



KERN BRIDGES YOUTH HOME

Performance and Quality Improvement Quarterly Report

April 2019 to June 2019

Final Version

5 Year Plan Goals Progress 2014/2019

a. BoD members and senior staff to recruit members in the following professions: Medical employee of CHW, Law Enforcement, College Professor of Cal State Bakersfield, Insurance industry executive, and Oil Industry Executive, Bakersfield City Government employee and Kern High School District employee. Four new members joined the BoD this quarter. *The above positions still to be filled are College Professor of Cal State Bakersfield, and an Oil Field Executive.*

b. *BoD members to more actively fund raise and market the agency. Progress continues.*

c. *Fully implement COA standards and gain COA Accreditation. Initially Accredited 9/30/2014. Reaccredited in July 2018.*

d. *Build monetary fund reserves to \$300,000.00. Current value of CDs is \$66,374.10 There is an additional \$14,003.67 in the Casa de Niño's building fund.*

Short Term Plans Progress in Implementing 5 Year Plan Goals

1) BoD members and senior staff to recruit members in the following professions: Medical employee of CHW, Law Enforcement, College Professor of Cal State Bakersfield, Insurance industry executive, and Oil Industry Executive, Bakersfield City Government employee and Kern High School District employee. Four new members joined the BoD this quarter. *The above positions still to be filled are Professor of Cal State Bakersfield, and an oil industry executive.*

a) BoD will engage community members of the differing careers listed above as opportunity allows. At each BoD meeting utilization of this task will be discussed. During annual open house members from the above professions will be encouraged to consider joining our Board. After the open house each senior staff and BoD member will be asked if they made any progress towards encouraging a member of the above professions to consider joining our BoD. *Open house completed. BoD recruitment continues.*

b) A BoD recruiting post will be put on our web site and Facebook pages. *Done.*

2) BoD members to more actively fund raise and market the agency. *Progress made.*

a) BoD members will solicit Wishmas Tree donations during the Christmas Holiday

season. *This was accomplished in each year. Christmas donations via the Wishmas tress totaled over \$16,000.00 in 2018.*

c) BoD members will be asked for commitments at the October BoD meeting. This was accomplished. *BoD attendance 70% in April, 80% in May, 60% in June. The By-Laws state four members constitute a quorum.*

d) BoD members will spearhead at least one fundraiser in addition to those listed above. *This has been accomplished. 100% participation in the "Give Big Kern Day"*

3) *Fully implement COA standards and gain COA Accreditation. This was complete on September 30, 2014 and we were reaccredited in July, 2018. The annual data submissions are sent to COA every year. With the new law AB 403 COA will require KBYH to be accredited as a Short Term Residential Therapeutic Program and as a Mental Health Provider. KBYH has been licensed as STRTP and had SMH program approved but not certified yet by any County to provide SMH services. This remains a work in progress throughout the State by many STRTPs.*

a) *All personnel will be involved in training for accreditation standards and will have an opportunity over the five-year plan to participate on differing committees. All personnel old and new have been trained and this is ongoing.*

b) *Management team will discuss accreditation progress at weekly management meetings. This is discussed at weekly management meeting and is ongoing*

4) *Build monetary fund reserves to \$300,000.00. Current reserve is \$141,979.95.*

a) *Each quarter, as cash flow allows, a CD may be bought and set aside as part of fund reserves. This amount will be discussed as part of regular BoD meetings and progressed assessed. This is progressing well.*

2018/2019 Budget Year Goals

KBYH has one "budget-year" goal, and that is to make no new expenditures unless necessitated by a Title 22 issue or safety & health issue because of the following reasons:

a) With our STRTP license the reimbursement rate by the State of California increased by more than \$3,000 per month to cover the costs of the additional staff required for licensure.

b) The Adoption payment methodology for finalized adoptions, through PAARP, has remained unchanged. The current contract with the Kern County Department of Human Services pays \$2,000 per completed assessment (\$3,000 for Spanish speaking

families) and is reimbursed to KCDHS when or if the family finalizes an adoption.

c) The new Foster Parent, now known as Resource Parent, pay rate has once again been set.

