

**YOUTH**CARE

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

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*2021 Quarter 3*

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## Section One – Introduction

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Welcome to the PQI Quarterly Report! This report is part of YouthCare’s PQI (Performance and Quality Improvement) Program that we launched 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 **PQI Plan** for more information. This plan is in the process of being finalized, building in lessons learned from our pilot.

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 Two – 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. So far, there are five areas where YouthCare has collected data, analyzed, and aggregated that data, and summarized results. This includes:

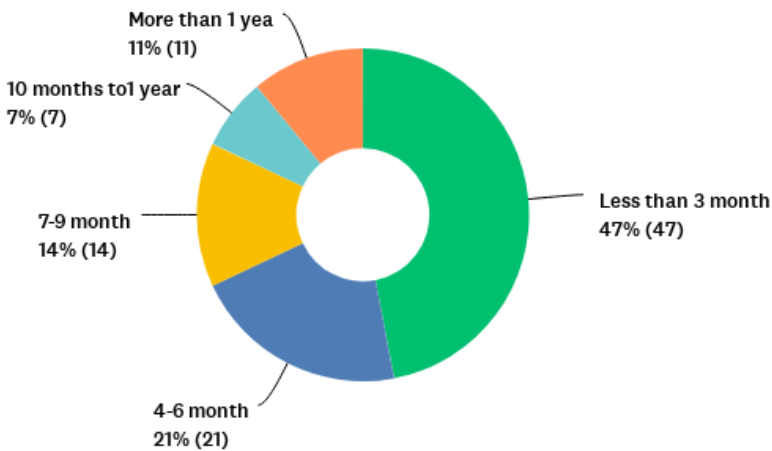
- Client Satisfaction & Experience Surveys
- Incident Reports
- Client File Reviews
- Staff Exit Survey
- Staff Retention

This quarter we focused on the Client and staff survey, retention rates, and have included graphs and data along with themes for where we are successful and areas for improvement. YouthCare launched our new Client Management system, CaseWorthy, in June 2021. The PQI team continues to build out dashboards for teams that include more program indicators of quantity along with improvements for reviewing Incident Reports and client files

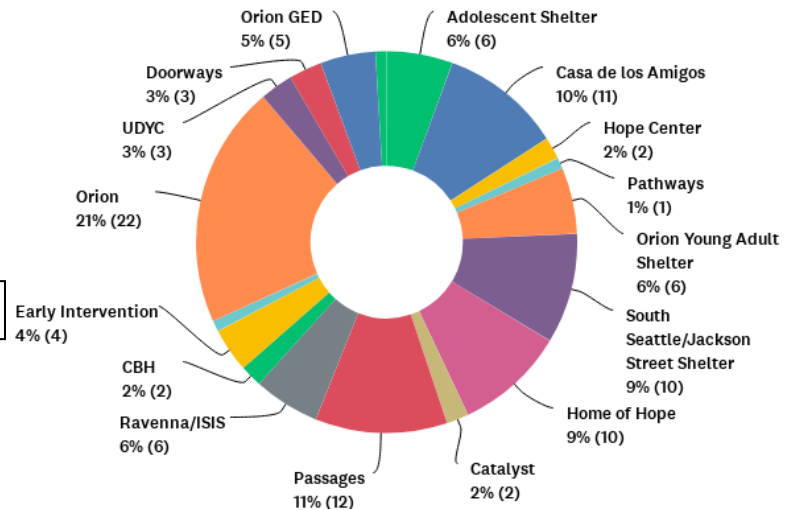
## Section Three – Client Satisfaction & Experience Surveys

After feedback gathered from program staff, we are now offering the client satisfaction survey for the entirety of the quarter. Offering the client satisfaction survey for the entire quarter will allow us to collect as many youth voices as possible. Programs individually track who has participated in the survey each quarter to ensure there are no duplicates. During the months of August and September, we administered our Client Satisfaction & Experience

