

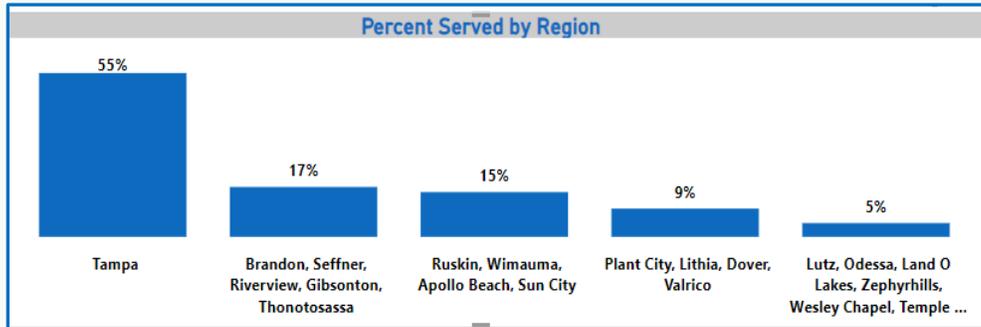


# PQI ANNUAL REPORT

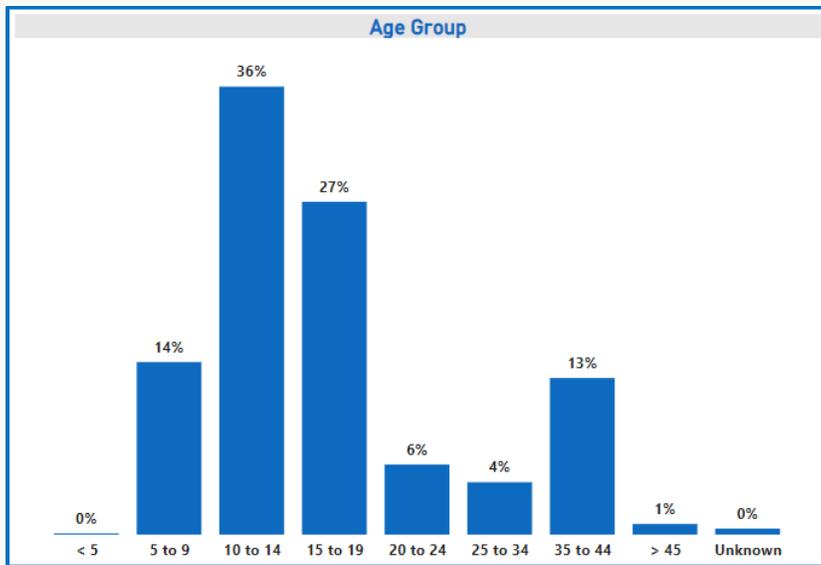
## Behavioral Health Programs

FY 2021-2022

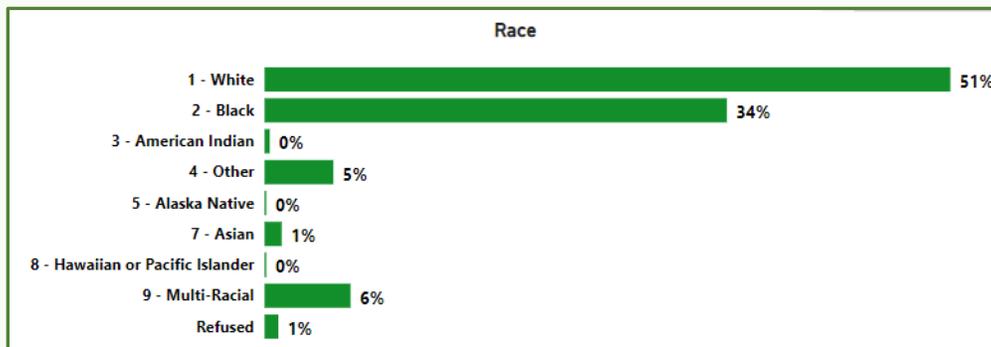
### Who We Served



Fifty-five percent of participants served were from the Tampa area, followed by 17% from the Brandon/Seffner/Riverview area and 15% from the South County (Ruskin, Wimauma, Apollo Beach) area.

