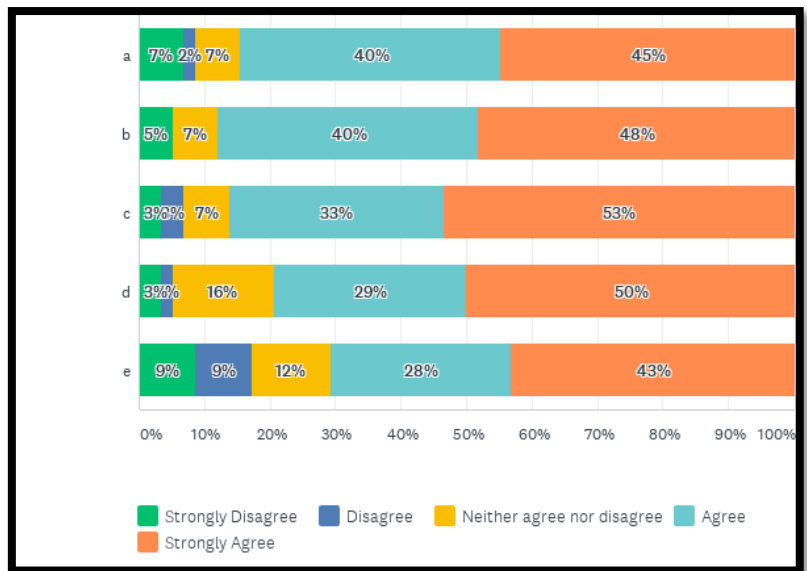
1. Intake & Assessment
2. Program Safety & Support
3. Voice & Choice
4. Case Management & Goal Planning

Participants were asked *“How strongly do you agree or disagree with each statement?”* and provided their rating on a 5-Point Scale from Strongly Disagree to Strongly Agree. Each question received a weighted score from 1-5, and our goal is to score a minimum average of 4.25.

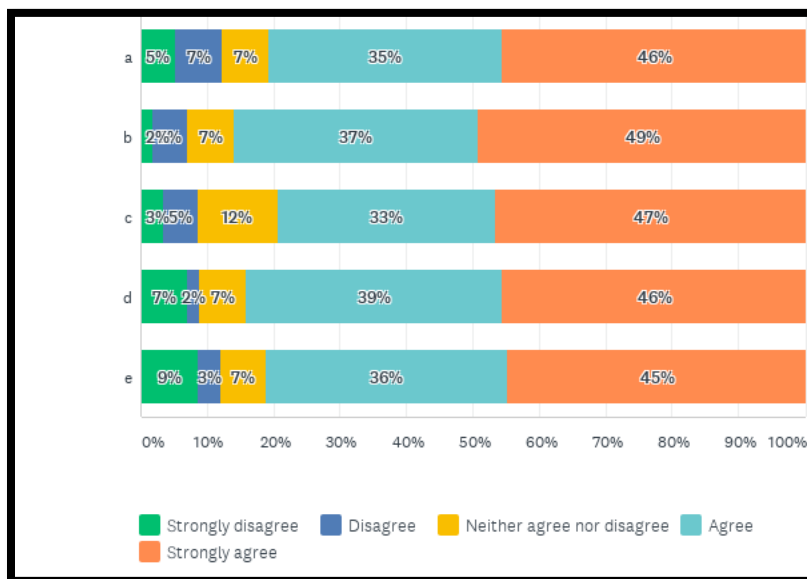
### Questions:

- a) The purpose behind intake and assessment questions were explained to me.
- b) Staff asked me the intake or assessment questions in a confidential place.
- c) I can refuse to answer any intake or assessment questions I feel uncomfortable answering.
- d) Staff and volunteers take steps to protect my confidentiality and the confidentiality of others.
- e) I know how to file a complaint or grievance if I have a problem with the program, staff, or volunteers.

### INTAKE & ASSESSMENT



### PROGRAM SAFETY & SUPPORT



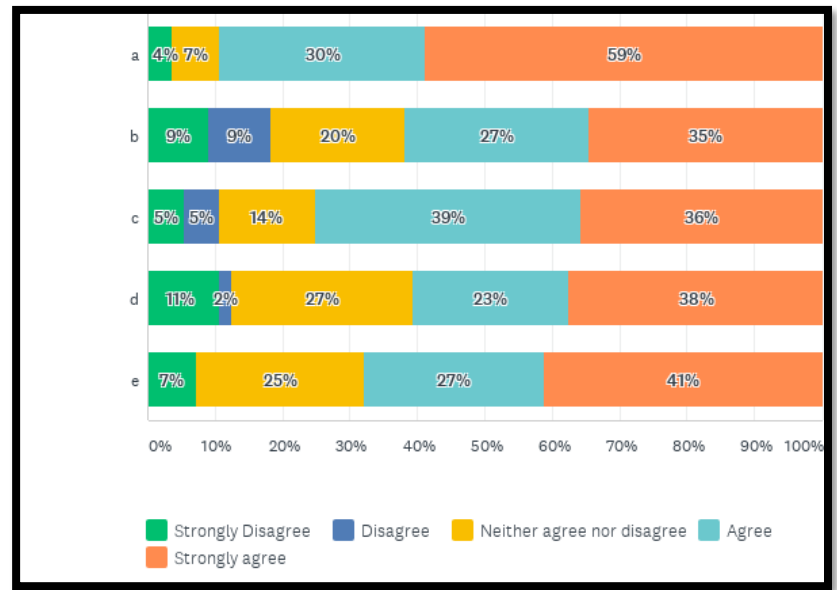
### Questions:

- a) I feel safe while accessing services and participating in this program.
- b) Staff helped me understand my rights as a program participant.
- c) Staff helped me understand the rules of the program, why they have them, and consequences of breaking rules.
- d) Staff treat me with respect (i.e. respecting my boundaries, not making insulting or humiliating remarks, etc.)
- e) I feel okay letting staff know if I have a problem or feel unsafe around others.

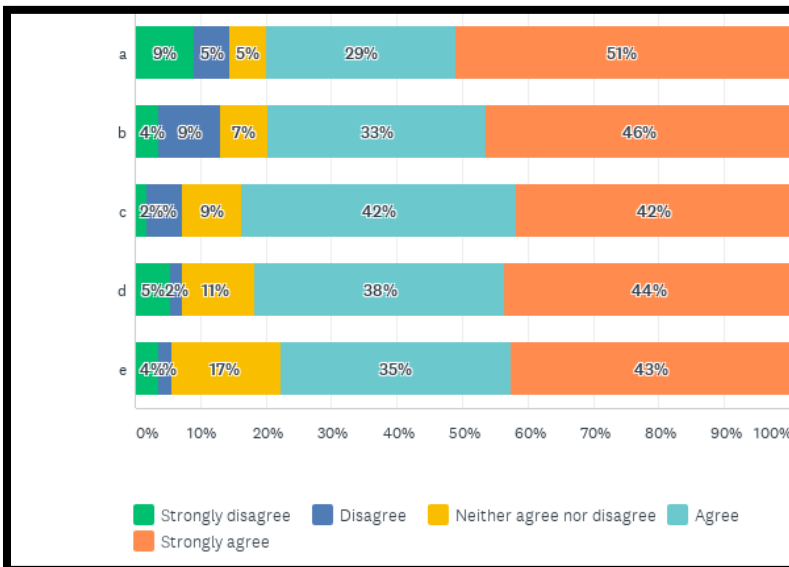
### Questions:

- Staff consistently use the name and pronouns I use (ex. she/her, they/them, he/him, etc.).
- I've been asked to be involved in program decision making (i.e. advisory group, input on program activities, etc.).
- I have seen examples where youth input has led to positive change.
- This program helped me explore my interests, talents, and abilities.
- I get to express my culture, religion, heritage, and/or identity while participating in this program.

### VOICE & CHOICE



### CASE MANAGEMENT & GOAL PLANNING



### Questions:

- I have a case manager or staff person I can meet with on a regular basis.
- I talk about what I want during case management and/or program activities.
- I participate in developing my service plan and setting my own goals.
- I feel like the staff in this program care about me, and my needs matter to them.
- This program has helped me with my next steps towards achieving my goals.

