
Continuous Quality Improvement Year-End Report 2024



May 13, 2024

Highfields, Inc.

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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.

CQI Committee Meetings

January 18, 2024

April 18, 2024

July 18, 2024

October 24, 2024

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.

This report covers calendar year 2024 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 recurrence of identified problems
- To effect systemic change where needed in response to identified concerns

CQI Goals

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. (*HB benchmark is 6, DHHS is 3)
- 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.

Goals for 2025

- Improve/maintain paperwork timeliness at an average of 90% across all programs in the agency by implementing the PDSA cycle to increase accountability and remove barriers.
- Maintain survey completion rates of at least 50% across the agency by utilizing established band of acceptable performance and monthly tracking sheets.
- 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.
- Increase implementation of PDSA cycle across the organization by the CQI team role modeling effective use of the process with leadership and staff.
- 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. (HB benchmark is 6, FTBS/FRP is 3, IHFS is 1)
- Review 2024 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 2024 Goals

1. Improve/maintain paperwork timeliness at an average of 90% across all programs in the agency by increasing supervisor and employee skillsets.

Progress:

The timeliness workgroup established in 2023 continued its work throughout 2024. The *Timeliness Policy and Expectations Guidelines* document created at the end of 2023, was shared with supervisors and staff in January 2024 at all-staff meetings. Supervisors were encouraged to use the document to help staff work through barriers to timeliness to help keep staff and teams accountable and held to the same standard. It was also discussed that timeliness didn't just mean reports, but opening and closing paperwork, as well as billing. During subsequent workgroup meetings, ways in which staff were able to improve timeliness and barriers for those staff who weren't were discussed. Supervisors were encouraged to utilize the PDSA cycle to help staff improve their timeliness and to loop the Director of Q & E in if necessary.

In 2024, 30% of programs reached or exceeded the 90% paperwork timeliness standard. Unfortunately, this was a significant decrease from 2024. Notably, twenty-six percent of programs were above 80% which was a significant increase over 2023. The agency had an overall average of 85.82% for the entirety of 2024. There were a number of programs that either began or ended tracking over the course of the year which may have contributed slightly to the overall decrease in timeliness. This goal continues in 2025.

2. Increase consistent completion of satisfaction surveys to 50% by increasing awareness of internal agency policies by continuing to increase individual and supervisor accountability.

Progress:

Work within the CQI workgroup that was established in 2023 continued throughout 2024. Multiple interventions were adapted including adding AAPI and Protective Factors surveys to tracking to increase compliance for DHHS contracts, adding a survey question to the closing form, and other interventions that were then shared in team and all-staff meetings.

Monthly tracking sheets continued to be sent out to supervisors asking for a response to any missing surveys and the response rate to them has increased significantly. Communication regarding return rates was shared with staff regularly throughout 2024 during CQI committee meetings and all-staff meetings.

The continued focus on surveys has significantly improved return rates, and 2024 saw three quarters in which the return rate exceeded 50%. With continued outreach and follow-up, the CQI team anticipates reaching the return rate goal of 50% for all quarters in 2025.

3. 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.

Progress:

The Senior leadership and leadership teams have had multiple discussions regarding moving to a new strategic and annual planning process for 2025. The time dedicated to this review has been focused on the reorganization plan. As described in the short-term planning section below, the plan will be shared and feedback provided at the January meeting of the board and the two agency roundtables.

4. Continue to implement the PDSA cycle across the organization by providing learning opportunities at Leadership Retreats and All-Staff meetings.

Progress:

Implementation of the PDSA cycle increased in 2024 with utilization in multiple CQI workgroups as they continued to identify areas of improvement, the goals and steps to take to help achieve it, and the results of implementation. The template has also been used with supervisors and staff to assist with barriers to job performance and to outline expectations to achieve better outcomes. Overall, the process and format have been well received. The PDSA cycle will continue to be utilized for various situations as needed throughout the agency in 2025.

5. 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 LW units workgroups.

