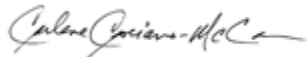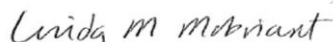**ST. MARY'S HOME FOR CHILDREN**
PQI QUARTERLY REPORT
First Quarter: January – March, 2020
COVID-19 Global Pandemic

Executive Note: As stated in Linda's note below, the PQI quarterly will not look like it always does and this is due to the unprecedented time in which we find ourselves. I have been amazed by the flexibility and creativity of our staff to adjust to big changes in the way that we function and grateful for the commitment and courage our staff is exhibiting to work through such an uncertain time. Our staff consistently rise to the many challenges we face. The coronavirus is another challenge to face and overcome. In this report, you will read about many of the steps we have taken to prepare for COVID-19 and what we are doing to mitigate the risk of it entering the residential programs. There is no guarantee that we will not be impacted by COVID-19 so it is important that all of us who are on campus every day monitor ourselves to ensure that we do not bring it on campus and stay home when sick. Please take a moment to read this report and do not hesitate to reach out to me with any questions or concerns you may have. In the meantime, please stay healthy and safe.

PQI Note: With so many significant changes taking place in a very short period of time due to the COVID-19 pandemic, I felt publishing the Quarterly was important but that it wouldn't be in traditional format. I wanted to highlight that as an agency, we've been successfully navigating this crisis to date and have so many business functions continuing under our 'new (temporary) normal'. This is in part due to strong maintenance of accreditation systems in place throughout all programs and departments; in part due to strong leadership, and critical decision making that is taking place throughout the agency; but mostly, this has been due to AMAZING staff. So many thanks to all employees working on campus and remotely, all under significantly changed conditions, and at a time of increased stress. To those who are furloughed during this time, we look forward to having you all back. Please know how much everyone's work is appreciated. We will return to our previous format - hopefully in Quarter Two.

Contents

COVID-19 Business Continuity Highlights

On 3/1/2020, Rhode Island Department of Health confirmed the first 'presumptive positive' case of the pandemic virus. Significant actions, and a multitude of communications, protocols and practices were put in place in preparation for, and mitigation through, the pandemic.

Our initial business continuity planning meeting specific to the pandemic took place on 2/26/2020. We quickly increased frequency, intensity and number of participants. We continue remote briefings with the administrative Leadership Team 2-3 times per week. Actions and decisions have been (*and continue to be*) taken in reliance on information from, and discussions / communications with:

- RI Department for Children Youth and Families;
- RI Department for Education;
- RI Coalition for Children and Families;
- Centers for Disease Control;
- RI Department of Health;
- Department for Health and Human Services;
- RI Governors' Office;
- SAMHSA;
- COA;
- Insurers;
- RI Department for Labor and Training;
- National social work ethics experts and national allies.

Please note the following list is not all inclusive of actions taken during the quarter, and does not highlight the continuation of the 'regular work' still taking place agency-wide.

- Prevention focused handouts & information distributed to staff and clients; postings were placed across campus; the administration committed to no less than weekly communications to all staff;
- Increased purchases of cleaning, medical and food supplies; increased campus-wide cleaning on a documented schedule; transitioned third floor from shared office spaces to an isolation unit;
- Created list of essential campus-based staff, and closed campus to all others (effective 3/18/2020); implemented a protocol for non-essential campus based staff to access campus with approval from the Executive Director only; closed campus to all vendors except food/essential deliveries, and safety vendors if needed;
- Two Decision Trees created; one to create consistency for employees to self-assess ability to work, and one for staff to use to assess youth's health; limited gatherings to 5 or less (except residential houses); requiring staff to wear masks when on campus; reinforcing 6 foot apart distancing (except residential houses);
- Implemented a Work at Home Policy, and a Bring Your Own Device Policy;
- Transitioned school to remote based learning with a RIDE approved plan; implemented staff and student training for remote use of Chromebooks; increased use of 36 Chromebooks for remote learning continues into Q2;
- Established 23 additional virtual remote access points for essential remote-working staff; established use of Google Hangouts for office and community based programs to conduct Telehealth sessions; implemented use of Google Hangouts for meetings among teams; adjusted billing for Telehealth and increased calendar appointment 'types' to track data more accurately; implemented a written Telehealth Consent Form to replace verbal consent;