### Section 1 Summary of Strengths: Items that scored > 4.25

- Q: I can refuse to answer any intake or assessment questions I feel uncomfortable answering.
  - Score = 4.29 (*Intake & Assessment*)
- Q: Staff asked me the intake or assessment questions in a confidential place.
  - Score = 4.26 (*Intake & Assessment*)
- Q: Staff helped me understand my rights as a program participant.
  - Score = 4.26 (*Program Safety & Support*)
- Q: Staff consistently use the name and pronouns I use (e. she/her, they/them, he/him, etc.)
  - Score = 4.41 (*Voice & Choice*)

### Section 1 Areas for Improvement: Items that scored < 4.00

- Q: I've been asked to be involved in program decision making (i.e. advisory group, input on program activities, etc.).
  - Score = 3.69 (*Voice & Choice*)
- Q: This program helped me explore my interests, talents, and abilities.
  - Score = 3.75 (*Voice & Choice*)
- Q: I know how to file a complaint or grievance if I have a problem with the program, staff, or volunteers.
  - Score 3.88 (*Intake & Assessment*)
- Q: I have seen examples where youth input has led to positive change.
  - Score = 3.95 (*Voice & Choice*)
- Q: I get to express my culture, religion, heritage, and/or identity while participating in this program.
  - Score = 3.95 (*Voice & Choice*)

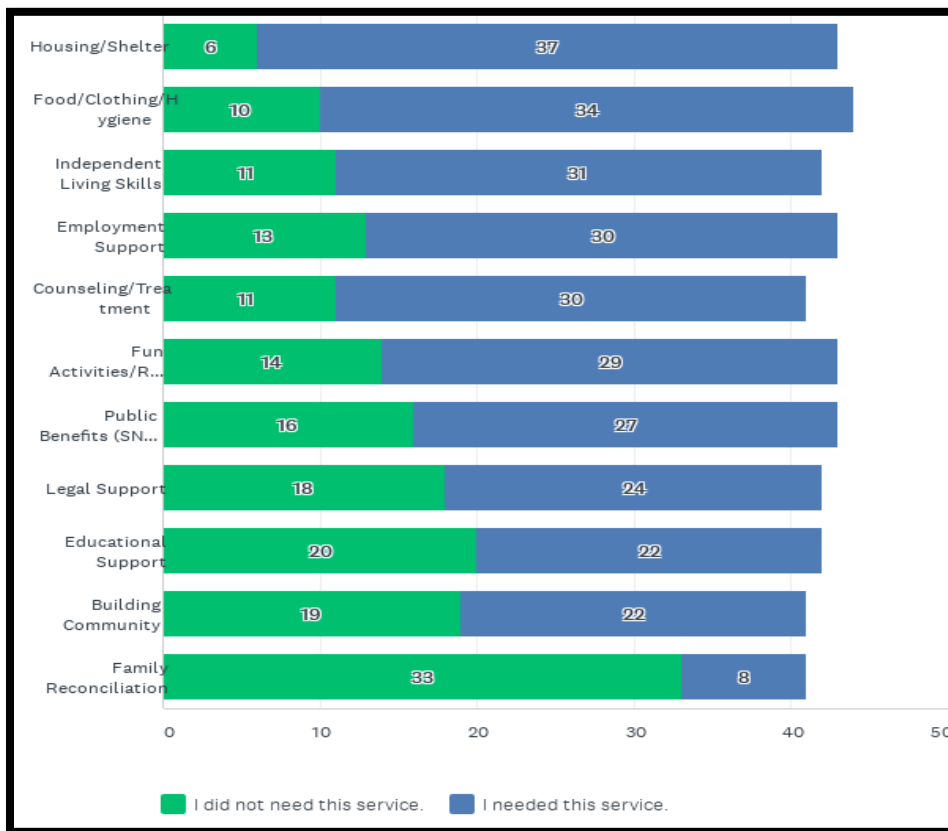
Many of the areas for improvement fall in the Voice & Choice category. These areas that scored below a 4.00 will be a focus of improvement for the Improvement Plans being created this quarter and we'll work to see an improvement in score for these items next quarter.

### **Section 2 – Service Delivery**

In this section, participants were asked to review a list of service options and first mark if they needed the service or did not need the service, then mark their level of satisfaction.

| 24. For each service, please check the box to indicate if you <b>needed</b> that service when you entered this program.<br>For services that you <b>needed</b> , check the box to indicate your <b>level of satisfaction</b> with the service(s) you received. |                          |                                   |   |                                    |                          |
|--|--------------------------|-----------------------------------|---|------------------------------------|--------------------------|
| I did not need this.   | I needed this.           | Type of Service                   | Dissatisfied/<br>I did not receive this | Neither satisfied nor dissatisfied | Satisfied                |
| <input type="checkbox"/>   | <input type="checkbox"/> | Food/Clothing/Hygiene             | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |
| <input type="checkbox"/>   | <input type="checkbox"/> | Family Reconciliation             | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |
| <input type="checkbox"/>   | <input type="checkbox"/> | Housing/Shelter                   | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |
| <input type="checkbox"/>   | <input type="checkbox"/> | Employment Support                | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |
| <input type="checkbox"/>   | <input type="checkbox"/> | Educational Support               | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |
| <input type="checkbox"/>   | <input type="checkbox"/> | Counseling/Treatment              | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |
| <input type="checkbox"/>   | <input type="checkbox"/> | Independent Living Skills         | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |
| <input type="checkbox"/>   | <input type="checkbox"/> | Fun Activities/Recreation         | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |
| <input type="checkbox"/>   | <input type="checkbox"/> | Legal Support                     | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |
| <input type="checkbox"/>   | <input type="checkbox"/> | Building Community                | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |
| <input type="checkbox"/>   | <input type="checkbox"/> | Public Benefits (SNAP, TANF, SSI) | <input type="checkbox"/>                | <input type="checkbox"/>           | <input type="checkbox"/> |

Assessing this section for successes and improvements is not as simple as reviewing the rated score for each item. We also compare the level of need with the level of satisfaction. Our goal is to have items most needed rate higher in satisfaction and the analysis of this section will continue to be refined in piloting our PQI Plan.



**Q: For each service, please check the box to indicate if you needed this service when you entered this program.**

For this question, the graph to the left is arranged from most needed service at the top, to least needed service at the bottom.

**Q: For each service you needed, please let us know how satisfied you were with this service.**

For this question, the graph below is arranged from most satisfied to least satisfied by weighted score (1-3)

### Strengths:

#### Housing/Shelter

- 37/44 needed, 2.34 weighted score
- 1<sup>st</sup> highest need, 2<sup>nd</sup> highest in satisfaction

#### Food/Clothing/Hygiene

- 34/44 needed, 2.88 weighted score
- 2<sup>nd</sup> highest need, 1<sup>st</sup> highest in satisfaction

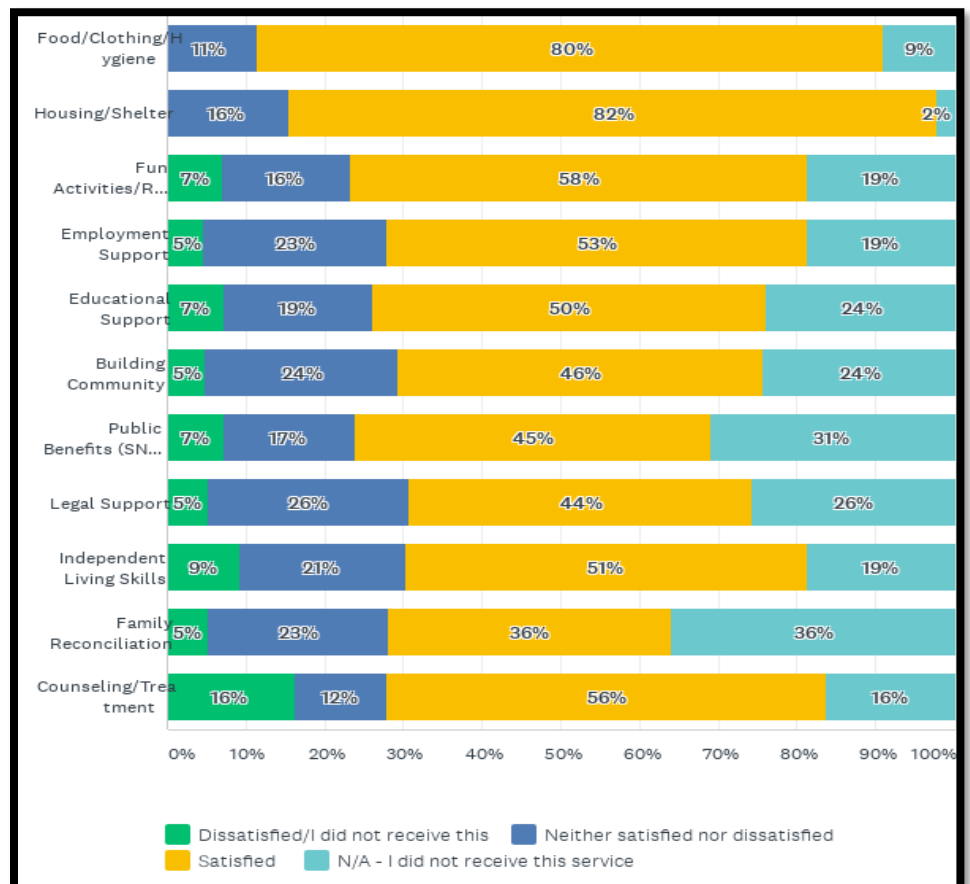
### Improvement:

#### Independent Living Skills

- 31/44 needed, 2.51 weighted score
- 3<sup>rd</sup> highest need, 3<sup>rd</sup> to last in satisfaction

#### Counseling/Treatment

- 30/44 needed, 2.47 weighted score
- 5<sup>th</sup> highest need, last in satisfaction





Finally, we asked 2 questions for participants to provide narratives. We are so appreciative for the very specific feedback provided by participants. Some of the most valuable information we get is in the form of the comments in the narrative section. For this report, we decided to include all the responses from participants instead of just a sampling (any potentially identifying information has been removed).