Progress:

In a concentrated effort to reach the goal, the two-unit workgroups formed in 2023 continued through 2024. These workgroups identified interventions including bringing the DHHS staff from both teams together to brainstorm what's working for each, setting expectations with clients from the start, building rapport with stakeholders, boosting hours by joining clients for community events, and creating urgency with clients to reschedule. DHHS had multiple programs that either reached the 3-unit benchmark or came close in various quarters of 2024. Tracking of IHFS started in the third quarter of 2024. The program has been above the benchmark of 1 since tracking began.

The Home Based units workgroup interventions included getting non-engaged clients off of staff caseloads and working with the local CMH to expedite the process, creating instructions for frequent dis and reengagement, utilizing the *Units Policy and Expectations Guidelines* document to hold staff

and clients accountable. HB units were above 5 for two quarters and achieved the 6-benchmark goal in the third quarter, achieving an average of 5.4 for 2024. This goal will continue into 2025.

6. 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.

Progress:

While the focus has remained on ensuring completion and return of outcomes, the CQI team has not been able to focus on reviewing outcome data in 2024. The goal will continue for 2025.

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.

Highfields will engage in a new strategic planning process in the fall of 2025. This new process will move us from the traditional 5-year strategic plan to a more current "Strategic Framework" allowing for the process to be more fluid and adaptable. This strategic framework will serve for the 2026-2028 time period and will be shared at each January meeting of the board of directors, and the two agency roundtables to provide opportunities for feedback.

CARL J. LATONA DISTINGUISHED SERVICE AWARD

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 2024:

Employees

- Agency Roundtable meetings occurred on May 8th and October 16th 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 training were provided. Training topics included wellness, safety, DEI, and self-care.
- Community Services Roundtable meetings for North (Lansing & Livingston offices) and South (Jackson & Hillsdale offices) Teams were held February 14th and August 14th at the Dart Family Foundation building at Highfields in Onondaga. Training at the meetings included a poverty simulation, budgeting education to help clients, DEI activities, DHHS assistance application training, skill sharing, resource sharing, intervention presentations, and motivational interviewing.
- Residential Services held monthly staff meetings as well as quarterly Staff Forums.
- Leadership retreats were held on January 9th, and June 12th at the Dart Family Foundation building at Highfields. These retreats were extended meetings that included team development, and training on multiple topics.

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."

- The annual Employee Recognition Dinner was held at the Hidden Gem in Holt on February 17th. 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. Notes from all meetings are maintained electronically in a Drop Box file. Board committees include Program, Fund Development, Personnel and Finance, Building and Sites, Executive and Endowment Committees.

- Highfields Annual Meeting of the Board of Directors was held on April 24th at the University Club. 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

- A donor survey was completed in 2024
- Donors and key stakeholders were mailed the Highfields Annual Report. It was also distributed to staff and made available on the Highfields website.
- The 44th Annual Golf Outing took place on June 3rd, and was attended well by over 150



donors, board members, staff, and other members of the many communities served by Highfields.

- Highfields' Annual Strengthening Families Breakfast took place on October 9, 2024, at Eagle Eye Banquet Center in Bath. 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 18th through December 14th of 2024. Toy drive boxes were placed at various Mid-Michigan Ford Dealerships to collect donations to benefit children and families in Highfields'

programs. Almost 2,000 toys were donated during the drive. The agency is grateful for the continued support during the holiday season from the multiple communities that Highfields serves.

Referral Agencies

- A multitude of site visits and audits of case files took place during the year, some audits remained virtual, but most 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. Some programs saw an increase over 2023 and overall, averaged just below 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.
- 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 of 2023, 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 of Michigan 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 between November 4th and 8th, 2024. The inspection found issue with documentation of critical incidents. The agency was compliant in all other areas.

In 2024, there were eight special investigation reports from licensing. Three of the instances required a CAP, all of which were accepted by licensing. The other special investigations 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 April 17, 2024. An addition needed to be added to the policy with the new policy being distributed to staff and proof of staff training on said updated policy.

Community Services

Highfields provided credentialing information to LifeWays in November 2024 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 2024, Highfields facilitated the program at Attwood, daVinci, East Jackson, Eaton Rapids, Greyhound, Hope Middle, Hunt, Leslie, Mt. Hope, Springport, Townsend, Waverly. Some programs closed at the end of the 23/24 school year, while others opened at the beginning of the 24/25 school year.

