



2014 Year End Report

CONTINUOUS QUALITY IMPROVEMENT

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 Jill Clark, MSW, LMSW at jclark@highfields.org.

3/1/2015

Table of Contents

<i>Agency Mission</i>	3
<i>Purpose</i>	3
<i>Goals</i>	3
<i>Overview of Process</i>	4-7
➤ CQI Meeting Dates	
➤ Goal Review	
<i>Stakeholder Involvement</i>	8-10
➤ Employees	
➤ Board Related	
➤ Donors	
➤ Referral Agencies	
➤ Consumers	
➤ Community Members	
➤ Consumer Advocates	
<i>Long Term Planning</i>	11
<i>Short Term Planning</i>	11
<i>External Quality Monitoring</i>	11-14
➤ State Monitoring	
➤ Agency Licensing	
➤ Afterschool	
➤ Community Services	
➤ Residential Services	
➤ Support Services	
➤ Administrative Services	
<i>Internal Quality Monitoring</i>	14-25
➤ Risk Management Review	
➤ Case Record Review	
➤ New Programs	
➤ Outcomes	
○ Afterschool	
○ Community Services	
○ Agency Timeliness	
○ Residential	
➤ Consumer Satisfaction	
<i>Feedback Mechanisms</i>	26
<i>Summary</i>	27

Highfields mission: To provide opportunities to children, youth and families to become 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, corporate compliance regulations, and privacy and security guidelines.

The purpose of the Quality Improvement process is:

1. To insure the highest level of quality service provision to all consumers.
2. To monitor critical points of the organization's service delivery.
3. To detect any areas of concerns that should be addressed.
4. To oversee corrective actions plans to ensure identified needs are addressed.
5. To oversee the change process to prevent reoccurrence of identified problems.
6. To affect systemic change where needed in response to identified concerns.

Goals 2014:

1. Monitor progress of 5 year Strategic Plan.
2. Use CQI meetings to review paperwork timeliness through the Quality Assurance Process and help ensure that all divisions meet the goal of at least 85% for report timeliness.
3. Report progress to CQI committee regarding tracking contract requirements and CAP's for improved adherence to external quality monitoring.
4. Provide support, assistance and monitoring through the CQI committee of the compliance for contract requirements, specifically meeting unit requirements for those contracts specifying hourly client contact of units (FRP, FTBS, HB and HB 0-3).
5. Track agency benchmarks through the Agency Dashboard.
6. Work through the CQI committee and quality assurance reviews to assure we are providing customer service in all areas, including administrative, human resources, referral sources, and client contact.

OVERVIEW OF THE PROCESS

Continuous Quality Improvement (CQI) is an essential part of Highfields' services. As an organization, Highfields highly values employee and stakeholder involvement in carrying out the agency's mission, vision, goals and desired outcomes. The CQI Committee led by the Director of Quality and Program Development oversees the agency's quality initiative. The CQI Committee is comprised of representatives from each of Highfields' divisions as well as senior leadership. These include Residential Services, Community Services, Administrative Services (Accounting, Human Resources, Support Services and Development), President CEO, and the Vice President, Clinical Services. This report covers calendar year 2014 and provides an overview of the activities of the CQI initiative and the agency.

CQI Committee Meeting Dates, January 2014 through December 2014:

February 26, 2014

April 23, 2014

July 2, 2014

September 3, 2014

November 13, 2014

GOAL REVIEW	
GOAL	PROGRESS
1. Monitor progress of 5 Year Strategic Plan. *	Each Board committee reviewed and updated their strategic plan. Board as a whole approved the updates. Each division of Highfields updated their plan and continues to review the Strategic Plan.
DATA: The 5 year Strategic Plan is included in the CQI Plan for 2014 & CQI Manual STATUS: Progress	
2. Use CQI meetings to review paperwork timeliness through the Quality Assurance Process and help ensure that all divisions meet the goal for report timeliness of 85%.	Paperwork timeliness was monitored through the Quality Assurance Process. All paperwork timeliness reports were reviewed at the CQI meeting, the board Program Committee, and with each division of Highfields.
	The timeliness standard is a minimum of 85%. In the calendar year 2014 paperwork annual timeliness rates were as follows:

Residential Services	86%
North Team	95%
South Team	98%
Agency Total:	97%

This compares with an overall rate of 97% in 2013 and an overall rate of 92% in 2012. This trending up in paperwork timeliness marks a pattern of consistency from staff in meeting paperwork requirements and standards for each division.

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 are assigned to a committee member for follow-up and then reviewed again at subsequent committee meetings until resolution occurs.

DATA: All data and reports are available in the CQI manual.
STATUS: Significant Progress

3. Report progress to the CQI committee regarding tracking contract requirements and Corrective Action Plans (CAPS) for improved adherence to external quality monitoring.

The CQI committee regularly reviewed CAPS to monitor adherence and compliance.

The CQI committee reviewed case reading reviews and corrective action plans for the Family Reunification Program (FRP) for the Jackson/Hillsdale FRP team and the Ingham/Livingston FRP team. Wraparound SED Waiver program audits and corrective action plans for Eaton, Clinton, Jackson, and Hillsdale counties were also reviewed.

DATA: Minutes documenting actions on CAP's are in the CQI manual. CAPs are kept in a separate manual and are also available for review. The Director of Quality maintains and distributes unit report summaries.

STATUS: Significant Progress

4. Provide support, assistance, and monitoring through the CQI Committee of the compliance for contract requirements, specifically meeting unit requirement for those contracts specifying hourly client contact of units (FRP, FTBS, HB, and HB 0-3).

Highfields has implemented a tracking system for those contracted programs requiring clients be seen a specific number of hours or units. The programs requiring units and being tracked are Families Together Building Solutions (FTBS); Home-Based Services (HB); Home-Based 0-3 Services (HBO-3); Family Preservation Program (FPP); Multi-Systemic Therapy (MST) and Family Reunification Program (FRP). These units are compiled on a quarterly basis and reported on the Agency Dashboard. Supervisors of these programs receive

summaries identifying staff and cases that have fallen below compliance requirements. Unit reports are used for supervision purposes and to assist staff in making necessary adjustments to meet contract requirements.