**Q: What would you like to see changed to make this program better?**

- *"I'd like to see some staff focus less on enforcing every little rule, and more on giving us a break"*
- *"staff that are easier to talk to"*
- *"better conflict resolution time"*
- *"more interaction with each client"*
- *"some staff needs more investment in the program. Security is not the best. Night staff operates like don't ask don't tell. I don't know who my case manager is and I've been here for a week now."*
- *"I would like for the staffs communication skills to be better and whoever is the director needs to learn how to reach out to people"*
- *"That the manager is willing to work with us cause the one before he didn't do his job at all was going to leave me at my house with nothing but I like my new manager she the best"*
- *"A lot of employees makes it difficult for everyone to remember specific needs/concerns for people and some days get very boring"*
- *"More consistency"*
- *"Later when coronavirus is less of a threat, maybe seeing how community takes place!"*
- *"I think I'm starting to see these changes now that I've been out of the program for awhile, but during my time, I would have liked to have seen regard for myself and other clients as adults, and not children...I've seen this in how long a number of staff members stay on or move to a different program...Also, for the love of god, make your employees more conscientious of other people...I should have filed a grievance then, but wasn't entirely sure how to do so"*
- *"I would like to see the program offer credit building resources and information about managing finances."*
- *"Let people stay for like 2 years almost so we could save more money and knowing that we got everything we need to be good on our own"*
- *"If we started a budget treatment for those employed in the House"*
- *"Give people to tools they need to learn how to budget, create goals, & set financial boundaries successfully."*
- *"I've seen this in how long a number of staff members stay on or move to a different program. I think if the company were run by the employees themselves and provide enough for themselves, there would not be a chase to whatever golden position they're hoping to land in. Corporate culture is not an effective solution to the problems of youth homelessness, hunger, or unemployment."*
- *"More black people"*
- *"A lot"*
- *"more access or location of new shelters down south near airport"*
- *"Everything is good. But growth will happen naturally."*
- *"To be honest nothing you guys are so good at what you do!"*
- *"Nothing. Give these people a raise."*
- *"Maybe a raise for those in direct contact with client"*
- *Proved records Amplitude Albuna Beats, quiet mornings, focused afternoons, free to study evenings, melting records, lo-fi cafe playlists for ambient lounge sounds, group cooking/resume sharing, inquire to local businesses for food ingredients, work opportunity sharing, sofas in commons*
- *"I would like to be able to have an overnight guest sometimes"*

In reviewing answers to the previous question, two themes emerged throughout the comments: (1) Relationship building/engagement with peers and staff and (2) Financial Literacy and/or skill building. These are two areas that we have seen impacted due to COVID-19 when a focus on the health and safety of our clients became a priority. These will be areas of focus in Improvement Plans for this quarter.

**Q: What is something you appreciate about this program?**

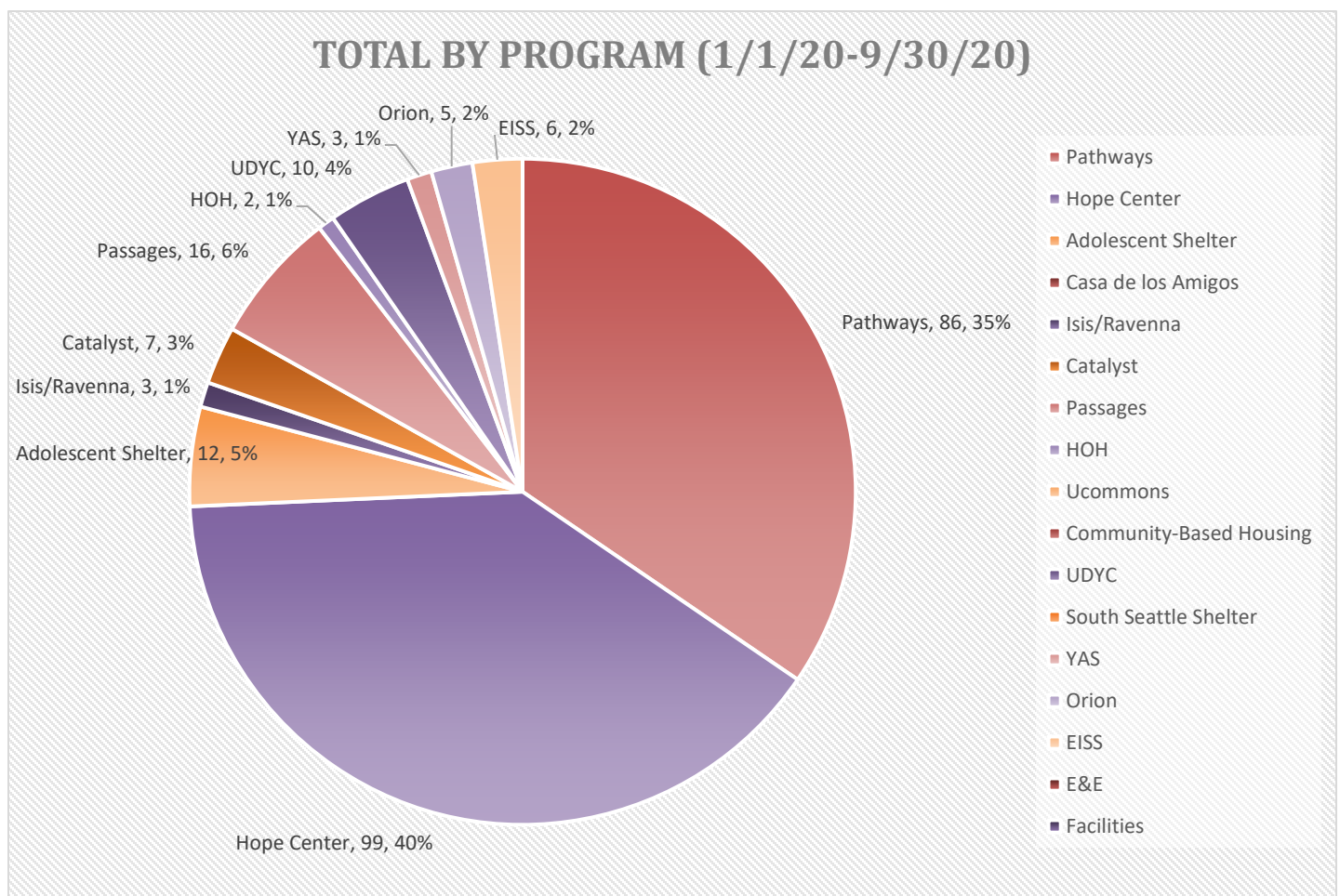
- *"Just appreciate the help i needed to get back on my feet and with the right people to do so."*
- *"It's cool and chill"*
- *"There is a lot of support and the program has great foundation"*
- *"\*inclusion\*"*
- *"I appreciate how caring and easy to talk to the staff are"*
- *"letting us spread our wings with our passions & business"*
- *"I appreciate that they gave me the opportunity to be in the program and helping me with my first apartment and housing."*
- *"Helping me get into my own place again"*
- *"Being able to stay with Orion has been tremendously helpful during this difficult time for my life and family. I'm thankful and confident for the community support, encouragement, and guidance from experienced local perspectives. Greatly thankful for food, shelter, and career development counseling."*
- *"This program helped me and my friend both get housing in a new city. I also met a lot of interesting and cool people."*
- *"I appreciated that I was able to stay in a private room that also shielded me from the elements. I appreciated that the Home of Hope took precautions when the COVID-19 pandemic hit."*
- *"that everyone is nice an always check up on each other and be there an help each other out"*
- *"Having a place to live "*
- *"some of the workers care "*
- *"That they help me get a house and that she is going to put me on with the best jobs out there so I can take care of my family ☺"*
- *"My case manager is very helpful and driven to actually help me. It's a good, reassuring feeling to know they are advocating for me!"*
- *"Everyone is so nice and considerate"*
- *"All the help and support"*
- *"you get to express your needs and staff does whatever they can to help"*
- *"I like how friendly the staff are"*
- *"I feel like it will help me and give me the support I need"*
- *"Being able to be creative with projects"*
- *"I appreciate that everyone is caring and helpful. I appreciate the support that is given."*
- *"That I have a roof over my head now and don't have to fear for my safety 24/7 anymore"*
- *"The staff"*
- *"the staff are very attentive to the needs of everyone"*
- *"independent and hands free but also helpful if you need it to be. Staff are understanding and helpful."*
- *"I appreciate the feeling of community that YouthCare provides. I feel like I have a voice here."*
- *"How open everyone is and how much respect they give you no matter the situation."*
- *"The supportive staff"*
- *"Having a place to live"*
- *"The fact that this program exists, mean's a lot, step by step I regret being in this position, but its perfect to get me out this position with preparation I'll achieve my goal."*

- *"We have a place to stay"*
- *"The people"*
- *"I like how friendly the staff are"*
- *"What I appreciate the most was the services provided by my case worker she was able to provide housing and employment support fairly quick and is the main reason for my satisfaction levels."*
- *"Very patient and understanding people"*

## Section Four – Incident Reports

YouthCare tracks Incident Reports to monitor our responses to crisis in ways that support the safety of our clients. Incident Reports (IRs) are to be completed when a significant event involving a client, a behavior out of the ordinary, and/or an event in the facility occurs. Any event or behavior that is considered dangerous, risky, or harmful to self or others would constitute an incident. In addition, any event or behavior that could be the result of supervision concerns or have the potential for media attention or public concern constitutes an incident report. Finally, any incident involving fire, fire alarms, or vehicle accidents must be documented on an Incident Report. Our goal is to review Incidents on a quarterly basis to (1) identify trends in type of incidents that are occurring and (2) assess the quality of the response including timelines, de-escalation and crisis response techniques, access to sufficient resources, and use of external agencies for support. Heightened scrutiny will be applied to situations where SPD was called to determine if that response was warranted and if their support resulted in increased safety for our clients.

