

PQI Quarterly Newsletter

Q1 2021

EXECUTIVE NOTE

A full year into the pandemic and our teams and committees continue the important work of improving this agency so that we are stronger in fulfilling our mission.

In this Newsletter, you will see a special section on staff turnover. Rosette Martinez, COO and Sharron Costello, HR Manager and the whole HR team have worked very hard on restructuring the department as well as recruitment, hiring, orientation and onboarding. We are committed to decreasing turnover at the agency and will re-establish a retention workgroup to examine the reasons people leave, and explore the processes in place that support staff members, analyze staff surveys, and create an action plan to address the issues and challenges that lead to turnover. I encourage anyone with an interest in joining this workgroup to let Sharron Costello know.

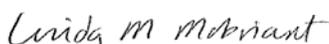


PQI NOTE

As planned, the PQI department revamped our quarterly report into a Newsletter with a completely new design. I hope everyone enjoys the new format designed by Suellen Rizzo, PQI Specialist.

The Newsletter remains true to the intention and purpose, which is to summarize and communicate PQI Committee work & highlight their achievements, to report on PQI Priority Initiatives & Census data, and have included a special COVID section since the pandemic began.

We're working on a flier to communicate Committee opportunities which will include their meeting dates, times & locations. The flier will be distributed during the quarter. Please consider joining a committee of interest when that is distributed. We've reinstated an in person Celebration for Chairs & Co-Chairs on June 3rd and hope that all current and incoming Chairs & Co-Chairs can participate.



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Staff Retention Spotlight
- Census Data
- COVID-19 Business
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- PQI Committee Highlights &
Achievements

INITIATIVE SPOTLIGHT

Recent turnover & retention PQI activities at SMHFC

- Restructured HR department, which includes recruitment & training positions
- Implemented new processes for recruitment, hiring, orientation & onboarding
- RTX/HR meetings to address overtime which can lead to staff burnout, staff injury, dissatisfaction and financial risks
- Completed salary assessments
- Implemented formal Exit Interview & Termination Reports
- Implemented Annual Evaluation Reporting

Upcoming activities in response to risk data

- Re-establish a Retention Workgroup, who will analyze all available data & reports, and create an action plan
- Introduce a PQI guided activity to provide a new way of thinking about & approaching problems & solutions
- Review 2 policies related to employee evaluations

EMPLOYEE RETENTION

“The organization has a dedicated and experienced workforce. They are highly trained & skilled”
8/27/20 COA Accreditation Final Report

HISTORY & CURRENT STATUS:

Turnover in outpatient, support & administration was historically much lower than turnover ratios in residential programs. In 2015, a Retention Committee was formed to specifically target retention in residential programs. They met regularly from 2015 – 2019 and included the Executive Director, HR & finance, milieu & clinical employees. They created, implemented and monitored a comprehensive action plan. The results were positive - significant gains were made and systemic changes to help reduce turnover were implemented. The decision was made to re-instate the Committee in the future if needed.

Retention continued to be monitored, and undesirable trends emerged during the COVID pandemic. Specifically, departments with historically low turnover ratios were increasing, and residential was inconsistent. In response, retention was identified as a priority initiative.

Since September of 2020, retention data has been reported to the PQI Committee and risk targets were established. In 2021, reporting on employee annual evaluation data was added to the initiative. As you see below, Q1 2021 was a positive quarter for turnover. However fiscal year-to-date data indicates we’re still in the at-risk range, and that prompted an action plan. *See side panel*

Employee Turnover Ratios 2021 Results

January 1, 2021 – March 31, 2021

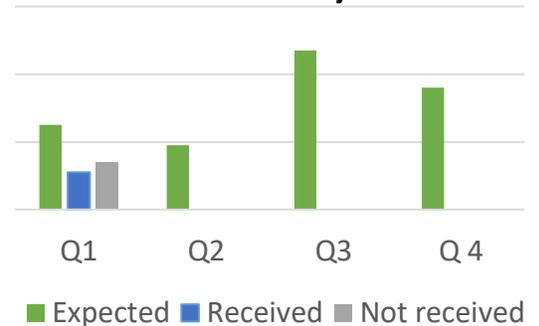
Residential – 24.2 **Stable**
All other departments – 9.2 **Stable**

Fiscal Year to Date Results

July 1, 2020 – March 31, 2021

Residential – 47.9 (was 29.9) **At risk range**
All other dept’s – 15.9 (was 11.4) **Monitor range**

Employee Annual Evaluations 2021 Results & Projections



9/2020 – 9/2021 PQI PRIORITY INITIATIVES & STATUS

RATE OF RESTRAINT

- The rate of restraint in 2021 remains low, and includes the lowest ever rate of restraint which was .2 in February.
- The year-to-date rate is just slightly over the .4 target, but below .5, keeping it in the ‘monitor range’.

