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## CQI Process and Purpose

CQI is an essential part of Highfields' services. As an organization, Highfields highly values employee and stakeholder involvement in conducting the agency's mission, vision, goals, and desired outcomes. 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 standards, Michigan Department of Health and Human Services standards, corporate compliance regulations, and privacy and security guidelines.

The CQI Committee, led by the Director of Quality & Education, oversees the agency's quality initiative, and meets on a quarterly basis. The CQI Committee is comprised of representatives from many Highfields divisions and leadership. These include Residential Services, Community Services, Administrative Services, President/CEO, and Vice President.

### **CQI Committee Meetings**

January 26, 2023

April 27, 2023

July 20, 2023

October 26, 2023

This report covers calendar year 2022 and provides an overview of the activities of CQI initiatives and the agency.

### **The purpose of the CQI process is:**

- To ensure the highest level of quality service provision to all clients
- To monitor critical points of the organization's service delivery
- To detect any areas of concern that should be addressed
- To oversee corrective action plans to ensure identified areas of need are addressed
- To oversee the change process to prevent reoccurrence of identified problems
- To effect systemic change where needed in response to identified concerns

## CQI Goals

### **Goals for 2023**

- Improve/maintain paperwork timeliness at an average of 90% across all programs in the agency.
- Increase consistent completion of satisfaction surveys to 50% by increasing awareness of internal agency policies and increasing accountability.
- Monitor progress of Highfields Five Year Strategic Plan and find opportunities to review progress with staff.
- Improve the process of continuous learning and quality improvement by implementing the PDSA cycle across the organization
- Improve or maintain DHHS and Home-Based units at or above benchmark for three consecutive quarters.

### **Goals for 2024**

- Improve/maintain paperwork timeliness at an average of 90% across all programs in the agency by increasing supervisor and employee skillsets.
- Increase consistent completion of satisfaction surveys to 50% by continuing to increase individual and supervisor accountability.

- Monitor progress of Highfields Five Year Strategic Plan by reviewing at each CQI meeting and continuing to review progress and gain feedback from staff at the May and October Agency Roundtable meetings.
- Continue to implement the PDSA cycle across the organization by providing learning opportunities at leadership retreats and all staff meetings.
- DHHS and HB programs will improve/maintain units at or above benchmark for three consecutive quarters by implementing interventions developed by the CQI DHHS units and HB units workgroups.
- Review 2023 outcomes data to identify trends of strengths and struggles. CQI team and program staff will develop action steps needed to improve program specific performance indicators identified in Logic Models.

## Review of 2023 Goals

### 1. Improve/maintain paperwork timeliness at an average of 90% across all programs in the agency.

#### Progress:

The agency continues to focus on timeliness. In the spring, a workgroup comprised of members of the CQI committee and additional staff and supervisors was formed to focus on the barriers and successes of timeliness. A survey was sent out to both community services staff and supervisors to obtain information on what is working and not working for both groups. Out of the responses, a *Timeliness Policy and Expectations* document was created which outlines Highfields policy of 90% timeliness, and the ways in which staff and supervisors can work together to achieve the goal. It also serves as a guideline to hold everyone to the same standard across all programs and offices. This document was shared with supervisors and staff in January of 2024.

In 2023, fifty-eight percent of programs met the 90% paperwork timeliness average standard, which was an increase from the 34% obtained in 2022. This was the second year-over-year increase. Additionally, 19% of programs were above 80%. Quarter two saw the entire South team achieve the 90% goal with many programs at 100%! This achievement occurred for the first time since tracking began.

We saw the same trend in 2023 from 2022, that smaller programs with a small caseload and one worker seeming to have the most issue with maintaining timeliness above 80%. If one report was late in those instances, it greatly impacted the overall percentage. Additionally, there were two programs that had no timeliness due to no cases during the quarter due to lack of staff. The agency had an 88.3% average timeliness rate over the course of 2023.

### 2. Increase consistent completion of satisfaction surveys to 50% by increasing awareness of internal agency policies and increasing accountability.

#### Progress:

In the summer, members of the CQI committee formed a workgroup to determine barriers to survey completion. A one-pager with best practices and Survey Monkey links was created and shared at team meetings across the agency. An acceptable band of performance of 30% was established to indicate at which point additional interventions would become necessary if the return rate dropped below the threshold.

Monthly tracking of surveys continued in 2023, with information being sent to supervisors and asking for a response to any missing surveys. The way in which the surveys were being tracked was updated to

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exclude AWOL, no-count, and administrative terminations. It was determined that cases closed in those manners would not be able to have a survey completed due to a range of factors including a residential student leaving campus or being sent to another facility, or a community services referral being inappropriate.

2023 saw two quarters where return rates were above the 50% goal with another quarter being just below. The steps that the CQI team and the surveys workgroup continue to take are increasing return rates and we believe that with continued monitoring, supervisor involvement, and overall staff awareness, the rates will continue to increase.