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



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



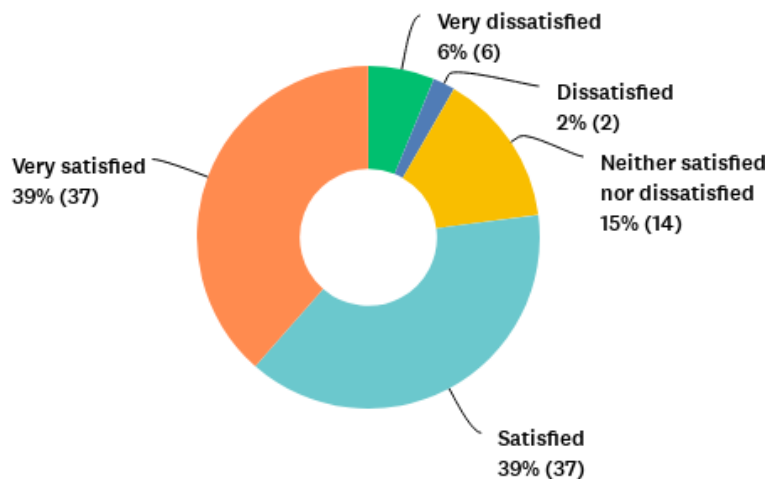
Survey across the agency for the third quarter. As this was a new change, the survey will be available for all three months of quarter four. This survey allows us to obtain accurate information regarding the experience and level of satisfaction from the participants of YouthCare’s services to identify 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. This quarter, **118** clients participated in the survey across 16 YouthCare programs with a 107% increase in participation from Quarter 2. We have been successful in our efforts to engage with clients on their thoughts and feedback regarding programming and ensuring their voices are heard. Information collected supports programs in identifying areas of opportunity for improvement which are included in Performance Opportunity Plans.

By collecting over 100 surveys from program participants, we can identify accurate trends in enrollments and overall program satisfaction. Quarter 3 results show that most program participants have been enrolled in programming for less than three months, consistent with quarter 2. As well, clients are either very satisfied or satisfied with programs.

This report shows data for all YouthCare to highlight agency trends. This is combined with Department

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



Reports provided to Program Leadership to share more specific feedback to better inform program improvements. Please reach out to your supervisor if you'd like to see more detail!

### 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. Items that score above 4.25 are considered **strengths**. Items that score below a 4.00 are considered **areas for improvement**. On the next page are charts showing the change in scores from 2021 Q2 to 2021 Q3 with strengths highlighted in green and areas for improvement in red. This quarter we can better identify trends across the agency due to the total number of surveys collected. All areas reflect programs are on track to ensuring quality experiences for clients. An area of opportunity we have identified across the agency is ensuring we exhibit how client input leads to positive change. This opportunity will be incorporated into all Performance Opportunity Plans (POPs) for quarter 4.

#### Intake & Assessment

	2021 Q2	2021 Q3	CHANGE
The purpose behind intake and assessment questions were explained to me.	4.27	4.15	-0.12
Staff asked me the intake or assessment questions in a confidential place.	4.39	4.15	-0.24
I can refuse to answer any intake or assessment questions I feel uncomfortable answering.	4.41	4.22	-0.19
Staff and volunteers take steps to protect my confidentiality and the confidentiality of others.	4.38	4.29	-0.09
I know how to file a complaint or grievance if I have a problem with the program, staff, or volunteers.	4	4.07	0.07
	<b>Answered</b>	<b>51</b>	<b>109</b>
	<b>Skipped</b>	<b>7</b>	<b>11</b>

#### Program Safety & Support

	2021 Q2	2021 Q3	CHANGE
I feel safe while accessing services and participating in this program.	4.37	4.24	-0.13
Staff helped me understand my rights as a program participant.	4.35	4.22	-0.13
Staff helped me understand the rules of the program, why they have them, and consequences of breaking rules.	4.3	4.21	-0.09
Staff treat me with respect (i.e., respecting my boundaries, not making insulting or humiliating remarks, etc.)	4.43	4.19	-0.24
I feel okay letting staff know if I have a problem or feel unsafe around others.	4.41	4.17	-0.24
	<b>Answered</b>	<b>51</b>	<b>109</b>
	<b>Skipped</b>	<b>7</b>	<b>11</b>