DATA: Agency Dashboard and program unit reports.
STATUS: Progress

5. Track agency benchmarks through the Agency Dashboard.

The CQI director maintains a quarterly Agency Dashboard that is presented at Leadership meetings and the board Program Committee. The Dashboard aims to reflect the health of the agency as measured against agency benchmarks. A summary of fiscal year 2013/2014 follows:

- **Satisfaction**
Measured on a Likert scale of 1-5; client and referring agency satisfaction has averaged well over the 4.50 benchmark.
 - **Timeliness**
Paperwork timeliness for FY 2013/2014 was 97% with an 85% benchmark.
 - **Contract compliance**
Residential capacity benchmark was 22 and FY 2013/2014 ended with an average capacity of 19.8.
 - **DHS contracts**
All contracts met benchmarks except for FTBS program which ended the FY 2013/2014 at 2.8 compared to a benchmark of 3.00.
 - **MH contracts**
All MH contracts met their benchmarks.
 - **South Team growth**
During the FY 2013/2014 the South Team increased the number of clients served by approximately 20%.
 - **School programs**
Ingham Academy reflected an average attendance rate of 64% with Evening Reporting reflecting an average attendance rate of 61% for High Risk students and 85% for Low Risk.
 - **Reaching Higher/Afterschool**
Average attendance all after school programs combined was 63%.
 - **Finance**
Financially it was a good fiscal year with Highfields meeting or exceeding all benchmarks including meeting our benchmark for Capital Budget.
-

DATA: Discussions regarding the Agency Dashboard can be found in the CQI Committee minutes, Program Committee minutes, and Leadership minutes.

STATUS: Progress

6. Work through the CQI Committee and Quality Assurance reviews to assure we are providing customer service in all areas including administrative, Human Resources, referral sources, and client contacts.

Customer and referring worker satisfaction surveys measures the quality of customer service. These surveys are reflected in the form of a table further in this report.

Comments from referring agencies and consumers are taken seriously as they reflect our commitment to quality service. Any dissatisfaction expressed in these surveys is handled with a personal phone call to the individual filling out the form from the Director of Quality and/or the supervisor of the program. Our goal is to assure that each consumer knows that they were heard and we will take steps to improve. The vast majority of our surveys are positive. A few examples of comments directly from the surveys for FY 2013/2014 include:

- “. . . went above and beyond to help this family. He cared for the family and their progress, but was always a straight-shooter when dealing with them.” (Referring worker re: an Families Together Building Solutions therapist)
- Clients response to *Things I like best about Highfields service*: “The conformity to a structure with instruction and review.” (Multi-Systemic Therapy client)
- “. . . has helped and we will continue using the materials she has taught and hope to have a follow-up.” (HB 0-3 client)
- “How easy the material was to understand.” (Parenting Wisely client)

DATA: Customer Satisfaction is reported on the Agency Dashboard and later in this report.

STATUS: Progress

* Strategic 5 Year Plan available upon request

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, 2014 – December 31, 2014.

Employees

- Round Table meetings for the entire agency occurred on May 14, 2014 and October 8, 2014
- Community Services Round Table meetings for staff from the North Team and South Team were held in March, June, September, and December of 2014.
- Residential Services held monthly all staff meetings
- HR held monthly staff meetings.
- Finance held monthly staff meetings.
- Administrative Services Round Table meeting was held in September 2014.
- Standing committees with employee participation (meeting notes are available for review in the CQI Manual):
 - Safety Committee met on March 13, 2014; June 19, 2014; September 25, 2014; and December 18, 2014
 - Wellness Committee, the committee began submitting articles to the Employee Newsletter in 2014
- The Employee Awards Banquet was held February 22, 2014 to celebrate staff completing 10, 15, and 25 years of service. Staff honored:
 - **25 Year Trust Award**
 - Tim Monroe
 - Jill Clark
 - Frank Sabat
 - **15 Year Compassion Award**
 - Dwayne Dennis
 - **10 Year Caring Award**
 - Julie Duffey
 - Sharla Hansen
 - **The 2014 Carl J. Latona Distinguished Service Award:**
 - LuAnn Sawdey-Roberts, Associate Director
- Employee satisfaction survey was completed in January 2014; results and Highfields' response to staff are available for review.
- Highfields Dispatch, Employee Newsletter was published quarterly in 2014



The Carl J. Latona Distinguished Service Award was established in 2012 and is given annually to an employee, nominated by his/her peers, who has exhibited the 4 major characteristics exemplified by Carl: integrity, passion for helping others, perseverance and an

Board Related

- Board members participated in bi-monthly 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, Fund Development, and Endowment

- A Board Orientation was held June 4, 2014. 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. Karen Johns and Tanda Reynolds joined the Program Committee, Mark Kellogg joined Finance & Personnel Committee, Marlon Roberts joined Program Committee, Katie Rherrode joined Fund Development Committee, and Reshma Sambare joined the Fund Development Committee.
- The Annual Meeting was held April 30, 2014. The event which included past, new and current board members and staff was held at the Walnut Hills Country Club. The following Awards were presented at this event:
 - Robert L. Drake Citizenship Award** to *Larry and Candy Parker*
 - Highfields Partnership Award** to *Douglas Steel Fabricating Corporation and Christman Construction*
- The **Aldinger Scholarship** was awarded to Haley Daniels at the annual Strengthening Families Breakfast on October 23, 2014. Haley was a Community Services client and a student at Madison Middle School. The scholarship was for \$575 and went to pay for her student trip to Chicago.

Donors

- Donors and key stakeholders were mailed the Highfields' annual report and it was made available to all staff and others, in November and is posted on Highfields' website.
- A Golf Outing, fundraiser was held June 9, 2014. The funds were raised to support Highfields programs. Board members, staff and community members attended the event.
- The annual Donor Appreciation Event was held July 24, 2014 at the Garden Gala at the Ingham Academy.
- Highfields was a recipient of WLNS Channel 6 Toy drive. The agency received gifts that were distributed to families participating in Community Services programs and the Residential program in time for Christmas.