### **3. Monitor progress of Highfields Five Year Strategic Plan and find opportunities to review progress with staff.**

#### **Progress:**

The Five-Year Strategic Plan was reviewed by leadership during the summer of 2022. It was determined that many of the goals (or the steps previously identified to achieve them) had been accomplished and additional steps for those goals could be identified. In October 2022, the discussion was brought forth at the Agency Round Table where staff identified and helped develop those additional steps to further promote achievement of the goals.

### **4. Improve the process of continuous learning and quality improvement by implementing the PDSA cycle across the organization.**

#### **Progress:**

The implementation of the PDSA cycle continues to be a work in progress. The PDSA template has been utilized with the eight CQI workgroups to identify areas of improvement, the goals, steps to take and results of those interventions. The template continues to be used into 2024 as those workgroups continue to improve on processes and procedures to reach the goals of the CQI committee. The PDSA cycle has also been used in several areas in the agency to improve performance and outline expectations. As the members of the CQI team continue to use the PDSA template and cycle, a change to a different version may occur for ease of use.

### **5. Improve or maintain DHHS and Home-Based units at or above benchmark for three consecutive quarters.**

#### **Progress:**

In an ongoing effort to reach and maintain our unit goal, two workgroups were formed that were comprised of CQI committee members and additional staff. Multiple interventions were done including conducting a FIT to determine barriers, engagement training at the Community Services Roundtable in August, individual follow-ups with staff, increased documentation, and monitoring non-engagement. These efforts have helped increase units in some areas, but we have yet to sustain our goal consistently. The two workgroups will continue to meet in 2024 and establish additional interventions and training to support staff in achieving this goal.

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# Planning



## Long Term

The Highfields Board of Directors and Highfields staff worked together to update the Five-Year Strategic Plan in the fall of 2022. A copy of the plan is available on the [Highfields website](#). The overall goals of the Five-Year Plan include:

### Priority 1: Programs and Services

**Vision Statement:** Provide high quality programs and services with fidelity that result in positive outcomes for children and families.

### Priority 2: Development

**Vision Statement:** Create a growing, balanced development plan to support Highfields' programs, employees, and ensure positive outcomes for children and families.

### Priority 3: Diversity, Equity, and Inclusion

**Vision Statement:** Create an empowering environment based on principles of equity and inclusion that fosters the exchange of ideas, recognizes, and challenges bias, and emphasizes the value of our collective differences to deliver equitable services to children and families.

### Priority 4: Financial Stability and Growth

**Vision Statement:** Equip employees, services, and infrastructure with necessary resources to effectively sustain programming.

### Priority 5: Employee Investment

**Vision Statement:** Invest in a workplace culture that supports, engages, and develops employees to positively impact children and families.

### Priority 6: Facilities and Infrastructure

**Vision Statement:** Support employees and services through modern and safe facilities, current technology, and data security.

The Board, board committees, and Senior Leadership Team will continue to monitor the goals and priorities outlined in the plan during regular meetings to evaluate progress.

## Short Term

On an annual basis, Highfields staff and supervisors participate in planning activities to integrate the priorities of the strategic plan and current needs of the community into the agency's programs. Annual goals are formed based on feedback from staff at an Agency Roundtable meeting, information from the CQI Year-End Report, results of any audits/monitoring activities, and current needs and conditions of the communities Highfields serves.

The Director of Quality & Education compiles the goals and strategies for approval by Senior Leadership.



A new annual short-term plan will be reviewed in the Spring of 2024 and shared with the board of directors at their June board meeting. Progress toward goals will continue to be reviewed and monitored by the CQI Committee at each quarterly meeting.

## Stakeholders

Stakeholders participate in the CQI process through a variety of mechanisms including work groups, surveys, social events, board meetings, board committee meetings, and CQI initiatives. The following stakeholder events took place in 2023:

### Employees

- Agency Roundtable meetings occurred on May 10<sup>th</sup> and October 18<sup>th</sup> in person at the Dart Family Foundation building at Highfields. Staff were recognized for two, four, and six-year service awards. Agency wide updates and trainings were provided. Training topics included DEI and wellness activities, safety/IT updates, team building activities, and employee accident/injury report training. Staff also provided feedback as well as created new goals and initiatives for the Strategic Plan at the October meeting.
- Community Services Roundtable meetings for North (Lansing & Livingston Offices) and South (Jackson & Hillsdale Offices) Teams were held February 8<sup>th</sup> and August 9<sup>th</sup> at the Dart Family Foundation building at Highfields. Training at the meetings included poverty simulation, suicide prevention training, engagement skills, TFEBT skill sharing, DEI activities, and incident reporting. Updates regarding various community services were also reviewed.
- Residential Services held monthly staff meetings as well as quarterly Staff Forums.
- The annual Employee Recognition Dinner was held at the Cascades Manor House in Jackson. Several staff were recognized for their length of service and the Carl J. Latona award winner was formally recognized.