COVID SURVEILLANCE TESTING & ISOLATION USE

- Isolation use was in the ‘monitor’ range in Dec. ‘20, and ‘at risk’ in Feb. ‘21. Otherwise, it has been stable.
- Over 3,000 tests have been administered & the % positive rate consistently stable.

CLIENT CLINICAL RECORD AUDITS

- Latest data indicates that 79% of residential records are at or above target, and 82% are in outpatient programs.
- A positive trend is evidenced in the quarterly results, with 95% at or above target in PRTF, and 91% in Office Based.

CENSUS

Q1 2021 AGENCY CENSUS DATA

Program	2020 Q4	2021 Q1
ARTS	8	19
ASC Hills	9	18
BBI Aftercare	7	10
CFTT	4	6
Day Students	14	16
Campus School Residents	--	23
EOS	27	27
Equine	11	12
FISA	6	8
FISA Group	6	11
HFH Group	9	14
MLMC Group	0	0
Office Based	101	138
OSP	14	21
Our Family HFH Group	0	0
PRTF Hope	6	6
PRTF Horton	7	10
PRTF Mauran	6	7
SAE	4	8
SAFFE	15	18
STAAR	26	26
All Programs	--	413
Unique individuals served	--	289

CENSUS DETAILS

Average Agency Daily

Census: 293

January = 283

February = 290

March = 307

This is consistent with the previous quarter (301).

Data based on Best Notes P – Census Summary Report.

73 clients (25% of total clients) participated in two or more programs during Q1, 2021.

This is consistent with the previous quarter (26%).

Data Quality Team members review and correct data where needed. The team meets every eight weeks to ensure there is agency-wide systemic oversight to client data and the system in which it is stored.

As you can see, there has been an increase by 100% - or more - in the number of clients served in ARTS, Hills, and Sexual Abuse Evaluations. There has been a 50% increase in OSP and 36% in Office Based programs.

Significant increases or spikes in new or returning clients contributes to employee workload in all departments and programs. Much appreciation to all staff for continually providing best practice treatment, services & supports to clients.

“The organization is committed to the principles of clients' rights. The services are trauma-informed and there are opportunities for clients to provide feedback and be involved in setting goals”.

8/27/20 COA Accreditation Final Report

COVID-19 BUSINESS CONTINUITY

HIGHLIGHTS January - March

On 2/26/2021, the agency moved from COVID Restricted Phase to COVID Cautious Phase (*see panels below*).

Thirteen COVID Protocols were edited and two new were created during the quarter to support the transition from Restricted to Cautious Phase and in preparation for increasing the number of staff on campus. The new Protocols provide guidance for facilities department volunteer groups, and for increasing spaces on campus that can be reserved by any staff for client sessions, family time or staff meetings.

The National Guard provided a fourth training during the quarter for residential staff, nursing and administrators. These Guard trainings and consultations ensure we are acting upon the most up-to-date science, data and best practices regarding the virus, its transmission, spread and prevention.

Human Resources issued a travel notice which eased requirements for vaccinated and asymptomatic staff to return to work after traveling within the US.

The staff sleeping quarter was disassembled due to the ability to use hotels for staff when needed, and to prepare the entire second

floor for staff & client therapy spaces. With the third floor reserved for Isolation, and continued safety guidelines of six feet or more space between individuals, the entire floor was restructured to accommodate and welcome staff back. On April 7th, they were given a presentation of COVID Protocols, which is the third such presentation to date at the agency.

Surveillance testing continues weekly for all staff on campus by the Nursing department. Two on-campus vaccination clinics were facilitated by the Nursing department, and all staff were eligible. Approximately 50% of staff have been vaccinated through the clinic or elsewhere and have voluntarily shared that information with the Nursing Director.

With Gemma Center renovations complete, capacity was increased to 18 by using visual & physical cues to ensure appropriate social distancing.

The Work at Home policy that had been conceptualized and developed pre-pandemic is being examined by the Risk Management Committee in response to the changed workplace.

The campus moved to Cautious phase on 2/26/2021.

CAUTIOUS

This is the least restrictive phase; hybrid and full work at home models in programs / departments as able; some shared office spaces allowed; minimal if any restrictions to any staff accessing campus; restrictions to Outpatient client sessions being held on campus based on their program phase.

RESTRICTED

Increased restriction phase; assignment of hybrid or full work at home models as able to minimize the number of individuals on campus; those staff have opportunity to access campus outside their assigned schedule by getting approval from their own Program Director; Outpatient client sessions on campus restricted to limited areas (e.g. main building first-floor office, outdoors) and based on their program phase; vendors and volunteers allowed on case-by-case basis and as able to distance from clients and staff.