## Voice & Choice

	2021 Q2	2021 Q3	CHANGE
Staff consistently use the name and pronouns I use (ex. she/her, they/them, he/him, etc.).	4.63	4.22	-0.41
I've been asked to be involved in program decision making (i.e. advisory group, input on program activities, etc.).	4.06	4.03	-0.03
I have seen examples where youth input has led to positive change.	3.96	3.88	-0.08
This program helped me explore my interests, talents, and abilities.	4.22	3.95	-0.27
I get to express my culture, religion, heritage, and/or identity while participating in this program.	4.36	4.14	-0.22
<b>Answered</b>	<b>51</b>	<b>109</b>	
<b>Skipped</b>	<b>7</b>	<b>11</b>	

## Case Management & Goal Planning

	2021 Q2	2021 Q3	CHANGE
I have a case manager or staff person I can meet with on a regular basis.	4.23	4.16	-0.07
I talk about what I want during case management and/or program activities.	4.27	4.14	-0.13
I participate in developing my service plan and setting my own goals.	4.17	4.17	0.00
I feel like the staff in this program care about me, and my needs matter to them.	4.37	4.16	-0.21
This program has helped me with my next steps towards achieving my goals.	4.31	4.14	-0.17
<b>Answered</b>	<b>49</b>	<b>106</b>	
<b>Skipped</b>	<b>9</b>	<b>14</b>	

## 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. This quarter, the highest needed services remained the same as the past 3 quarters – Housing/Shelter & Food/Clothing/Hygiene. There was a significant decrease in the level of need for Family Reconciliation as compared to quarter 2. All other services show a decrease in client needs. All other areas of need had a significant increase across the agency. The chart below shows the percentage of clients who reported needing each service.

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

	2021 Q2	2021 Q3	CHANGE
Food/Clothing/Hygiene	80.00%	82.00%	2.00%
Family Reconciliation	73.00%	33.00%	-40.00%
Housing/Shelter	72.00%	83.00%	11.00%
Employment Support	66.00%	72.00%	6.00%
Educational Support	61.00%	69.00%	8.00%
Counseling/Treatment	51.00%	65.00%	14.00%
Independent Living Skills	51.00%	58.00%	7.00%
Fun Activities/Recreation	43.00%	61.00%	18.00%
Legal Support	41.00%	58.00%	17.00%
Building Community	37.00%	46.00%	9.00%
Public Benefits (SNAP, TANF, SSI)	27.00%	72.00%	45.00%

For level of satisfaction, clients rate on a scale from unsatisfied to satisfied. Each service received a rated score from 1-3. 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. Highest scoring items are highlighted in green and lowest scoring items are highlighted in red. Overall, we have a more accurate depiction of satisfaction rates of needed services due to the number of collected surveys. The service areas with the largest needs are rated high in satisfaction. However, we should continue to strive for high satisfaction in all service areas.

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

	2021 Q2	2021 Q3	CHANGE
Food/Clothing/Hygiene	2.74	2.74	0.00
Family Reconciliation	2.71	2.25	-0.46
Housing/Shelter	2.71	2.59	-0.12
Employment Support	2.66	2.52	-0.14
Educational Support	2.62	2.49	-0.13
Counseling/Treatment	2.61	2.58	-0.03
Independent Living Skills	2.57	2.48	-0.09
Fun Activities/Recreation	2.55	2.48	-0.07
Legal Support	2.5	2.34	-0.16
Building Community	2.46	2.43	-0.03
Public Benefits (SNAP, TANF, SSI)	2.32	2.52	0.20

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. The Department Reports provide all feedback collected for those departments. Below are a few examples of the appreciations provided:

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

- *I appreciate the fact that I can express myself and my identity. I also really like unity in clients that come into shelter. – Adolescent Shelter*
- *That in the program they treat us with respect and make us feel very good. - Casa*
- *I love the staff they are helpful– Orion YAS*
- *Appreciate the amount of help that is provided whenever I need it. – Catalyst*
- *I appreciate that the case managers show a level of caring. I also appreciate how this program is dedicated to helping the family work together and keep the children at home. – Early Intervention CM*
- *Just being able to talk with staff about anything. - UDYC*
- *The inclusiveness and kindness – Orion GED Casa*

**Section Four – Incident Reports**

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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. Our goal is to review Incidents on a quarterly basis to (1) identify trends in type of incidents that are occurring and (2) assess risk, and (3) 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.