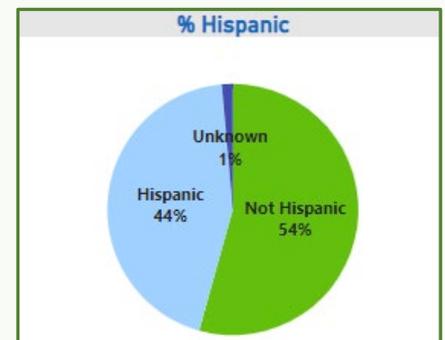
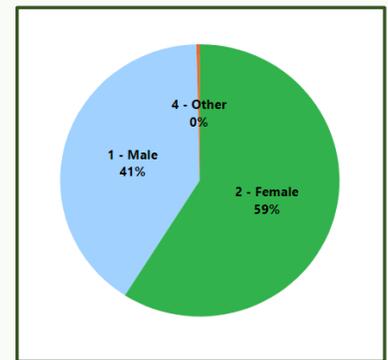


The largest percentage of clients served were in the 10–14-year-old age group (36%), followed by the 15–19-year-old age group (27%).

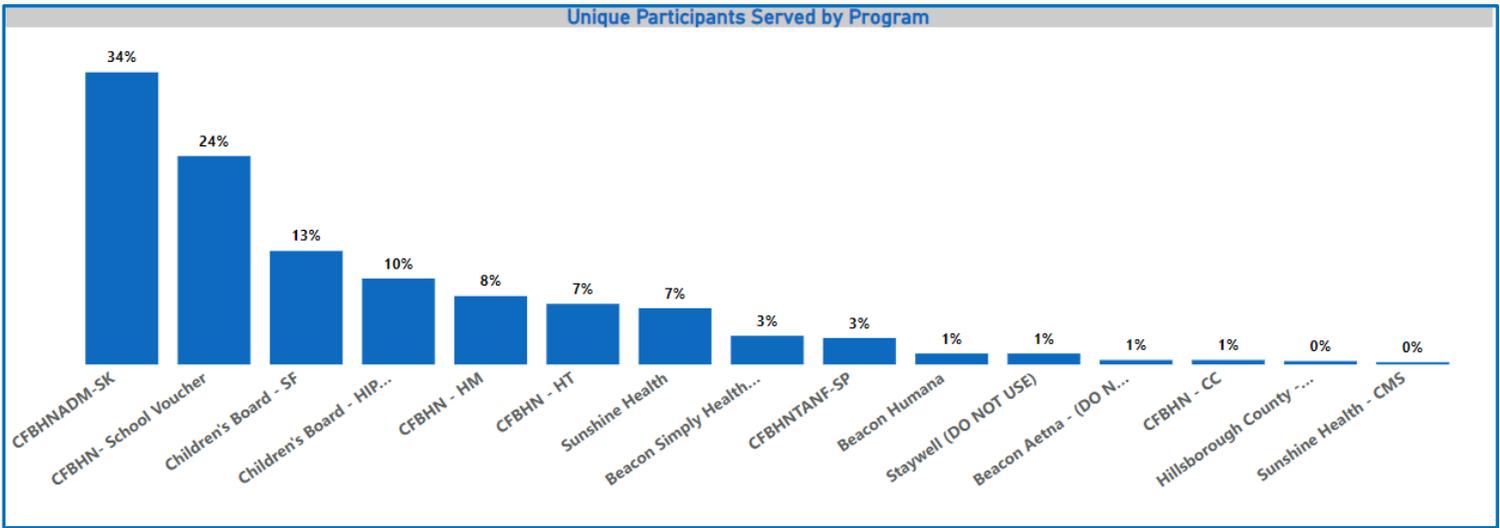


S4KF served over 900 participants in its behavioral health programs in the past year.

Through a partnership with Hillsborough County and the Department of Children and Families, S4KF implemented a new therapeutic program to support youth involved in the Juvenile Mental Health Court and their families. This program began in May of 2022.

