Performance & Quality Improvement Newsletter

LaSalle School Albany, NY

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Upcoming Topics:

- ♦ Case Record Reviews
- Student Survey Results
- ♦ Strategic Plan
- ♦ Program Outcomes

Performance and Quality Improvement (PQI) activities assist with achieving program and service area outcomes, and contribute to efforts to improve organizational climate and culture and staff and client satisfaction. PQI encourages the use of data and staff and stakeholder involvement to identify, establish and implement improvement practices that contribute to desired outcomes. This occasional newsletter will be one avenue to encourage staff involvement in PQI.

Staff Satisfaction Survey

June 2018

Thank you to staff for completion of the Staff surveys. 87 staff completed the surveys. The results are listed below, with comparisons results from recent years. These results will be used by leadership to improve crucial aspects of organizational structure, support and culture. Staff

included a few narrative responses which are included below.

Strengths:

Staff: Understand their job roles; have training opportunities available; feel supported by their supervisor; have good working relationships with colleagues; feel safe at work (a new question).

Opportunities for improvement: Staff: receive praise and feedback on their progress; feel their opinion counts and that they are well informed about decisions.

The following is a sample of narrative responses:

absenteeism and lack of support took its toll on staff who picked up the slack related to "call-ins;" technological issues are a barrier; we have to work harder and smarter to meet the needs of the students; improve communication between departments, and between administration and education staff; supervisors need better support so they can better support staff; beneficial if LSS

Questions	2018	2017	2014
I know what is expected of me at work	90%	93%	98%
I have the materials and equipment I need in order to do my job	75%	84%	92%
Training opportunities are available to me	89%	93%	91%
I have the opportunity to use my talents and skills	93%	88%	89%
In the last 7 days, I have received praise or recognition for doing good work	57%	70%	76%
I know who to talk to when I have a concern	87%	91%	New
I feel supported by my supervisor	90%	93%	90%
My professional development is encouraged	83%	88%	88%
My opinion seems to count	63%	78%	72%
I am aware of procedures to address safety issues in the work environment	83%	88%	90%
I feel safe at work	85%	90%	New
My co-workers are committed to doing quality work	79%	82%	85%
I have good working relationships with my colleagues	95%	96%	94%
In the last 6 months, someone has talked to me about my progress	59%	70%	66%
The agency mission makes me feel my job is important	89%	83%	88%
I feel the agency is trauma informed	91%	88%	New
I feel the agency has implemented the 12 virtues well	77%	69%	New
I feel the agency has implemented PBIS well	65%	74%	New
I feel well-informed about important decisions	58%	66%	New

could enter PD hours into the NYSE system to assist with certification maintenance; many comments like "I LOVE my job and our mission"; there are issues with staff behavior, not modeling appropriate behavior; student discharge dates need to be communicated better; there needs to be better staff training about PBIS, the 12 Virtues, trauma informed care and TCI; we should address workplace issues through root cause analysis and better anticipation of problems rather than a reactive approach; students should be more involved with food choices, and possibly building up a garden on property; Safety-Safety-Safety, there are too many safety concerns for staff; there are many safety concerns with an open campus and increase effort around safety planning and drills is paramount; morale is affected by others who make little to no effort; some feel their voices go unheard; too many differences among supervisors and their expectation for supervisees; roles and tasks for clinic staff should be clearer.

In addition to what was learned through the survey about these important approaches to our work, we continue to work with various consultants and regional resources to help measure our progress in these areas and to strengthen our approaches.

LaSalle's Alphabet Soup

A guide to the acronyms used on campus-School Testing Edition

ACRC-Association of Children's Residential
Centers: An international membership
organization that has as its mission
"Providing a powerful voice for
residential interventions through
relationships, leadership, advocacy, and
the promotion of innovative treatment
and best practices.

Alliance- Alliance for Strong Families and
Communities: A national membership
organization that works with thousands of
committed social sector leaders to help
their organizations more positively
impact their communities. Members of
the Alliance share a common vision of
creating a healthy and equitable society
so children, adults, and families may
achieve their full potential.

COA-Council on Accreditation: is an international, independent, nonprofit, human service accrediting organization specializing in programs that provide child and family services. LaSalle is currently accredited by COA through 2019.

COFCCA-The Council of Family and Child Caring Agencies: the principal representative for nearly all the not-forprofit organizations providing foster care, adoption, family preservation, juvenile justice and special education services in New York State, COFCCA is comprised of over 100 member organizations, ranging in size from small community based programs to the nation's largest multi-services agencies - all of which share the mission of serving children and families. COFCCA works with its members and government to ensure quality services for our most vulnerable children — children who have suffered abuse and abandonment and children at-risk.



This quarter's focus is on groups to which LaSalle School belongs.

PBIS Updates

The PBIS Committee organized the 2018 Field Day. The event reinforces PBIS expectations while allowing students to celebrate the end of the school year.