During Quarter 3, the agency actively worked towards improving the process on incident reporting. The PQI team launched the function of Incident Reporting in CaseWorthy. There were total of 108 reports recorded during quarter 3. The PQI team will be working diligently to ensure all backlogged incident reports are entered throughout the remainder of the year. Once all backlogged reports are entered, the PQI team conduct a full review on data for the year and report in the annual PQI report. This report will be available by February 2022.

## Section Five – Random File Review

This quarter the PQI department took lead on random client file reviews. This was the first quarter we have conducted a review after launching the new case management system, CaseWorthy, transitioning from paper files to an online system. Future reviews will be 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 and to assess the quality of documentation and case notes. Additionally, there is opportunity to evaluate the quality-of-service delivery and to ensure that confidential information remains confidential. This review allowed us to identify the areas of growth in utilizing the new case management system as well as areas of strength. Assessing these areas will allow the PQI team to pinpoint extra supports needed for training all staff in efficient use of the new system.

A total of 281 files were reviewed across the agency for quarter three. Files are reviewed utilizing a point system of 1-5 for each category section focusing on 6 areas of completeness and documentation, and a total of 70 possible points for each case file. Please see Appendix A for the File Review Matrix Tool. The areas of focus and total scoring numbers are:

- Documents (1.1-1.3)
- Services (2.1-2.2)
- Case Notes (3.1-3.4)
- Referrals (4.1)
- Service plans (5.1-5.3)
- Assessments (6.1)

### Total Scoring:

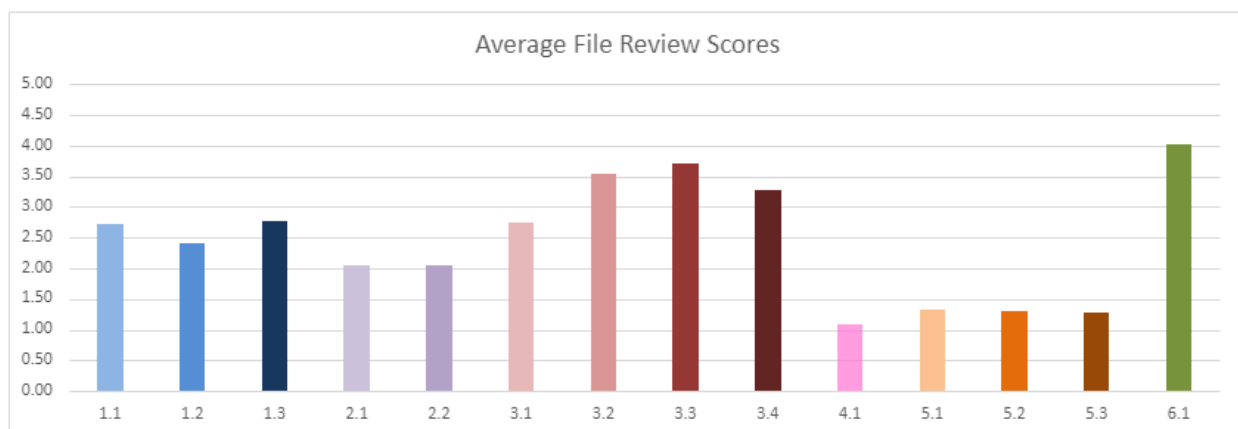
56-70 = Excellent

42-55 = Needs further support

28-41 = Requires support plan from Director

Below 27 – requires support plan from director and meeting with PQI to address challenges