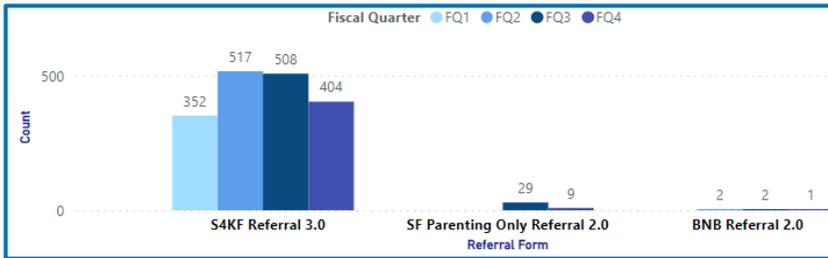


## Numbers Served

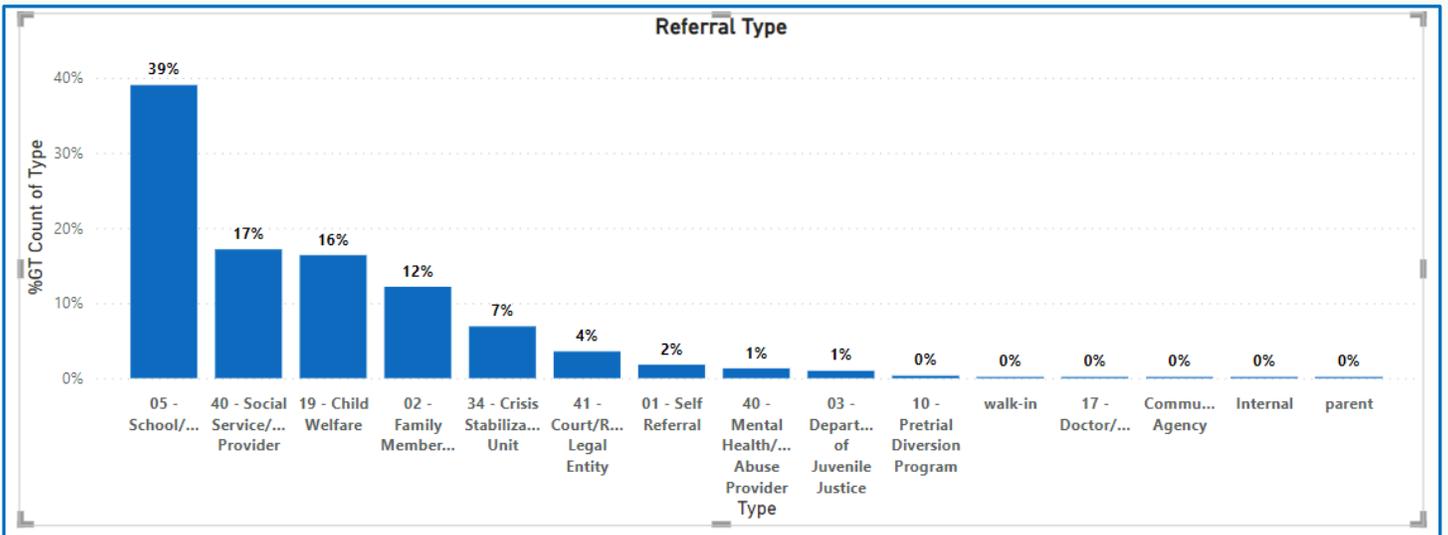


Successful Kids/Youth/Parents served 37% of participants, followed by School Voucher at 24%. The Children's Board programs (SF & HIPPPY) served 23% of participants with Healthy Minds at 8% and Healthy Transitions at 7%.

## REFERRALS



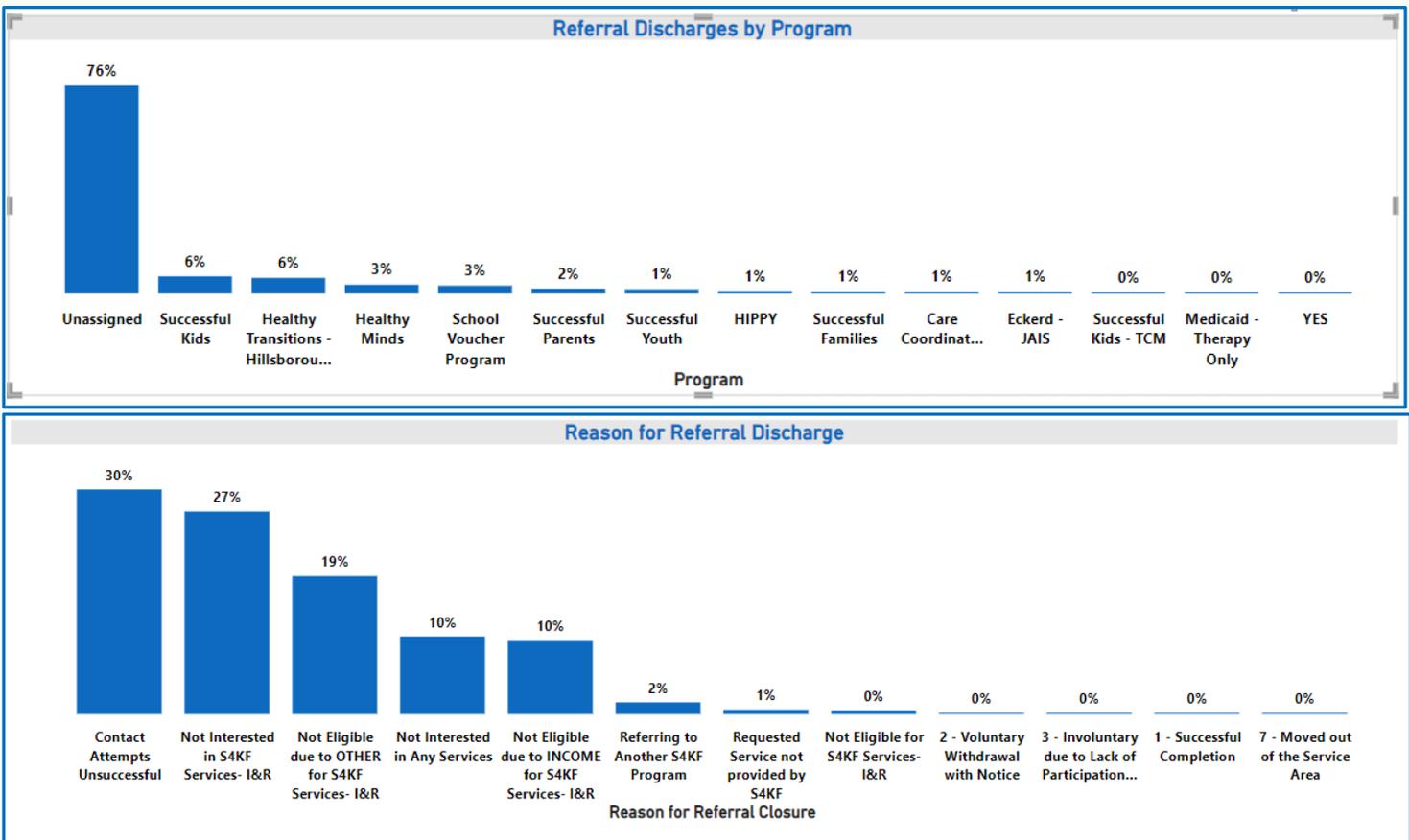
S4KF processed over 1,800 referrals this year. The school system and child welfare system continue to account for just over half of the referrals received. S4KF has always had strong ties to the school system and school personnel have been a primary referral source since the agency was founded.