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 2024 calendar year.

Residential Services	
Western Wayne County/Growth Works	Findings: OTC meds must be double locked just as prescriptions, 'wash your hands' signs need to be posted at every sink. Staff
Reviewer: Bridgeway Services	

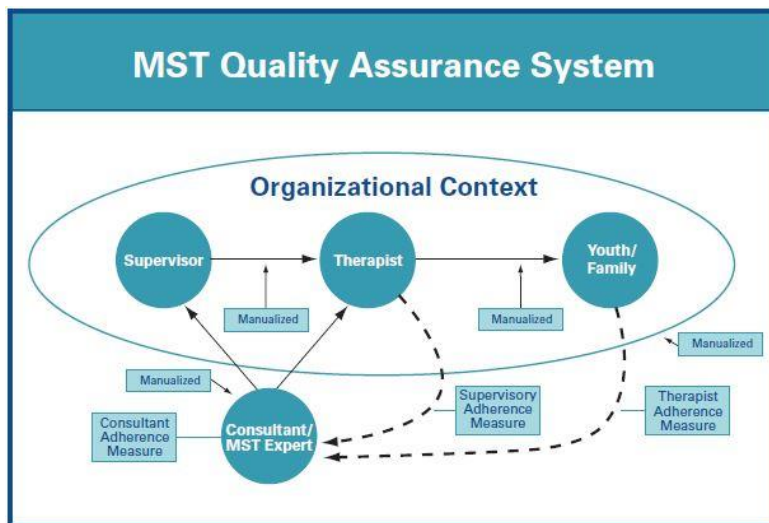
Date: July 18, 2024	files audited showed some were missing training that hadn't been offered since staff started. Reviewer stated that campus looks great, and the administrative review showed full compliance.
CAP Required: No	
Prison Rape Elimination Act (PREA) Compliance Check	Findings: A CAP was required based on lack of internal investigations of allegations and not all youth being aware of advocacy efforts, in addition to needing some additions or revisions to a couple of current policies and practices. The CAP was written and accepted.
Reviewer: PREA Juvenile Program	
Date: April 27, 2024	
CAP Required: Yes	
Renewal Inspection	Findings: 5 of 39 critical incidents were not documented withing the contracted 24-hour reporting period. A CAP was written and accepted.
Reviewer: MDHHS	
Date: November 4 – 8, 2024	
CAP Required: Yes	
Community Services	
South Team	
LifeWays Recipient Rights Review	Findings: Highfields is in compliance
Reviewer: LifeWays CMH	
Date: March 18, 2024	
CAP Required: No	
Family Preservation Program (FPP) Lenawee County	Findings: Highfields achieved a 100% rating.
Reviewer: Lenawee CMH	
Date: August 05, 2024	
CAP Required: No	
LifeWays MEV Audit	Findings: Highfields was in compliance.
Reviewer: LifeWays CMH	
Date: August 13, 2024	
CAP Required: No	
North Team	
Program name	No audits were conducted for the North team in 2024
Reviewer:	
Date:	
CAP Required:	
Educational Services	
21 st Century Community Learning Centers	Findings: There were several areas of documentation missing including evidence of family involvement in decision making.
Reviewer: MI Dept. of Education	
Date: May 14, 2024	
CAP Required: Yes	

Highfields also undergoes an annual financial audit, known as a single audit. This was completed in the summer of 2024. 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 for 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 21st Century Community Learning Centers program each academic year. In September 2024, 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:

" Highfields' Reaching Higher 21st Century Community Learning Center Afterschool Program completed its 17th year of operation during the 2023-2024 academic school year." ... "The program was implemented and facilitated across nine schools: Attwood, DaVinci, East Jackson, Greyhound, Hunt, Leslie, Mount Hope, Springport, and Townsend/Vandercook. Overall, the program aimed to provide a safe, supportive, and enriching environment during the afterschool hours for children and youth to engage in learning, personal growth, and development that fosters improved academics, life skills, positive youth development, and behavior."