### How are we doing across the agency?





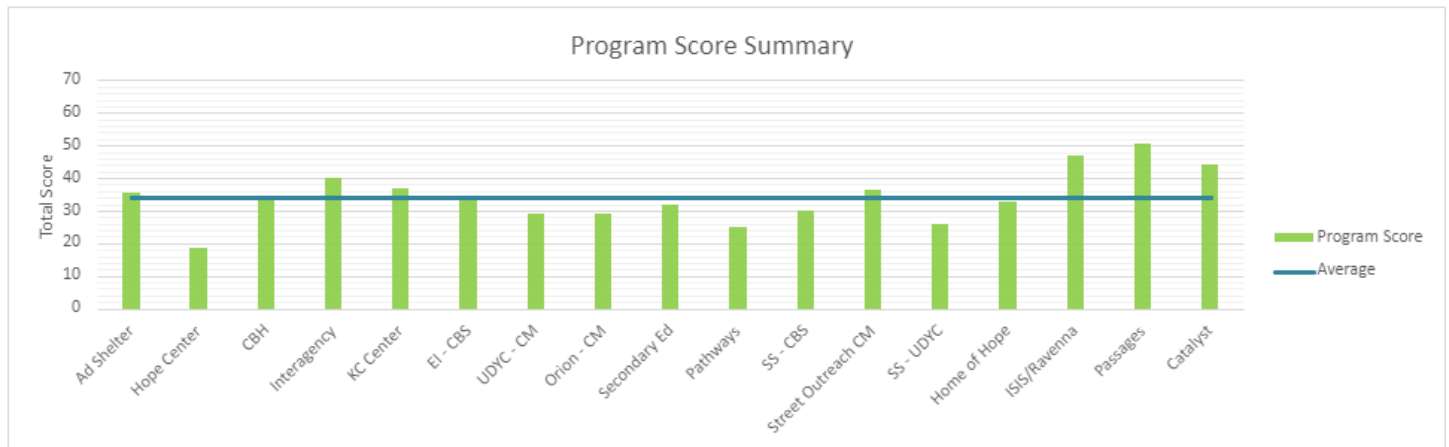
Above provides an overview on the average performance across the agency in each subcategory of the review matrix. The highest performing area was assessment completeness (6.1)

Areas of Strength	
6.1	Completed Assessments
3.3	Case Notes Quality - Objectivity
3.2	Case Notes Quality - 3rd Person
3.4	Case Notes Overall Quality
1.1	Utilization of Document Checklists

Areas of Growth	
4.1	Referrals
5.1	Service Plans
5.2	Service Plan Goals
5.3	Service Plans Signed
2.1	Service Provision
	Services - Case
2.2	Management Sessions

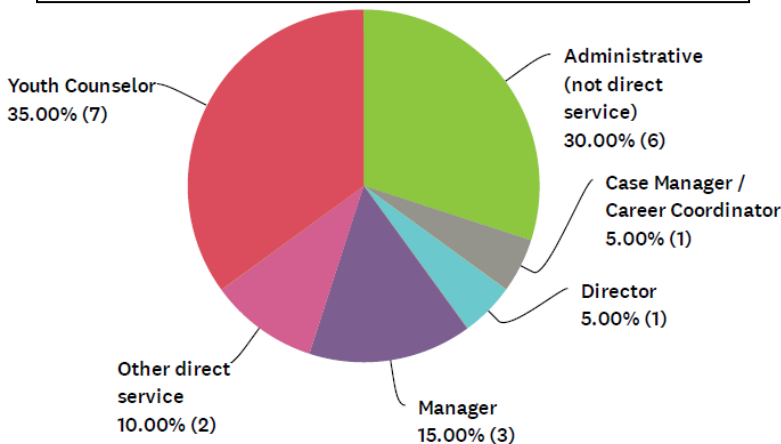
with an average score of 4.0 and the internal and external referral function (4.1) with the lowest average of 1.1. Please see additional information in the Areas of Strength chart (above, right). During this review, we were able to identify areas of growth in addition to utilizing the referral function in CaseWorthy. Those areas are service plans, service plans goals, signed service plans, service provisions, and case management sessions (left).

By identifying areas of growth, the PQI team will be working collaboratively with programs across the agency and training all staff on the policies, procedures, and client care and service provision to ensure we are maintaining efficient client files and providing quality services to program participants. See below for an overview of file review scores for each program.