Over half of the referrals received from the School/Education system had a referral source subtype of Other School /Education (56%) followed by School Social Worker's (24%). Child Protection Investigators account for 74% of referrals coming from Child Welfare with a majority of Crisis Stabilization referrals coming from Gracepoint (91%).

- Primary Referral Source Subtypes**
- School/Education:**
- Other School/Education = 56%
  - School Social Worker = 24%
  - Guidance Counselor = 16%
- Child Welfare:**
- Child Protection Investigators = 74%
  - Other Child Welfare = 19%
- Social Service Provider:**
- Other Social Service/Community Provider = 89%
  - 211 = 7%
  - Healthy Start = 3%
- Family Member Friend**
- Parent/Guardian = 92%
  - Other Family Member = 6%
- Crisis Stabilization**
- Gracepoint = 91%
  - Other Crisis Stabilization Unit = 9%

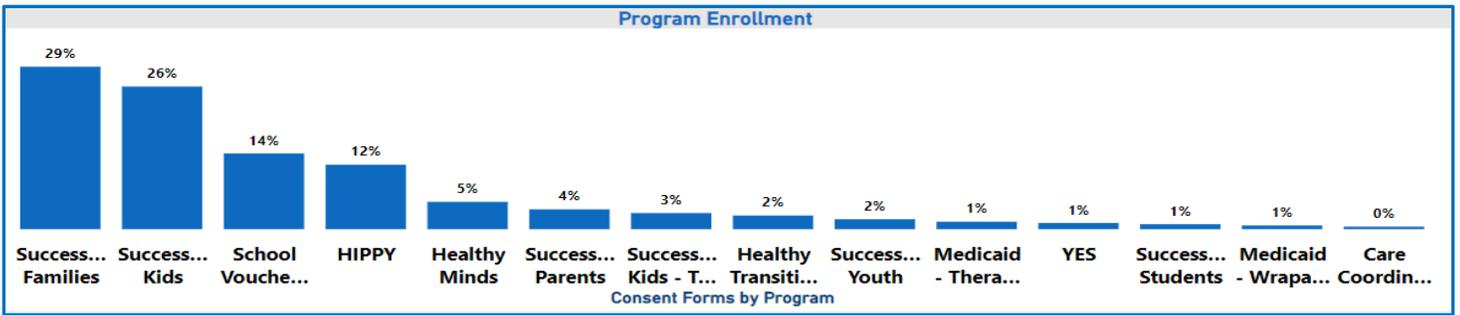
## Referral Discharges



There were 1202 Referral Discharges completed. A majority of them (76%) belonged to the Unassigned category, meaning the referral came into the agency & not to a particular program.