THE PBIS Committee completed the annual Benchmarks of Quality assessment to determine how PBIS is being implemented and used at LaSalle School. While there is still much to be done to reboot the PBIS system, gains have been made in the composition and support of the PBIS team and faculty commitment to PBIS. Much of the work of this year has focused on updating the matrix and revamping our systems of positive reinforcement of behaviors, so we expect to see many improvement to our PBIS through the next school year.

If you would like to be part of the PBIS committee, contact Marilyn Saunders.



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JRFC Outcomes

The Juvenile Reporting and Family Center continues to demonstrate positive outcomes for youth in its care. When the agencies (we are the lead agency with an administrative role with St Anne's and St Catherine's) were awarded the contract for this program, we also proposed it as an Alternative to Detention option for youth prior to adjudication in the system. The youth admitted to this program are presented to the right as

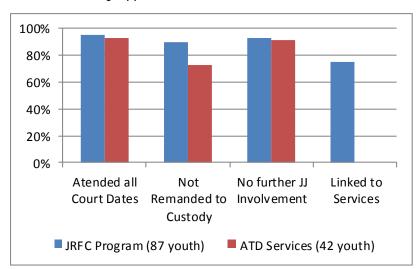
ATD, and while the outcomes of the youth in the ATD program are somewhat lower than those in the JRFC, these are not unexpected outcomes given the complex profile of the youth.

The program exceeded on one of proposed benchmarks in the four expected areas, and fell short on three. The program served 100 youth from Albany County, representing 11 different zip codes

The goal related to remand to detention reached the 90% benchmark outlined in the contract, reaching 90% for JRFC youth. It did not meet the goal for the ATD program, reaching 79%, which was an improvement since last year. The linkages goal also

fell short of the 90% benchmark, reaching 75%. Finally, the youth in the JRFC for ATD services did not reach the 80% benchmark for avoiding further involvement in the Juvenile Justice System.

The JRFC is an asset for the City of Albany and continues to be a strong support for our continuum of care at LaSalle School.



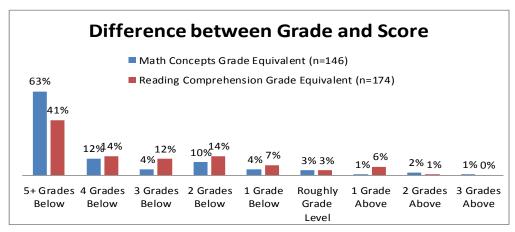
SOAR Corner-Changes in Achievement Scores

When students arrive at LaSalle School, whether as a resident or as a day student, they are given a battery of educational tests to determine their levels of academic achievement. We have been using the Kaufman Test of Educational Achievement (KTEA) for this assessment for a number of years. This is an individually administered battery that provides in-depth assessment of key academic skills. Special education teachers, school psychologists, educational diagnosticians, and other professionals use this tool to help:

- Evaluate academic skills in reading, math, written language, and oral language
- Measure progress or response to intervention and adjust instruction based on performance
- Identify learning disabilities on a core level

As is demonstrated by the graph, a number of our students arrive with skills that fall significantly below their current grade level. This may be due to a number of factors, including learning disabilities and other issues that result in CSE classification, undiagnosed/

undertreated mental health issues that interfere with class performance, and/ or extensive absenteeism/truancy. A portion of our students remain on campus long enough to have a second assessment of their skills. Of the 47 students with two scores, 32% increased math and 43% increased reading by at least one grade level. Some students made significant gains (2.5 grade increase) in math (14%) and reading (25%) over the course of a year at LaSalle School.



LaSalle School

391 Western Ave. Albany, NY 12203

Phone: 518-242-4731 Fax: 518-242-4747



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Residential Case Record Review

We are in the process of compiling an extensive case record review of the residential records. This includes examining completion rates and times for necessary documents. From January to June of 2018, 77% of the progress conference reports were completed and on time. The ACE completion rate is lower, with 65% completed. On-time FASP completion is still problematic, with only 30% of FASPs completed by the due date, and slightly under 50% completed within two weeks of the due date. Individual Crisis Management Plan Reassessment completion also lags behind, with fewer than 50% of these completed on time.

We are also in the process of compiling Utilization Review (SMUR) findings, which reflect aggregate information about the progression of youth and families toward permanency and successfully completion of placement will be presented. Utilization review The SMUR method of reporting indicators of positive outcomes involves reporting data by reviewing the progress of cases in each program. The information gained from this data assists with program evaluation and monitoring performance. This data is reviewed by the clinical and supervisory staff, and monitored by quality assurance and other management activities.

COA REACCREDITATION

We are in the process of preparing the self-study for national reaccreditation process. As many of you know, LaSalle has been accredited by the Council on Accreditation for several decades, and we were among the first child welfare programs in the Country that achieved this national accreditation. The reaccreditation process will involve a comprehensive review of our programs and of our administrative, management, supervisory, training, human resources and service delivery functions against international standards of best practice.