Referral Agencies

- Site visits and file audits took place during the year.
- 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.
- 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.
- Referring workers are sent satisfaction surveys at the end of service. Overall results for referring worker satisfaction surveys indicated an average score for Community Services of 4.52 and an average score of 4.70 for Residential Services.

Consumers

- Consumers are asked to complete satisfaction surveys at the end of services. Overall results indicated an average score for Community Services (Jackson & Lansing offices) of 4.92 and Residential of 4.30 (scale of 1-5) for satisfaction. Results of these surveys are included later in this report.
- Thanksgiving Dinner was held at the Onondaga campus and approximately 30 consumers, staff and board members attended with their families.



Community Members

- Several meetings took place with the Onondaga Neighborhood Watch. Meetings held in 2013 took place January 31, 2013; June 11, 2013; and October 24, 2013.

Consumer Advocates

- Staff members participated in ongoing meetings as part of Michigan Federation of Children Services, Ingham County System of Care/Impact, LifeWays IPLT, and numerous other State and community advisory boards.

Mentorship Award:

Residential Manager of Clinical Services, Christopher Robinson was awarded the *Mentorship Award* on October 22, 2014 at the Michigan Department of Human Services event, ***Night of Outstanding Stars***.

The award was presented by DHS Director, Maura D. Corrigan and State Representative Mike McCready. Chris was nominated and awarded this award based on his outstanding mentoring of a Michigan Foster Care youth (DR) placed in Highfields Residential program in 2011. During DR’s third month in the program his mother was diagnosed with cancer and passed away shortly thereafter. Chris provided immediate grief counseling helping DR through this tragedy with fatherly understanding and support. Chris took DR across the state to attend family visitation and the funeral. Chris continued grief and loss counseling over the next two years while DR was in placement at Highfields. Chris assisted in tracking extended family members and found an Aunt who agreed to visit and participate in family programming to build a relationship with DR. Chris assisted DR through several critical life events including the death of his mother, and a failed community placement with his sister. Through his support and encouragement DR earned his High School Diploma. Chris’ mentorship in the areas of anger management and peer relations leading him to make positive decisions contributing to DR’s growth and development and successful integration into the community.

LONG TERM PLANNING:

Highfields finished its second full year of the 5 year strategic plan. The agency and Board kept the 5 year plan in front of them and worked to accomplish all goals. This plan includes five year planning from the CEO, Finance & Personnel, Program, Fund Development, and Building & Sites committees. The five year plan 2013 – 2018 overall goals are to:

- Provide a clear and concise vision for the next five years
- Develop a plan to ensure the continued financial stability of the agency
- Ensure continuity between the four major committees of the Board of Directors

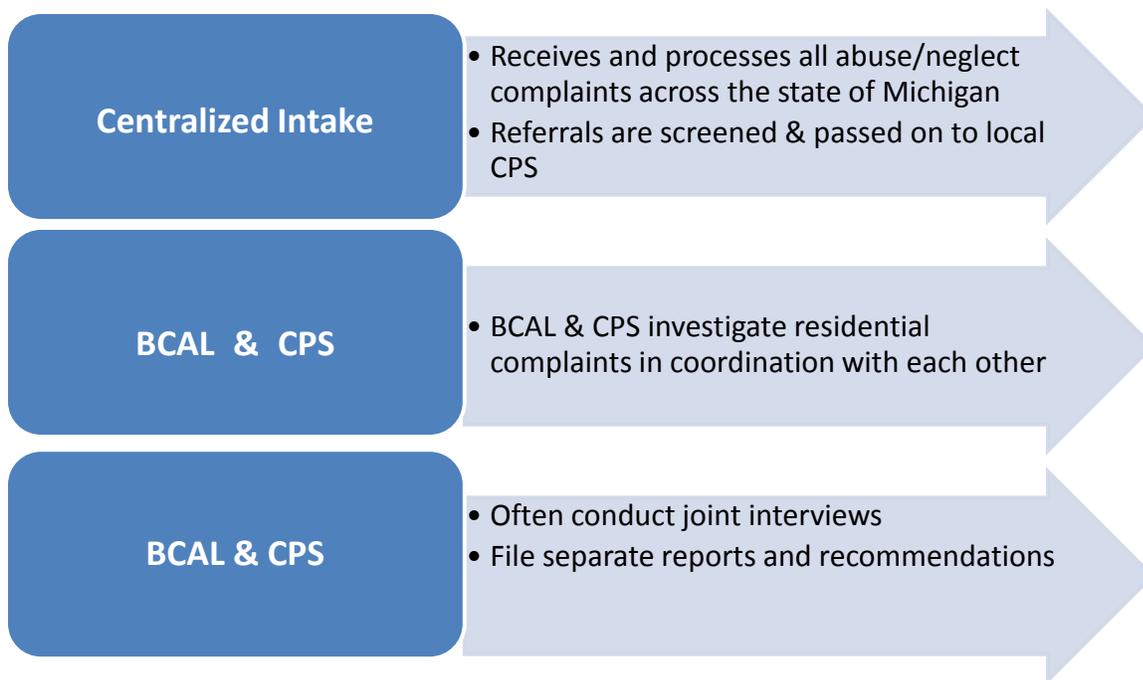
SHORT TERM PLANNING:

The divisional short term plans are updated each year and become a part of the working CQI Plan. The three Highfields divisions (Community Services, Residential, & Administration) updated their strategic plans during periodic round table meetings. All staff had an opportunity to participate and contribute to this process.

EXTERNAL QUALITY MONITORING:

STATE MONITORING

The state of Michigan maintains a centralized intake system that receives and processes all abuse/neglect complaints across the state. BCAL (Bureau of Children and Adult Licensing) investigates licensing violations and Children's Protective Services (CPS) conducts investigations in cases of abuse/neglect for residential settings.



