



HIBISCUS CHILDREN'S CENTER

Performance and Quality Improvement

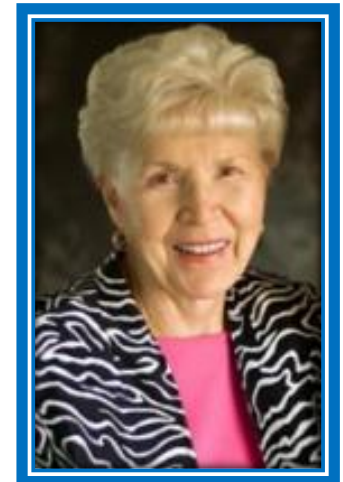
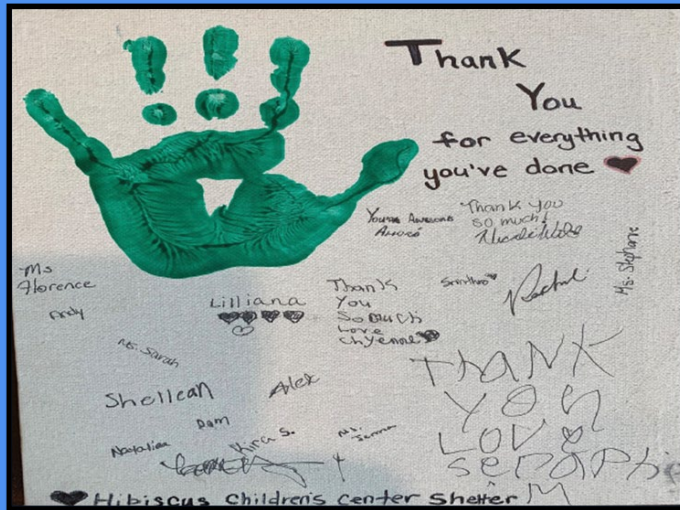
Quarterly Report | October - December 2020

Lilly LaVaughn Tilton

February 12, 1925 - January 8, 2021

The Hibiscus family mourns the passing of our beloved Founder, LaVaughn Tilton, 95, who went on to heaven on Friday, January 8th.

We are committed to continuing the mission she started so long ago, and her legacy will live on through all the children's lives Hibiscus saves.



Section One

Introduction

Welcome to our PQI Quarterly Report! This report is for all stakeholders, including clients, staff, community members, board members, funders and any individual who is interested in the great work that we do. PQI - Performance and Quality Improvement - is an integral part of our organization. We are always open and willing for new opportunities to change and grow. We hope this report demonstrates our commitment to the clients we serve, our transparency for when things don't go as well as planned, and desire to receive feedback from others. If you have ideas on how this document can be improved, please let us know.

An important feature of this report is that we want to provide information to our stakeholders, both accomplishments and opportunities for improvement regarding our services from October through December 31st, 2020. As an organization, we seek to learn from our experiences and grow. As you read through this report, when you see progress that is not up to our expectations, there will always be a plan for how to address the challenge. You will notice that we use a simple icon system for our targets: a red arrow on the target but not hitting the bullseye means that we are greater the 10% away from our target; a yellow target closer to the bullseye means that we are within 10% of our target and a green arrow hitting the bullseye means we are at target or above. This system can give you a quick look at how we are doing.

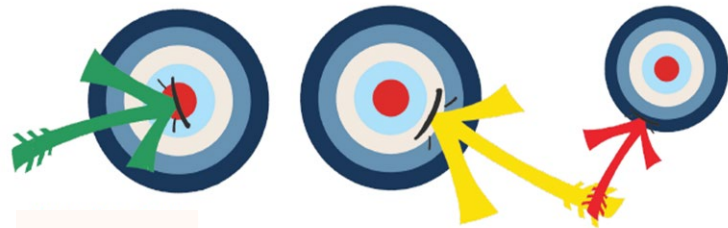


Section Two – Targets

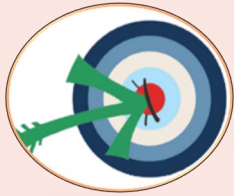
This section looks at our Risk Prevention and Operation/Management Reports. In the vital area of risk management, concerns are reviewed and addressed, as they occur, by Leadership.

The PQI Team meets monthly and quarterly to review data, trends and patterns for the following risk management reports and makes further recommendations, as needed.

