

CFC PQIC Q2 2024 Summary Report



Date: 5/8/2024

Dear Stakeholder,

Below you will find the most recent Performance and Quality Improvement (PQI) results for Christian Family Care programs and departments. PQI is an important process at CFC that ensures we serve our clients, students, community partners and other stakeholders well.

Highlights for Q2:

- *Placement permanency remains high with 0 disruptions in the DCS Adoption and Youth Permanency programs.*
- *File compliance is strong with 12 programs achieving over 90% compliance and 3 other programs being in the 80% range.*
- *The Staff turnover rate continues to drop for CFC.*
- *A high percentage of program and administrative outcomes are being achieved and 4 Improvement Plans were completed.*
- *IT risk levels have been lowered due to additional protections put in place by our Business Intelligence Team.*

Please note the following regarding our reporting process: If any programs or departments fail to meet their file review goal of 90% or a specific outcome goal, an Improvement Plan (IP) will be implemented. *Goals must be achieved for two consecutive quarters for the Improvement Plan to be considered complete.*

- **File Review Data:** A total of 176 files were reviewed for Q2.

Areas of Strength (*compliance with effective practice indicators*): Files need to meet a 90% compliance standard. Twelve of the 15 department file reviews achieved 90% or above. Below are the programs that achieved this compliance benchmark for Quarter 2 of FY2024:

- **Counseling** achieved 96%, about the same as Q1 which was 97%.
- **Infant Adoption** achieved 99% up from 98% in Q1.
- **Foster Care** achieved 96% file compliance in Q2 2024.
- **TFC files** increased to 98% from 92% compliance.
- **Volunteer** file compliance decreased to 91% from 97%.
- **Family Care KIDS** achieved 90%, down slightly from 92%.
- **Family Coaching** achieved 95%.
- **STRONG Families** improved to 100% for **Host Families and Family Friends**.
- **STRONG Families** also improved to 100% from 94% for **Placing Parent** files. *IP Complete*
- **Mentor** files improved to 100% from 80% in Q1. *Existing IP*
- **Staff Care** files improved to 91%, up from 73% in Q1. *Existing IP.*

Areas of Opportunity

- **DCS Adoption** dropped to 80% from 93% in Q1. *Existing IP*
- **Pregnancy Counseling** increased significantly from 84% in Q1 to 87% in Q2. *Existing IP.*
- **Complex Care Intervention (CCI)** improved from 61% in Q1 to 83% in Q2. *Existing IP*
- **Youth Permanency** dropped below 90% to 89% from 93% the previous quarter. *New IP*

➤ All-Agency Programs Outcomes for Q2 2024

- **Agency Outcome 1:** *99% of clients were satisfied with services received when asked, "How satisfied were you with the services received?" on the Client Satisfaction Survey. (Goal: 90%)*
- **Agency Outcome 2:** *99% of clients were satisfied when asked, "Do you feel the agency staff is respectful of persons from all cultural backgrounds?" on the Client Satisfaction Survey.*
- **Agency Outcome 3:** *While receiving services from CFC, all staff, children/clients shall remain in a safe and stable living environment as reported through Incident Reports. Total Incidents Statewide Q2: 10% (not to exceed 10%) and Emergency Incidents Statewide Q2: 5%, (not to exceed 5%)*

➤ Program Outcomes achieved in Q2 2024

- 98% of **Counseling client's** Treatment plan objectives showed improvement. (Goal: 95%)
- 71% of **Counseling** clients show improvement from intake to discharge assessment as evidenced by PROPS, PCL-5, PHQ9 assessment, or GAD-7 assessment. A drop from 83% in the previous quarter but still meeting the goal. (Goal: 60%)
- The retention rate of **Foster Families** was 3.1 years in Q2 2024 (Goal: 3 or more years)
- 100% of **DCS Adoption** children remained in their adoptive placement during Q1 (Goal:75%) *Completed IP*
- 100% of **YP youth** remained in their adoptive placement in Q2 (Goal: 70%) *Completed IP*
- 76% of **Foster Care** parents made 3 or more connections with birth families (Goal: 65%) *Completed IP*
- 100% of **YP** youth, age 14+ were discharged by reason of permanent connection om Q2. (Annual goal: 80%) *Existing IP*
- One new **Therapeutic Foster home** was added to the CFC roster of homes in Q2. (Annual goal: 2) *Existing IP*

➤ Program Outcomes Improvement Opportunities

- 28% of **Mentors** engaged their mentee in Kingdom Touches (Goal: 80%) *Existing IP*
- **Youth Permanency (YP)** placed 1 youth in a Christian home in Q2. Correction for Q1-0 children placed in Christian homes in Q1. (Goal:10) *Existing IP*
- Q2 utilization of **TFC beds** was 46% in Q2. (Goal: 68%) *Existing IP*

➤ Administrative Outcomes

- **Staff Care Outcome 1:** Statewide turnover rate: 29% (not to exceed 30% annually).
- **Staff Care Outcome 2:** 97% of employees completed their annual review within 45 days of hire anniversary date up from 82% in Q1 (Goal: 85%) *Existing IP*
- **Finance Outcome 3:** 98% of invoices were paid in full within 60 days, up from 77% in Q1. (Goal – 85%) *Existing IP*
- **Finance Outcome 4:** CFC's cash on hand is at 155 days. (Goal: 150+ days)
- **Information Technology Outcome 5:** Zero user accounts were compromised in the quarter with a zero-trust Microsoft 365 environment as measured through SIEM. (Goal: 0 accounts)
- **Information Technology Outcome 6:** Laptop patch rate is 61% on employee devices (Goal: 85%) *Existing IP*

PQI Committee Comments/Recommendations

- Overall agency programs and departments are maintaining high standards and show improvement in identified outcomes.
- Risks in the areas of data management and confidentiality are being managed well by the BI Team.
- Additional training opportunities on CFC's data management system are recommended.

For questions regarding this report, feel free to contact me at: susan@cfcare.org. I would be happy to discuss our results with you.

Blessings,



Susan M Dudley LMSW
Director of Quality and Continuous Improvement