This year we experienced unique challenges in tracking and documenting these incidents due to staffing turnover and COVID-19. During our collection of Incident Reports for 01/01/20-09/30/20, it became clear that not all Incident Reports were being saved and tracked in one space. Additionally, in our response to COVID-19, many staff were working remotely and there was a decreased ability to physically sign the Incident Report forms. In August, we updated the Incident Report form into a PDF to allow for digital signatures and created a shared folder on our X Drive for storage. However, it should be noted that the data that follows is an incomplete data set and both Casa de los Amigos and Community-Based Housing were excluded from the tracking process. A focus for improvement this quarter will be on improving our procedures.

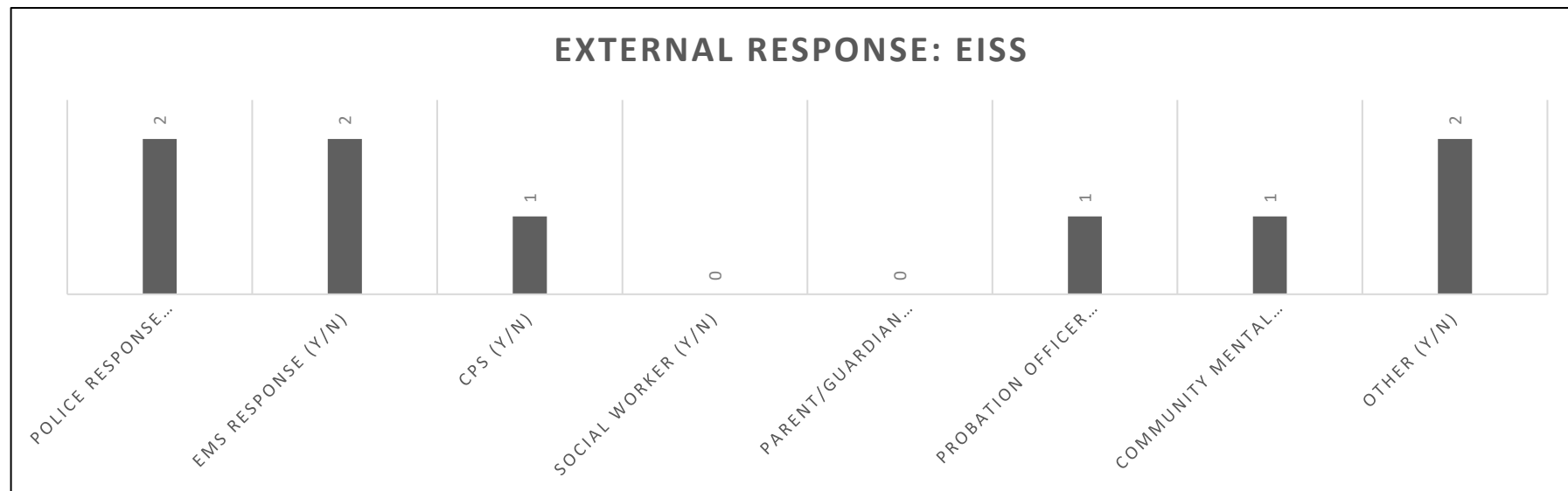
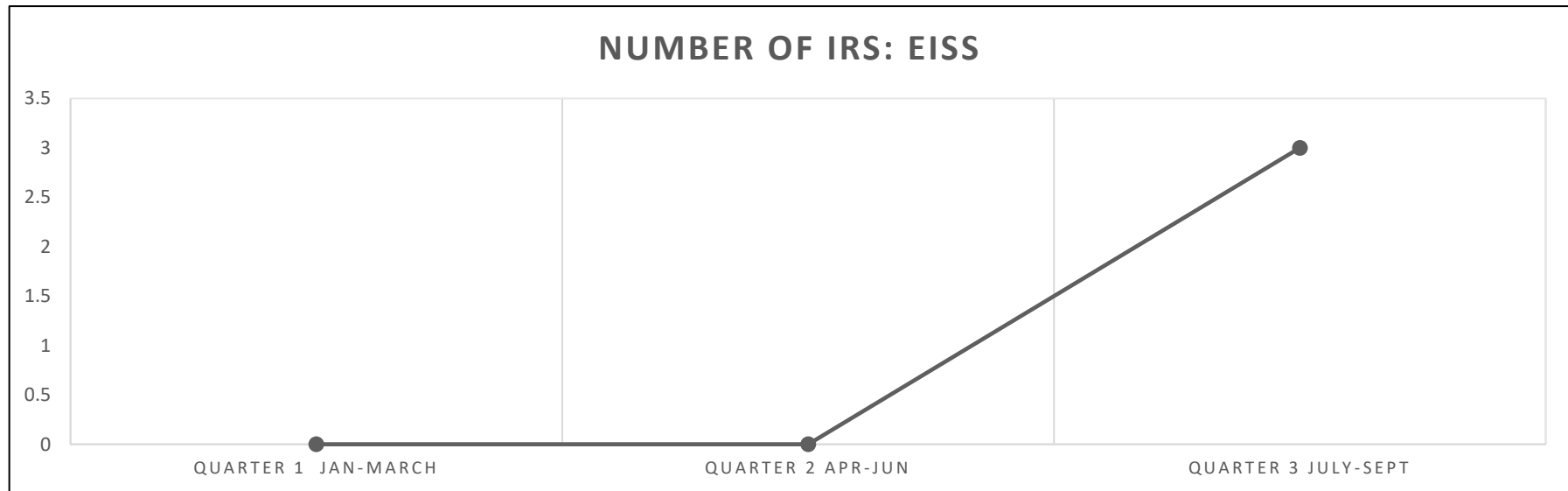


## 2020 Q1-Q3 Incident Reports Summary

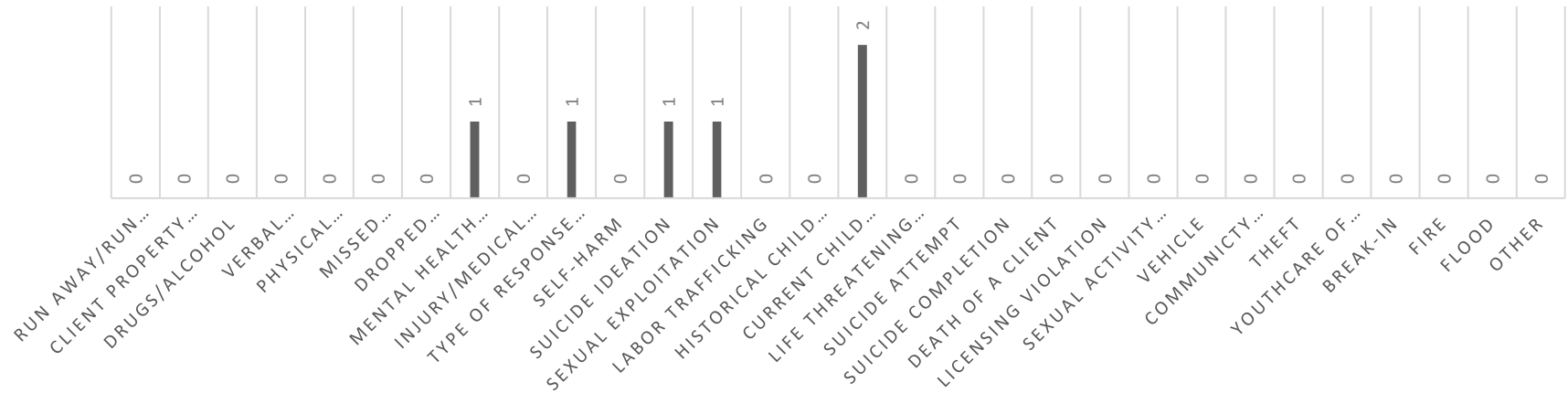
### Early Intervention & Specialized Services



Included: Early Intervention, Specialized Services



## TYPE OF INCIDENT: EISS



|                  |  |   |     |
|------------------|--|---|-----|
| LEVEL 1 INCIDENT | Run Away/Run Report Filed  | 0 | 0%  |
|                  | Client Property Damage   | 0 | 0%  |
|                  | Drugs/Alcohol  | 0 | 0%  |
|                  | Verbal Threats/Aggression  | 0 | 0%  |
|                  | Physical Altercation/Aggression                                    | 0 | 0%  |
|                  | Missed Medication/Refusal  | 0 | 0%  |
|                  | Dropped Medication/Medication Error                                | 0 | 0%  |
|                  | Mental Health Emergency  | 1 | 13% |
|                  | Injury/Medical Emergency   | 0 | 0%  |
|                  | Type of Response for Injury (First Aid, Clinic, ER, None, Refused) | 1 | 13% |
|                  | Self-Harm  | 0 | 0%  |
|                  | Suicide Ideation   | 1 | 13% |
|                  | Sexual Exploitation  | 1 | 13% |
|                  | Labor Trafficking  | 0 | 0%  |
|                  | Historical Child Abuse Report                                      | 0 | 0%  |
|                  | Current Child Abuse Report   | 2 | 25% |

|                   |                                    |   |    |
|-------------------|------------------------------------|---|----|
| LEVEL 2 INCIDENT  | Life Threatening Medical Emergency | 0 | 0% |
|                   | Suicide Attempt                    | 0 | 0% |
|                   | Suicide Completion                 | 0 | 0% |
|                   | Death of a Client                  | 0 | 0% |
|                   | Licensing Violation                | 0 | 0% |
|                   | Sexual Activity Involving Clients  | 0 | 0% |
| PROPERTY INCIDENT | Vehicle                            | 0 | 0% |
|                   | Community Involvement              | 0 | 0% |
|                   | Theft                              | 0 | 0% |
|                   | YouthCare of Staff Property Damage | 0 | 0% |
|                   | Break-In                           | 0 | 0% |
|                   | Fire                               | 0 | 0% |
|                   | Flood                              | 0 | 0% |
|                   | Other                              | 0 | 0% |