### Board Members

Board members participated in bi-monthly board and board committee meetings. All meetings were conducted via Teams or Zoom. Notes from all meetings are maintained in a file at the Onondaga Campus. Board committees include Program, Fund Development, Personnel and Finance, Building and Sites, Executive and Endowment Committees.

- Board Chairperson Robert Easterly and President/CEO Brian Philson chaired the 2023 Board Orientation on May 5<sup>th</sup> to

### CARL J. LATONA DISTINGUISHED SERVICE AWARD

This award was established in 2012 and is given annually to an employee, nominated by his or her peers, who has exhibited the four major characteristics exemplified by Carl: integrity, passion for helping others, perseverance, and an uncompromising commitment to “doing the right thing.”

- familiarize new board members to the board manual and workings of the agency.
- Highfields Annual Meeting of the Board of Directors was held on April 26<sup>th</sup> at Hawk Hollow Golf and Banquet Center. Past, present, and new board members as well as staff and Aldinger Scholarships Awardees participated. Various awards were also presented at the event including the Robert L. Drake Citizenship Award, the Highfields Partnership Award, and multiple Aldinger Scholarship Awards.

## Donors

- Donors and key stakeholders were mailed the Highfields Annual Report. It was also distributed to staff and made available on the Highfields website.
- A donor survey was completed in 2023.
- The 43<sup>rd</sup> Annual Golf Outing took place on June 5<sup>th</sup>, and was well-attended by over 150 donors, board members, staff, and other members of the community.
- Highfields' Annual Strengthening Families Breakfast took place on October 11, 2023, at the Kellogg Center in East Lansing. The breakfast highlighted clients who have turned their lives around with help from Highfields and its staff.



- Highfields' Annual Toy Drive, sponsored by WLNS Channel 6, took place November 13<sup>th</sup> through December 10<sup>th</sup> of 2023. Toy drive boxes were placed at various mid-Michigan Ford Dealerships to collect donations to benefit children and families in Highfields' programs. We are grateful for the continued support of our community during the holiday season.

## Referral Agencies

- Site visits and audits of case files took place during the year, some audits remained virtual, and some returned to an in-person format.
- Results of the audits and any subsequent CAPs are available as needed. Any CAPs have been accepted by auditing bodies.
- Numerous presentations and meetings took place between the Courts, Department of Health and Human Services, and Community Mental Health Authorities with whom Highfields contracts to provide services.
- Referring workers were sent satisfaction surveys at the end of services. All programs saw an increase over 2022 and were once again above the 4.5 benchmark score on a 5-point scale. Actual scores are available in the Internal Quality Monitoring section of this report.

## Clients

- Clients were asked to complete satisfaction surveys at the end of services. Overall results for client satisfaction surveys indicated that across all programs, Highfields once again exceeded the 4.5 benchmark score on a 5-point scale. Actual scores are available in the Internal Quality Monitoring section of this report.

## Client Advocates

- Staff participated in ongoing meetings as part of Michigan Federation for Children and Families, Michigan Home-Based Family Services Association, LifeWays, MDHHS, and numerous other state and community advisory boards.
- Highfields CEO Brian Philson serves as a Governor appointee to the Michigan Committee of Juvenile Justice, and he and our Director of Residential, Tyler Jones, have been active participants in the Juvenile Justice Reform taking place in the state of Michigan.



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- Staff also participate in the “Walk a Mile in My Shoes” Mental Health Awareness Day, “Out of the Darkness Walk” for Suicide Prevention, and Legislative day, among others.

## External Quality Monitoring

### Licensing

Highfields holds various licenses and credentials for its range of programs and services. Highfields has been accredited since 1995 through the National Council on Accreditation (COA). The agency's current accreditation is through May 31, 2027. The reaccreditation process was completed in March and Highfields achieved its first ever expedited accreditation! The work that supervisors and staff across the agency do daily is demonstrated in this achievement. Highfields is committed to continuing to uphold COA standards in all the work that it does, while continuing to improve upon services in ways that are meaningful and beneficial to the communities that we serve.

### Residential Services

Highfields holds a license with the Division of Child Welfare Licensing (DCWL) through the State for its residential programming. Regular reviews and audits occur, as well as investigations for alleged licensing violations. If a violation includes any allegations of abuse or neglect, Children's Protective Services (CPS) will also investigate it. DCWL and CPS often investigate residential complaints in coordination with each other and may conduct joint interviews. However, they file separate reports and recommendations.

An interim licensing inspection occurred on August 29, 2023. The inspection found no issues with compliance. Highfields was offered technical assistance in two areas; timely medical and dental services and ensuring the DCWL consultant receives notifications of incidents.

In 2023, there were three special investigation reports from licensing. A CAP was necessary for two of the instances, both of which were accepted by licensing. The other special investigation did not require a CAP due to no violations being identified.