STRTP DATA: Planned/Unplanned Discharges

	CASA		Almklov	
	Planned	Unplanned	Planned	Unplanned
Oct-Dec 2018	1	0	1	0
Jan-Mar 2019	0	0	1	0
Apr-Jun 2019	0	0	1	1

The planned discharges during this period were for a resident who transitioned to lower levels of care. Neither STRTP had an unplanned discharge for the quarter.

AWOLS

	CASA	Almklov
Oct-Dec 2018	8	4
Jan-Mar 2019	9	8
Apr-Jun 2019	12	14

AWOLS fluctuate at both homes based on the barrier behaviors of the current residents.

In cooperation with Law Enforcement; Youth who leave the STRTP without permission, and yet we know where they are, are not considered AWOL.

Instead, they are considered UA (unauthorized absence) and no police report is filed, unless they are gone past midnight.

When youth leave, and we do not know where they are after three hours, a police report is made.

Medication Errors (Staff errors)

	CASA	Almklov
Oct-Dec 2018	0	0
Jan-Mar 2019	1	0
Apr-Jun 2019	0	0

There were zero staff medication errors this quarter.

Medication Incidents (these are not Staff errors)

	CASA	Almklov
Oct-Dec 2018	0	24
Jan-Mar 2019	3	18
Apr-Jun 2019	1	38

These numbers fluctuate based on the number of residents with AWOLing behavior, and who do not desire to be on psychotropic medication and refuse to take the prescribed medications. An “incident vs error” is logged, when through no direct fault of KBYH staff, medications were not taken.

These incidents are caused primarily for two reasons: (1.) The court medication order or scripts were not provided by county and/or mental health staff, or (2.) Clients go AWOL without their medications, or Clients simply refuse to take the medication.

This quarter two Almklov residents refused their medications for the entire month of June 2019.

STRTP Residents Requiring First Aid

	CASA	Almklov
Oct-Dec 2018	4	2
Jan-Mar 2019	8	0
Apr-Jun 2019	6	0

Casa had 5 injuries requiring first aid treatment during the April-June 2019 quarter

- JF Horse-playing and was kneed in the face by Marcos using MMA moves. He was given an ice bag for swelling and Ibuprofen
- JE Scraped the bottom of his left foot on cement walking barefoot outside. He was given a bandaid
- AR fell off his scooter while on wilderness outing in Venice beach scraped his left knee. He was given a bandaid
- MP kept trying to MMA DS and DS hit MP in in the eye, given MP a black eye. He was given an ice bag for swelling and Ibuprofen
- PS bruised left foot (toe) while being detain by police officer
- JV bitten on side of lower right side of face by peer. He was given an ice bag for swelling

Almklov had zero injuries requiring first aid treatment during the April-June 2019 quarter

Injuries

STRTP Residents Requiring Professional Medical Care

	CASA	Almklov
Oct-Dec 2018	3	5
Jan-March 2019	1	5
April-June 2019	6	3

Casa had six injury requiring professional medical care during April-June 2019 quarter.

- MP went to urgent care for a rash and shoulder (hurt while MMA practice) . Given prescription to alleviate the pain.
- JV complain of ear ache was taken to Urgent Care. Given prescription to alleviate the pain.
- JF complained of chest congestion and was sent home from school and taken to Urgent Care. He was given a prescription to alleviate the pain.
- PS complained of chest congestion and was sent home from school and was taken to Urgent Care. He was given prescription to alleviate the pain.
- JV fell on ankle playing basketball was taken to Urgent Care. Given prescription to alleviate the pain.
- MP cut on leg jumping over plant container in court yard. Doctor bandaged the wound and recommended Ibuprofen.

Almklov had three incidents requiring professional medical care during April-June 2019 2019 quarter.