|       |   |
|-------|---|
| TOTAL | 6 |
|-------|---|

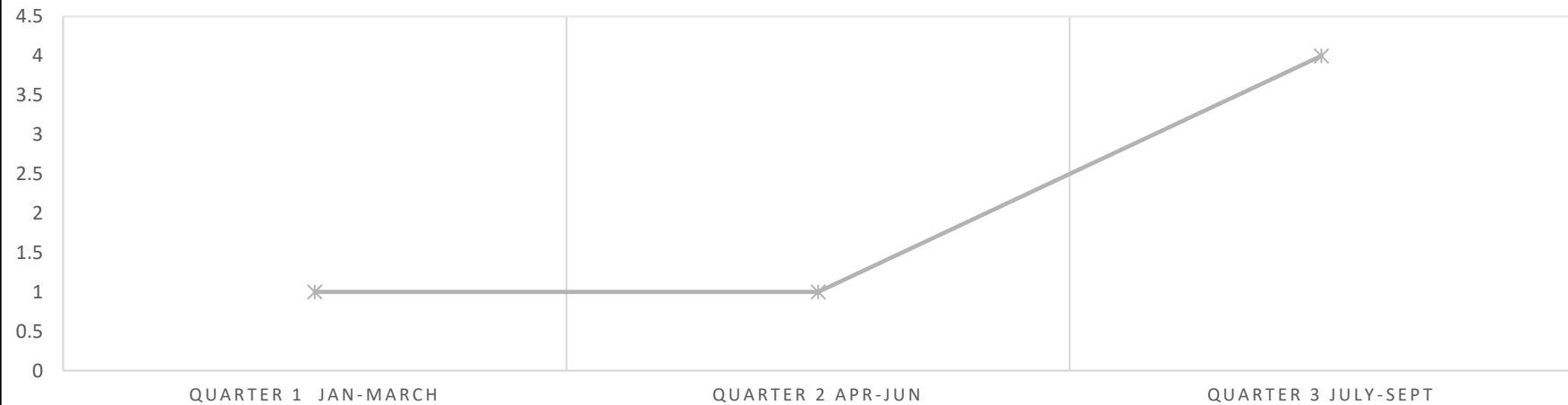
## 2020 Q1-Q3 Incident Reports Summary

### Engagement

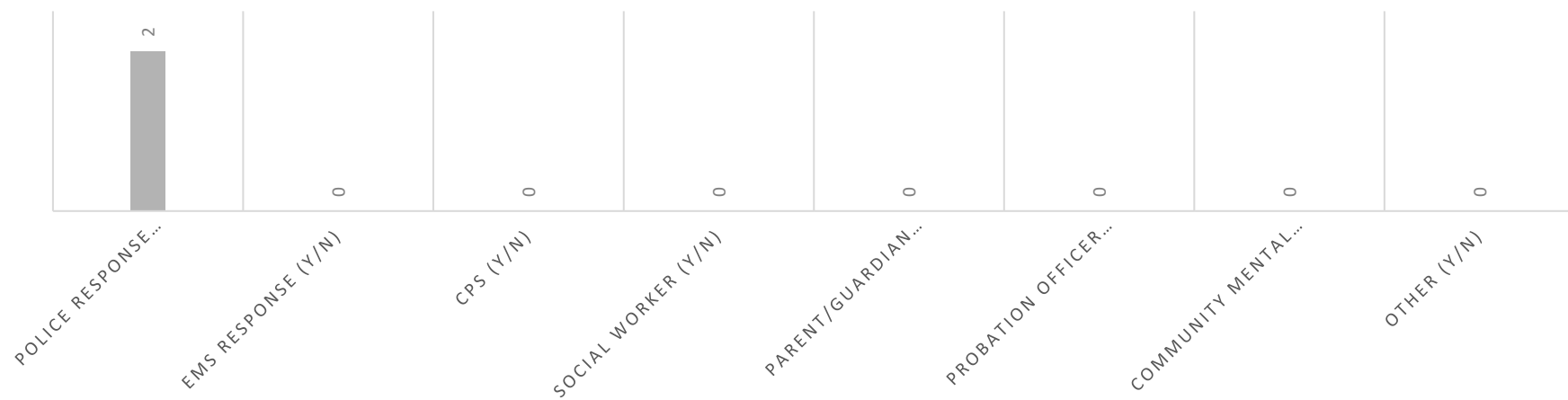


Included: Orion Center, UDYC, YAS; Not Included: Jackson St.

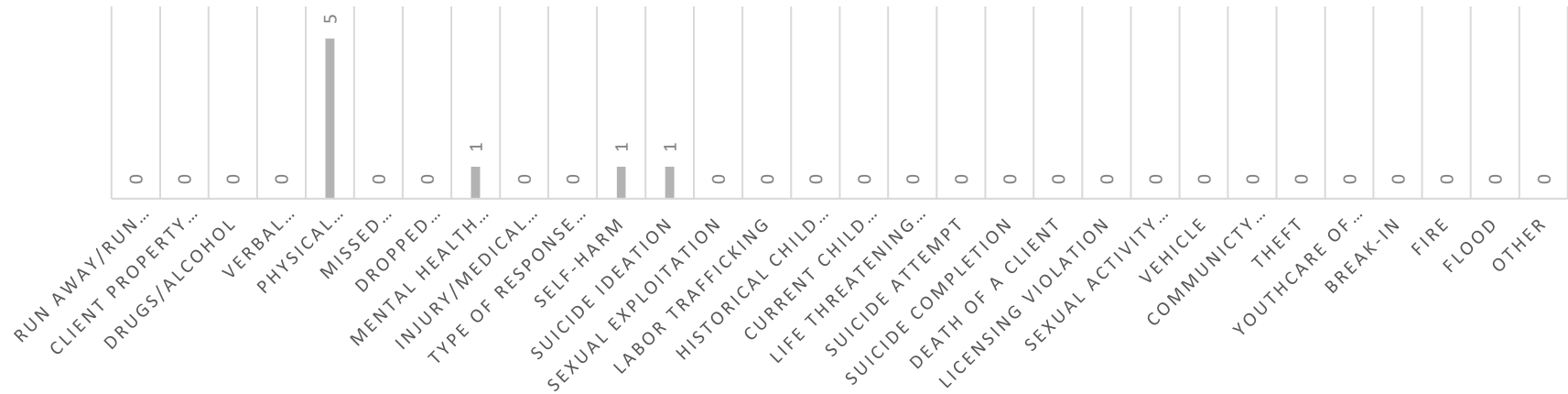
#### NUMBER OF IRS: ENGAGEMENT



#### EXTERNAL RESPONSE: ENGAGEMENT



## TYPE OF INCIDENT: ENGAGEMENT



|                  |  |   |     |
|------------------|--|---|-----|
| LEVEL 1 INCIDENT | Run Away/Run Report Filed  | 0 | 0%  |
|                  | Client Property Damage   | 0 | 0%  |
|                  | Drugs/Alcohol  | 0 | 0%  |
|                  | Verbal Threats/Aggression  | 0 | 0%  |
|                  | Physical Altercation/Aggression                                    | 5 | 63% |
|                  | Missed Medication/Refusal  | 0 | 0%  |
|                  | Dropped Medication/Medication Error                                | 0 | 0%  |
|                  | Mental Health Emergency  | 1 | 13% |
|                  | Injury/Medical Emergency   | 0 | 0%  |
|                  | Type of Response for Injury (First Aid, Clinic, ER, None, Refused) | 0 | 0%  |
|                  | Self-Harm  | 1 | 13% |
|                  | Suicide Ideation   | 1 | 13% |
|                  | Sexual Exploitation  | 0 | 0%  |
|                  | Labor Trafficking  | 0 | 0%  |
|                  | Historical Child Abuse Report                                      | 0 | 0%  |
|                  | Current Child Abuse Report   | 0 | 0%  |

|                   |                                    |   |    |
|-------------------|------------------------------------|---|----|
| LEVEL 2 INCIDENT  | Life Threatening Medical Emergency | 0 | 0% |
|                   | Suicide Attempt                    | 0 | 0% |
|                   | Suicide Completion                 | 0 | 0% |
|                   | Death of a Client                  | 0 | 0% |
|                   | Licensing Violation                | 0 | 0% |
|                   | Sexual Activity Involving Clients  | 0 | 0% |
| PROPERTY INCIDENT | Vehicle                            | 0 | 0% |
|                   | Community Involvement              | 0 | 0% |
|                   | Theft                              | 0 | 0% |
|                   | YouthCare of Staff Property Damage | 0 | 0% |
|                   | Break-In                           | 0 | 0% |
|                   | Fire                               | 0 | 0% |
|                   | Flood                              | 0 | 0% |
|                   | Other                              | 0 | 0% |