Later in the PQI Report, measurements of how clients improved will be discussed and reviewed.



Management and Operational Risk Management Targets



Endowment

There is a 5% or less draw annually on the 3-year average balance of the endowment, reported quarterly.



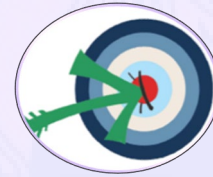
Staff Supervision and Improvement Plans

Supervision is held at least 1x per month between supervisee and supervisor. Also, staff improvements plan are developed within 10 days of discovery of performance issue.



Workplace Accidents

There are two or fewer workplace accidents of the same type reported within a calendar year.

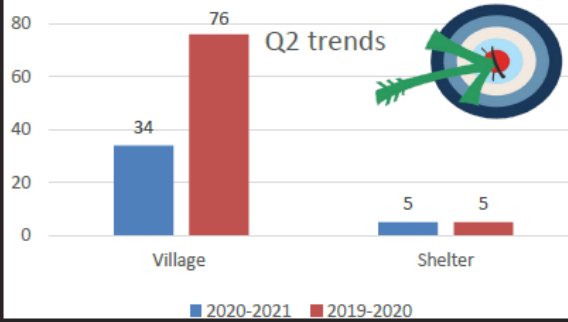


Safety and Security

100% of all grounds and buildings safety and security risks that pose an immediate danger to residents, guests and/or staff are secured immediately upon discovery to minimize exposure.

Significant Incidents

Our aim is to reduce the number of significant incidents by 20% on a yearly basis, reported quarterly.



Abuse and neglect

100% of our children served at Hibiscus residential programs were not victims of abuse and neglect while in our care.



Medication Administration / Audit

100% of medication prescribed by a physician was administered properly (person, dosage, time, and route).



Academics

90% of clients attending school had two or fewer behavior referrals each school quarter.

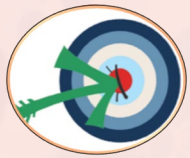


Peer File reviews

95% of all files had no deficiencies (active or discharged). 100% of active files are reviewed at least quarterly. 100% of discharged files have a final review within 30 days of client being discharged.

General Targets

Our revised PQI plan includes targets related to fundraising and volunteers. Due to COVID-19, all HCC fundraising events have cancelled but alternative fundraising strategies are in place.



Board Giving

100% of the HCC Board of Directors financially support HCC as well as 100% of the HCC Leadership team.



Major Donors

Number of major donors increases each year by 5%, reported quarterly.



New Donors

Number of new donors increases each year by 5%, reported quarterly.



New volunteers

Number of new volunteers increases each year by 5%, reported quarterly .



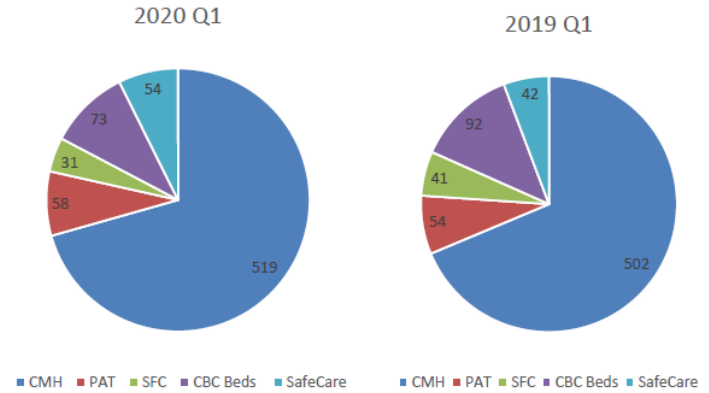
Overall Giving

Overall giving increases each year by 5%, reported quarterly.

