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HIGHFIELDS INC.

Continuous Quality Improvement

Year End Report

January 1, 2009 – December 31, 2009

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Highfields mission is “to provide opportunities to children, youths, families and other individuals to be more responsible for their own lives and to strengthen their relationships with others.” Highfields is committed to adhering to all expectations of its Quality Improvement Plan. This includes adherence to the rules, expectations and guidelines of State of Michigan licensing standards, Council on Accreditation for Children and Family Services standards, Department of Community Health Guidelines and corporate compliance regulations as well as privacy and security guidelines.

The purpose of the Continuous Quality Improvement (CQI) process is:

1. To insure the highest level of quality service provision to all consumers.
2. To detect any areas of concerns that need to be addressed.
3. To oversee corrective action plans to address identified needs.
4. Assist in the prevention of reoccurrence of identified problems.

Goals 2009:

1. Assist with oversight of Strategic Plan so it becomes a working plan for the agency that is monitored and evaluated (including Divisional Short-term Plans). Ask for bi-annual updates from division members who participate on the CQI committee.
2. Use CQI meetings to oversee the progress of employee work/focus groups developed to support the agency’s strategic plan.
3. Provide oversight of implementation of new Eighth Edition Standards for the Council on Accreditation.
4. Use CQI meetings to review Outcome data, Quality Assurance reports and Risk Management findings to ensure effective agency utilization.
5. Support implementation and follow through on all agency Corrective Action Plans. Request updates from specified divisions.

OVERVIEW OF THE PROCESS:

This is the fourth report since the implementation of the Continuous Quality Improvement committee. The committee was formed in June 2005 to oversee the agency's quality initiative. The committee replaced the role played by the senior management team in the agency's review of CQI processes. The committee is comprised of two representatives from Residential Services division, two from the Community Services division, two from Administrative Services (Accounting, Human Resources, Support Services and Development) and is led by the Director of Quality. The committee utilized a template outlining CQI activities for the agency which is the basis for each CQI meeting. This report is written to cover calendar year 2009. In this time period the committee met on the following dates:

CQI Committee Meeting Dates from January 2009 through December 2009:

[February 18, 2009](#)

[April 15, 2009](#)

[June 4, 2009](#)

[August 20, 2009](#)

[October 22, 2009](#)

[December 17, 2009](#)

This report contains feedback on the goals established for the CQI process as well as feedback on the various quality initiatives the agency established. Questions concerning this report should be directed to Gillian Peck, MSW, LMSW, ACSW at jpeck@highfields.org.

GOAL REVIEW

Goal	Progress	Data	Status
<p>1. Assist with oversight of Strategic Plan so it becomes a working plan for the agency that is monitored and evaluated (including Divisional Short-term Plans). Ask for bi-annual updates from division members who participate on the CQI committee.</p>	<p>The Long Term Plan was reviewed prior to January and presented at the Agency Round Table meeting In January. The Divisions each completed their supporting divisional plans and these were completed before April 2009. The Long Term Strategic Plan will be again be reviewed and updated at the Agency Round Table meeting in January 2009. Once feedback all staff is compiled the Leadership team will review and update any changes. Each Division will then write a Divisional Plan based on the updated Agency Strategic Plan. The Divisional Plans are due by end of April 2010.</p>	<p>The Agency Strategic Plan is included in the CQI Plan for 2010 and the accompanying Divisional plans will be reviewed by the CQI committee. All data is also included in the CQI Manual.</p>	<p>Progress.</p>
<p>2. Use CQI meetings to oversee the progress of employee work/focus groups developed to support the agency's strategic plan.</p>	<p>One focus group took place in 2009. The group planned and sponsored a Wellness Challenge for all staff to improve employee moral and support healthy behaviors.</p> <p>The agency has three active on-going committees in Technology, Safety and CQI. The Technology work group was re-instated in 2009 after a one year lapse. Technology met once in 2009 and the Safety and CQI Committees meet regularly throughout 2009.</p>	<p>Minutes from the Committees are maintained in the CQI Manual.</p>	<p>Some Progress</p>
<p>3. Provide oversight of implementation of new Eighth Edition Standards for the Council on Accreditation.</p>	<p>The committee continued to make good progress in this goal area. Several standards were reviewed at committee meetings. In 2009 the committee reviewed the PQI, Environment, Finance, Ethics and Client's Rights Standards. If any standards were not being currently addressed, steps were taken to address the noncompliance and create a plan for correction.</p>	<p>Summaries of the reviews are found in the CQI minutes.</p>	<p>Progress</p>