Highfields underwent licensing reviews, audits, and investigations during 2014. Below is a listing of dates and whether a corrective action plan (CAP) was required. All CAPS were reviewed by the CQI committee.

Agency Licensing:

COA

Highfields is accredited by The Council on Accreditation (COA) through May 31, 2015. Highfields applied for re-accreditation and began the re-accreditation process January 2014 completing and submitting a self-study on December 19, 2014. The site visit took place February 1 – 4, 2015.

BCAL

The Bureau of Children and Adult Licensing (BCAL) conducted its annual licensing review and issued a renewal letter dated September 17, 2014. There were no significant findings and Highfields wrote a corrective action plan regarding tracking report completion and recording orientation training. The corrective action plan was accepted and license renewed through September 17, 2016.

Mental Health

Highfields re-credentialed with LifeWays and Lenawee County CMH through May 2016 to provide mental health services in Lenawee, Jackson, and Hillsdale counties.

Afterschool:

May 23, 2014	Gardner Middle School – Licensing study completed
April 26, 2013	Western Middle School – Licensing Study – No findings/No CAP required
N/A	Springport Middle School – applied and was accepted for exemption from on-site inspections (granted based on 2 years clean inspection and school board approval)
N/A	Leslie School - applied and was accepted for exemption from on-site inspections (granted based on 2 years clean inspection and school board approval)
N/A	DaVinci School - applied and was accepted for exemption from on-site inspections (granted based on 2 years clean inspection and school board approval)
August 29, 2014	Hunt Elementary was granted provisional license. Renewal due February 2015
October 9, 2014	Townshend Elementary (Vandercook Lake) Granted provisional license. Renewal due in April 2015.

Community Service Division:

Aug 22, 2014	LMCHA Administrative Review Minor responses of Video and Audio policy and Medicaid Integrity Training were required.
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Residential Services: (the following Licensing Investigations listed per date of investigation)

December 17, 2013	#3007 Licensing Investigation – CAP required and accepted
December 17, 2013	#3009 Licensing Investigation – CAP required and accepted
July 2, 2014	#3026 Licensing Investigation - CAP required and accepted

August 19, 2014

#3030 Licensing Investigation – CAP required and accepted

Support Services:

August 20, 2014 and September 12, 2014

Environmental Health Inspection - substantial compliance with applicable rules

July 23, 2014

Fire Safety Compliance Record – the kitchen hood suppression system was connected with the fire alarm system by **9/30/2014** putting us in full compliance.

August 18, 2014

Food Establishment Inspection – substantial compliance

Administrative Services:

August 23, 2013

Received final report - financial audits completed, final reports submitted. This report was submitted to the Board of Directors for review. No CAP required.

INTERNAL QUALITY MONITORING:

Highfields evaluates its systems, procedures, and programs throughout the year. Below is a list of reviews that took place in 2014.

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.

Mental Health cases are reviewed through the CMH process and their Behavior Management Review Committee (BMRC) as risk management issues are identified.

***Copies of Risk Management Reports are available for review.**

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 authorization of 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 2014 Quality Assurance reviews took place quarterly. Each QA Review was submitted to each program manager for reply and correction if necessary. Paperwork timeliness was reported quarterly on the Paperwork Timeliness scorecard. The paperwork scorecard is designed to assist supervisors in meeting time frames established by contracts and Highfields internal expectation. See Agency Paperwork Timeliness 2014 year end summary (page 23).

Quality Assurance reports were distributed to all agency managers and reviewed by the CQI committee and board Program Committee. QA review teams were made up of the Director of Quality and other staff volunteers from the CQI Committee and programs being reviewed. Copies of all reports are archived and are available for review.

Quarter 1 (January-March)

Afterschool for Springport and DaVinci School in Jackson were reviewed.
Review Team: Jill Clark, Director of Quality and Brenda Weck, Project Director

Files Reviewed: 20 student files and 10 staff files were reviewed – Files were in excellent order. It was recommended that as yearly training and background checks are accomplished that the old be shredded since it is only required to maintain current reports/tests in the record.

Quarter 2 (April-June)

Residential – June 5, 2014

Review Team: Jill Clark, Director of Quality; Israel Valez, Finance Director; Barbara Rose, Administrative Assistant

Files Reviewed: 23 residential files were reviewed (all current residents). Cases were found to be thorough and organized. There were miscellaneous paperwork not in file, but the Administrative team for Residential located the missing work that had not yet been filed. A recommendation was made that the "Table of Contents" for Phoenix and Stabilization be made into a checklist and paperwork not required be eliminated from the list.

Quarter 3 (July – September)

North Team – September 22, 2014 – 100% of Wraparound SED cases were reviewed for the upcoming audit.

Review Team: Jill Clark, Director of Quality; Sharla Hansen, Coordinator
 Files Reviewed: During this review, all WASED files were reviewed using the state fidelity tool. No major concerns were identified.

Quarter 4 (October – December)

South Team – December 18, 2014, Families Together Building Solutions (FTBS); SED Waiver Wraparound cases; and Family Preservation Program files were reviewed.

Review Team: Jill Clark, Director of Quality; Tim Monroe, Vice President Clinical Services; Molly Linn, Communications; and Tania Moore, Administration Assistant

Files Reviewed: During this review, 7 files from five programs were reviewed using the state fidelity tool. No CAP was required although Jill Clark, Director of Quality and Program Development spoke with supervisors regarding meeting with the Wraparound team to discuss fidelity expectations as outlined in the fidelity tool. There was also discussion regarding concern around FTBS worker not meeting face to face time expectations of 3 hours per week.