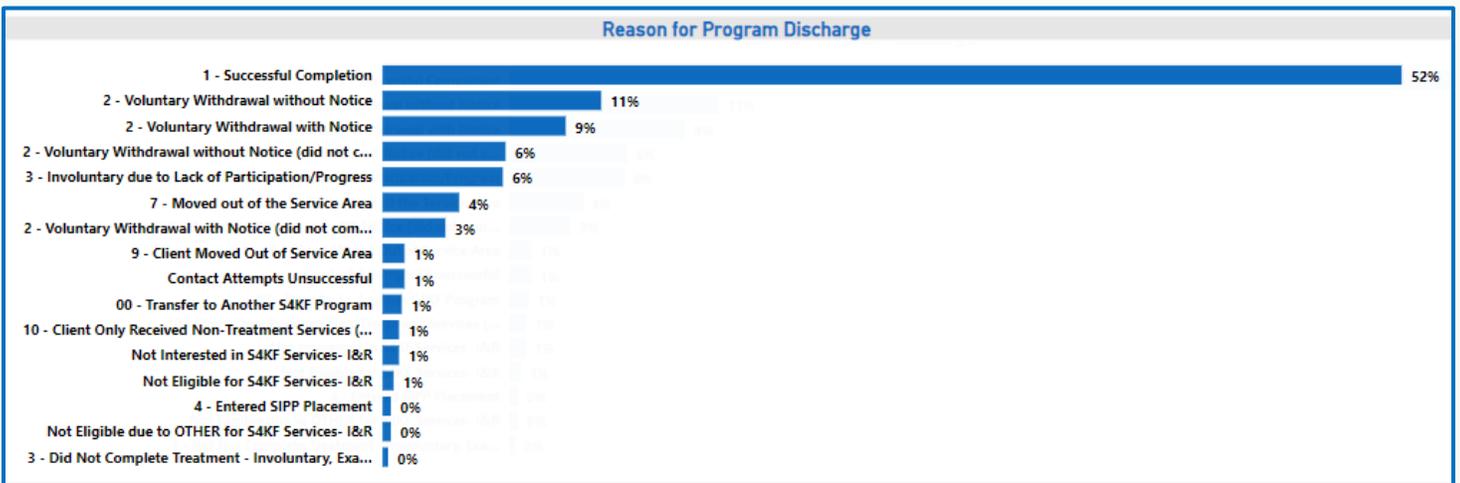
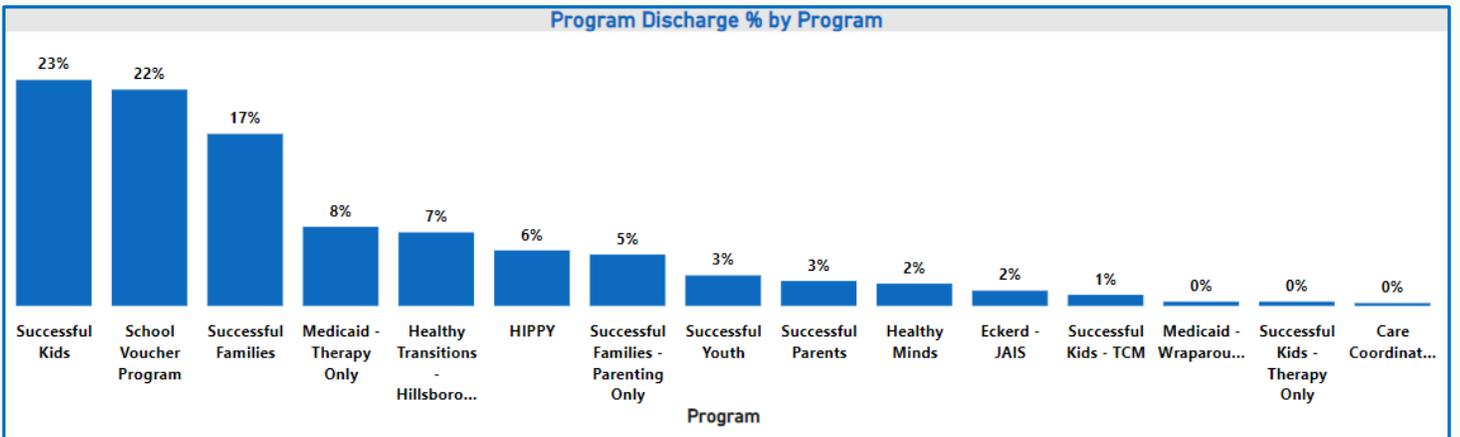
The primary referral discharge reason was Contact Attempts Unsuccessful, at 30%, followed by Not Interested in services at 27% and Not Eligible due to Other at 19%.

# ENROLLMENT



Of the 1824 referrals that entered the system, 546 were enrolled in one of S4KF's programs (30%). Successful Families accounted for 29% of those enrollments, followed by Successful Kids at 26%, School Voucher at 14% & HIPPY at 12%.