GOAL REVIEW

Goal	Progress	Data	Status
4. Use CQI meetings to review Outcome data, Quality Assurance reports and Risk Management findings to ensure effective agency utilization.	Outcome data, Quality Assurance reports and Risk Management reports were all submitted to the CQI committee for review as established. Outcome data is compiled annually and is part of the CQI report. QA and Risk Management submit their data quarterly. Any concerns, suggestions or questions were assigned to a committee member for follow-up and this would be reviewed again at subsequent committee meetings until resolution occurred.	All data and reports are available in the CQI manual.	Progress
5. Support implementation and follow through on all agency Corrective Action Plans. Request updates from specific divisions.	All audits and reviews along with any required corrective action plans were submitted to the CQI committee for review. The committee worked to insure that actions outlined in the plan were completed. The CQI director began reviewing corrective action plans that were in place for particular contracts prior to the next audit. This proved helpful and demonstrated that steps in corrective action plans were being put into practice and were continuing to be practiced.	All reports are available in the CQI manual.	Progress

CQI Review

STAKEHOLDER INVOLVEMENT:

Stakeholders were involved in the improvement process through a variety of mechanisms including work groups, surveys, board meetings, social events, board committee meetings, Quality Assurance and CQI processes. Following is a list of stakeholder events that took place January 1, 2009 – December 31, 2009.

Employees

- Partnership meetings for the entire agency occurred on January 14, May 13 and November 14.
- Community Services held round table meetings for their staff on March 24, June 23 and September 22 of 2009.
- Residential Services held round table meetings on January 13 and April 29, October 23 and November 11 of 2009.
- Administrative Services held round table meetings on February 11, May 7 and September 16, 2009.
- Focus groups held in 2009 covered Wellness. The group began on March 30 and ended on May 13.
- Two Standing committees with employee participation continued to meet on a regular basis. Both CQI, and Safety met throughout the year. The Technology Committee was reinstated in 2009 and met on March 5. Meeting notes for these events are available for review in the CQI Manual.
- An Award's Banquet was held March 14, 2009 to celebrate staff that had completed 5, 10, 15, 20, 25 & 30 years of service, 9 staff were honored.
- Employees will complete an employee satisfaction survey in January 2009; results will be available for review.

Board Members

- Board members participated in bimonthly board meetings and committee meetings. Notes from all meetings are maintained in a file in the main office. Board committees consist of: Executive, Finance/Personnel, Program, Building & Sites, and Fund Development.
- A Board Orientation was held June 3, 2009. The orientation was chaired by the Board Chair and President/CEO. The focus was to orient new board members to the board manual and workings of the agency.
- The Annual Meeting was held April 29, 2009. The event which included past, new and current board members and staff was prefaced with the board members attending dinner with the residents of the Residential program.
- An event for Past Board Members was held on May 14, 2009 to thank former board members for their on-going support of the agency.

Donors

- Donors received the agency annual report which was sent out in August 2009; three Bright Futures newsletters were published and mailed to donors throughout the year.
- A Golf Outing, fundraiser was held June 18, 2009. The funds were raised to support The Alternatives to Domestic Violence program. Board, staff and community members attended the event.
- A Fall Community event was held on September 10, 2009. The event held on the Onondaga Campus highlights community support. Ingham Family Court was the recipient of the Partnership Award and Kelly Dean received the Robert L. Drake Citizenship Award. A picnic was held and tours of the campus were provided. Consumers, staff, donors, board members and neighbors were invited.
- On October 28, 2009 an Ask Event Breakfast was held. This event was premised by numerous small meetings with community members and potential donors to explain Highfields' mission. The Ask Event, which hosted over 200 community members along with staff and consumers, explained Highfields mission and asked for support from the community.
- Highfields participated in WLNS Channel 6's Day of Giving on December 10, 2009. Highfields was also the recipient of Channel 6 toy drive. The agency received thousands of toys and gifts that were distributed to consumers in time for Christmas.