Quality Assurance quarterly reviews in 2015 will be scheduled quarterly (Calendar Year) by program. This is a change from the traditional review by location. The schedule is as indicated below:

2015 Quarter	Program
1 st Quarter January - March	Afterschool programing <ul style="list-style-type: none"> ✓ Vandercook Lake Schools ✓ Western Middle School
2 nd Quarter April – June	Phoenix Stabilization
3 rd Quarter July – September	Wraparound SED Families Together Building Solutions Outreach Family Reunification Program
4 th Quarter October – December	Home-Based Services Home-Based 0-3 Multi-Systemic Therapy Parenting Wisely

Monitoring of units for programs with contracts that have unit requirements was completed monthly this year. A monthly unit report is provided supervisors per service they supervise and the unit averages are reported quarterly on Highfields' Agency Dashboard. Programs monitored for unit contract compliance include Families Together Building Solutions (FTBS) in Ingham, Jackson, Hillsdale, and Branch counties; Family Reunification Program (FRP) in Ingham, Eaton, Jackson, Hillsdale, Calhoun, and Branch counties; Multi-Systemic Therapy (MST) in Jackson,

Hillsdale and Livingston counties; Family Preservation Program in Lenawee county; and Home-Based/0-3 Home-Based Services in Jackson and Hillsdale counties. Unit monitoring is intended to provide feedback to supervisors and staff regarding their performance and contract compliance to assist them in making adjustments in service provision when appropriate.

C. New Programming:

- ❖ Family Maintenance (FM) in Eaton County in December 2014.
- ❖ Parenting Wisely (PW) for the First Step program with the Ingham Co. Court in August 2014
- ❖ Case Management for Autism with Lifeways in Jackson county March 2014
- ❖ Wraparound in Branch County in May2014

D. Outcomes:

Outcomes were gathered monthly from consumers who successfully completed their program. The data displayed below covers consumers served in 2013 & 2014 and recorded in 2013. Data for 2014 is still being collected, since cases closed in the last half of 2013 are contacted for follow-up in 2014. Outcome data for the 21st Century Learning Centers Afterschool Programming is collected through Michigan State University and evaluated through their affiliate Eval Global Solutions, LLC. Summary data for Afterschool is included in this report. Review of the full report is available upon request. The data is used to review progress and to evaluate the effectiveness of strategies employed.

Afterschool:

Highfields Afterschool program as part of the Reaching Higher 21st Century Community Learning Centers Afterschool Programming was evaluated by ***Eval Global Solutions, LLC*** authored by Oseela N. Thomas, PhD. The summary below is based on their **2013-2014 Year-End Final Evaluation Report***. Highfields provided Afterschool programming in 6 schools. These included participants in K-1 through 8th from El Shabazz, Da Vinci, Gardner, Leslie, Western, and Springport schools.

The 2013-2014 school year enrolled 521 youth with 279 or 54% considered regular participants (participated 30 or more days); 79% of participants were low income compared to 80% the previous year. The percentage of regular participating Reaching Higher youth attending 90 days or more improved in 2013-2014 with an average of 159 days of youth participating.

Below is a table depicting increases in participation in life skill development activities and art and music.

Activity	FY 2011	FY 2012	FY2013	FY2014
Youth Development	31%	46%	0%	88%
Youth Career/Job Training	22%	37%	29%	48%
Entrepreneurial Education	35%	51%	69%	91%
Telecommunication	39%	62%	56%	84%
Science	37%	60%	68%	82%
Art & Music	63%	62%	75%	92%

The report found through the completion of “dosage analyses” that participation rates may play a significant role in academic achievement. Indeed, extant research demonstrates that youth’s regular participation over an extended period of time produces maximum benefits. There was a statistically significant difference in ELA grades between Reaching Higher High Participation & Low Participation students.

Dosage effect also reveals there is a significant difference in Math grades between Reaching Higher High Participation & Low Participation students. **(see Chart 1 and Chart 2 below)**

Chart 1: Association between *Reaching Higher* Participation and ELA Marking Period (M) Grade

MARKING PERIOD (M)	LOW PARTICIPATION YOUTH		HIGH PARTICIPAITON YOUTH	
	2013	2014	2013	2014
M1 ELA	2.46	2.46	2.74	2.74
M2 ELA	2.19	2.19	2.050	2.5
M3 ELA	2.30	2.30	2.77	2.77
M4 ELA	2.31	2.07	2.53	2.37

Chart 2: Association between *Reaching Higher* Participation and Math Marking Period (M) Grade

MARKING PERIOD (M)	LOW PARTICIPATION YOUTH		HIGH PARTICIPAITON YOUTH	
	2013	2014	2013	2014
M1 MATH	2.49	2.34	2.66	2.57
M2 MATH	2.17	2.31	2.39	2.83
M3 MATH	2.02	2.11	2.54	2.74
M4 MATH	2.08	1.82	2.46	2.35

Dosage effects on MEAP scores also indicated that High Participation students scored, on average, higher than Low Participation students in MEAP Reading scores at all grade levels. High Participation students also scored higher than Low Participation students in MEAP Math scores at all grade levels.

The **2013-2014 Final Examination Report** cited the following “strides” made as well as recommendations for improvement for the academic 2013-2014 school year:

ACHIEVEMENTS

Reaching Higher has made great strides in student retention, participation rates in Science, Arts & Music and life skill development activities.

Reaching Higher has made great gains in MEAP scores.

There have been improvements in afterschool staff connection with school personnel.

Academic achievement in Reading and Math although improvement has been made this appears to be a continual area in need of improvement for participating youth. Though students are reporting positive attitudes about their academic achievement as a result of participating in the program, it has not translated into tangible results (e.g., grades).

RECOMMENDATIONS

Incorporate a more streamlined and focused academic instructional component that is age appropriate and consistent across sites.

Improve upon participation rate among students in Reaching Higher over the Longer term (90 or more days.)

Provide afterschool staff with professional development opportunities for “connecting afterschool program with school day”, “classroom/behavioral management”, and “coming up with programming ideas”. *Note: this is the #1 area staff would like additional training.*

Continue to improve upon connecting with school day staff on a more meaningful level. A viable system needs to be developed where communication can be streamlined more effectively between school day teachers and Reaching Higher afterschool staff.

Continue to ensure continuous, accurate, and complete data collection.