The Residential program also maintains status as a QRTP facility (Qualified Residential Treatment Provider), which qualifies the program to receive Title IV-E funding. Title IV-E specifies that a QRTP placement must meet the following criteria:

- 24/7 availability of nursing and clinical staff
- Trauma-informed treatment model
- Family outreach and inclusion
- Discharge and aftercare support for at least 6 months
- Licensed and nationally accredited

A PREA audit was completed on June 6, 2023. Some additions needed to be made to the policy to become fully compliant with the standards.

### Community Services

Highfields provided credentialing information to LifeWays in July 2023 and retains full credentialed status with LifeWays Community Mental Health to provide Home-Based, Multi-Systemic Therapy, Outpatient, and Case Management. Highfields also maintains full credentialed status with Lenawee County Community Mental Health Authority (LCMHA) to provide the Family Preservation Program, and Livingston County Community Mental Health to provide Multisystemic Therapy.

## Reaching Higher

The Reaching Higher afterschool program requires each site to be licensed as a Childcare Center through the state of Michigan. In 2023, Highfields facilitated the program at daVinci, Hunt, Springport, and Townsend.

## Audits and Case Readings

Many Highfields programs are formally audited or have case readings with the various contract holders and authorities providing oversight for the services. Below is a summary of program audits and case readings that external sources completed with Highfields during the 2023 calendar year.

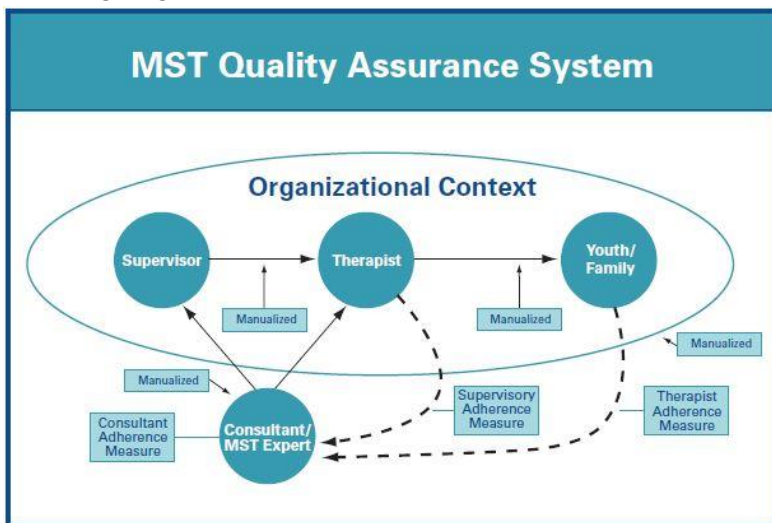
Residential Services	
<b>Western Wayne County/Growth Works</b>	<b>Findings: A Corrective action Plan (CAP) was required for partial compliance on training and dental exams exceeding the 90-day window. The CAP was written and accepted.</b>
<b>Reviewer: Bridgeway Services</b>	
<b>Date: May 31, 2023</b>	
<b>CAP Required: Yes</b>	
<b>Prison Rape Elimination Act (PREA) Compliance Check</b>	<b>Findings: A CAP was required based on lack of internal investigations of allegations and not all youth being aware of advocacy efforts. The CAP was written and accepted.</b>
<b>Reviewer: PREA Juvenile Program</b>	
<b>Date: June 6, 2023</b>	
<b>CAP Required: Yes</b>	
<b>Renewal Inspection</b>	<b>Findings: A CAP was required based on several findings including a lack of mental health care provider, a need for an interpreter where applicable, and needed additions to Highfields policies. The CAP was written and accepted.</b>
<b>Reviewer: MDHHS</b>	
<b>Date: August 10, 2022</b>	
<b>CAP Required: Yes</b>	
Community Services	
South Team	
<b>In-Home Family Services (IHFS) Hillsdale County</b>	<b>Findings: Awaiting results from DHHS</b>
<b>Reviewer: MDHHS</b>	
<b>Date: September 13, 2023</b>	
<b>CAP Required: Unknown</b>	
<b>Families Together Building Solutions (FTBS) Jackson County</b>	<b>Findings: Awaiting results from DHHS</b>
<b>Reviewer: MDHHS</b>	
<b>Date: August 16, 2023</b>	
<b>CAP Required: Unknown</b>	
<b>Family Preservation Program (FPP) Lenawee County</b>	<b>Findings: Highfields achieved a 97% rating.</b>
<b>Reviewer: Lenawee CMH</b>	
<b>Date: June 27, 2023</b>	
<b>CAP Required: No</b>	
North Team	
<b>Outreach Ingham County</b>	<b>Three Findings: document in file verbal eval of client progress, notify DHHS worker after 2 consecutive missed appointments, bill identified insurance before billing MDHHS.</b>
<b>Reviewer: MDHHS</b>	
<b>Date: March 21, 2023</b>	

CAP Required: No	
<b>Educational Services</b>	
21 <sup>st</sup> Century Community Learning Centers	<b>Findings: Overall, there was some documentation missing but nothing that required a CAP.</b>
Reviewer: MI Dept. of Education	
Date: April 11, 2023	
CAP Required: No	

Highfields also undergoes an annual financial audit, known as a single audit. This was completed in the summer of 2023. Note: Highfields once again received a clean, unmodified audit with no findings. The subsequent audit report is available upon request or directly on the Highfields website.