Referral Agencies

- The Jackson office was the recipient of LifeWays' Quality Improvement Award. This award was presented at LifeWays' Annual Meeting May 1, 2009.
- Numerous site visits and file audits took place in the time period.
- Results of the audits and any accompanying corrective action plans are contained in the CQI manual. All corrective actions plans have been accepted by auditing bodies. (See Corrective Action Plans page 14)
- Numerous presentations and meetings took place between the Courts, Department of Human Services and Community Mental Health Authorities with whom Highfields contracts to provide services.

Customers

- Customers are asked to complete satisfaction surveys at the end of service. Results of these surveys are included later in this report.
- Thanksgiving Dinner was held at the Onondaga campus on November 24, 2009. All consumers, staff and board members were invited to attend with their families. Approximately 100 people attended.

Community Members

- Several meetings took place with the Onondaga Neighborhood Watch. Meetings held in 2009 took place on July 16, and October 22.

Consumer Advocates

- Staff members participated in ongoing meetings as part of Michigan Federation of Children Services, Ingham County Community Coalition for Youth, Impact and numerous other State and community advisory boards.

Long Term Planning:

At the August 2008 Leadership meeting the team reviewed the long term plan and refined the existing goals cited below. These goals then served as the basis for divisional goals. The goals will be reviewed at the agency Round Table Meeting in January of 2010. Any changes will be noted in the CQI Plan for 2010.

- Develop and Implement Early Intervention, Prevention and Aftercare Programs to Address the Needs Presented in the Communities Highfields Serves.
- Keep the main thing the main thing: Continue to Provide Quality Services.
- Strengthen and Improve Organizational Assets to Allow Meaningful and Effective Service Provision.

Short Term Planning:

Each division met individually to design a short term plan to support the agency's goals listed above. The divisional short term plans are updated each year and become a part of the working CQI Plan.

External quality monitoring:

The agency was subject to several external reviews in this reporting period.

Community Service Division:

- LifeWays conducted several file reviews to ensure compliance. Two Case Readings were held one in February and one in August 2009 – CAP requested.
- The Department of Community Health conducted two audits. On April 8 a review was conducted for the FPP program in Lenawee. The home-based cases for the LifeWays contract were reviewed by DCH on December 8.
- A-133 audit was completed for all federally funded programs on May 29 and June 1, 2009 – CAP requested.

Residential Services:

- Health Inspection July 2009.
- Bridgeway Audit – Residential, June 24, 2009 - CAP requested.
- DHS Contract Review – July 23, 24 & 27, 2009 –CAP requested.
- Licensing Investigation– Highfields self reported March 17 –not substantiated; June 3 – no violation, June 29 – CAP required; October 15, CAP required. The Corrective Action Plans that were submitted were accepted by the Licensing consultant. Full licensure was maintained.

Administrative Services:

- Health Inspection Kitchen January 2009.
- MDE Audit of 21st Century Programs November 23 & 24 no Correction requested.
- Financial audits were completed in June 2009. Final reports were submitted September 8, 2009. This report was submitted to the Board of Directors for review.

Copies of all audits, investigations and inspections are available upon request.

Internal quality Monitoring:

Highfields utilized several mechanisms to evaluate its systems and procedures throughout the year. Outlined below is a list of reviews that took place.

A. Risk Management Review:

Reviews took place on a quarterly basis. Reports were reviewed at manager's meetings, Safety Committee meetings and also at the CQI meetings. The reports looked at the following areas:

- Restrictive Behavior Management Interventions
- Critical incidents including client injury
- Client grievances, incidents or accidents
- Environmental Risks
- Medication dispensing
- Staff grievances, incidents or accidents.

Copies of Risk Management Reports are available upon request.

B. Case Record Review:

Case records were reviewed in several manners. Ongoing reviews took place by supervisors and administrative assistants as listed below:

- Supervisors for respective services review and authorize each report that goes into a client's file.
- Administrative assistants review all cases for necessary documentation at case opening, monthly billing, periodic audits, and case closing.
- Contractors periodically audit services through a file review to measure compliance in treatment provision and fiscal management.
- Consumers review their progress with our workers and receive copies of all reports written by Highfields' workers.