- Angel was seen at the ER for an infected insect bite and was prescribed Bactrim (antibiotic)
- Alex was taken to the Urgent Care for a muscle strain of his back and prescribed Motrin 600 mg for pain
- Brett was transported to Mercy Southwest due to punching car window causing a laceration on his right arm on 6/2/19

School Days Missed/Total Days Scheduled

School Days Missed V Scheduled	CASA	Almklov
October 2018	51/276	24/138
November 2018	34/195	10/96
December 2018	36/180	16/90
January 2019	19/144	11/98
February 2019	13/216	23/103
March 2019	23/228	23/126
April 2019	44/204	26/72
May 2019	51/264	18/100
June 2019	0	3/3

The clients at CASA/Almklov generally come to us with major school issues. However, as one can see, missed school days continues to be a major problem with youth in STRTP. With the seriousness of this issue KBYH has instituted a comprehensive policy that includes sending a letter to the placing worker indicating that the resident may need to be moved to another facility if they believe there is a facility that can motivate the youth to attend school. This comprehensive policy has been shared with all pertinent stakeholders and the clients. County Social Workers are as frustrated with the residents who constantly refuse school as anyone else is. Although the data shows a downward (positive) trend for KBYH residents, albeit modest, truancy remains a major issue at KBYH and STRTPs throughout the United States. In addition, the “subjects” being measured change, so the data is not a “pure” grasp of our program’s influence.

In reviewing the data and reviewing the literature we find, . . . *“In its review of promising truancy reduction programs, the Colorado Foundation for Families and Children noted several critical elements that were necessary for effective programming: (1)*

parent/guardian involvement, (2) a continuum of services, to include meaningful incentives, consequences and support, (3) collaboration with community resources—including law enforcement, mental health services, mentoring and social services, (4) school administrative support and commitment to keeping youth in the educational mainstream, and (5) ongoing evaluation” . . .

The one area we, at KBYH, have most control over is meaningful incentives. In a non-scientific survey boys desire for money ranks in the top ten after girls, sports, video games and a few others. But three boys said it well;

“Money
This Should Be The 1St.
Because No Money No Girl
No Money No Games
No Money No Cheese
No Money No Sex - Got it? - StylesX

Money is definitely the one to vote for. These guys at school are totally into the money. I am a girl and a tomboy. I think I should know.

This should be one of the first, no money, no nothing”

KBYH has redesigned our allowance policy whereby the residents will receive \$5 per day for school attendance. This coupled with other allowance incentives provides for a total of \$70.00 or more per week. This will take place once we are certified as STRTP.

Individual Counseling via Community Resources

Another issue that residents in STRTP often have is the refusal to attend therapy that is provided by professionals outside of the STRTP. KBYH make effort to motivate residents to attend therapy with rewards for attending.

No consequences are given for refusing to attend as they have a right to refuse treatment under the Foster Youth Bill of Rights.

Casa rescheduled 5 CG appointments in the month of June 2019 due to summer camping trip.

Appointments Missed	CASA	KBYH Staff Fault	Child Guidance Cancelled	Resident Refused or AWOL
October 2018	0	0	0	0
November 2018	3	0	3	0
December 2018	4	0	3	1
January 2019	8	4	0	4
February 2019	8	3	0	5
March 2019	4	2	0	2
April 2019	2	0	0	2
May 2019	11	0	3	8
June 2019	1	0	0	1

Appointments Missed	Almklov	KBYH Staff Fault	Child Guidance Cancelled	Resident Refused or AWOL
October 2018	4	0	2	2
November 2018	2	2	0	2
December 2018	2	0	2	0
January 2019	0	0	0	0
February 2019	0	0	0	0
March 2019	3	0	2	1
April 2019	4	0	1	3
May 2019	3	1	1	1
June 2019	5	1	2	2

CASA LAW ENFORCEMENT CONTACTS

Month	Total Number of Law Enforcement Contacts	Initiated by KBYH as Required by Title 22	Initiated by KBYH at Staff Discretion	Initiated by Resident	Initiated by Stake Holder
Oct 2018	5	4(AWOLs)	0	0	1
Nov 2018	2	2(AWOLs)	0	0	0
Dec 2018	2	1(AWOL)	1	0	0
Jan 2019	1	1(AWOL)	0	0	0
Feb 2019	6	4(AWOLs)	1	0	1
Mar 2019	4	3(AWOLs)	0	0	1
Apr 2019	1	1(AWOL)	0	0	0
May 2019	4	2(AWOLs)	0	0	2-teachers
June 2019	1	1(AWOL)	0	0	0