It is also noted that *High Participation* youth had on average, less behavioral problems at school than *Low Participation* youth. Results also indicated a correlation between Reaching Higher participation rate suspensions such that as youths’ participation in Reaching Higher increased, the suspension rate decreased at the same time. Findings revealed positive association between participating in Reaching Higher and youth demonstrating positive behaviors, and improved attendance at school.

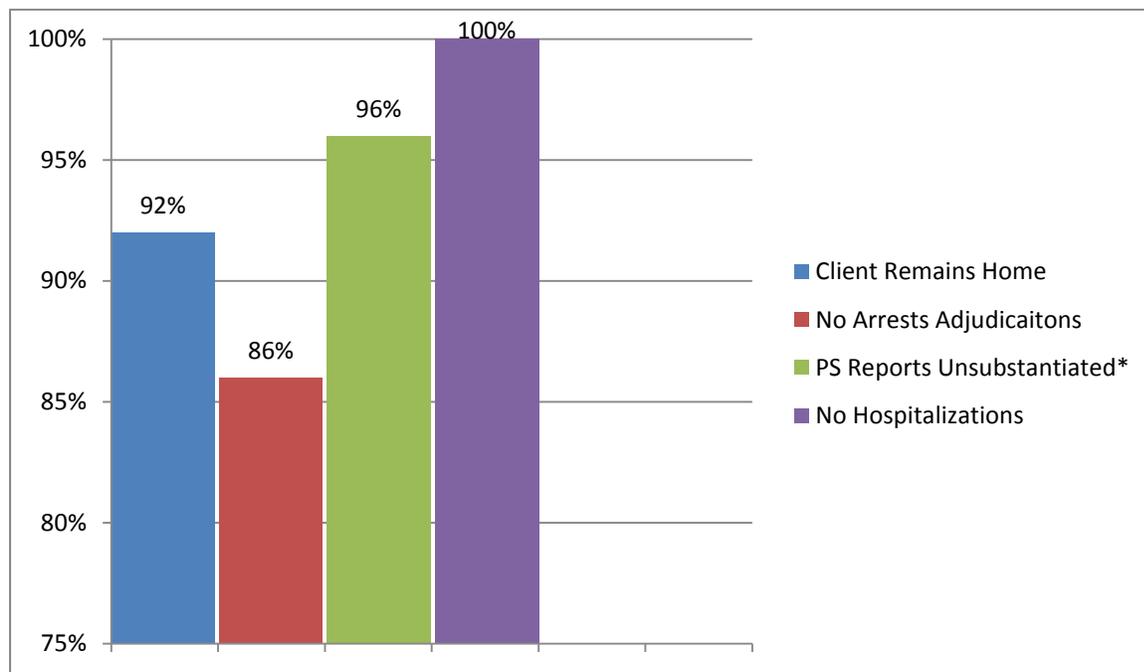
***Copies of the entire 2013-2014 Year-End Final Evaluation Report is available for review**

Community Services :

Outcomes for 12 month follow ups are being reported for January 1, 2013 – December 31, 2013 since all data is complete for that time period. Data for 6 month follow-up is reported for the first 6 months of 2014.

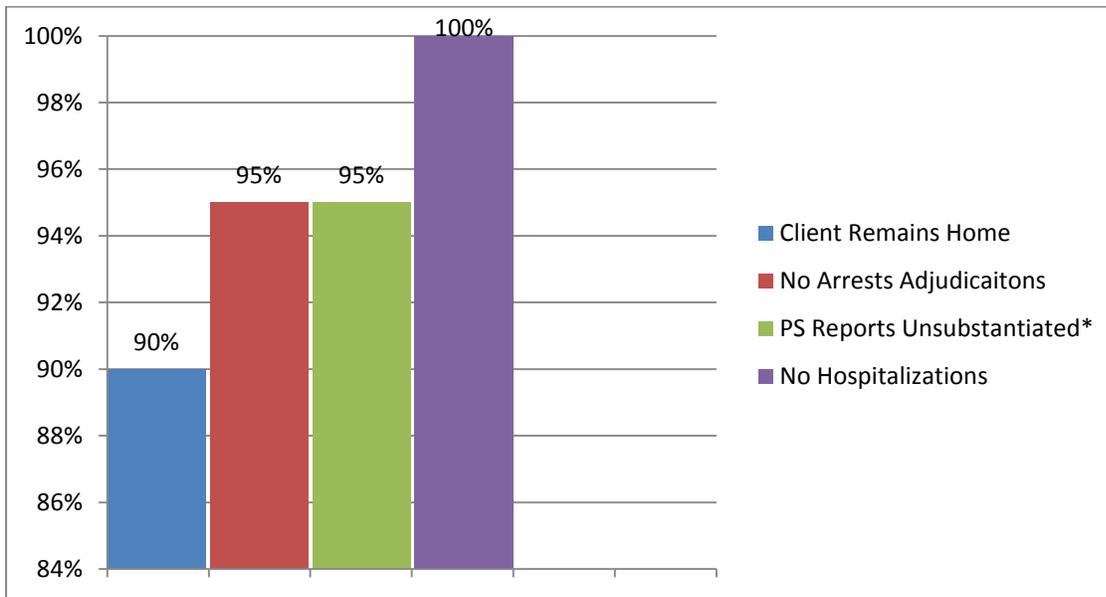
Community Services (CS) success with clients remaining in their home was 90% and above as illustrated in the graphs below depicting the 12 month 2013 follow-up and the 6 month 2014 follow-up. Their success rate was also excellent in preventing hospitalizations (100%). These are two goal areas required by DHS and CMH.

12 month follow up 2013



*of reports filed

6 Month Follow-up 2014



*of reports filed

Home-Based Services, Wraparound, and MST Mental Health programs were measured by the Child and Adolescent Functional Assessment Scale (CAFAS). CAFAS is administered at case opening, quarterly, and at case closure. There are eight subscales which reflect the youth's day-to-day functioning: School/Work; Home; Community; Behavior toward Others; Moods; Self-Harm; Substance Use; and Thinking/Communication. All subscales are scored at (0) Minimal or No Impairment; (10) Mild Impairment; (20) Moderate Impairment; and (30) Severe Impairment which are then added up for a total score. Eligibility for services is a score of 80 or above.