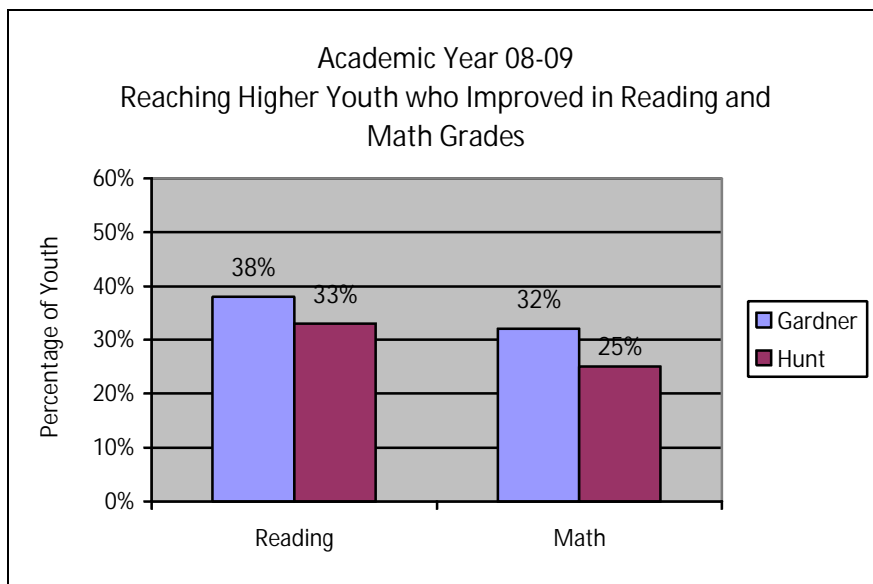
In 2009 Quality Assurance reviews took place in March, June, September and December. Also in 2009 paperwork timeliness was reported as part of the quarterly QA report. This report is designed to assist supervisors in meeting time frame established by contracts. Each analysis was submitted to each program manager for reply and correction. See 2009 timeliness in table at the end of this section. Quality Assurance reports are distributed to all agency managers and are reviewed by the CQI committee and board Program Committee. Copies of all reports are archived and are available for review.

- March 2009 – 31 files reviewed in the Jackson Office, review completed by 2 reviewers reading full case files for documentation and content.
- June 2009 – 16 Residential files were reviewed by 1 reviewer reading full case files for documentation and content.
- September 2009-- 16 files reviewed in the Lansing office, review completed by 1 reviewer reading full case files for documentation and content.
- December 2009 –37 After-school files were reviewed by 1 reviewer at two different sites. The programs were reviewed for documentation and adherence to program and licensing requirements.

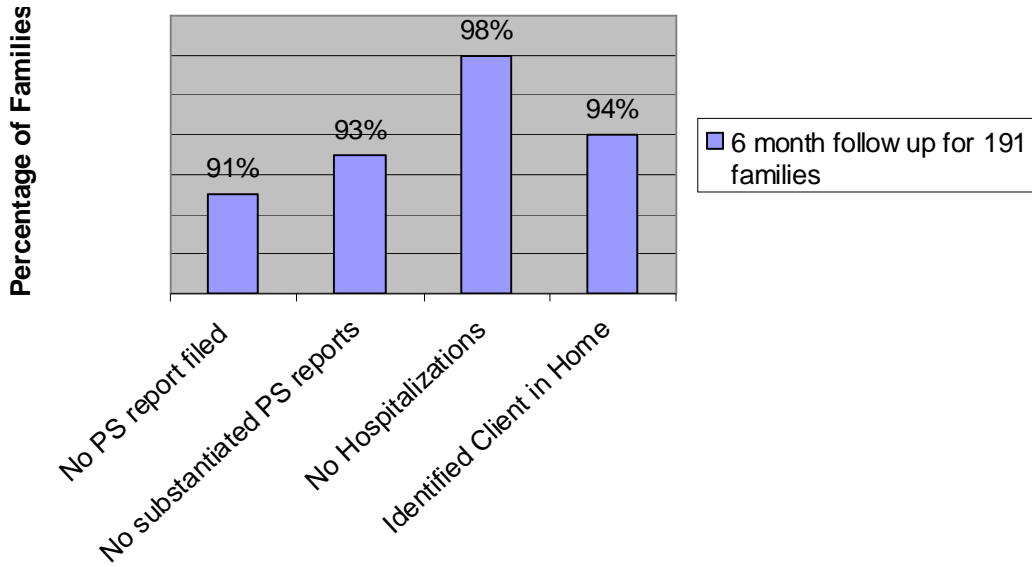
2009 – Completion Rate By Site			
North Team			
	Reports Mailed	Reports on Time	Percentage on Time
1 st Quarter 2009	346	305	88%
2 nd Quarter 2009	394	366	92.9%
3 rd Quarter 2009	212	203	95.8%
4 th Quarter 2009	172	160	94.2%
South Team			
	Reports Mailed	Reports on Time	Percentage on Time
1 st Quarter 2009	319	245	77%
2 nd Quarter 2009	394	317	80.5%
3 rd Quarter 2009	295	262	88.9%
4 th Quarter 2009	418	368	88%
Residential			
	Reports Mailed	Reports on Time	Percentage on Time
1 st Quarter 2009	209	173	82%
2 nd Quarter 2009	160	146	91%
3 rd Quarter 2009	206	181	88%
4 th Quarter 2009	181	155	86%