# PROGRAM DISCHARGE



There were 726 Program Discharges completed. The Successful Kids Program accounted for 23% of Program Discharges, followed by the School Voucher Program at 22% and the Successful Families program at 17%. The primary reason for Program Discharge was Successful Completion, at 52%, followed by Voluntary Withdrawal without Notice at 11% and Voluntary Withdrawal with Notice at 9%.

### Primary Program Discharge Reasons by Program:

- School Voucher Program: Successful Completion at 60%, followed by Voluntary Withdrawal without Notice at 13%
- Successful Kids: Successful Completion at 44%, followed by Voluntary Withdrawal with Notice at 12%
- Successful Families: Successful Completion at 86%, followed by Voluntary Withdrawal without Notice at 7%
- Healthy Transitions: Voluntary Withdrawal without Notice at 40%, followed by Successful Completion at 15%
- HIPPY: Successful Completion at 58%, followed by Involuntary due to Lack of Participation/Progress at 18%

# Program Performance

## Outcomes

### Successful Kids/Students/Youth

Outcome	Goal	Actual
% Improved Function	64	72
% Stable Housing	93	97

Both goals were met with with over 70 % of clients showing improved functioning and 97% with stable housing

### Successful Families

Outcome	Goal	YTD
Increased Social Supports	85%	100%
Concrete Supports	85%	94%
Parents Reduced Stress	70%	100%
Increased Parenting Skills	80%	95%
Improved Mental Well-Being	80%	95%

\*Children's Board FY starts 10/1.

Successful Families met or exceeded all goals , with 100% in 2 areas, 95% in 2 areas and 94% in 1 area.

*Healthy Transitions exceeded their goal of serving 65 unduplicated participants (70). The program is working towards establishing additional outcomes to measure based off of a newly created EHR form.*

### Healthy Transitions

Outcome	Goal	YTD
# Participants Served (combined/unduplicated)	65	70
# New Participants (Wraparound / Intensive CM)	N/A	29
# New Participants (Educational/Vocational Services)	N/A	19
# New Participants Peer Support Services	N/A	6
Outreach Activities	N/A	340

### Healthy Minds

Healthy Minds	Admits 2 Per Month 24 for FY		Outreach/Education Avg 3 Per Month 36 for FY		70% Improved Function
	Month	YTD	Month	YTD	
Jul-21	2	2	3	3	90%
Aug-21	2	4	4	7	50%
Sep-21	2	6	4	11	100%
Oct-21	1	7	4	15	100%
Nov-21	3	10	3	18	100%
Dec-21	3	13	6	24	100%
Jan-22	2	15	4	28	100%
Feb-22	2	17	3	31	100%
Mar-22	2	19	3	34	100%
Apr-22	2	21	2	36	100%
May-22	2	23	2	38	60%
Jun-22	1	24	4	42	86%

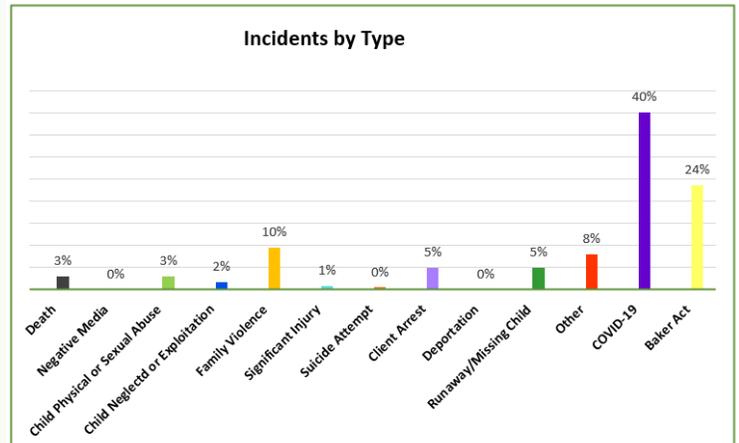
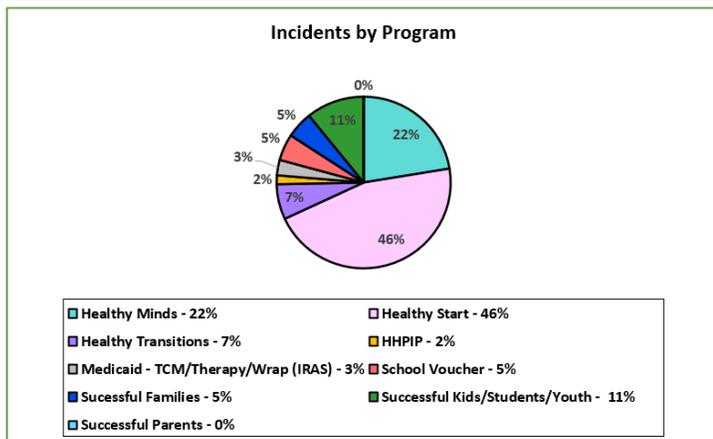
*The Healthy Minds program met their goal of 24 admits for the FY & exceeded their goal of 36 Outreach/Education events. They met the goal of 70% Improved Function 10 out of the 12 months (83%).*

\*Successful Parents – Outcomes not reported due to very limited sample.