|       |   |
|-------|---|
| TOTAL | 8 |
|-------|---|

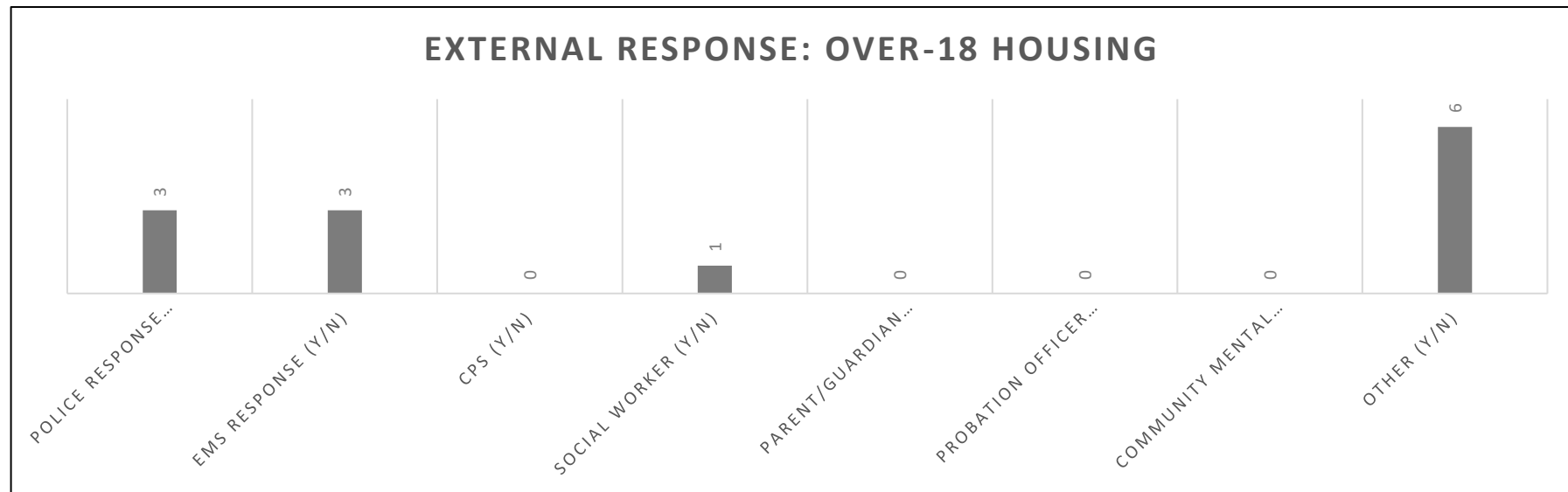
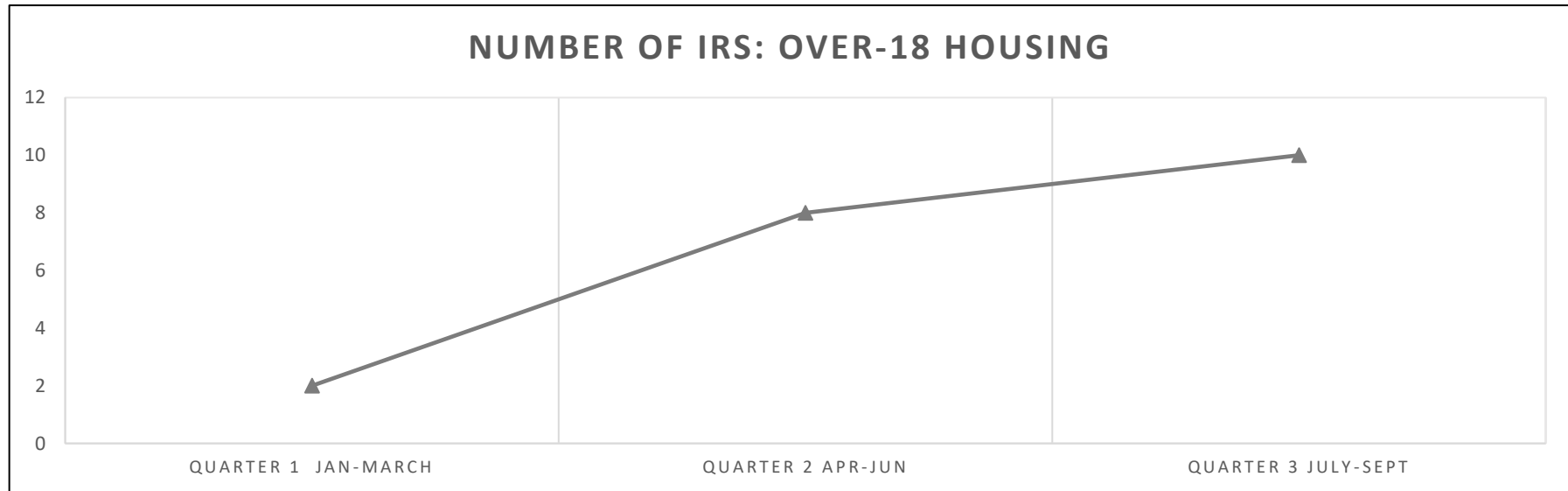


## 2020 Q1-Q3 Incident Reports Summary

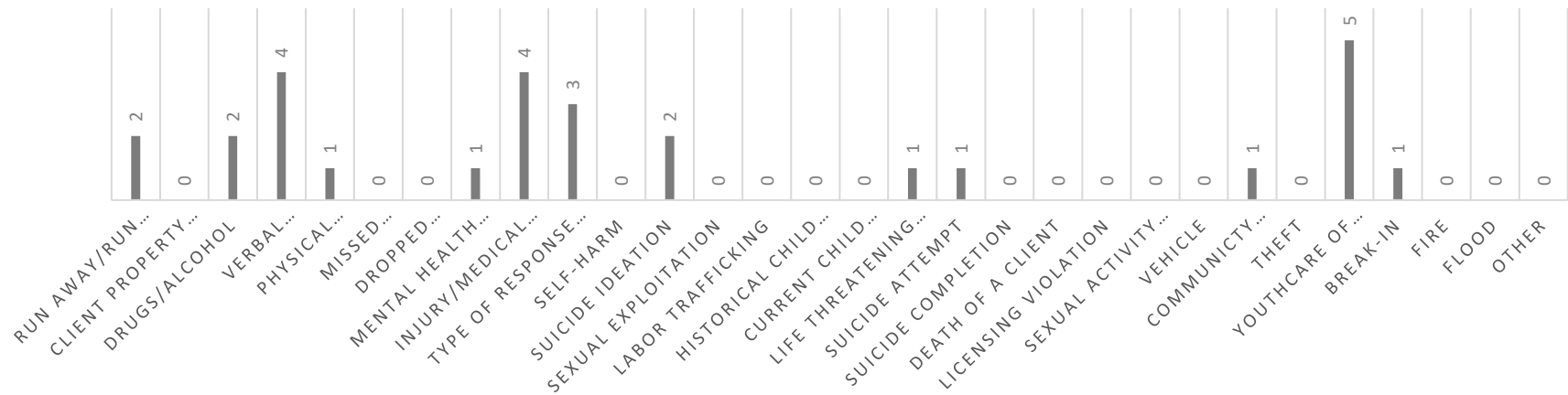
### Over-18 Housing



Included: Isis/Ravenna, Passages, Catalyst, HOH; Not Included: Ucommons, Community-Based Housing



## TYPE OF INCIDENT: OVER-18 HOUSING



|                  |  |   |     |
|------------------|--|---|-----|
| LEVEL 1 INCIDENT | Run Away/Run Report Filed  | 2 | 7%  |
|                  | Client Property Damage   | 0 | 0%  |
|                  | Drugs/Alcohol  | 2 | 7%  |
|                  | Verbal Threats/Aggression  | 4 | 14% |
|                  | Physical Altercation/Aggression                                    | 1 | 4%  |
|                  | Missed Medication/Refusal  | 0 | 0%  |
|                  | Dropped Medication/Medication Error                                | 0 | 0%  |
|                  | Mental Health Emergency  | 1 | 4%  |
|                  | Injury/Medical Emergency   | 4 | 14% |
|                  | Type of Response for Injury (First Aid, Clinic, ER, None, Refused) | 3 | 11% |
|                  | Self-Harm  | 0 | 0%  |
|                  | Suicide Ideation   | 2 | 7%  |
|                  | Sexual Exploitation  | 0 | 0%  |
|                  | Labor Trafficking  | 0 | 0%  |
|                  | Historical Child Abuse Report                                      | 0 | 0%  |
|                  | Current Child Abuse Report   | 0 | 0%  |

|                   |                                    |   |     |
|-------------------|------------------------------------|---|-----|
| LEVEL 2 INCIDENT  | Life Threatening Medical Emergency | 1 | 4%  |
|                   | Suicide Attempt                    | 1 | 4%  |
|                   | Suicide Completion                 | 0 | 0%  |
|                   | Death of a Client                  | 0 | 0%  |
|                   | Licensing Violation                | 0 | 0%  |
|                   | Sexual Activity Involving Clients  | 0 | 0%  |
| PROPERTY INCIDENT | Vehicle                            | 0 | 0%  |
|                   | Community Involvement              | 1 | 4%  |
|                   | Theft                              | 0 | 0%  |
|                   | YouthCare of Staff Property Damage | 5 | 18% |
|                   | Break-In                           | 1 | 4%  |
|                   | Fire                               | 0 | 0%  |
|                   | Flood                              | 0 | 0%  |
|                   | Other                              | 0 | 0%  |