C. Outcomes:

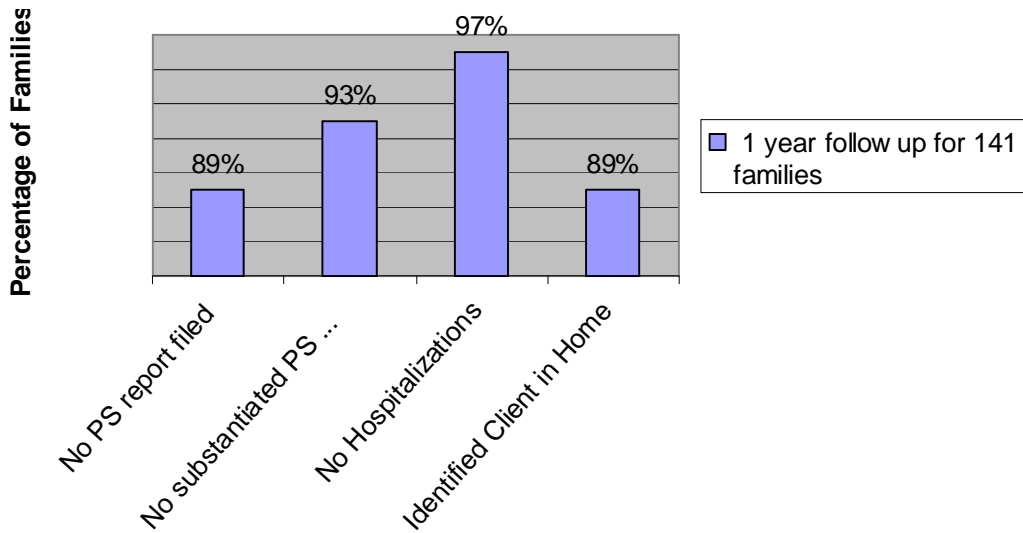
Outcomes are gathered on a monthly basis from consumers who have successfully completed their program. The data displayed below covers consumers served in 2008 & 2009 and recorded in 2009. Data for 2009 is still being collected, since cases closed in the last half of 2009 are contacted for follow-up in 2010. Outcome data for After school programs is collected through Michigan State University. Summary data for After school is included in the report but full data is available on-line and is accessed by the Program Director. The data is used to review progress and to evaluate the effectiveness of strategies employed. Data for the Community Services programs and the Residential programs are listed on the following pages.