## Section Six – Staff Exit Survey and Retention

**Q: What was your position at YouthCare?**

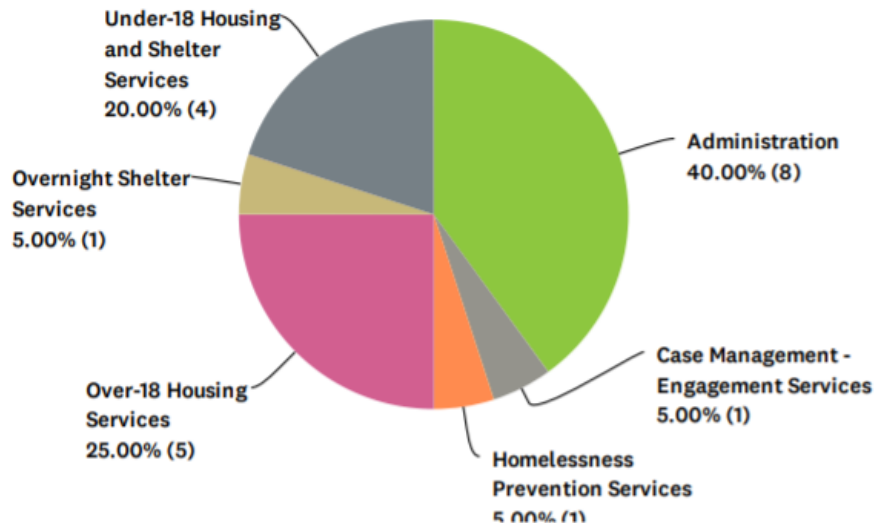


This quarter, we reviewed data collected from staff exit surveys from February 2019 – September 2021. Moving forward, this information will be reviewed each quarter, comparing trends, areas of strengths, and opportunities for improvement to past quarters. The information provided in this report provides transparency and sets the foundation where the agency can improve. Quarterly, the goal is to administer the Staff Exit Survey to 100% of staff transitioning out of the agency with a 100% return on participation.



A total of 20 staff completed the exit survey upon their departure from the agency. Among the total surveys collected we saw the highest turnover among Youth Counselors (above). Additionally, the department with the greatest amount of staff transitions was the administration department, with a total of 8 staff exiting the agency. The asks a series of 13 questions as it is related to their experience working for the agency. Those questions are:

**Q: What department did you work in at YouthCare?**



1. What factor (s) contributed to your decision to leave YouthCare?
2. What was your position within YouthCare?
3. What department did you work in at YouthCare?
4. In evaluating your job with YouthCare, how would you rate the following?
  - a. Some categories rated are communication across programs and teams, communication from leadership to staff, and opportunities to learn new skills and develop knowledge
5. How would you rate your supervisor at YouthCare in the following regards?
  - a. Some categories rated are trainings provided, direction and guidance, and helped you with career development

6. Would you consider working for YouthCare again?
7. What did you enjoy most about working at YouthCare?
8. Were you satisfied with the training you received at YouthCare?
9. Were your duties and expectations accurately described when you accepted the position?
10. Would you recommend YouthCare as an employer to others?

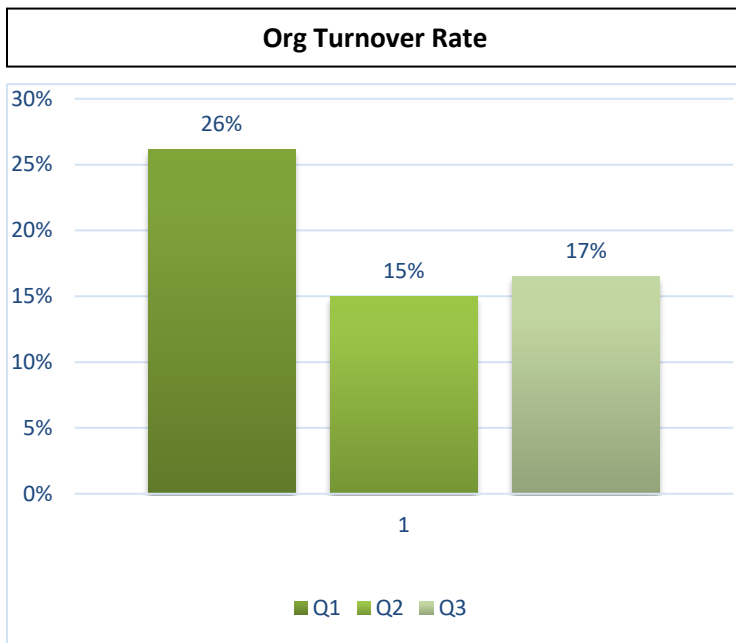
Staff are then we asked a series of open-ended questions for participants to provide narratives. We are so appreciative for the very specific feedback provided by participants. Some of the most valuable information we get is in the form of the comments in the narrative section. The Department Reports provide all feedback collected for those departments. Below lists the open-ended questions and examples of feedback received.