## MST

Multi-Systemic Therapy, which Highfields offers in Livingston, Jackson, and Hillsdale counties, is an evidence-based model that provides its own Quality Assurance System through MST Services. MST Services works with agencies delivering MST to structure a system within which programs will be faithfully conducted. Its Quality Assurance System provides multiple layers of clinical support, program support, and ongoing feedback to ensure that providers faithfully implement MST.



Fidelity of the model is tracked weekly through group (team) supervision, weekly consultation (with the MST Expert), and weekly summary completion. Additional tracking mechanisms include observation and/or recording of MST sessions to provide the therapist with immediate feedback; monthly calls to each family from a call center to complete a Therapist Adherence Measure (TAM) to track therapist behavior; a Supervisor Adherence Measure (SAM), completed bi-monthly by therapists to track supervisor behavior; and a Consultant

Adherence Measure (CAM) completed by the team bi-monthly to track consultant behavior. Results are tracked and collectively shared with the greater MST professional community.

All new hires attend a 5-Day Training course in MST. On a quarterly basis, teams are provided MST Booster training to target team needs and enhance skill sets in the delivery of MST. Bi-annually, Program Implementation Reports (PIR) are developed/updated and delivered to key stakeholders to provide a review of the team's implementation of MST. Copies of the PIR are available upon request.

## Reaching Higher

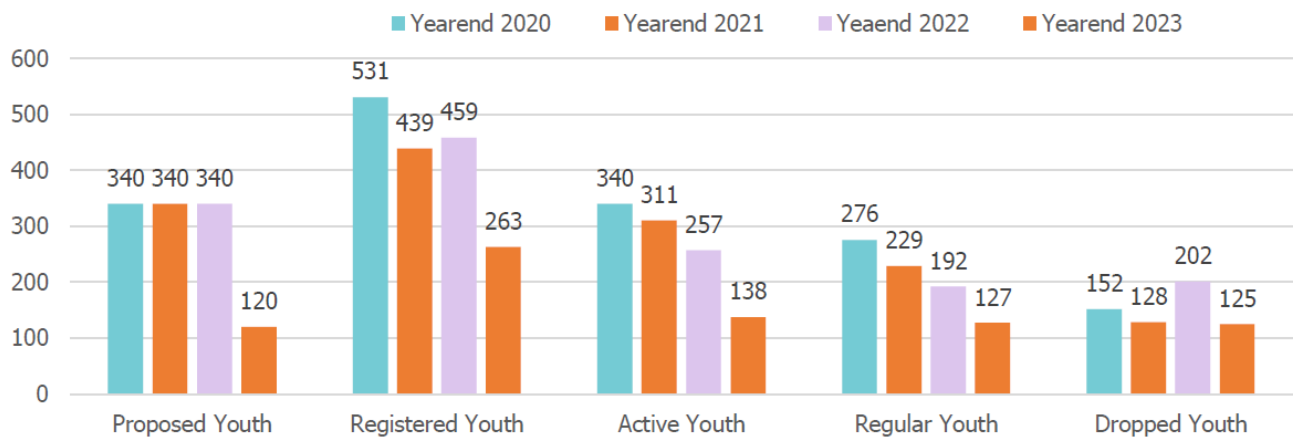
Highfields contracts with an external evaluator to assist in a thorough review of its Reaching Higher 21<sup>st</sup> Century Community Learning Centers program each academic year. In October 2023, Oseela Nadine Thomas, PhD of Eval Global Solutions, LLC authored a report entitled *Reaching Higher Final Evaluation Report*, which includes data, analysis, and recommendations for the program. A copy of the full report is available upon request. Key findings were adapted from the report and summarized below:

“During the 2022-2023 academic year, Highfields facilitated the Reaching Higher program across four different locations: daVinci, Hunt, Springport, and Townsend. A total of 263 youths were registered, with 138 actively participating and 127 regularly attending for 30 or more days. The average attendance for all participants was 55 days, while active participants attended for an average of 66 days.”



The parent survey showed 97% of parents “expressed satisfaction with the program and believed it provided their children with safe and constructive afterschool activities.”