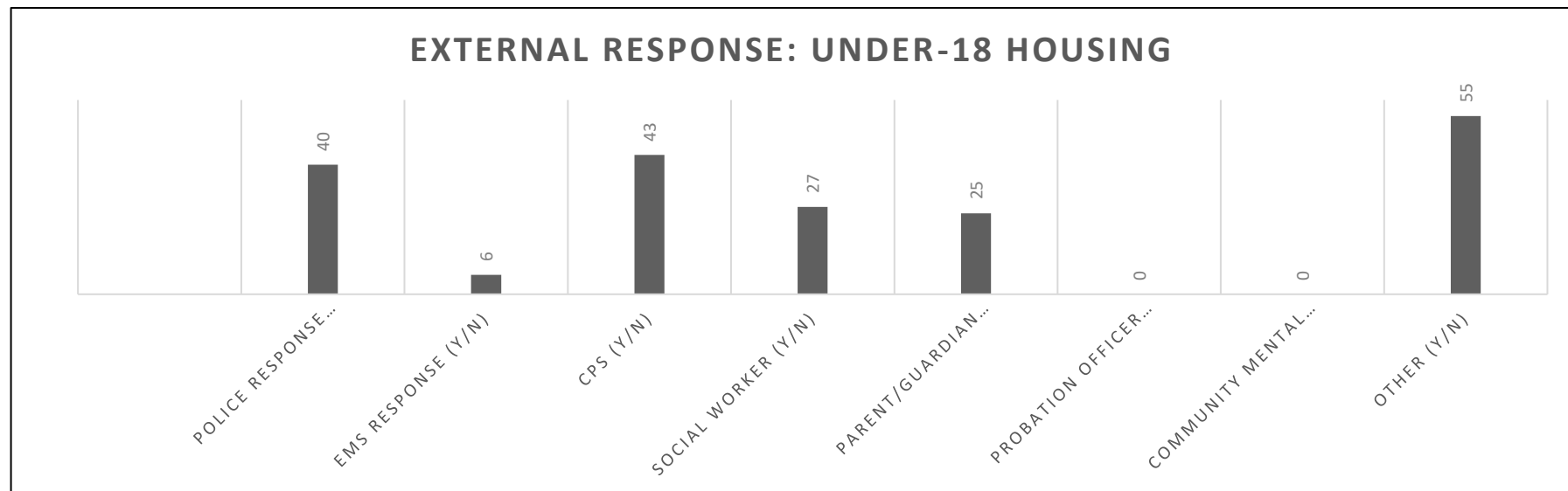
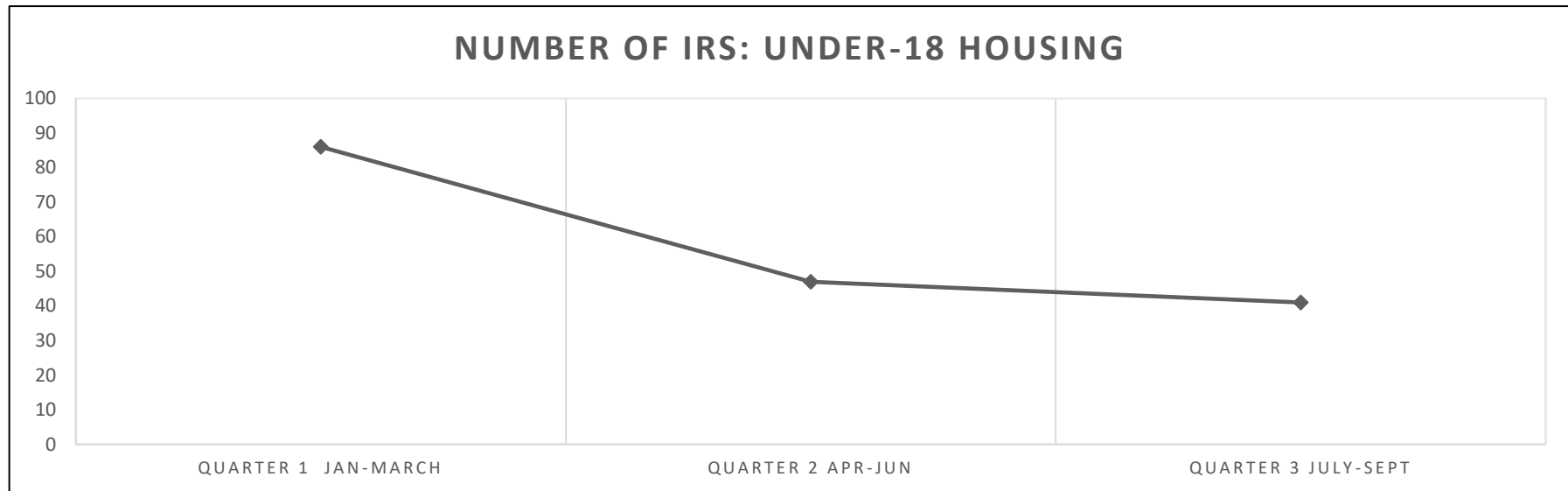
|              |           |
|--------------|-----------|
| <b>TOTAL</b> | <b>28</b> |
|--------------|-----------|

## 2020 Q1-Q3 Incident Reports Summary

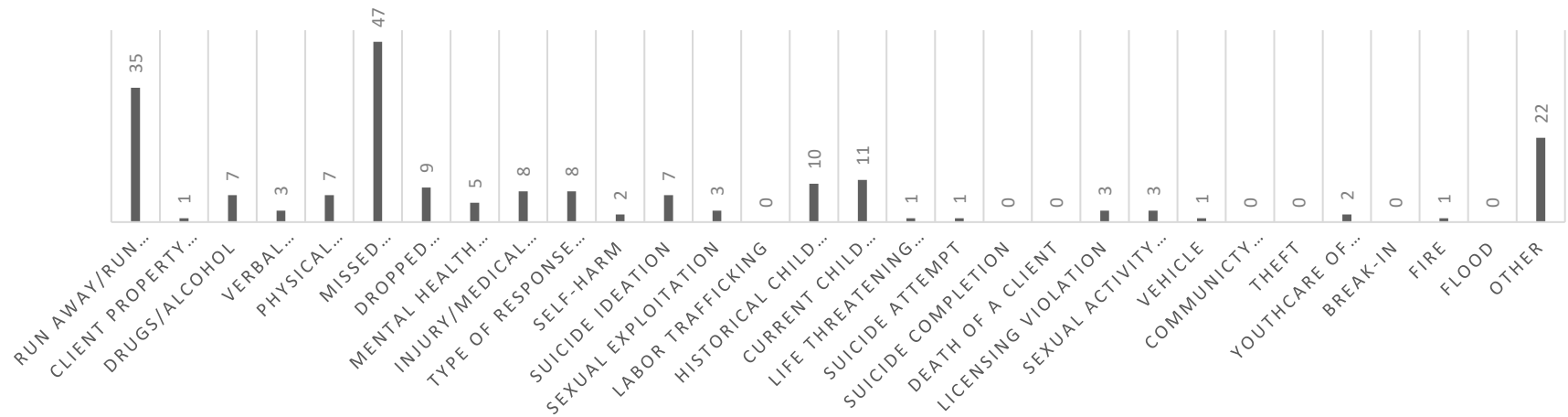
### Under-18 Housing



Included: Hope Center, Adolescent Shelter, Pathways; Not Included: Casa de los Amigos



## TYPE OF INCIDENT: UNDER-18 HOUSING



|                  |  |    |     |
|------------------|--|----|-----|
| LEVEL 1 INCIDENT | Run Away/Run Report Filed  | 35 | 18% |
|                  | Client Property Damage   | 1  | 1%  |
|                  | Drugs/Alcohol  | 7  | 4%  |
|                  | Verbal Threats/Aggression  | 3  | 2%  |
|                  | Physical Altercation/Aggression                                    | 7  | 4%  |
|                  | Missed Medication/Refusal  | 47 | 24% |
|                  | Dropped Medication/Medication Error                                | 9  | 5%  |
|                  | Mental Health Emergency  | 5  | 3%  |
|                  | Injury/Medical Emergency   | 8  | 4%  |
|                  | Type of Response for Injury (First Aid, Clinic, ER, None, Refused) | 8  | 4%  |
|                  | Self-Harm  | 2  | 1%  |
|                  | Suicide Ideation   | 7  | 4%  |
|                  | Sexual Exploitation  | 3  | 2%  |
|                  | Labor Trafficking  | 0  | 0%  |
|                  | Historical Child Abuse Report                                      | 10 | 5%  |
|                  | Current Child Abuse Report   | 11 | 6%  |

|                   |                                    |    |     |
|-------------------|------------------------------------|----|-----|
| LEVEL 2 INCIDENT  | Life Threatening Medical Emergency | 1  | 1%  |
|                   | Suicide Attempt                    | 1  | 1%  |
|                   | Suicide Completion                 | 0  | 0%  |
|                   | Death of a Client                  | 0  | 0%  |
|                   | Licensing Violation                | 3  | 2%  |
|                   | Sexual Activity Involving Clients  | 3  | 2%  |
| PROPERTY INCIDENT | Vehicle                            | 1  | 1%  |
|                   | Community Involvement              | 0  | 0%  |
|                   | Theft                              | 0  | 0%  |
|                   | YouthCare of Staff Property Damage | 2  | 1%  |
|                   | Break-In                           | 0  | 0%  |
|                   | Fire                               | 1  | 1%  |
|                   | Flood                              | 0  | 0%  |
|                   | Other                              | 22 | 11% |

|       |  |     |
|-------|--|-----|
| TOTAL |  | 197 |
|-------|--|-----|

## Section Five – Random File Review

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Random client file reviews will begin to take place on a quarterly basis and conducted by a variety of staff members from different levels of the organization. The intent of the file review is to ensure that the records contain all the required information to provide services. It's an opportunity to assess the quality of service delivery and to ensure that confidential information remains confidential. This quarter was focused on launching the review process, tracking the location of all files, and ensuring they are complete. Next quarter we will create targets for completeness and quality that all programs will be held accountable to.