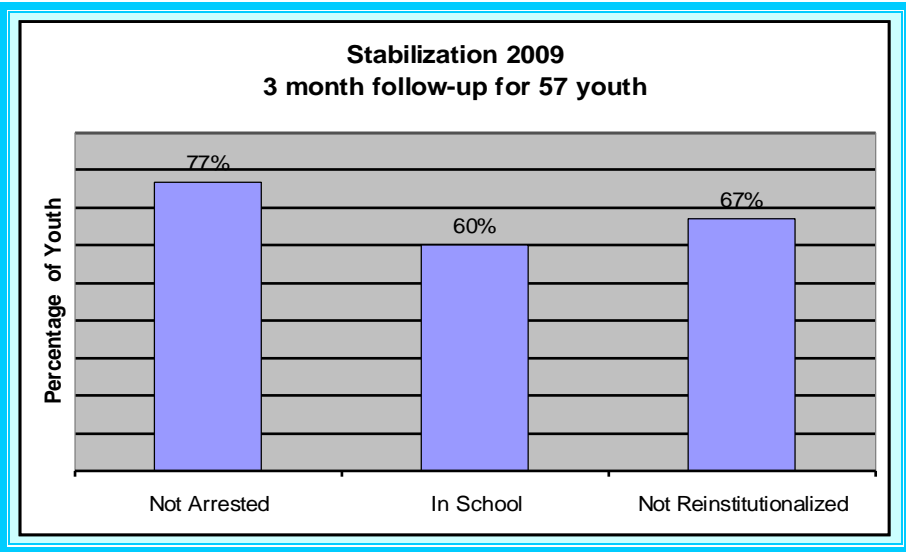
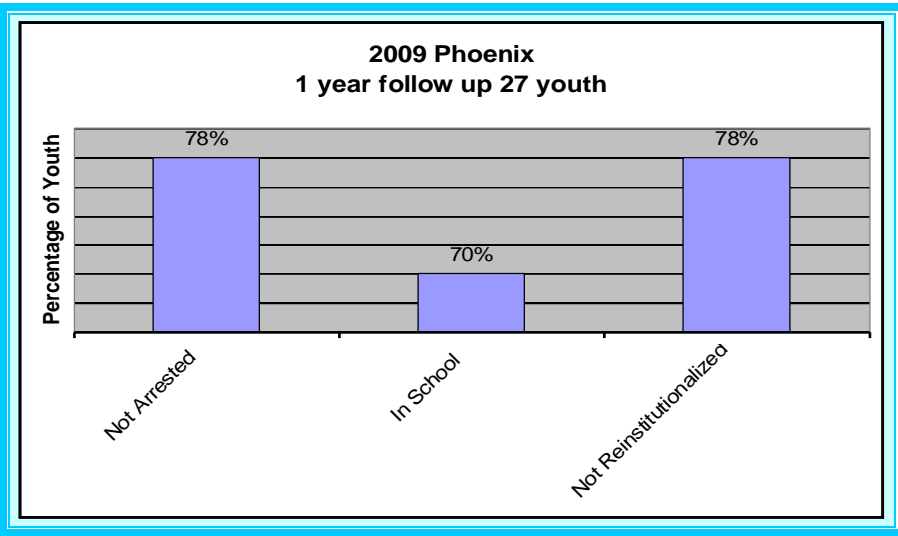
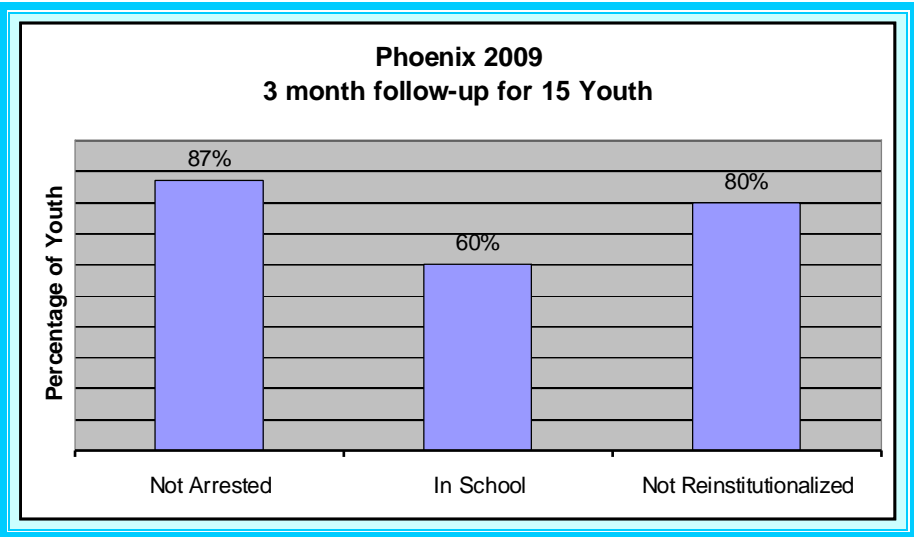