11. What is one thing that you would change at YouthCare?  
***“Relationships within YouthCare need to improve at all levels. Rebuild trust and communication.”***
12. How could YouthCare have enabled you to make fuller use of your capabilities and potential?  
***“Providing more opportunities for training and interaction across departments.”***
13. What does it take to be successful at YouthCare?  
***“It depends -Having a full understanding of all YC programs, teams, partnerships definitely helps -Adequate onboarding and training -Consistent person-centered supervision and support -Community -Often I've witnessed it means putting your head down, agreeing with mainstream Nonprofit practices, speaking a certain way to be treated with respect.”***

All information received through the staff exit survey is shared quarterly at Leadership Meetings. Of the data gathered from the 20 surveys, YouthCare is currently working towards providing robust training and onboarding to ensure all staff have the tools they need to be successful in their positions. Additional feedback received highlighted the need for more intentional supervision. YouthCare is working towards this opportunity for improvement through the recent implementation of the Supervision Framework and expectations for all managers and staff. For detailed information on the supervision framework, connect with your direct supervisor.

### **PRELIMINARY 2021 TURNOVER ANALYSIS**

Overall organizational retention rates will be reviewed and reported quarterly. Additionally, the PQI team will analyze the retention and turnover rates of the agency and present it to the Senior Leadership Team and the Board annually. Agency priorities will be formulated based on the data, and areas of improvement will be created for department Performance Opportunity Plans. This is a preliminary analysis of the year 2021 Year to Date – Quarter 1 through Quarter 3.



Turnover is calculated by dividing the number of employees who left the agency by the average employees working in the time period (employees at beginning plus employees at the end divided by 2). Simply put, it's the percentage of your team that left in a given time period. Each quarter, the agency has had about 215 employed staff. Respectively, 45, 32, and 35 employees have left each quarter.

Turnover information is also collected for individual departments. Data for departments is shared individually with program directors and managers on a quarterly basis.

### **Section Seven – Recognition**

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.

There are many staff that deserve recognition for their engagement in collecting Client Satisfaction Surveys and creating Performance Opportunity Plans with their teams. Shout out the Orion Center team – they were able to collect a total of 22 responses from engagement program participants. Additionally, staff across all programs have actively participated in identify areas of opportunity for improvement within their programs and have intentioned outlined plans of action in their Performance Opportunity Plans. Through active participation from all staff, the agency will continue to grow in providing quality services to our young people. Thank you all for your participation!

## Section Six – Values in Action

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### Workforce Development & Education

“Nick Goodwin has gone above and beyond completing document uploads in CaseWorthy. He has taken it upon himself to frequently contact the data management team to ask questions for his team. It’s evident that Nick cares about the program and wants to see it succeed so it can positively impact more of the youth we serve.”

### Young Adult Housing

“Derek has taken on the role of advocate for our young people. He proactively meets with our youth and goes above and beyond to make sure they have everything that they need to be successful when they leave the program. Amazing work Derek!”

“Kendra works diligently to support youth on her case load and is a quick learner when it comes to navigating resources to support them. In the past month Kendra has logged 112 logins to case worthy! Way to go Kendra!”

“OMG – the whole crew who went above and beyond to make that Passages project happen. It was supposed to be a big group project, but then we had to cancel the big group, and that crew still made it happen!”

### Orion Engagement Center

“Jennifer Juarez has done an incredible job with our clients with high mental health needs. She is youth-centered, compassionate, and persistent in supporting them throughout their journey :) “

### Administration:

“Tony has worked hard to make sure Colleen’s landing was smooth.”