- Increased frequency of remote contacts with office and community based clients; exploring implementation of remote group therapy to re-connect clients with peers;
- Restricted residential youth to on-campus & outdoor recreational activities only; significantly increased on-campus activities for youth; put a hold on in-person visitation, and implemented use of I-Pads to connect visually with family and friends; implemented Telehealth for families;
- Established protocols with DCYF for residents returning to campus following AWOL, hospitalization and for new admissions;
- Increased crisis intervention from teams working in both remote and on-site locations; continual attention to changing client needs as the length of time increases under restrictions; observing patterns with client changing week-to-week;
- Conducting data-analysis of incidents for individual residents, as well as the residential program as a whole, to assist with decision making and planning for future outbreaks;
- Established written procedures in the kitchen to isolate working staff; implemented a plan to provide 18+ emergency meals if needed; increased cleaning protocols;
- Established protocols for use of the isolation unit, including staffing, use of PPE, cleaning, supplies and more;
- Communicated HR 6201 FMLA Emergency Paid Sick Leave information; and RI Department of Labor and Training Unemployment benefits information to affected staff; provided essential campus-based staff with letters in the event they are stopped by local authorities;
- Implemented hazard pay for employees providing direct service to residents on the isolation unit;
- Implemented wide use of conference calls to continue meetings with remote participants including CERT/Safety; Critical Incidents; Treatment Plan & Review Meetings; Leadership Team Meetings; and administrative Briefings;
- Continual collaboration with funders of contracted programs; began tracking all expenses related to COVID-19; submitted an application for the payroll protection plan;
- Continual communication with donors; applied for emergency funds available to non-profits;
- Implemented spot-checking of staff temperatures and Decision Tree conversations to ensure sick staff are not on campus;
- Collaborating and advocating for expedited testing of our staff (i.e. group home staff), to decrease the length of time employees with no symptoms need to remain out of work if they are in fact negative; additional advocacy with DCYF regarding testing of youth prior to admission;
- Distributed ergonomic tips for remote working staff;
- On target to complete the COA Self-Study submission as scheduled (pens down 4/24/2020);
- *Again, thank you to everyone working so hard remotely and on campus doing 'business as usual' in addition to the work above which was necessary due to the pandemic.*

Modified PQI Committee Reports

CERT/Safety Committee
- Finalized Narcan policy, and revised / re-issued the agency Safety & Emergency Manual;

Staff Relations
- Hosted the agency post-holiday party, which had excellent turnout - 126 in attendance;
- Distributed staff appreciation treats including pretzels, chocolate lollipops and candy; hosted a Valentine's Day shopping event; sent plants to staff for sympathy/illness, and 5 baby gifts.

Wellness Committee
- Continued to hold free Yoga classes every Tuesday;

LGBTQQ+ Committee
- Facilitated "I Am Jazz" events campus-wide in February, later posted to social media;
- Office/community based staff held an after-school reading for clients with snacks; and 26 campus school students participating in activities that included a self-pride collage with tie-in to weekly Social Emotional Learning.

PQI Committee
- Finalized implementation of the agency-wide Outcomes Project;

Risk Prevention and Management Committee
- Finalized revisions to the Business Continuity Plan Policy on 3/10/2020, which had been assessed throughout the quarter;

Residential & School Improvement
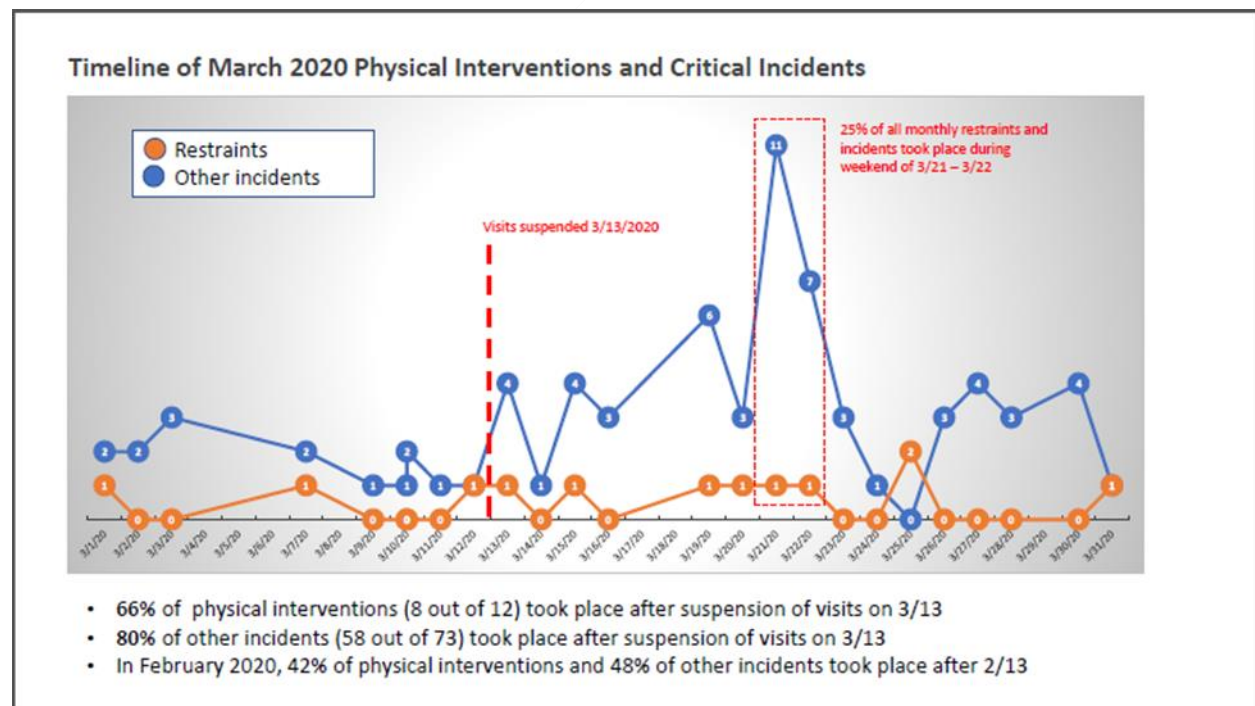- Successfully conducted staff survey regarding supervision, and began to aggregate the responses for discussion and action planning;