The overwhelming majority of parents and caregivers reported that their child had shown significant personal growth since attending Reaching Higher. This growth included improved family relationships (74%), peer relationships (87%), life skills (83%), positive behavior (84%), and decision-making skills (84%). Most parents and caregivers also reported that their child received the academic support (91%) that they needed from the program. They have observed in their child improved academic performance in Math (82%) and ELA (82%), as well as increased interest and enjoyment in both subjects (Math=72%, ELA=79%). Furthermore, most parents and caregivers (82%) believed their child cared more about doing well in school since attending the program.

Chart 1. Student Enrollment: Yearend 2020 – Yearend 2024



“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 of 2023, community services supervisors began reviewing one file per staff person per quarter. In 2024, more supervisors were conducting those reviews on a more frequent and consistent basis.
- 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.

There was a decrease in the overall number of open case reviews completed in 2024. This was due in large part to the Q & E Coordinator being assigned multiple additional responsibilities in the second quarter for the remainder of the year. Multiple community services supervisors were able to conduct file reviews for their programs which did help increase the number of file reviews that otherwise would not have been completed.

In the Case File Review Workgroup, it was identified that surveys for DHHS programs were not being completed consistently. Interventions were implemented and an increase in completion rate was achieved. Tracking of completion began in Q2 with completion rates increasing in Q3 and Q4. 2024 finished with an agency completion average of 60%, which was an increase from 49.9% in 2023.

Reviews continued to reveal 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. Copies of the Case Record Review Quarterly Report are available upon request.

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 2023 calendar year, as data collection for 2024 will continue throughout the current year.

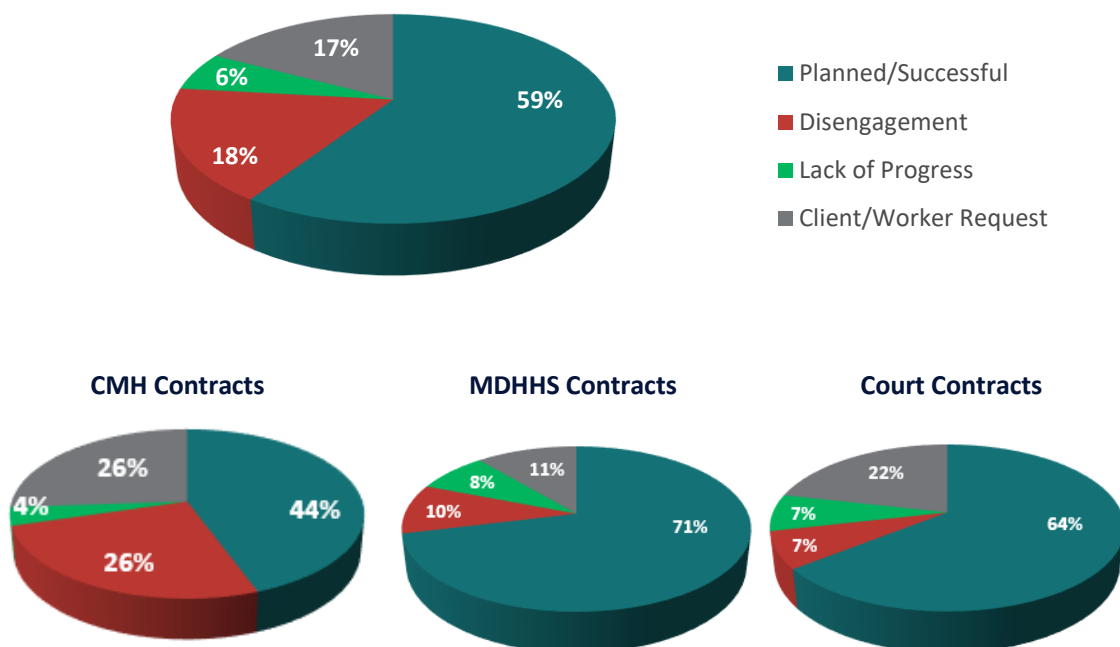
Community Services

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

All Community Services



The above charts demonstrate reasons for discharge in all Community Services programs. Fifty-nine percent of all Community Services cases were successful at the time of discharge. CMH and court contracts saw a decrease in successfully closed cases, with DHHS cases saw a small increase. Most contracts saw an increase of cases closed due to disengagement except for court cases. Staff recruitment and retention continues to remain a focus across the agency to increase 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.