HB 0-3 program is measured by the Pre-school and Early Childhood Functional Assessment Scale (PECFAS). The subscales are similar to CAFAS without Substance Use. Scoring is based on the developmental age of the child. All subscales are scored at (0) Minimal or No Impairment; (10) Mild Impairment; (20) Moderate Impairment; and (30) Severe Impairment which are then added up for a total score. Eligibility for services is a score of 80 or above.

Progress and ultimately success is considered an improvement of at least 20 or 30 points:

CAFAS/Jackson and Hillsdale County

1/1/14 to 12/31/14

Average CAFAS Youth Total Score on Initial Assessment	104
Average CAFAS Youth Total Score on Most Recent Assessment (closing)	73*
DIFFERENCE	31*

**A lower average score at the most recent assessment (closing) indicates a positive change.*

**The average difference score: a positive number indicates improvement in functioning, 0 indicates no change, and a negative number indicates greater functional impairment.*

PECFAS/Jackson and Hillsdale County

1/1/14 to 12/31/14

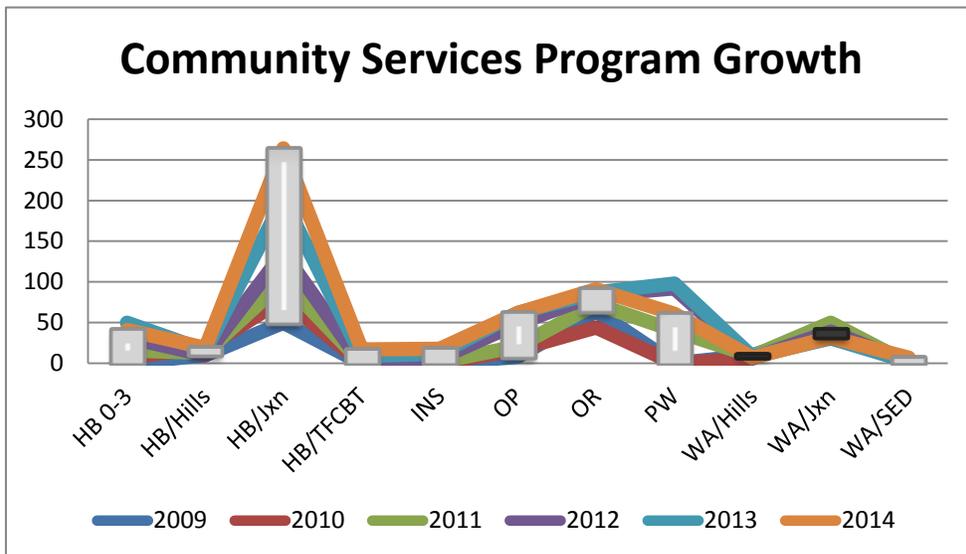
Average PECFAS Child Total Score on Initial Assessment	104
Average PECFAS Child Total Score on Most Recent Assessment (closing)	73*
DIFFERENCE	31*

**A lower average score at the most recent assessment (closing) indicates a positive change.*

**The average difference score: a positive number indicates improvement in functioning, 0 indicates no change, and a negative number indicates greater functional impairment.*

Program Growth:

Community Services has been growing at a steady pace of approximately 15% or greater for the past 5 years, primarily through the Jackson office or South Team mental health contracts. The chart below depicts growth for the following programs: Home-Based 0-3; Home-Based (Hillsdale & Jackson counties); Trauma Focused Cognitive Behavioral Therapy; Insurance Cases; Outpatient; Outreach; Parenting Wisely; Wraparound (Hillsdale & Jackson counties); and Wraparound for Severely Emotionally Disturbed.



The Community Services Growth chart, above with bars highlighting trends indicates the spiked growth in cases in mental health Home-Based Services over the six years shown. The number of cases served for these programs increased 70% between 2009 and 2014. The chart also depicts a slower but steady growth in cases in all other programs as well.

Paperwork Timeliness:

Paperwork timeliness requirements, is a part of all of Highfields contracts. Auditors for all programs, including our yearly A-133 audit track timeliness. The 2013 calendar year ended with paperwork timeliness hitting overall 97% for the year. (See Paperwork Timeliness, Year End Summary chart below)

**PAPERWORK TIMELINESS
2014 Year End Summary**

Program	Quarter1 % On-Time	Quarter 2 % On-Time	Quarter3 % On-Time	Quarter 4 % On-Time
RESIDENTIAL	90%	84%	82%	90%
NORTH TEAM	99%	92%	92%	97%
SOUTH TEAM	97%	97%	99%	99%
AGENCY WIDE	97%	96%	97%	98%

Residential Services (Phoenix and Stabilization):

Highfields reduced its’ residential capacity to two houses (24 students) in 2013 and continues with this model. The two house model allows for the reduction in referrals experienced across the state and maintains a predictable financial impact on the agency.