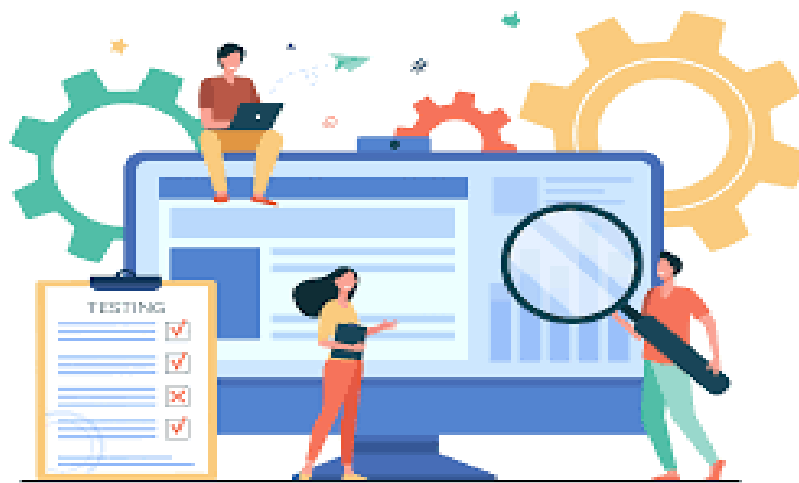
Figure 1. Student Enrollment: June 2020, June 2021, June 2022, and June 2023



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“The Reaching Higher Afterschool Program offered by Highfields provides numerous benefits to children and youth. The program creates a safe and supportive environment where the participants engage in enriching and structured afterschool activities that promote academic success, personal growth, and social development. Reaching Higher also helps youth build self-confidence and self-esteem and form positive relationships with their peers and adults. The program further develops crucial life skills in youth such as leadership, teamwork, and problem-solving. The program has proven to be an invaluable resource for both students and their families, as well as the communities Reaching Higher serves.

## Internal Quality Monitoring



### Risk Management Review

Each quarter, a Risk Management Review form is completed with data from across the agency for review at the CQI Committee meetings. The Risk Management Review form includes information on physical interventions, licensing or contract complaints/investigations, client grievances, critical incidents, environmental risks, dispensing of medications, and staff accidents, grievances, and turnover. Individual teams and supervisors review these incidences when they occur, while the CQI Committee reviews the compiled data on a quarterly basis. Copies of the Risk Management Review are available upon request.

### Case Record Reviews

Case records are regularly reviewed internally in a variety of ways:

- Supervisors in each program read and edit formal reports prior to entering them into the record.
  - In some contracted programs, supervisors are required to formally review a certain number of cases from each member of staff.
  - In the third quarter, the CQI team began collaborating with the other community services supervisors to ensure that each supervisor was reviewing one file per staff person per quarter.
- Administrative assistants review cases for necessary documentation at case opening, monthly or bi-monthly billing, and periodic audits. All records are reviewed at case closing.
- The Quality and Education Coordinator does random open file reviews across all programs throughout the year.

- Clients and/or their guardians are provided copies of most reports pertaining to their care and can review their progress with their assigned Highfields worker.

In addition to these regular reviews (North Team/South Team/Residential as well as reviews by Director of Quality & Education in preparation for audits and random sampling), during the closing process, cases are reviewed for missing paperwork, proper documentation, and to ensure HIPAA compliance.

In 2023, we continued to increase the number of open case reviews completed on a quarterly basis. This has continued to be helpful in identifying trends and addressing them with supervisors and employees prior to cases closing. Copies of the Case Record Review Quarterly Report are available upon request.

Overall, reviews revealed positive trends in case documentation. As any concerns or trends were revealed, the Director of Quality & Education met with supervisors and teams to review strengths and weaknesses discovered in case records. Ongoing collaboration continues to address any concerns and recognize areas of excellence.

## Outcomes

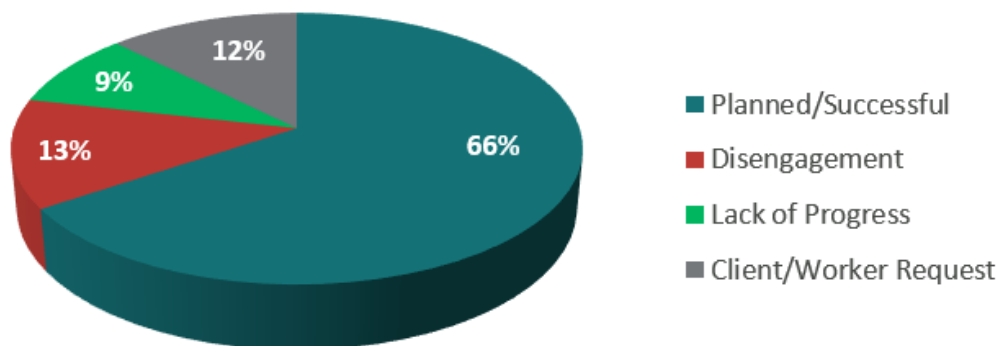
All Highfields programs collect data when cases close to track progress and better understand the strengths and barriers that affect case closure. Discharge data in this report covers cases closed in the 2023 calendar year. Highfields also collects follow up data at 3, 6 and 12 month intervals. This report includes any follow-up contacts for cases that closed in the 2022 calendar year, as data collection for 2023 will continue throughout the current year.

