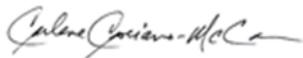


PQI Quarterly Newsletter

Q3 2021

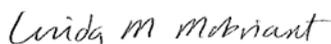
EXECUTIVE NOTE

We are fortunate to have such a skilled and motivated PQI team at St. Mary's and equally blessed to have so many staff members participating and contributing to our PQI processes and initiatives. It is through this work that we examine what we are doing well and what we need to improve. We aspire to be an organization that continuously learns and strive towards excellence. A big THANK YOU to everyone who moves us in that direction.



PQI NOTE

As we continue to increase in-person meetings, activities and events, I was struck by a board member's recent comment that 'interaction sparks innovation'. It's so true. The Staff Retention Committee, Residential Re-Set & most PQI Committees are 100% in person – and so many great things are happening! Following agency COVID-19 safety protocols, including weekly testing, self-monitoring of symptoms, temperature checks, staying home when feeling sick and staying 3 feet apart with masks when indoors is important so that we can continue to meet in-person – and continue to spark innovation! Please consider joining a PQI Committee so we can share ideas and implement action plans that will improve the agency for clients, staff and the community.



- Priority Initiatives & Spotlight: Client Clinical Records
- Census Data
- PQI Committee Highlights & Achievements

INITIATIVE SPOTLIGHT

CLIENT CLINICAL RECORD AUDITS

HISTORY & CURRENT STATUS: Clinical record audits are completed every quarter, in January, April, July and October. This includes records in all outpatient and all residential programs. Additionally, every April and October an audit of residential medical department documentation takes place.

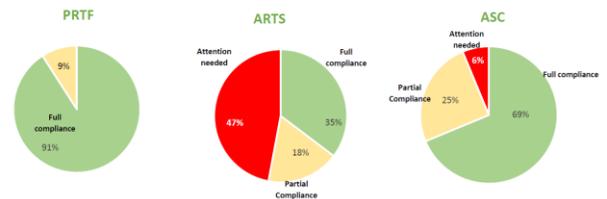
PQI and the respective programs work as a team to conduct the comprehensive audit. The process includes selecting records (random sample in some programs, and 100% of records open during the quarter under review in other programs), preparing forms, assigning auditors (providers who have not provided direct service to the client), actual audit, data analysis, assign rating based on standard key, and a formal report prepared for the Executive Director and respective Program Director.

Most important is what happens as a result of the audit. Specifically, using the results to inform practice or policy changes, to catch and correct 'drift', to provide support to providers and/or to celebrate staff or department successes.

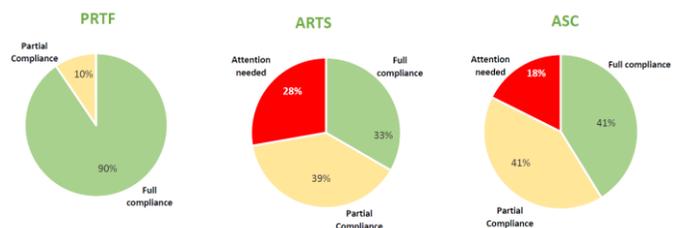
Compliance with key clinical documentation and their due dates has increased overall since records have been an agency initiative, with some quarters falling a bit backward, and most quarters showing improvement. When setbacks occur, action plans to improve and correct are implemented.

We continually strive for documentation improvements, and are consistently proud of the excellent work being done by all staff involved in client services.

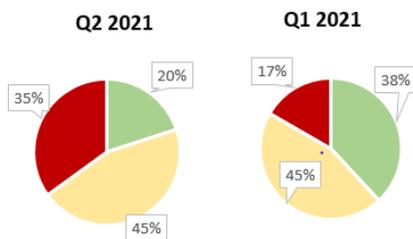
Residential Programs Q2 2021



Residential Programs Q1 2021



Outpatient Programs

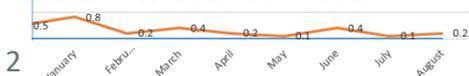


The reader should note that record audit data by no means tells the complete story of high quality treatment and services being provided to clients and families. Our audit system ensures that progress notes, treatment plans, clinical assessments and other key documents are read by licensed clinicians. During that clinical peer review is where client engagement and development of client-provider relationships is evidenced; where support, advocacy and empowerment is evidenced; and where we see use of evidence informed practices to support clients in achieving their goals.

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

RATE OF RESTRAINT

- 2021 YTD rate = .27
- **The entire year is to be celebrated.** Thank you to all staff whose patience, perseverance and trauma-informed approach is making a significant difference in the lives of residents & day students.



EMPLOYEE TURNOVER

- The PQI Workgroup continues to meet monthly. They engaged in activities to identify & prioritize retention impacts, and are monitoring 2 current action plans.
- One involves the restructured recruitment process and related data collection. The other is involves the milieu management team restructure.
- A third action plan is being created and implemented this quarter relative to supervision.

COVID-19 SURVEILLANCE TESTING & VACCINATION RATE

- Latest data shows 48% of all employees and independent consultants are vaccinated, which is well below the goal of 70%+.
- Isolation has not been in use since June.
- After no positive surveillance testing positive results in June, July or August, there have been 3 positive results September to October 20, 2021.