ALMKLOV LAW ENFORCEMENT CONTACTS

Month	Total Number of Law Enforcement Contacts	Initiated by KBYH as Required by Title 22	Initiated by KBYH at Staff Discretion	Initiated by Resident	Initiated by Stake Holder
Oct 2018	3	0	0	1	3
Nov 2018	0	0	0	0	0
Dec 2018	2	1(AWOL)	0	0	1
Jan 2019	2	1(AWOL)	0	0	1
Feb 2019	2	1(AWOL)	1	0	0
Mar 2019	4	3(AWOLS)	0	0	1
Apr 2019	4	4(AWOLS)	0	0	0
May 2019	4	3(AWOLS)	0	1-alleged assault	0
June 2019	7	7(AWOLS)	0	0	0

Congregate LAW ENFORCEMENT CONTACTS

Under the new law, CCL conducts a comprehensive review of the programs in the State that have the top 50% of law enforcement contacts initiated by the STRTP. We have been reviewed annually and no deficiencies were found.

STRTP Residents Property Destruction

	CASA	Almklov
Oct-Dec 2018	\$1,683	\$50
Jan-Mar 2019	\$1,065	\$570
Apr-June 2019	\$740	\$2790

Property Destruction generally includes holes in walls, broken TVs, and vehicle damage.

This quarter property damage was very low at both STRTP locations.

We believe the new restructure of our allowance has contributed to lower property damage. Property damage is taken into consideration when determining the amount of money a resident will receive for their weekly allowance. If residents do property damage, they are held accountable by paying for the damages from their allowance. Under our new allowance scale, the boys can earn up to \$70 dollars per week.

Month	Total Number of Law Enforcement Contacts	Initiated by KBYH as Required by Title 22	Initiated by KBYH at Staff Discretion	Initiated by Resident	Initiated by Stake Holder
Oct/Nov/Dec 2018	14	8	1	1	4
Jan/Feb/Mar 2019	19	13	2	0	4
Apr/May/June 2019	21	18	0	1	2

Clients Taking Psychotropic Medication

With the passage of AB 403 the State department of Social Services is now monitoring how many residents are on psychotropic medication. A mandatory review of all programs that are in the top 50% of agencies with percentage of clients on psychotropic medications is now done annually by CCL. We have been reviewed annually and no deficiencies were found.

Fiscal Year 2018/2019	Casa Total Clients Served	Casa Total Clients and % of total clients on Psychotropic Medications	Almklov Total Clients Served	Almklov Total Clients and % of total clients on Psychotropic Medications	Congregate % of clients on Psychotropic Medications
October 2018	13	8=62%	6	5=83%	68%
November 2018	12	8=67%	6	5=83%	72%
December 2018	12	8=67%	7	6=86%	74%
January 2019	12	8=67%	6	6=100%	78%
February 2019	13	7=54%	6	5=83%	63%
March 2019	12	7=58%	6	5=83%	67%
April 2019	12	7=58%	7	4=57%	58%
May 2019	12	7=58%	7	4=57%	58%
June 2019	12	6=50%	6	4=57%	56%

The data indicates that the percentage of residents on psychotropic medications has increased over the last six months.

We attribute this to AB 403 in the sense that there is a stronger push to have youth in foster care, or kin care instead of group care.

Subsequently, only the youth with the most severe barrier behaviors are in group care and they are the youth most likely to be under psychiatric care.

Bed Days = Total Available/Total Filled

Fiscal Year 18/19	CASA	Almklov
October 2018	364/372=98%	186/186=100%
November 2018	360/360=100%	180/180=100%
December 2018	372/372= 100%	175/186=94%
January 2019	372/372=100%	180/186=97%
Feb 2019	345/348=99%	169/174=97%
March 2019	372/372=100%	186/186=100%
April 2019	360/360=100%	174/180=97%
May 2019	372/372=100%	178/186=96%
June 2019	360/360=100%	180/180=100%

Occupancy Rate was 100% for Casa and 98 % for Almklov for quarter.