# YOUTH CARE

## File Review Matrix

Client ID: \_\_\_\_\_ Client Program Enrollments: \_\_\_\_\_

Quarter being reviewed: \_\_\_\_\_ Date Review Completed: \_\_\_\_\_

Case Managers: \_\_\_\_\_

Areas of need – evidenced by the (“What services or supports are you looking for?” question in the “Intake Assessment and Referral”:

**Total Scoring Legend:** 56 – 70: Excellent  
 (highlight final score) 42 – 55: Needs further support, document below  
 28 – 41: Requires support plan from Director (if any \* areas do not score a 5 follow up plan from Director is required)  
 Below 27: Requires support plan from Director and meeting with PQI to address challenges

Assessment Item	Score	Notes
<b>1. Documents</b>		
<b>121.1 Documents Checklist Utilization</b>		
5 – The document checklist has 4+ items documented		
3 – The document checklist has 1-3 items documented		
1 – The document check list is not utilized at all		
<b>1.2 Required Documents Uploaded*</b>		
5 – All required documents are uploaded		
3 – Some required documents are uploaded		
1 – No required documents are uploaded		
<b>1.3 Required Documents Quality – Completeness*</b>		
5 – All required documents have required fields completed		
4 – Most required documents have required fields completed		
3 – Some required documents have required fields completed		
2 – No required documents have required fields completed		
1 – No required documents are uploaded		
<b>2. Services</b>		
<b>2.1 Are the areas of need being addressed in service provision?</b>		
5 – All areas of need have services provided		
3 – Some areas of need have services provided		
1 – No areas of need have services provided		
<b>2.2 Case Management Sessions Provided</b>		
5 – 3x per week or more since enrollment / not applicable for program		
4 – 2x per week since enrollment		
3 – 1x per week since enrollment		
2 – Less than 1x per week since enrollment		
1 – No sessions provided		
<b>3. Case Notes</b>		
<b>3.1 Do the client’s case notes address areas of need?</b>		

5 – All areas of need have case notes 3 – Some areas of need have case notes 1 – No areas of need have case notes		
<b>3.2 Case Notes Quality - 3<sup>rd</sup> Person</b>		
5 – Case notes are in 3 <sup>rd</sup> person all of the time 4 – Case notes are in 3 <sup>rd</sup> person most of the time 3 – Case notes are in 3 <sup>rd</sup> person some of the time 2 – Case notes are rarely in 3 <sup>rd</sup> person 1 – Case notes are never in 3 <sup>rd</sup> person OR there are no case notes		
<b>3.3 Case Notes Quality - Objective</b>		
5 – Case notes are always objective 4 – Case notes are objective most of the time 3 – Case notes are objective some of the time 2 – Case notes are rarely objective 1 – Case notes are never objective OR there are no case notes		
<b>3.4 Case Notes - Quality</b>		
5 – Case notes are always informative and have an obvious intent 3 – Case notes are sometimes informative and have an obvious intent 1 – Case notes are never informative or have an obvious intent OR there are no case notes		
<b>4. Referrals - evidence in “Referrals” section of client file on CaseWorthy</b>		
<b>4.1 Referrals are documented that address areas of need</b>		
5 – There are referrals to internal/external providers that address all needs 3 – There are referrals to internal/external providers that address some needs 1 – There are no referrals to internal/external providers		
<b>5. Service Plans</b>		
<b>5.1 Service plans are created in CW to address areas of need</b>		
5 – There are 4 service plans created 3 – There are 3 service plans created 2 – There are 1-2 service plans created 1 – There are no service plans created		
<b>5.2 Service plans in CW have goals/steps with dates</b>		
5 – All service plans have goals steps documented with dates 3 – Some service plans have goals/steps documented with dates 2 – No service plans have goals/steps documented 1 – There are no service plans created		
<b>5.3 Service plans in CW are signed*</b>		
5 – All service plans have BOTH client and case manager signatures 4 – Some service plans have BOTH client and case manager signatures 3 – Some service plans have client signatures but NO case manager signatures 2 – Some service plans have case manager signatures but NO client signatures 1 – There are no service plans created OR no service plans signed		
<b>6. Assessments</b>		
<b>6.1 Assessments are complete</b>		
5 – All assessments are complete for this client 3 – This client has some pending assessments 1 – No assessments are complete for any program enrollment		
<b>TOTAL SCORE</b>		

\*If any starred domains are not scored at a 5, follow up is necessary in the section below\*

**Follow Up Needed:**