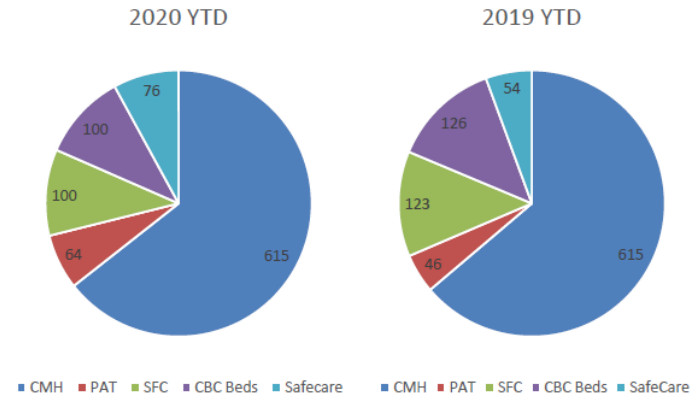
Clients Served

Presentation Title

Quarter on Quarter (QOQ) Clients served by Program



Year Over Year (YOY) Clients served by Program



Turnover Rate ⓘ

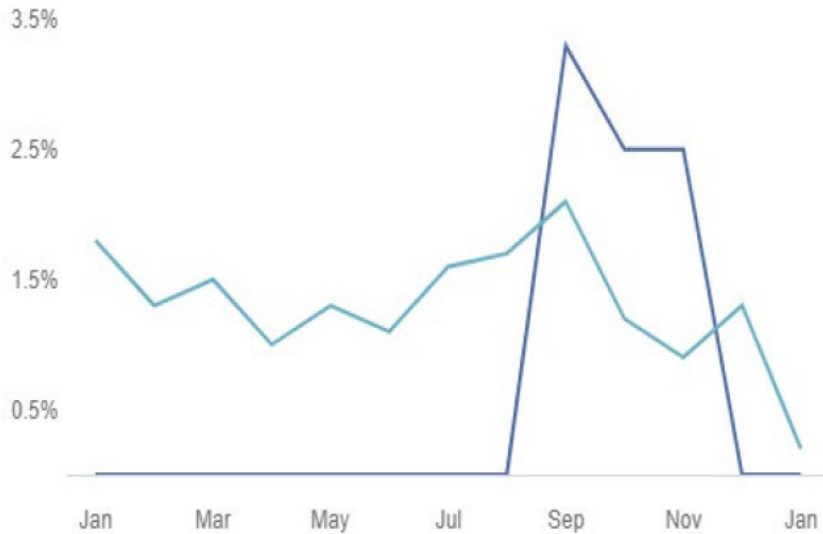
Jan 1, 2020 - Jan 12, 2021

● My Company

● Similar Companies

8.3%

17.0%



Current Turnover Trends

Client satisfaction is very important to us achieving our mission. Our goal is to increase client participation each year by 10% until 100% participation is achieved and maintained. For the current quarter, we achieved 30% participation rate and a 95% satisfaction rate. Here are some of the positive comments we received:

- I have received information on helping take care of my family especially my children*
- I started back working and i went to rehab*
- I was able to open more and able to express myself better.*
- I got clothes for my kids and help with food and a Walmart card to help my family. Thank you*
- it changed my life so much and changed who I use to be.*
- Everything the but if i had to pick it would have to be the experience I am gaining and the way she's helping me prep for life*
- My advocate helped me find a home for my family. Also, the program paid my first months rent, and I received furniture and beds. Myself and my children are so grateful for all the help we have received. We were living out of my car prior to this program and advocate helping us. Thank you and God Bless Hibiscus.*
- When my son was sick, I needed to get him a Vick's warm humidifier to help him breathe(per doctor and hospital request) I was completely unable to purchase one myself. I mentioned it to Mrs. Maggie and that same day she brought one out to me and my son. The relief I felt from being about to help my son breathe was amazing. My son would still be sick if it wasn't for these wonderfully amazing people helping us.*

Section Three

Service Delivery Outcomes

Section Three

Client Satisfaction (Continued)



• Some of the most valuable information we get is in the form of comments through the narrative sections of the surveys and through comment cards. Below is a sampling of what the clients are saying on how we can improve our services (any potentially identifying information is removed):

- *Maybe a monthly rental plan*
- *Maybe offer more services*
- *More rooms and spacings.*
- *Having better pizza on Saturdays*
- *Do not threaten to take away things we worked hard to try to get us to listen it does more harm than good. An example would be jobs that we earned on our own.*



Section Four - Improvement Plans

Over the past quarter, new improvement plans have been implemented and current plans have been completed and closed. Here is a brief synopsis of some of the work that we have been doing to improve the overall quality of services .