LOCKDOWN

This is the most restrictive phase; staff who are not on the 'campus approved list' cannot access campus unless approved by the Executive Director; assignment of full work at home model to as many individuals able; no volunteers allowed; vendors restricted to emergency repairs and basic needs.

PQI COMMITTEE HIGHLIGHTS

SAFETY COMMITTEE

- Facilitated improvements to hear overhead announcements in Hills House via installation of speakers in their living room
- Participated in Business Continuity Plan tabletop activities
- In response to observations made during BCP activities, facilitated emergency alert system policy changes and number of employees able to use the system
- The surveillance camera doorbell was installed in the White House main entrance this quarter as a result of the committee's previously reported efforts

CRITICAL INCIDENT COMMITTEE

- Members of RTX leadership, clinicians, administrators and BBI team members along with school leadership have completed the 15 hours Six Core Strategies for Reducing Restraint training
- Since the training was introduced, the rate of restraint is down 75% and the .2% rate in February the lowest ever
- Held mock debriefings for RTX supervisors, assistants & school behavior support w/ youth involvement
- Review of incidents led to 3 successful action plans

RISK PREVENTION AND MANAGEMENT COMMITTEE

- Facilitated 3 Business Continuity Plan emergency tabletop activities and analyzed observations. Worked with the Safety Committee to facilitate changes to the emergency alert system
- The PQI Specialist designed a data driven and engaging dashboard format for the Annual Board Risk Report

RESIDENTIAL PARENT COUNCIL

- Parent Council continues to meet, with some weeks having higher participation than others
- A Newsletter is distributed to members to keep all informed. This has included communication of COVID friendly activities (Cinema Under the Stars), recipes (one pot creamy turkey and potato dumplings for a snowy weekend) and educational articles

WELLNESS COMMITTEE

- "Wellness Connect" continued monthly all quarter
- Participants enjoy seeing staff that have been working off site. Free virtual Yoga continues every week as well
- Free Blue Cross Blue Shield webinars were sent out to staff to participate in, and you are not required to have health insurance with SMHFC to participate in the seminars
- Please check out our Wellness board in the main building

SCHOOL TECHNOLOGY COMMITTEE

- Implemented Smoothwall (a content web-filter to allow for a safer digital learning environment for students)
- Creating a plan & procedures for ensuring safe and proper handling of Chromebooks
- Getting the digital testing browsers up and running for our state assessments

RESIDENTIAL YOUTH COUNCIL

- Youth Council continues to meet with the Youth Mentor in group and individual settings
- Members advocated for some changes with food service and can be credited for the following:
 - Chocolate chip pancakes (every other)
 - Family style salads in all Houses at dinner
 - Lasagna and sausage
 - Cookies & brownies for desserts (some nights)

STAFF RELATIONS

- Opened every meeting with a family engagement story
- Distributed holiday bonus checks, valentine candies and scratch tickets with 100,000 Grand bars to all employees as a token of appreciation
- Sent flowers & plants to staff for well wishes and sympathies
- Encouraged staff to complete a Starfish Award to recognize colleagues who go above and beyond, and gave gift cards to every employee who received a Starfish
- Made appreciation cards that can be personalized, and gave packets of them to supervisors so they have easy access to complete one for their staff

LGBTQQ+ / EDI COMMITTEE

- Planned & promoting a campus-wide PRIDE event for Wednesday June 9 for staff & clients in all programs
- Outlined information & data for an equity grant to help enhance the event with a theme of *Celebrating Our SOGIE*
- Began the conversation & process of expanding committee scope to equity, inclusion and diversity

PQI COMMITTEE

- The following reports were presented and are being used in PQI activities taking place throughout the agency: IT Helpdesk, Business Continuity Plan, Terminations & Exit Interviews, Fund Development and Standards of Excellence Training.
- Monthly and quarterly reporting continues on target including but not limited to Census, Policy, Committees, Program Outcomes, Restraint Reduction, Clinical Records, Surveillance Testing & Use of Isolation and Employee Turnover

SCHOOL PBIS & SOCIAL EMOTIONAL LEARNING (SEL)

- Implemented 'panther bucks' to reinforce positive behavior. Bucks are cashed in for amazing rewards at the school store
- Weekly SEL groups continue and are in-person
- Continue active participation in a PQI-guided School Assessment to determine the most effective ways to track student progress, and to identify ways to measure SEL and track its effectiveness
- Reviewed data extracted from SWIS system, identified data quality issues and created a remediation plan. All classroom staff will enter data to SWISS