# Administrative Performance

## Participant Health & Safety

### Client Incident Reports n241 (annual)



Incidents by Program	Q1	Q2	Q3	Q4	ANNUAL
Healthy Minds	16	14	17	7	54
Healthy Start	41	20	38	11	110
Healthy Transitions	10	1	4	1	16
HHPIP	1	1	0	2	4
Medicaid - TCM/Therapy (IRAS)	0	2	3	2	7
School Voucher	3	4	5	0	12
Successful Families	3	0	9	0	12
Successful Kids/Students/Youth: ADM	12	4	3	7	26
Successful Parents	0	0	0	0	0
<b>Total</b>	<b>86</b>	<b>46</b>	<b>79</b>	<b>30</b>	<b>241</b>

Incidents by Type	Q1	Q2	Q3	Q4	ANNUAL
Death	2	3	1	1	7
Negative Media	0	0	0	0	0
Child Physical or Sexual Abuse	0	0	2	5	7
Child Neglect or Exploitation	1	1	1	1	4
Family Violence	7	7	4	5	23
Significant Injury	0	0	2	0	2
Suicide Attempt	0	0	1	0	1
Client Arrest	4	4	1	3	12
Deportation	0	0	0	0	0
Runaway/Missing Child	2	1	5	4	12
Other	7	5	5	2	19
COVID-19	46	7	40	4	97
Baker Act	17	18	17	5	57
<b>Total</b>	<b>86</b>	<b>46</b>	<b>79</b>	<b>30</b>	<b>241</b>

There were 241 client incidents reported this year, with Quarter 4 having the least number of incidents at 30. The fluctuation in incidents is largely related to the number of COVID-19 reports.

The Healthy Start program continues to account for the highest number of incidents (46%) due to program size, followed by Healthy Minds (22%) and Successful Kids/Students/Youth (11%).

COVID-19 reports accounted for the highest type of incident (40%), followed by Baker Acts (24%) and Family Violence (10%).

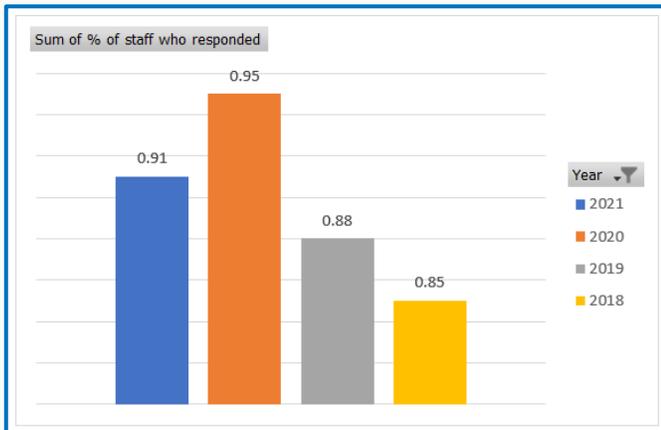
Family Violence dropped from 15% in Q2 to 5% in Q3.

# Administrative Performance

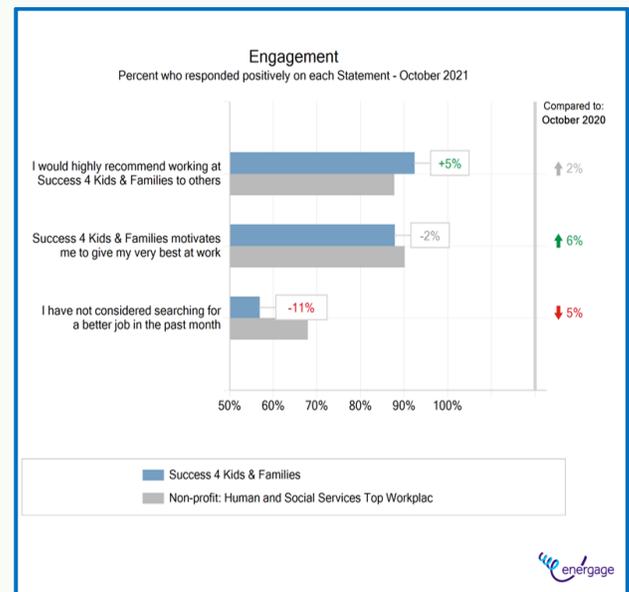
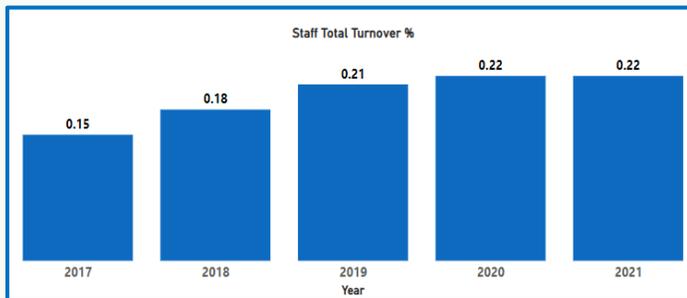
## Staff Engagement