CAFAS was phased out in the 3rd quarter of 2024 and replaced with a more comprehensive and longer MichiCANS assessment. Data for the MichiCANS assessments is not yet available.

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 cases discharged as planned/ successful, client disengaged, lack of progress, and at client/worker request, 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 2023				
Time Frame	3 mo.	6 mo.	12 mo.	Avg./Total
Client/Family experienced success	90%	91%	85%	89%
Client still resides at home	100%	88%	89%	92%
No reported legal or protective service involvement	100%	87%	90%	92%
Total Number of Respondents	20	93	102	215

Most cases that closed successfully and engaged in follow up contacts provided information that indicated they continued to experience success since Highfields services ended. At 3 and 6-months after discharge, at least 90% of respondents reported they experienced success.

It is important to note that the data reported here has changed from previous years. Since 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 2024, Residential Services discharged a total of fourteen cases, all 14 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.

Sixty-four percent of discharges from the Phoenix program were positive, with all 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 responses.

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

- 3-month outcomes are completed for Stabilization cases, of which there were none for 2024
- 92% had not been adjudicated or convicted within 6 months
- 100% had not been adjudicated or convicted 12 months post discharge

Staffing challenges continued to lead to a decreased sample size in 2024 due to the lack of students being served in the Residential program.

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 almost all programs. The following results represent all survey responses received during the 2024 calendar year:



"This program was everything we needed but didn't know we needed." - MST

"Thank you for helping our family learn the skills needed to be successful." -CM

"Grateful for the coping skills." – Residential student

"This is a wonderful program, and I don't think the family would have been as successful without the support of FRP."

Satisfaction Survey Results 2024		
COMMUNITY SERVICES	# Responses	Average Score
Clients (South Team)	63	4.86
Clients (North Team)	71	4.88
Referring Workers (South Team)	9	4.82
Referring Workers (North Team)	10	4.73
RESIDENTIAL SERVICES	# Responses	Average Score
Clients	8	4.58
Referring Workers	6	4.29

Response rates for customer satisfaction surveys increased significantly from 2023. The surveys workgroup continued to look at barriers to completion and implemented multiple strategies to increase returns. Interventions included adding a question to the closing form asking if a survey was completed. Supervisors were emailed tracking info monthly and asked to provide information on missing surveys, and data was shared with teams at all-staff meetings. The average score for each team and type of survey remained consistent and were very 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 2024:

DIVISION	QTR 1	QTR 2	QTR 3	QTR 4	2024 AVG/TOTAL
Residential	90.9%	93.3%	91.7%	86.7%	90.65%
North Team	77.2%	83.6%	82.6%	69.6%	78.25%
South Team	91.2%	88.9%	86%	80.9%	86.75%
Agency Total	88.2%	87.8%	85.4%	79.1%	85.13%

For the first time in four years, the Agency's overall total decreased. From 88.3% in 2023 to 85.13% in 2024. While the decrease was slight, Highfields goal of 90% goal continues to remain just out of reach.

Reaching the timeliness goal of 90% remains a focus for the CQI committee, the timeliness workgroup created in 2023, and the agency as a whole. Identified interventions from the workgroup and the use of the PDSA cycle with both supervisors and staff, will continue to support all programs to achieve the benchmark.

Summary

Although there continue to be many challenges, Highfields and its staff continue to persevere throughout, while the agency's presence ensures quality services that meet the needs of youth and families in our communities. The CQI team is incredibly proud of the efforts that staff and supervisors continue to put forth to not only meet the goals established, but for their commitment to providing quality services to the clients and families that they serve. The CQI team looks forward to a productive and improved 2025 through the goals and work of the team, supervisors, and staff.

Any questions, comments, or requests for additional information related to this report can be directed to the Director of Quality & Education at BGardner@highfields.org.