## Community Services

### Discharge Data

Most Community Services cases closed successfully, meaning the client or family met some or all of their goals and a plan was made for discharge. In cases not marked as “successful,” the reason for discharge is sorted into three possible categories:

- **“Client Disengagement”** – the client stopped meeting and did not respond to attempts to contact by phone, mail or in person
- **“Lack of Progress”** – there was insufficient progress despite best attempts within program parameters; this may also include when a case closes because a higher level of intervention became necessary
- **“Client/Worker Request”** – the client, family, or referring worker has requested to end services for any reason

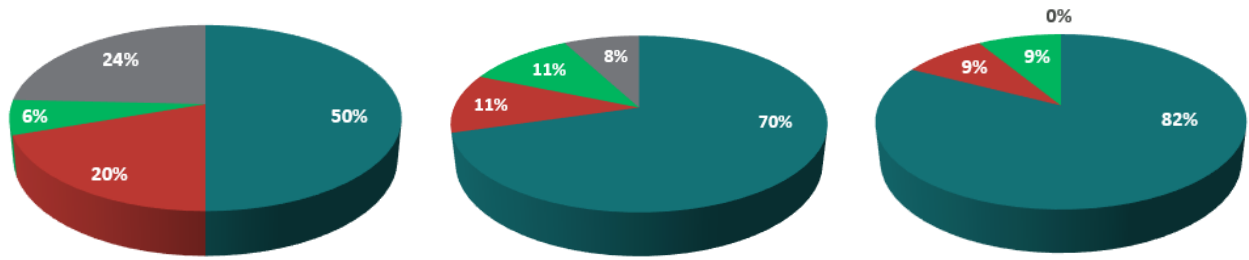


CMH Contracts

MDHHS Contracts

Court Contracts





The above charts demonstrate reasons for discharge in all Community Services programs. Sixty-six percent of all Community Services cases were successful at the time of discharge. Both CMH and MDDHS contracts saw an overall decrease in successfully closed cases, while court contracts showed a 25% increase. Many of our contracts saw increases in closings due to disengagement and lack of progress, however court contracts saw a 24% decrease in cases closed due to disengagement. The agency continues to work on staff retention and recruitment of new staff to prevent staffing issues from affecting client engagement.

### CAFAS Scores

CAFAS stands for Child and Adolescent Functional Assessment Scale. It is a standardized assessment for school-aged children and youth determining functional impairments across a range of subscales. Most of the program contracts Highfields holds with LifeWays are required to administer the CAFAS at case opening, every three months, and discharge. The following table compares the initial assessment to the most recent assessment and includes both open and closed cases for the 2023 calendar year.

Program	HB	MST	WA	All
Average Improvement in Total Score	<b>13</b>	<b>38</b>	<b>10</b>	<b>20</b>
Improvement in 1 or More Outcome Indicators	<b>46.5%</b>	<b>74%</b>	<b>50%</b>	<b>57%</b>
Total Number of Cases	<b>22</b>	<b>35</b>	<b>26</b>	<b>83</b>

CAFAS Outcome Indicators include Meaningful and Reliable Improvement (decrease of twenty points or more), no Severe Impairments (when compared to intake), and Pervasive Behavioral Impairment (defined as severe or moderate impairment on School, Home, and Behavior subscales). LifeWays benchmark for Home-Based cases in this area is 60%. Most areas showed a decrease in scores with Wraparound being the exception. There is a lack of trained staff in other organizations that provide respite, CLS and other therapeutic services which can contribute to a higher CAFAS score.

### Follow Up Data

All Community Services cases that close successfully are contacted at 6 and 12 months to follow up on their progress; a small number of programs also attempt follow up at 3 months per their contract requirements. Although attempts are made for all successfully discharged cases, not all clients respond, or some decline to provide information. If a client cannot be contacted or requests not to be contacted, they are removed from any subsequent contact lists. As a result, the sample size at 12 months may be smaller. The table below illustrates post-discharge trends among families Highfields was able to contact.

### Follow Up: Community Services Discharged in 2022

Time Frame	3 mo.	6 mo.	12 mo.	Avg./Total
Client/Family experienced success	93%	90%	81%	88%
Client still resides at home	85%	92%	92%	89.7%
No reported legal or protective service involvement	100%	90%	89%	93%
Total Number of Respondents	14	93	108	215

The majority of cases that closed successfully and engaged in follow up contacts provided information that indicated they continued to experience success since Highfields services ended. Six months after discharge, 90% of respondents reported they experienced success and 92% reported their child(ren) still resided in the home.