### File Location Audit

The PQI Team provided all program leadership a list of all clients served in their program during 2019 & Q1-Q3 2020. Staff were expected to record the location of each file. This process was intended to be completed within 2 weeks, but we found that this was more taxing than anticipated due to high staffing turnover and staff relocation or remote service delivery due to COVID-19.

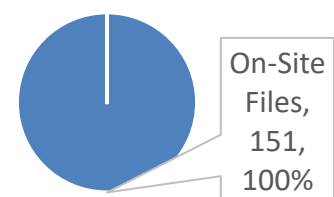
The results of this audit show that there are files that were not able to be located or possibly not created. The PQI Team chose not to include the exact results because there are additional efforts being done to locate all of the client files. However, as mentioned earlier, three themes emerged when leadership shared challenges for tracking files this year:

1. High volume & short engagement of clients
2. Recent staff turnover
3. Mobile/community-based Case Managers

Programs who struggled to track files will create Improvements Plans to address this issue. Additionally, the PQI Team is working on some upcoming system-improvements including:

- COA requires the agency to have a system of checking files in and out from their storage location
- Quarterly file reviews will assist in identifying if files are non-existent or missing
- Onboarding and Offboarding system will review caseloads, file location, file completion to ensure continuity of services to individual youth
- Annual archiving of files will ensure files are present at the end of each calendar year, YouthCare plans to have files in a secure 3<sup>rd</sup> party offsite storage facility. Processes to complete this archiving will soon be released.
- YouthCare's upcoming Client Management System will allow files to be completely digital. The draft timeline suggests this will be possible by Quarter 3, 2021

Young Adult Housing Services



## Quarterly File Review

The PQI team generated a list of clients served in Q1, Q2, and Q3 of 2020 and organized by program. For services that generally serve over 100 clients per year, 25 files will be reviewed each quarter. For services where fewer than 100 clients are served, 100% of cases are reviewed each year – thus of all clients served, up to 25 were reviewed during this review period. Files were randomly chosen using a random number generator and included both active and exited clients. Files that were reviewed were recorded, so to be removed from subsequent file reviews. The PQI Team along with program staff participated in the reviews, using the File Review Form that was updated in 2020 by the PQI Team. Forms will need continuous editing as it is determined what is considered required, and how to capture quality of services (see sample on the right).

This was quite a large task and was the first time a File Review has occurred across the agency in a few years. **572** Files were identified to be reviewed. Of those, **362** of those files were reviewed.

**YOUTH CARE**  
Quarterly File Review  
Performance Quality Improvement  
Community Advocate Case Management

|                                   |  |
|-----------------------------------|--|
| REVIEW DATE:                      | CASE MANAGER:  |
| CLIENT FIRST NAME:                | CLIENT LAST NAME:  |
| INTAKE DATE:                      | EXIT DATE (if applicable):   |
| IF CURRENT - DAYS SINCE INTAKE:   | <input type="checkbox"/> Peer Review <input type="checkbox"/> Supervisor Review <input type="checkbox"/> PQI Team Review |
| FILE REVIEWED BY:<br>(Print Name) | REVIEWER SIGNATURE:  |

| DOCUMENTS:                              | COMPLETE                 | INCOMPLETE               | MISSING                  | N / A                    | COMMENTS | Initial & Date When Corrected |
|---|--------------------------|--------------------------|--------------------------|--------------------------|----------|-------------------------------|
| 1 YouthCare Intake Form                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| 1 Participant Rights & Responsibilities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| 1 Grievance Procedure                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| 1 CPS Reporting Requirements            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| 30 Service Plan with Date & Goals       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| M Attainment Form(s)                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| 1 YCC Referral, Enrollment, Check in    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| 90 90 Day Service Plan Review           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| 1 WAIN ROI / Bridge ROI                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| A Release(s) of Information             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| M Progress Notes                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| A ID / Age Verification (if applicable) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| A Incident Reports (if applicable)      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| A Client Grievances (if applicable)     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |
| E YouthCare Exit Form                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |          |                               |

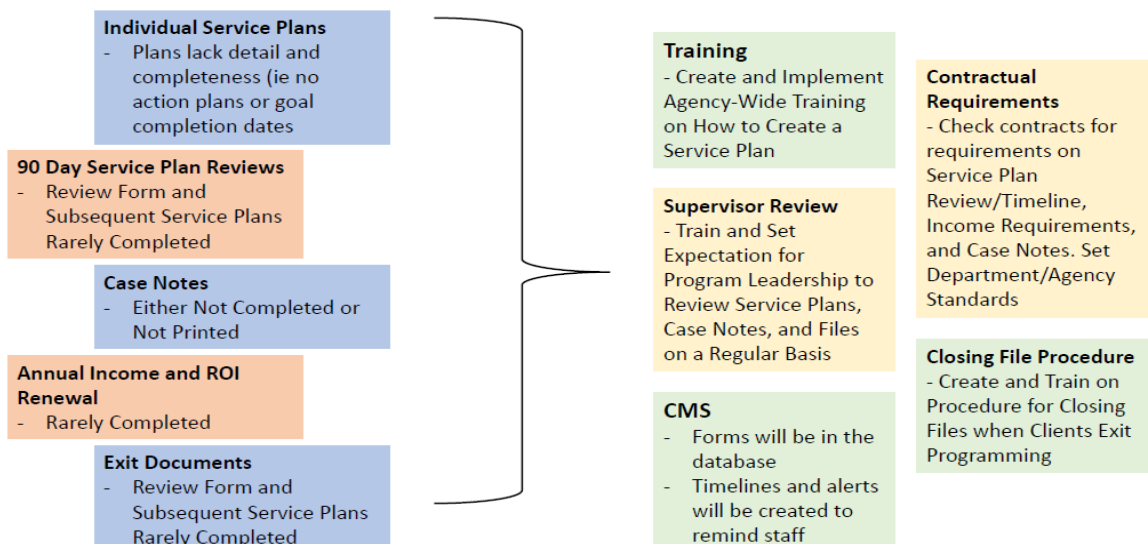
Case Managers should make corrections to incomplete or missing items 2 weeks after the review date. Once corrections are made, case managers date and initial the column to the right of the incomplete or missing item and sign below. This form is to be returned to the Case Manager's supervisor for review and then submitted to the Program Quality and Impact Team at [PQI@YouthCare.org](mailto:PQI@YouthCare.org).

|                       |                   |
|-----------------------|-------------------|
| Staff Name:           | Staff Title:      |
| Staff Signature:      | Date:             |
| Supervisor Name:      | Supervisor Title: |
| Supervisor Signature: | Date:             |

2020 Community Advocacy Case Management File Review Form - Page 1

As mentioned earlier, there were unique challenges brought by COVID-19 that impacted staff's ability to keep files up to date. In the beginnings of this crisis many Case Managers and Career Coordinators were asked to work in programs or began to work from home. It is clear that not enough guidance was initially provided for managing their caseloads and client files. This first File Review provided a critical process to review what had been missed and what procedures need to be improved or adjusted due to COVID-19 service adjustments. Below were some common themes and potential solutions that will be included in department Improvement Plans.

## Common Themes and Potential Solutions



## **Section Six – Improvement Plans**

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In the future, this section will highlight some of the Improvement Plans that are being worked on across the agency.

## **Section Six – Recognition**

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We want to acknowledge the phenomenal work that is occurring across the agency to ensure we're providing high quality programming for young people! Each quarter we will highlight a few staff who have contributed to improving the quality of what we do.

### **Melanie Mayo**

Thank you to Melanie for helping to make sure client input was included in our survey and PQI Program! As the Interim Program Manager at the Orion Center, Melanie collected the highest number of surveys – 13 from Orion! This data is invaluable, thank you Melanie!

### **Kathia Nuñez, Carlos Ceja, and Meredith Clark**

These three case managers at Casa de los Amigos showed evidence of tremendous organization and attention to detail in the program files that were reviewed. Their files required very few corrections, were easy to navigate and displayed quality services provided to the youth they worked with. Thank you, Meredith, Kathia, and Carlos for being so dedicated to the required documentation.

### **Althea Haug and Dani Schmitt**

Kudos to Althea, Case Manager of Home of Hope Rapid Re-Housing and Dani, Career Coordinator for Doorways for putting in a lot of additional work in ensuring files that were created prior to their recent hire into these roles were complete. Althea and Dani worked with other staff members to compile documents, and worked with clients to make sure they were up to date on Service Plans and required documents. Thank you Althea and Dani for all of your effort, your questions, and your desire to get things right!

### **Yarelys Rodriguez**

Thank you to Yarelys for helping to ensure the Client Satisfaction & Experience Survey was accessible for our Spanish speaking clients. Yarelys went above and beyond her role and translated the Survey into Spanish, including cultural considerations. We were able to collect feedback from 4 clients who would not have otherwise been able to participate in the survey. Thank you, Yarelys!

## **Section Six – Future Plans**

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We hope you found the information contained in this report helpful. We will continue to add to the types of data we collect and use to assess quality and will be working with departments to define what those are. Additionally, we will include progress on any Improvement Plans created in response to this report. If you have ideas on how this document can be improved or feedback about this report, please contact us at [PQI@youthcare.org](mailto:PQI@youthcare.org).