School Report: PBIS and Social Emotional Learning (SEL)
- Continued weekly social-emotional learning and implementation of project based learning;

Critical Incident Committee
- Significant responses and actions put in place to support individual youth as well as groups of youth impacted by the campus-based restrictions;
- Utilizing graphic data to help guide decisions and action planning; example below.

Timeline of March 2020 Physical Interventions and Critical Incidents

- 66% of physical interventions (8 out of 12) took place after suspension of visits on 3/13
- 80% of other incidents (58 out of 73) took place after suspension of visits on 3/13
- In February 2020, 42% of physical interventions and 48% of other incidents took place after 2/13

PQI Initiative / Action Plan spot-light: Affirmative Action Plan
A PQI Report on Affirmative Action data was completed remotely during the quarter. 2017 – 2019 demographic data (race, gender, ethnicity, veteran, and disability status) for applicants, and for new hires, was analyzed to see if there are any demographic differences. Demographic factors for new hires were also analyzed in comparison to our 2019 annual clients' demographics. The necessary discussion and action planning as a result of the analysis will take place in the upcoming quarter.

Agency Census Data

Average Agency Daily Census = 316
(January = 306; February = 328; March = 314)
Data based on Best Notes P – Census Summary Report

300 unique individuals, representing 411 clients, served in programs as follows:
ARTS 13
CFTT 9
EOS 42
STAAR 28
OSP 3
Equine Program 22
Office Based 120
SAFFE 18
FISA 13
MLMC Group 11
FISA Group 17
SAE 6
ASC Hills 14
BBI Aftercare 13
Day Student 24
HFH Group 28
RTX Hope 7
RTX Horton 9
RTX Mauran 8
Our Families' HFH Group 6

Data based on Best Notes P – Weekly Census Report
Data Quality review and correction of data for reporting 4/10/2020

Clinical Record Audits

Residential Audits (ARTS, Residential, Assessment Center)

- The audit was held on 1/28/2020, and the full report is available from the Director of Operations and PQI;
- RI DCYF collaborated and created a Medicaid compliant PRTF audit form. The new form is extensive, and requires an audit of significantly more data than the previous residential-level-of-care form. Due to the additional resources dedicated to PQI and the ability to pull data from BN through Reports, changes in regard to form completion were made in the residential audit process. Specifically, PQI will audit every restraint, and will populate forms with 'date completed' data (e.g. Treatment Plan Review; CANS; CSEC Screening etc.). That preparation allows clinical staff to focus exclusively on the quality of work being done in their peer review audit (i.e. does treatment plan connect to assessment; is there evidence of culturally appropriate services; do progress notes evidence work on treatment plan objectives etc.).

Community and Office Based Audits

- The audit was held on 1/29/2020, and the full report is available from the Director of Operations and PQI;
- This audit cycle showed a noticeable improvement from the previous quarter. A pilot program to set reminders as 'tasks' in Best Notes for key clinical milestones was implemented, and is attributed to the reduced number of late or missing documents. Work done with clinicians to avoid creating documents but not publishing them, has significantly reduced this type of case record error. Graphs to show these successes were created for use at a planned staff celebration.