1. Last quarter, it was decided that our Sanctuary training should be held during new employee orientation as a precedent to the Therapeutic Crisis training. This would allow all new hires to understand trauma-informed care and responsiveness. This was completed and closed.
2. The second improvement plan established last quarter was to re-implement fidelity checks to ensure the Sanctuary Model is being practiced consistently across the agency and the tools (i.e. supervision, community meetings, CARE plans, team meetings, red flag meetings, and self care plans) are embedded in all the departments policies/procedures. This is ongoing and will continue this quarter.
3. The 3rd improvement plan developed last quarter relates to crisis management and de-escalation training at the Vero Beach Village to deter significant incidents (i.e. runaways and Baker Acts. Our Sanctuary trainer will begin facilitating refreshers for staff starting in February.

Section Five - Recognition

Hibiscus recognizes Sheryl Overcash, Assistant Director of Operations, for 15 years of service dedicated to the children and staff at the Village Group Home. Sheryl represents strong leadership within the program; she has high expectations of our children and staff while displaying an immense sense of compassion. Sheryl is deeply dedicated to the mission and values of Hibiscus Children's Center. She is a champion for our children which shows in her daily work. We are very grateful to have Sheryl as part of the Hibiscus family for the last 15 years and many more to come.

Section Six – Client Outcomes

Community Mental Health Program and Residential Clinical Services

Goal: To improve client’s mental health by decreasing trauma by 10% as measured by an increase in daily functioning, protective factors, resiliency, social, emotional functioning obtained through the SEARS and trauma assessments.











✓ **79%** of the outpatient clients discharged demonstrated improvement in their social-emotional resilience, positive strengths, and adaptability in daily life as well as a decrease in trauma symptoms.

✓ **88%** of the residential clients discharged demonstrated improvement in their social-emotional resilience, positive strengths, and adaptability in daily life



Okeechobee - Martin Parents as Teachers

2020 Performance Measurement Report

BENCHMARK AREA 1: Maternal and Newborn Health								
Performance Measure	Complete Data	Okeechobee Martin Outcomes			Change from 2019	All MIECHV Sites 2020		Compared to MIECHV Average
		2018	2019	2020		Average	Range	
1 Preterm Birth Among mothers who enrolled prenatally before 37 weeks, percent of infants who are born preterm.	100% (12/12)	30% (3/10)	13.3% (2/15)	0% (0/12)		12.4%	0-27%	
2 Breastfeeding Among mothers who enrolled prenatally, percent of infants who were breastfed any amount at 6 months of age.	100% (9/9)	100% (2/2)	36% (4/11)	33% (3/9)		43%	0-63%	
3 Depression Screening Percent of primary caregivers screened for depression with the Edinburgh (EPDS) by 3 months postpartum or post-enrollment.	NA	93% (25/27)	95% (20/21)	100% (10/10)		95%	84-100%	
4 Well-Child Visit Percent of children who received the last recommended well-child visit, based on the AAP schedule.	NA	95% (37/39)	98% (53/54)	95% (54/57)		77%	36-95%	
5 Postpartum Care Percent of mothers enrolled prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks of delivery.	100% (6/6)	82% (9/11)	71% (10/14)	83% (5/6)		75%	33-88%	
6 Tobacco Cessation Referrals Percent of primary caregivers who reported using tobacco at enrollment and were referred to tobacco cessation services within 3 months of enrollment.	100% (6/6)	NA	100% (1/1)	NA	NA	91%	40-100%	NA

Nothing you do
for children is
ever wasted.
—Garrison Keillor

BENCHMARK AREA 2: Child Injuries; Child Abuse, Neglect or Maltreatment; and Reduction of Emergency Department Visits

Performance Measure	Complete Data	Okeechobee Martin Outcomes			Change from 2019	All MIECHV Sites 2020		Compared to MIECHV Average
		2018	2019	2020		Average	Range	
7 Safe Sleep Percent of infants that are always placed to sleep on their backs, without bed-sharing or soft bedding.	95% (18/19)	76% (31/41)	56% (24/43)	56% (10/18)	↔	78%	56-93%	■
8 Child Injury Rate of injury-related visits to the Emergency Department per 1,000 children enrolled.	100% (57/57)	24 (1/41)	0 (0/56)	70 (4/57)	↑	26	0-70	■
9 Child Maltreatment Percent of children with at least one investigated report of maltreatment.	72% (41/57)	4.2% (1/24)	5.9% (2/34)	0% (0/41)	↓	3.7%	0-11%	+