Accreditation promotes services that are appropriate, coordinated, culturally competent, evidence-based, and that are provided by a skilled and supported workforce. COA accreditation "stands on the shoulders" of our various State licenses and certifications and demonstrates our commitment to the highest level of standards, licensure and continuous improvement. Accreditation further demonstrates our commitment to accountability, credibility, integrity, compliance, best practices and achievement of desired outcomes, and helps position us with our various stakeholders because we:

 Ensure that staff is appropriately trained and prepared to meet client needs

- Require that services are provided in a safe and respectful environment
- Support positive outcomes
- Ensure ethics in practice, including related policies such as Client Bill of Rights, Code of Ethics/Conduct, Mandated Reporter and Whistleblower policies
- Are in good standing with our various State oversight agencies
- Promote quality improvement and strategic planning
- Emphasize budget and other fiduciary responsibility
- Ensure safe behavioral management practices
- Focus on risk management
- Promote a culture of excellence
- Ensure effective service environments
- Promote culturally competent services
- Define professional staff qualifications
- Create a performance and quality improvementoriented culture that is outcome driven
- Emphasize supervision
- Focus on best and evidence-based practice
- Ensure an equitable work environment that is supportive of organizational productivity, diversity, and stability

If you have questions about COA accreditation, please see Mark Silverbush

Incident Data

As noted in our last PQI Newsletter, we have seen an increase in our safety hold rate (a slight increase in the total number of safety holds during the past 18 months while serving fewer residents during that same time period = an increased rate). This is not entirely surprising as we have moved to a "hard-to-place" population, but it is not a trend that we are comfortable to accept without serious efforts to impact it. During the past 18 months about 50 separate youth were involved in at least one safety hold, with five of those youth being involved in a significant number of safety holds. One way to think of our number of safety holds numbers is that we have about two safety holds on campus per week. A majority of safety holds occur with younger youth between the hours of 3:30 - 7:30 pm, but there are other trends which are important to consider, and as we examine promising strategies to reduce safety hold numbers we plan to share more of that information.

Points of Interest:

- 1. The trend (rate) has increased
- 2. Our last restraint-free month was back in August 2005.
- 3. Since 2005, we have had a few months where the monthly number has been as low as one or two
- 4. We may consider setting a weekly, monthly, quarterly or annual goal rather than an "improve trend" goal
- 5. A possible goal might be set as a percentage reduction, like a reduction by 25% annually, or weekly or monthly goal number, such as one safety hold per week, or five per month.
- 6. Work is underway to strengthen services, follow-up, and safety hold review.
- 7. We have extremely few Day Student SHs
- 8. McCloskey youth are highly represented.
- 9. Slightly more SHs occur during residential hours than in school
- 10. Immediate follow up will include more detailed information about the antecedents to safety holds and "root cause analysis" of safety behaviors
- 11. Additional information from LSI and debriefing will be important, and will be reviewed carefully to help with planning to prevent subsequent safety holds

Like all residential treatment centers in our sector, LaSalle has a long standing commitment to continuous quality improvement not only in such areas as client outcomes improvement but also related to the reduction of high risk incidents. We recognize that safety holds and the behaviors that lead to safety holds present considerable risk - risk to safety, risk of trauma (for staff and youth), risk for injury, risk to reputation. As the list above suggests, we are presently looking at several practices to help us realize a significant reduction in safety holds. We have had a commitment to behavior and safety management for many years, and we are looking to redouble our efforts at implementing prevention-based alternatives to safety holds and other high risk behaviors.

This commitment is essential to be increasingly trauma-informed and is a key component of our efforts to promote safe, healing environments and to prevent trauma and re-traumatization. Our increased efforts will entail many components throughout LaSalle not limited to TCI, prevention, training, supervision, de-escalation, debriefing procedures and Safety Hold, Incident Review and Risk Management Committee work, and more. Among the work to be done, QA anticipates working closely with service departments to provide additional information to departments and committees to assist with alternative approaches. The excellent work of the Safety Hold Committee, which reviews all safety holds, assesses factors related to holds, identifies patterns such as types of holds used, injuries, time of day, day of week, staffing ratio, precipitating event, alternative interventions used, whether child has previously been in a safety hold, staff experience (in years), duration of restraint and other categories, and makes recommendation, will be essential in this effort.

There is considerable support for the idea that reductions in safety holds are typically achieved when simply elevating the oversight of the use safety holds. There is additional evidence that sustained quality improvement effort is needed to support this overall effort, and to sustain reduced rates over time. We anticipate this type of commitment from QA as well as agency leadership, and we also recognize that this work will require broad staff involvement. As agency leadership seeks early buy-in to safety hold prevention & reduction, we will look to tandem this with trauma informed care principles a logical framework to adopt.