2009 Community Services 6 month follow up for 191 Families



2009 Community Services 1 Year Follow-up for 141 Families





Customer Satisfaction:

Consumer satisfaction was measured using surveys to assess basic satisfaction with personnel and services. The standardized surveys ensure anonymity. Surveys are provided at end of service. All surveys use a 5 point Lickert scale with 5 being high and 1 being low. Survey results follow:

Community Services:

2009 - Client Satisfaction - 5 point scale. (235 responses)	
I was treated with courtesy by the Highfields worker.	4.89
I feel the Highfields worker understood my needs.	4.77
The services I received from Highfields met my needs.	4.65
Highfields' staff respected my language, race, religion, ethnic background & culture.	4.90
I was involved in the planning of the Highfields' service I received.	4.79
I feel the goals in my treatment plan were achieved.	4.53
The Highfields staff worked with me to achieve my goals.	4.77
Overall, I am pleased with the services I received from Highfields.	4.82
Average Score	4.76

2009 Referring Worker Satisfaction - 5 point scale (219 responses)	
The Highfields staff shared pertinent information with you concerning client's progress.	4.39
You received copies of progress reports in a timely manner.	4.38
You felt that the treatment needs of the client were addressed.	4.47
Overall you were satisfied with the services provided.	4.44
Average Score	4.42

Residential Services:

2009 Consumer Satisfaction - on a 5 point scale. (52 responses)	
Your rights were respected in this program	4.37
The stay at Highfields was helpful to you	4.56
Your decision making skills have gotten better.	4.27
You have better understanding of how thoughts and feelings affect your actions.	4.37
You have learned new skills to deal with problem situations	4.21
Your living situation at Highfields was safe and clean	4.10
Average Score	4.31

2009 Referring Worker Satisfaction - 5 point scale (49 responses)	
The Highfields staff shared pertinent information with you concerning client's progress.	4.38
You received copies of progress reports in a timely manner.	4.35
You felt that the treatment needs of the client were addressed.	4.26
Overall you were satisfied with the services provided.	4.32
Average Score	4.33

After school Services:

Academic Year 08-09 Program Satisfaction: Percent of Reaching Higher Youth who "Agreed" with the Following Statements			
Activity	Gardner	Hunt	Average for both Sites
At this program, I feel safe	66%	92%	79%
I have fun when I am at this program	75%	94%	85%
I really like coming to this program	61%	92%	77%

Academic Year 08-09: Percent of Reaching Higher Youth who Improved in the Following Activities According to Teachers			
Activity	Gardner	Hunt	Average for both Sites
Complete homework on time	71%	49%	60%
Participate in class regularly during activities	75%	54%	65%
Academic performance	67%	59%	63%
Come to school motivated to learn	73%	55%	64%

Feedback Mechanisms:

Bright Future Newsletters mailed to donors, vendors, contractors, other interested parties and posted on the agency web page:

- Winter Issue January 2009
- Summer Issue June 2009

Directors Connection, a publication sent to current and former Board Directors. This correspondence focuses on recent developments in the agency. Mailed:

- Spring Issue May 2009

Highfields Highlights, a newsletter sent to referring caseworkers. This publication was emailed:

- August 2009

Annual Report was completed in August 2009 and was mailed to donors, vendors, contractors, employees; other interested parties and posted on the webpage.

Corrective Action:

In the 2009 reporting year several corrective action plans were written and implemented. All corrective action plans were reviewed by the CQI committee and shared with the Program Board Committee.

Community Services Division:

LifeWays Case Reading Review, Plan of Correction accepted August 2009
A-131 review, CAP accepted July 2009

Residential Services Division:

DHS contract audit –Corporate Compliance Plan accepted 9/29/09
Corrective Action Plan -Bridgeway audit accepted 7/15/09.
Corrective Action Plans accepted 1/8/09, 7/9/09, 8/26/09and 10/17/09 (4) in response to licensing violations.

Copies of all plans and reports are available for review.

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