BENCHMARK AREA 3: School Readiness and Achievement

Performance Measure	Complete Data	Okeechobee Martin Outcomes			Change from 2019	All MIECHV Sites 2020		Compared to MIECHV Average
		2018	2019	2020		Average	Range	
10 Parent-Child Interaction Percent of children who receive an observation of caregiver-child interaction using a validated tool.	NA	100% (19/19)	100% (40/40)	96% (51/53)	↓	74%	33-98%	+
11 Early Language and Literacy Activities Percent of children whose caregiver reported that during a typical week, a family member read, told stories, and/or sang songs to the child daily, every day.	100% (57/57)	95% (40/42)	96% (55/57)	98% (56/57)	↑	83%	50-98%	+
12 Developmental Screening Percent of children with a timely screen for developmental delay using a validated parent-completed tool (ASQ-3).	NA	83% (10/12)	98% (40/41)	98% (46/47)	↔	88%	53-100%	+
13 Behavioral Concerns Percent of postnatal home visits where primary caregivers were asked if they have any concerns regarding their child's development, behavior, or learning.	NA	100% (377/377)	99% (615/616)	100% (922/922)	↑	99%	95-100%	+



Parents as Teachers

(Continued)

2020 Performance Measurement Report

BENCHMARK AREA 4: Domestic Violence								
Performance Measure	Complete Data	Okeechobee Martin Outcomes			Change from 2019	All MIECHV Sites 2020		Compared to MIECHV Average
		2018	2019	2020		Average	Range	
14 Intimate Partner Violence (IPV) Screening Percent of primary caregivers screened for intimate partner violence with a validated tool within 6 months of enrollment.	NA	95% (20/21)	100% (19/19)	100% (9/9)	↔	92%	76-100%	+

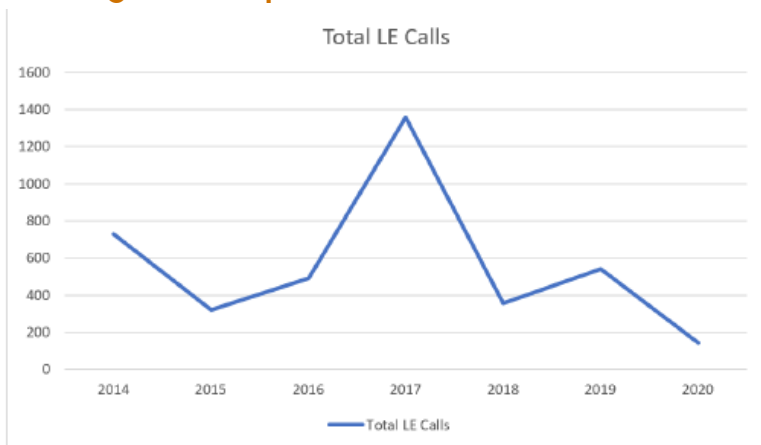
BENCHMARK AREA 5: Family Economic Self-Sufficiency								
Performance Measure	Complete Data	Okeechobee Martin Outcomes			Change from 2019	All MIECHV Sites 2020		Compared to MIECHV Average
		2018	2019	2020		Average	Range	
15 Primary Caregiver Education Percent of primary caregivers without a high school degree or equivalent at enrollment who subsequently enrolled in, maintained continuous enrollment in, or completed high school or equivalent.	100% (58/58)	8% (2/24)	0% (0/33)	6% (2/35)	↑	25%	0-54%	-

BENCHMARK AREA 6: Coordination and Referrals for Other Community Resources and Supports								
Performance Measure	Complete Data	Okeechobee Martin Outcomes			Change from 2019	All MIECHV Sites 2020		Compared to MIECHV Average
		2018	2019	2020		Average	Range	
17 Completed Depression Referrals Percent of primary caregivers referred to services for a positive depression screen who receive recommended services.	100% (10/10)	0% (0/3)	100% (1/1)	100% (1/1)	↔	46%	14-100%	+
18 Completed Developmental Referrals Percent of children with positive screens for developmental delays who receive services in a timely manner.	98% (46/47)	NA	100% (1/1)	0% (0/1)	↓	66%	0-100%	-
19 Intimate Partner Violence Referrals Percent of primary caregivers with positive screens for IPV who receive referral information to IPV resources.	100% (9/9)	NA	NA	NA	NA	91%	67-100%	NA

Section – Seven

Miscellaneous Information

Village Group Home Trends



Above you will find the trend of Law enforcement calls for the village over the past 6 years. The calls include attempt to locate, runaway/missing, suspicious person on campus, disturbance, arrests, follow ups, 911 hang up, area check, theft, baker acts, medical incident, abuse hotline follow up, found person, order to take into custody, larceny, and other arrests.