CENSUS

AGENCY CENSUS DATA

| Program | 2020 Q4 | 2021 Q1 | 2021 Q2 | 2021 Q3 |
|---------------------------|---------|---------|---------------------|----------------------|
| ARTS | 8 | 19 | 17 | 17 |
| ASC Hills | 9 | 18 | 16 | 19 |
| BBI Aftercare | 7 | 10 | 9 | 9 |
| CFTT | 4 | 6 | 7 | 8 |
| Day Students | 14 | 16 | 14 | 16 |
| Campus School Residents | -- | 23 | 22 | 21 |
| EOS | 27 | 27 | 31 | 30 |
| Equine | 11 | 12 | 20 | 25 |
| FISA | 6 | 8 | 12 | 9 |
| FISA Group | 6 | 11 | 5 | 1 |
| HFH Group | 9 | 14 | 18 | 8 |
| MLMC Group | 0 | 0 | 0 | 0 |
| Office Based | 101 | 138 | 120 | 107 |
| OSP | 14 | 21 | 15 plus 4 PL-OPS | 26 plus 11 PL-OSP |
| Our Family HFH Group | 0 | 0 | 0 | 0 |
| PRTF Hope | 6 | 6 | 6 | 5 |
| PRTF Horton | 7 | 10 | 9 | 10 |
| PRTF Mauran | 6 | 7 | 7 | 7 |
| SAE | 4 | 8 | 9 | 6 |
| SAFFE | 15 | 18 | 21 | 27 |
| STAAR | 26 | 26 | 29 | 30 |
| All Programs | -- | 413 | 391 | 396 |
| Unique individuals served | -- | 289 | 278 | 281 |

CENSUS DETAILS

Average Agency Daily

Census: 257.33

(down from 333.67)

July = 273

August = 260

September = 239

Data based on Best Notes

P – Census Summary Report.

83 clients (39% of total clients) participated in two or more programs during Q3 2021. This is up from 39% the previous quarter.

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.

Appreciation to all intake staff and those who provide demographic data for clients.

PQI COMMITTEE HIGHLIGHTS

SAFETY COMMITTEE

- Planned & carried out an agency-wide lock down drill with an invitation to the NP police to participate.
- Selected visual posters to assist with managing emergencies, and facilitated posting them throughout campus.
- Facilitated access to car seats for programs to utilize for client transportation.
- Monitored progress on campus projects including sewer repairs outside Hills House, multiple House doors and camera installation in the school conference room.

CRITICAL INCIDENT COMMITTEE

- Physical interventions continue to decrease, with ZERO restraints in September and just one each in July and August.
- TCI certification training for 5 Residential Supervisors is scheduled in November.
- The Six Core Strategies training has been fully incorporated into the initial 120 hours of milieu staff training.
- A PRTF unification work-group has started to meet toward the goal of increasing consistency across the PRTF houses.
- On 9/29, a Residential Re-Set workgroup consisting of clinical, BBL, milieu & PQI staff as well as residential youth representatives started meeting weekly to analyze programming so that a comprehensive action plan can be created to enhance services.

RISK PREVENTION AND MANAGEMENT COMMITTEE

- Completed a comprehensive Risk Targets Review system to ensure attention every other month to progress on identified risks in the areas of: critical incidents, client rights, IT, finances, insurance & liability, compliance w/ legal requirements, HR practices, contracts, conflicts of interest and COVID-19.
- Revised the Work from Home Policy.

RESIDENTIAL PARENT COUNCIL

- The Council continues to focus on restructuring & responding to parent's wishes to meet in-person (as they had been pre-pandemic). One meeting this quarter was in-person!
- There are now 2 Council sessions – one mid-day and one in the evening - to increase opportunities to participate at times when parents are available.
- Engagement strategies have been implemented to expand the Council to include parents from PRTF, School & Hills House.

WELLNESS COMMITTEE

- Continues to offer weekly free virtual Yoga, and has added free Meditation for staff as well.
- Highlighted summer safety tips on the Wellness bulletin board, and then transitioned to a focus on vaccination information.
- Hosted virtual Wellness Check-Ins open to all staff.
- Submitted achievements to BCBS for consideration of a Workplace Wellness Award.
- Established a Wellness folder on the agency Google Drive, and populated it with resources that all can access.

RESIDENTIAL YOUTH COUNCIL

- Youth Council continues to meet best in smaller settings versus a large meeting.
- Several youth are participating in the residential re-set work group, where their voices and contributions are critical to the process.

STAFF RELATIONS

- Staff appreciation was expressed with snacks for staff including Netties Kettle Corn in July, an ice cream truck and freezer treats for August and Apple Cider Donuts in September.
- Implemented small changes to the Starfish Award, including bigger and better recognition for staff, promotion of the nomination process and including a photo with permission of the winners.
- A quarterly staff raffle was re-implemented in September, with all staff entered to win gift cards.

LGBTQQ+ COMMITTEE

- Established and populated a folder of LGBTQQ+ resources on the agency Google Drive.
- Facilitated work necessary to be re-certified as a BCBS Safe Zone organization, including policy review, documentation and training practices.
- Planned and scheduled a holiday PRIDE event for December 8, 2021, which will include follow up from the June SOGIE PRIDE event.

PQI COMMITTEE

- All regularly scheduled reports were presented throughout the quarter including fund raising, census, turnover, employee evaluations, restraint, COVID surveillance testing, use of isolation & vaccination rates, client records & staff committees. The PQI School Guided assessment was also distributed to committee members.

SCHOOL TECHNOLOGY COMMITTEE

- Rolled out the new Smart Board for downstairs classrooms.
- Converted all desktop computers in the lab to Chrome Boxes.
- Exploring grant opportunities that will be needed to replace Chromebooks to ensure they are up-to-date.
- Scheduled SY21/22 Committee dates, and received the PQI Guided Assessment recommendations for action planning.

SCHOOL PBIS & SOCIAL EMOTIONAL LEARNING (SEL)

- The summer program continued implementation of PBIS and SEL principles.
- The PQI Guided School assessment was finalized, including recommendations for expanded use of the PBIS SWIS system.