Each Year S4KF participates in a survey of staff engagement levels in local nonprofits conducted by Energage. The survey provides feedback from staff about their perception of organizational health and effectiveness, alignment with values, management effectiveness, inter-departmental cooperation, and cross agency communications. Using this method to obtain staff feedback allows S4KF to compare its results to an external benchmark, providing a more informed assessment of agency performance in terms of creating a positive workplace environment.

In 2021, 91% of S4KF staff participated in the annual engagement survey. The participation rate was down 4% from the previous year which will be an area of focus for next year.



**S4KF was named Top Workplace for Small Businesses, being one of only two non-profits to be named as a Top Workplace in Small Business Group.**



2022 saw the same staff turnover as 2020 and a slight increase compared to 2018-2019.

The number of non-voluntary turnover for 2021 was as 25%, compared to 35% in 2020 and 29% in 2019.

Although the number of non-voluntary turnover decreased, the number of voluntary turnover increased from 65% in 2020 to 75% in 2021.

Staff satisfaction and retention continues to be a priority for Leadership and Management staff.

In 2021, S4KF exceeded the benchmark for “I would highly recommend working at S4KF to others” and showed a 2 % increase compared to 2020.

Although “S4KF motivates me to give my very best at work” was 2% below the benchmark, there was a 6% increase compared to 2020.

“I have not considered searching for a better job in the past month” falls 11% below the benchmark and was an overall drop of 5% in comparison to 2020.

# Performance & Quality Improvement Initiatives

When the review and analysis of data indicates areas for improvement, the QICM and Leadership work with staff to identify and implement strategies to improve performance. Below is a brief overview of some of the PQI initiatives implemented during the past year.

1. Feedback submitted by the Healthy Start program Coordinated Intake & Referral unit Supervisor regarding issues related to the delay in assignment of infant cases led to a PQI Workgroup to focus on a solution to prevent delays in assignment. Prior to the changes put in place as a result of the workgroup, it could take several weeks for a missed infant case to be assigned. After implementation of the new process, most cases are now assigned within 1-2 business days.
2. Successful Kids/Students/Youth case record reviews revealed that staff were not consistently completing required documents or filling out documents correctly. In order to address this, a workgroup was established to review current process and devise new procedures that resulted in a significant improvement in the number of errors/missing forms.
3. As a result of Staff surveys and employee turnover it was determined that measures needed to be taken to address staff retention and satisfaction and a PQI workgroup was formed which resulted in a series of Supervisor Workshops to foster more collaboration between teams, increase participation by supervisors in staff meetings and provide skill building opportunities. Although team members have reported feeling more appreciated, efforts need to continue in areas related to retention.
4. To address the issue of poor outreach related to services and employment opportunities, it was determined that the agency website was in need of significant upgrades. A workgroup was established to address this issue which led to working with a different company to manage our website. The new website is a great improvement over the old site which was difficult to update. The new website has updated information, a cleaner look, and a simplified process for submitting referrals.

## Looking Forward

*Some items on our list to address this upcoming year include:*

- **A deeper analysis of client engagement rates.** Currently enrollments are compared to the total number of referrals that are received. We believe that we should reevaluate how these numbers are calculated and consider comparing enrollments to the number of referrals that were eligible for services (as opposed to total number of referrals received).
- **Refocus on Satisfaction Surveys.** Satisfaction survey outcomes have been suspended over the last year due to a delay with the Department of Children and Families releasing an updated version (electronic version to replace previous paper version). The survey was recently released but we are currently awaiting assignment of a survey count goal.
- **Central Florida Behavioral Health Network's transition to Carisk.** Recently CFBHN transitioned to a new EHR system that providers must use to submit data. All data starting July 1,2022 will be entered into the new system, which will allow for significant improvement related to analyzing/reporting on data within the system.

*For questions about the contents of this report, or for more information about S4KF's Performance & Quality Improvement Program, please contact the Quality Improvement & Compliance Manager at:*

*(813) 871-4712 or [pqi@s4kf.org](mailto:pqi@s4kf.org)*