2014 – 729 calls

2015 – 319 calls

2016 – 490 calls

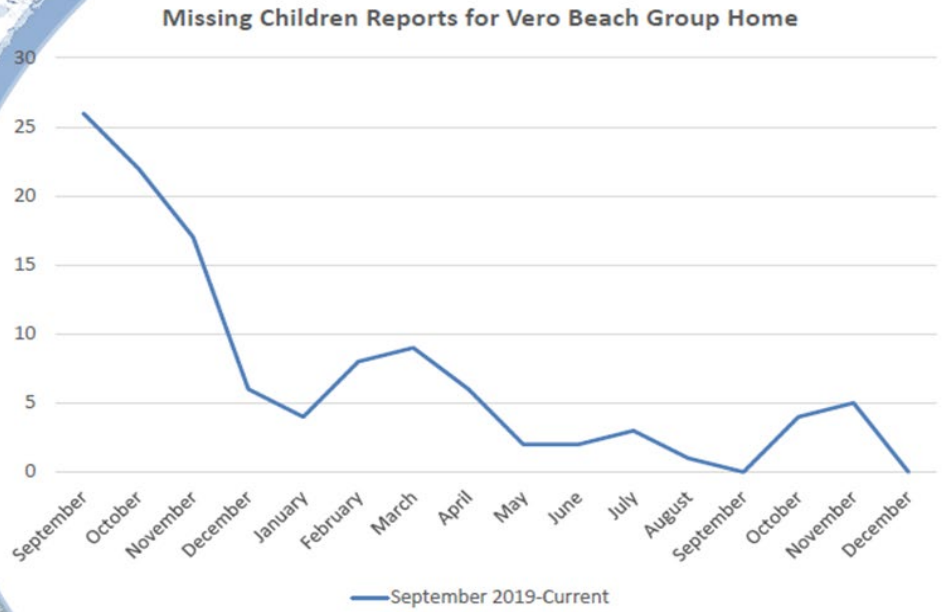
2017 – 1358 calls

2018 – 354 calls

2019 – 539 calls

2020 to 09/20– 141 calls





KIDS
are our future



Section - Eight Future Plans

We hope you found the information contained in this report helpful. For our next report, we would like to be able to report on the following items:

- Information on the FFPSA implementation as it impacts Hibiscus.
- Upcoming DCF re-licensing visit and Contract.
- Monitoring with CCKIDS.
- Re-credentialing status for our Safe Care Program.
- Update on the Shelter parking lot.

Contact us!

If you have any feedback about this report, please contact Caroline Vinyard via email or phone:

- cvinyard@hcc4kids.org
- (7720 340-5750 ext. 441)



Glossary of Terms

Peer Review – Evaluation of professional work by others working in the same field.

SEARS - Social emotional assets resilience scales which assesses positive social-emotional attributes of children and adolescents.

Care plan - The care plan is a small card that has 4 to 5 blank lines on it where a child or staff can write any suggestions for ways to keep them safe. These cards can be confidential, but all are encouraged to share their safety plans with others who can help them.

The following are examples that children and staff have found beneficial: Take a deep breath. Use positive self-talk. Take a walk. Think about being in a safe place. Talk to a friend. Listen to music. Leave the room. Write or draw.

Red flag meeting - Red light review meetings are called to discuss residents in crisis. They are appropriate for AWOLS, physical holds, increased aggression, injury, child/staff/family complaint, anything the community needs to respond to as a group.

Anyone can call a red light review and must choose a time and communicate it to those who should be in attendance. Those who should be invited to a red light review include: Families (when appropriate), client (when appropriate) administrators, social workers, nursing staff, psychiatrists, ancillary service providers, and teachers.

The more hands helping to solve a problem, the more likely it is to be handled well.



Hibiscus Children's Center
Saving Children Since 1985