Physical Restraints

	CASA	Almklov
Oct-Dec 2018	1	1
Jan-Mar 2019	3	4
Apr-June 2019	3	3

Physical restraints are still considerably low this quarter even though we are working with high-profile residents who are extremely behaviorally disturbed.

These high-profile residents are making very good progress, and we expect an extinction of the serious aggressive behavior during the next quarter.

STRTP Residents' Complaints

A California Benchmarking Initiative satisfaction survey was given to all 18 residents in June 2019, and 12-residents chose to complete the survey. The maximum score was 5, and the minimum score was 1. The overall average was 4.3 with "3" meaning neutral, and "4" meaning agree. Line Staff will be shown the survey and the results will be discussed as well as ways to improve the program to help residents be more satisfied with the services they receive. This quarter showed a slight improvement than last quarter.

Almklov had three complaints during the quarter. All three complaints were about the same two residents bullying each other. Staff resolved the issue by limiting space for both complaining residents and provided one-on-one when it was necessary. Nonetheless, all other needs were granted to client's satisfaction.

Complaints were made by two Casa de Ninos residents in this quarter. Both were minor complaints, and all were resolved to resident's satisfaction.

One resident had a complaint about the menu. He wanted more healthier foods; asked if we could increase our vegetables. Another resident requested better quality hygiene products. Both complaints were addressed and resolved to the client's satisfaction.

STRTP Adventure Program

Residents with substance abuse issues fluctuate in their commitment to sobriety.

Month	Total number of different residents with substance abuse problems participating in the outings	Number & % of different residents with substance abuse problems who Attended All outings	Number & % of different residents with substance abuse problems who Refused at least one outing
Oct 2018	8	0=0%	8=100%
Nov 2018	6	1=17%	5=83%
Dec 2018	n/a no wilderness	n/a no wilderness	n/a no wilderness
Jan 2019	8	0=0%	6=75%
Feb 2019	8	1=13%	5=63%
March 2019	9	1=11%	5=56%
April 2019	9	3=33%	6=67%
May 2019	9	3=33%	6=67%
June 2019	9	4=44%	6=67%

All residents who have a substance abuse problem are required to attend the weekend adventure outings. That number varies from week to week based on the intake and discharge of youths, or if a resident is no longer dealing with a substance abuse issue.

The goal is to get 100% of the residents dealing with substance issues to participate in 100% of the outings.

Trauma Informed Care Self-Assessment

Our annual trauma informed care self-assessment shows us rating from 2 to 4 in all areas.

2 = Plan has been implemented

3 = Plan has been implemented and data has been gathered regarding implementation

4 = Plan has been implemented and revised, based on feedback/data regarding implementation.

Administrative Functions

Financial Stability measured by all departments:

The Agency overall has an overall YTD net income of \$75,796.55
This can be attributed to the hiring of additional staff to meet AB 403 requirements.

Measure staff turnover:

This quarter saw 6 staff separated, and 4 staff hired.

Workers Compensation Claims:

There were 0 new workers' compensation claim this quarter.

Unemployment Claims:

There were 2 new unemployment claim this quarter.

Other liability insurance claims:

There were 0 new liability insurance claims.

Vehicles Accidents:

There were 2 vehicle accidents this quarter.

CCL Reviews - **FFA**

There was one citation for a foster home regarding unkempt grounds. Violations were corrected.

A133 Financial Audit

The Audit for fiscal year 2017-2018 is completed with no deficiencies found.

Annual Risk Management

The annual risk management review was conducted, and KBYH continues to be within accepted parameters.

Annual Review of Policy Manual

Policies were updated during the year to keep in compliance with State and federal changes. All policies are in compliance with the law. With that said AB 403 continues to be implemented. KBYH's FFA Policies have been approved by the State and are in compliance with AB 403. KBYH submitted the policy and program revisions to CCL for approval and approval was achieved on March 26, 2019. KBYH has submitted an application to Kern County on become Medi-Cal Certified, however Kern County has chosen not to certify any STRTP. The State and KBYH are looking at other alternatives.

Annual "Interested Party" Review

Two BoD members have "interested party" status having received compensation for work performed for the agency during this time period. Mike Conard performs IT work for KBYH, and Bill Slocumb provided legal work for us.