It is important to note that the data reported here has changed from previous years. For 2023, outcomes that were completed during the calendar year are reflected. This has led to a significant increase in the number of outcomes that are represented, particularly in the 12-month data set.

## Residential Services

### Discharge Data

In 2023, Residential Services discharged a total of twenty-seven cases, all 20 students were enrolled in the Phoenix program, with none in the Stabilization program. The reason for closing is collected at discharge and is categorized as either positive or negative. Positive reasons included graduation, release, and court de-escalation. Negative reasons may include, state-initiated termination, administrative termination, AWOL (eloping) from campus, and AWOL (eloping) from a home visit.

Forty-four percent of discharges from the Phoenix program were positive, with all of those youth returning to a family setting.

### Follow Up Data

Residential Services attempts follow up contact with successfully discharged cases at 3, 6 and 12 months. Like Community Services, not all clients respond. This, combined with the smaller sample size of cases, results in lower numbers of responses.

A total of eighteen responses were received across both Phoenix and Stabilization for 3, 6 and 12 month follow ups. Significant outcomes include:

- No outcomes were completed for cases 3 months post discharge
- 100% had not been adjudicated or convicted within 6 months
- 81% had not been adjudicated or convicted 12 months post discharge

Staffing remains a significant factor in 2023. Those staffing challenges led to a decreased sample size due to the number of students being served in the Residential program being dramatically reduced.

## Satisfaction Surveys

Highfields distributes surveys at the end of services to measure both client and referring worker satisfaction with Highfields' services. Client surveys are completely anonymous. All surveys utilize a five-point Likert scale, with one being the lowest possible score and five being the highest. The benchmark for satisfaction surveys is an average score of at least 4.5. Data reflects scores meeting the 4.5 threshold

across all programs. The following results represent all survey responses received during the 2023 calendar year:



*“I am thankful for this program, and I feel blessed that (my child) was able to be a part of it.”*

**“I am glad we participated in this program. It helped to bring everything full circle.”**

*“They were so supportive and taught me better ways to communicate and do the right thing.”*

**“I loved my workers and was able to be myself and feel comfortable and safe with them.”**

Satisfaction Survey Results 2023		
COMMUNITY SERVICES	# Responses	Average Score
Clients (South Team)	45	4.97
Clients (North Team)	41	4.72
Referring Workers (South Team)	15	4.61
Referring Workers (North Team)	12	4.89
RESIDENTIAL SERVICES	# Responses	Average Score
Clients	12	4.6
Referring Workers	5	4.7

Unfortunately, response rates stayed about the same from 2022, although the scores increased. In mid-2023 a workgroup was created to investigate ways in which the response rate could be increased as well as any barriers to completion. Multiple interventions were introduced including updating the Survey Monkey links to enable referring workers to complete more than one survey from their device, a one pager with best practices with those links imbedded on it was also created and distributed to supervisors and staff. The tracking process was also updated and is being shared more consistently with supervisors as well as requesting feedback from them with information on any missing surveys. The way in which the total number of surveys being counted has also changed and now excludes AWOL, administrative termination, and no-count since those surveys would never be able to be completed due to various programmatic reasons. Overall, there is still room for improvement, however the scores that are received from the responses are incredibly good.

## Timeliness

Highfields measures report timeliness across programs in a quarterly Scorecard. The Scorecard is typically reviewed in CQI Committee, Senior Leadership, and Leadership meetings. It is available upon request. The agency wide timeliness benchmark is 90%. The following rates were achieved in 2023:

DIVISION	QTR 1	QTR 2	QTR 3	QTR 4	2023 AVG/TOTAL
Residential	100%	100%	80%	73.3%	88.3%
North Team	79.2%	87.9%	84.9%	86.8%	84.7%
South Team	91.9%	97.3%	86%	83.9%	89.8%
Agency Total	88.7%	94.8%	85.5%	84.2%	88.3%

The Agency's overall total increased from 83.3% in 2022 to 88.3% in 2023. This was the fourth year-over-year increase and has put Highfields just below the 90% goal as an agency.

The continued focus on timeliness as a committee and as an agency has contributed significantly to the increase in timeliness numbers. These efforts are highlighted in the progress section of Goal 1. Highfields will continue to focus on timeliness as a goal into 2024 and will use the workgroup and its identified interventions to support all programs in achieving the respective benchmarks for each program.

## Summary

Highfields and its staff continue to persevere throughout the many challenges it faces, ensuring their presence to provide quality services that meet the needs of youth and families in our communities. The CQI team has continued to use the momentum from our COA reaccreditation to focus the agency's commitment to quality. We are incredibly proud of the efforts that staff and supervisors continue to put forth.

Any questions, comments, or requests for additional information related to this report can be directed to the Director of Quality & Education at [BWomboldt@highfields.org](mailto:BWomboldt@highfields.org).