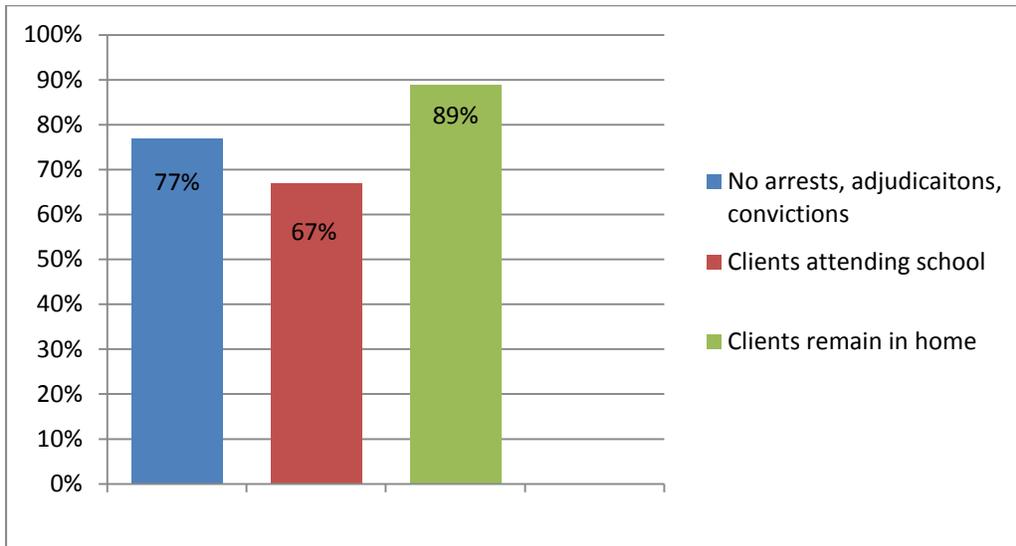
Stabilization Outcomes are reported for 12 month and follow-up from January 1, 2013 – December 31, 2013 since all data is complete for that time period. Stabilization Outcomes are also reported for 3 months follow-up. Phoenix 12 month Outcomes are reported for January 1, 2013 – December 31, 2013 since all data is complete for that time period. Phoenix 6 month Outcomes are also reported for 2014.

Stabilization served 6 youth for 2013. Out of those 4 or 67% were successful upon leaving the program. Two youth were able to be contacted **at 12 months** and both had stayed out of trouble with no arrests, remained in their home, and were attending school.

At **3 months** three youth were contacted and all remained at home, had no arrests and were attending school.

Phoenix program was able to contact one youth at the **6 month** follow up. That youth had remained in the home, had no arrests, and attended school. The **12 month** follow up is illustrated in the chart below.

Phoenix 12 month follow-up (2013)



CUSTOMER SATISFACTION:

Consumer satisfaction is 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		
2014 Client Satisfaction - 5 point scale (272 responses)		
Questions	Jackson	Lansing
I was treated with courtesy by the Highfields worker.	4.97	4.94
I feel the Highfields worker understood my needs.	4.96	4.85
The services I received from Highfields met my needs.	4.89	4.67
Highfields staff respected my language, race religion, ethnic background & culture.	4.99	4.92
I was involved in the planning of the Highfields' service I received.	4.99	4.77
I feel the goals in my treatment plan were achieved.	4.90	4.80
The Highfields staff worked with me to achieve my goals.	4.96	4.90
Overall, I am pleased with the services I received from Highfields.	4.95	4.92
Average Score	4.99	4.84
2014 Referring Worker Satisfaction - 5 point scale (94 responses*)		
Questions	Jackson	Lansing
The Highfields staff shared pertinent information with you concerning client's progress.	4.12	4.62
You received copies of progress reports in a timely manner.	4.48	4.60
You felt that the treatment needs of the client were addressed.	4.65	4.49
Overall you were satisfied with the services provided.	4.62	4.58
Average Score	4.46	4.57

* This number does not include LW's since there is no referring worker for Mental Health Cases

RESIDENTIAL		
2014 Phoenix Youth Satisfaction - 5 point scale (19 responses)		
Questions	Residential	
Your rights were respected in this program.	4.09	
The stay at Highfields was helpful to you.	4.31	
Your decision making skills have gotten better.	4.74	
You have learned new ways of dealing with people in authority.	4.17	
You have a better understanding of how thoughts and feelings affect your actions.	4.39	
You have learned new skills to deal with problems.	4.50	
Your living situation at Highfields was safe and clean.	4.30	
Average Score	4.31	
2014 Referring Worker Satisfaction - 5 point scale (17 responses)		
Questions	Residential	
	Phoenix	Stab
Highfields staff shared pertinent information with you concerning clients	4.71	4.80
You received copies of progress reports in a timely manner.	4.57	4.80
You felt that the treatment needs of the client were addressed.	4.57	4.70
Overall you were satisfied with the services provided.	4.57	4.80
Average Score	4.61	4.78

FEEDBACK MECHANISMS:

Bright Future Newsletters were mailed to donors, vendors, contractors; other interested parties and posted on the agency web page three times to represent a winter, spring, and summer issue.

Directors Connection, written by Highfields President CEO, is sent to current and former Board Directors. This correspondence focuses on recent developments in the agency.

Annual Report was completed in October 2013 and distributed at our annual breakfast on October 17, 2013 and mailed to other stakeholders.

Weekly Updates are emails to staff and Board members written by Highfields President CEO.

Highfields Dispatch an internal quarterly newsletter produced by Belle Black with written address from Highfields President CEO is emailed to all employees.

SUMMARY:

A few of the significant measures, findings, and accomplishments that affected Highfields this year are highlighted below and all have been addressed above in this report.

- ❖ Highfields added 4 new programs this year: Family Maintenance, Parenting Wisely with Ingham Co. Court, Case Management for Autism, and Wraparound in Branch County (*p. 17*).
- ❖ LuAnn Sawdey-Roberts, Associate Director received the Carl J. Latona Distinguished Services Award.
- ❖ Residential manager, Chris Robinson received the Mentorship Award through the Department of Human Services (*p. 11*).
- ❖ The Jackson office increased the number of clients served in FY 2013/14 by approximately 20% (*p. 23*).
- ❖ The Home Based Services program continues to be Highfields highest rate of growth (*see chart p.23*).
- ❖ Highfields awarded the Robert L. Drake Citizenship Award; the Highfields Partnership Award; and the Aldinger Scholarship (*p. 9*)
- ❖ Highfields minimum timeliness standard for reports is 85%. Staff averaged over 95% each quarter in 2014 (*see chart p. 23*)
- ❖ Residential Services continues to maintain a two house model.
- ❖ The Phoenix residential program has had an 89% success rate of youth remaining at home following discharge (*see chart p. 24*).

Copies of all plans and reports are available for review upon request.

Report Prepared By:

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