Annual Insurance Coverage Review and Authorization

A review of our insurance coverage was completed again this year. Some upgrades to coverage amounts were made.

Financials

As of June 30, 2019

Total Current Assets:	\$775,041.04
Total Current Liabilities:	\$469,852.95

Total Current Checking/Savings: \$141,979.95

Health and Safety Committee Minutes — July 16, 2019

The Health and Safety Committee Meeting convened at 9:00 AM in the KBYH Training Room with the following members present.

Joe G. Ortega Safety Officer / Chairman

Not Present

Kathy Irwin Safety Committee Member
Jill Howard Safety Committee Member

Opening Remarks. This Safety Meeting met with only the chairman present. The other two members were excused primarily due to no significant events needing committee action and operational requirements.

II. Old Business. There was no old business to review.

III. New Business. A discussion of active shooter training was considered.

IV. Next meeting is scheduled for October 15, 2019 at 9:00 AM at the KBYH training room.

Meeting concluded at 9:15.

FFA Data

Indicator	Intra-Agency Youth Transfers	School age youth NOT attending school	Injuries requiring professional medical care	Injuries requiring first aid	Property Damage by youth
October 2018	1	0	0	1	0
November 2018	0	0	0	2	0
December 2018	1	0	0	2	0
January 2019	0	0	1	5	0
February 2019	0	0	0	4	0
March 2019	1	0	0	1	0
April 2019	0	0	0	3	0
May 2019	0	0	1	1	0
June 2019	0	0	0	4	0

Status of Resource Family Homes

	Approved Homes at Beginning of month	Newly Approved Homes this month	Closed Homes this month	Total Approved homes at end of month
October 2018	34	2	0	36
November 2018	36	5	1	40
December 2018	40	1	0	41
January 2019	41	3	0	44
February 2019	44	0	3	41
March 2019	41	2	2	41
April 2019	41	0	2	39
May 2019	39	0	3	36
June 2019	36	2	1	37

ADOPTIONS

The adoptions department has seen numerous changes with respect to the completion of adoption home studies, due to the new CCR regulations. As such, the tracking starting 1/1/18 has been altered, per below.

- 1) The term “Home Study” changed to “Written Report”, “Psychosocial Assessment”, and now “Family Evaluation”.
- 2) KBYH completes assessments under various regulations and with different requirements, depending on the family.
 - a) Contract Adoption Home Studies are required to be completed within 4 months
 - b) Contract RFA Psychosocial Assessments and Family Evaluations are required to be completed within 60 days
 - c) In house, KBYH Psychosocial Assessments/Family Evaluations do not have a time limit and vary in length depending on the level of the prospective resource family’s motivation.

	Contract Adoption Home Study Referrals	Contract Psychosocial Assessment/FE Referrals	KBYH Psychosocial Assessment/FE's assigned
October 2018	2	8	0
November 2018	0	6	2
December 2018	1	6	3
January 2019	0	3	0
February 2019	0	2	1
March 2019	1	7	1
April 2019	1	4	0
May 2019	0	4	2
June 2019	0	3	1

	Contract Adoption Home Study Completed (average time frame in weeks)	Contract Psychosocial Assessment/FE Referrals Completed (average time frame in weeks)	KBYH Psychosocial Assessment/FE's Completed (average time in weeks)
Oct 2018	N/A	5.6	3
Nov 2018	N/A	4.7	3
Dec 2018	16	4.5	3
Jan 2019	N/A	4.8	4
Feb 2019	16	5.0	2
Mar 2019	N/A	4.0	3
April 2019	20	3.9	5
May 2019	N/A	4.0	4
June 2019	N/A	3.8	6

Psychosocial Assessment/Family Evaluation Satisfaction Survey—all surveys were positive. Additionally, random post-assessment phone surveys are being conducted and all results have been positive.

Client records/FFA, GH

All GH files are in good order.

All FFA files in good order

Staff records

All Employee files in good order.

Survey Responses: Staff satisfaction survey data returned an aggregate score of 4.12 out of 5 with five being completely satisfied.