



KERN BRIDGES YOUTH HOME

Performance and Quality Improvement

Quarterly Report

October 1, 2021 to December 31, 2021

Final

5 Year Plan Goals Progress 2020/2025

a. BoD members and senior staff to recruit members in the following professions: College Professor of Cal State Bakersfield, Insurance industry executive, and Oil Industry Executive, and Kern High School District employee. *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. Next accreditation is June 2022, and the process has begun.

d. Build monetary fund reserves to \$300,000.00. Current value of CDs is \$251,151.06. There is an additional \$14,003.67 in the Casa de Niño's building fund.

e. Hire a new CEO as the current CEO will retire in the summer of 2024.

f. Review the management structure as KBYH has expanded its services over the last five years.



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. Next open house is tentatively scheduled for Fall 2022 COVID depending.*

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 trees totaled over \$28,185.00 in 2021. This is the highest dollar amount ever.*

c) BoD members will be asked for commitments at the October BoD meeting. This was accomplished. *BoD attendance 45% in October, 36% in November, 54% in December. 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. Next reaccreditation is in June 2022 and the process has begun. The annual data submissions are sent to COA every year. KBYH has been licensed as STRTP and had SMH program approved in March 2021 by Tulare County.*

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 CD reserve is \$2521,151.06 and current total checking and savings is \$915,446.84.*

2021/2022 Budget Year Goals

1. Pay down debt.
2. Decrease expenses to pre-covid level.
3. Explore installation of solar system on Stine Rd. buildings
4. Develop a master plan to provide continuing education for Upper Management and provide incremental pay increases and education assistance for hourly RCCWs for specific certifications.
5. Build Financial Reserves to \$300,000.

STRTP
DATA:

CASA	Almklov
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Planned/Unplanned Discharges

	Planned	Unplanned	Planned	Unplanned
Jan-March 2021	1	0	2	0
April-June 2021	3	4	2	0
Jul-Sep 2021	3	0	2	1
Oct-Dec 2021	1	0	1	1

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

AWOLS

	CASA	Almklov
Jan-March 2021	2	1
April-June 2021	4	3
Jul-Sep 2021	3	15
Oct-Dec 2021	2	32

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
Jan-March 2021	1	1
April-June 2021	0	0
Jul-Sep 2021	0	0
Oct-Dec 2021	0	0

There were zero staff medication errors this quarter.

Medication Incidents (these are not Staff errors)

	CASA	Almklov
Jan-March 2021	0	6
April-June 2021	12	3
Jul-Sep 2021	50	34
Oct-Dec 2020	59	24

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.



STRTP Residents Requiring First Aid

	CASA	Almklov
Jan-March 2021	1	2
April-June 2021	1	7
Jul-Sep 2021	0	11
Oct-Dec 2021	0	2

Injuries

Casa had zero injury requiring first aid treatment during the Oct-Dec 2021 quarter

Almklov had two injuries requiring first aid treatment during the Oct-Dec 2021 quarter

- Michael was upset due to front screen door hitting peer and punched it causing his knuckles to bleed. Staff used alcohol and bandied to fix the wound.
- Zachary was upset due to his peer's getting more allowance than him and punched the wall causing his knuckles to bleed. Staff used alcohol and bandied to fix the wound.

STRTP Residents Requiring Professional Medical or MH Care

	CASA	Almklov
Jan-March 2021	4	7
April-June 2021	2	4
Jul-Sep 2021	4	3
Oct-Dec 2021	1	6

Casa had one incident requiring professional medical or mental health care during Oct-Dec 2021 quarter

- Isaac went to the ER for a sprained his ankle while playing football, crutches given.

Almklov had six incidents requiring professional medical or mental health care during Oct-Dec 2021 quarter

- Joseph complained of cough and shortness of breath and was transported to ER. Youth was diagnosed with a viral infection. Negative Covid test
- Isaac complained of cough and shortness of breath and was transported to ER. Youth was diagnosed with a viral infection. Negative Covid test
- Anthony made homicidal/suicidal threats at school and was transported to Mary K Shell and was treated and released.
- Andrew got upset with peer due to him being annoying and went and laid in the middle of the street and was almost hit by a car. LEA/MET were called out but decided he did not need to be taken to Mary K Shell for further evaluation
- Andrew was walking into traffic and laying in the street and was transported to Mary K Shell on a 5150 hold for 4 hours
- Juan was throwing up blood, complained of tingling in his hands, and shortness of breath. 9-1-1 was called and EMT stated youth vitals were good and he should be transported to Urgent Care. Juan refused.

School Days Missed/Total Days Scheduled

School Days Missed V Scheduled	CASA	Almklov
January 2021	78/252	65/120
February 2021	78/252	65/120
March 2021	78/252	65/120

April 2021	31/240	49/114
May 2021	34/240	59/120
June 2021	N/A	15/55
July 2021	N/A	0/17
August 2021	N/A	5/57
September 2021	8/252	28/109
October 2021	13/252	23/61
November 2021	13/252	38/74
December 2021	27/240	52/70

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.

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.



Appointments Missed	CASA	KBYH Staff Fault	Child Guidance Cancelled	Resident Refused/AWOL or 51/50
January 2021	0	0	0	0
February 2021	1	0	0	1
March 2021	0	0	0	0
April 2021	0	0	0	0
May 2021	1	0	0	1
June 2021	0	0	0	0
July 2021	1	0	0	1
August 2021	0	0	0	0
September 2021	0	0	0	0
October 2021	0	0	0	0
November 2021	0	0	0	0
December 2021	0	0	0	0

Appointments Missed	Almklov	KBYH Staff Fault	Child Guidance Cancelled	Resident Refused/ AWOL or 51/50
January 2021	3	0	0	3
February 2021	4	0	1	3
March 2021	3	0	1	2
April 2021	0	0	0	0
May 2021	2	0	2	0
June 2021	5	0	3	2
July 2021	7	0	4	3
August 2021	4	0	2	2
September 2021	8	0	1	7
October 2021	1	0	0	1
November 2021	6	0	1	5
December 2021	0	0	0	0

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
Jan 2021	0	0	0	0	0
Feb 2021	1	1 (AWOL)	0	0	0
March 2021	1	1 (AWOL)	0	0	0
Apr 2021	2	0	1	0	1
May 2021	2	1 (AWOL)	0	0	1
June 2021	2	2 (AWOLs)	0	0	0
July 2021	0	0	0	0	0
Aug 2021	3	1 (AWOL)	2	0	0
Sep 2021	6	3 (AWOLs)	1	1	1
Oct 2021	0	0	0	0	0
Nov 2021	3	1 (AWOL)	0	1	1
Dec 2021	2	0	0	0	2

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
Jan 2021	1	1(AWOL)	0	0	0
Feb 2021	0	0	0	0	0
March 2021	0	0	0	0	0
Apr 2021	2	0	1	0	1
May 2021	3	2(AWOLs)	0	0	1
June 2021	1	0	1	0	0
July 2021	1	0	0	1	0
Aug 2021	6	4(AWOLs)	0	2	0
Sep 2021	13	10(AWOLs)	1	0	2
Oct 2021	8	7(AWOLs)	0	0	1
Nov 2021	1	1(AWOL)	0	0	0
Dec 2021	2	2(AWOLs)	0	0	0

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
Jan/Feb/Mar 2021	3	3	0	0	0
Apr/May/June 2021	12	5	3	1	3
Jul/Aug/Sep 2021	20	14	1	3	2
Oct/Nov/Dec 2021	16	11	0	1	4

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. However, this quarter Almklov had 11 police calls initiated by our staff for runaways: two at Casa and 9 at Almklov. Staff are mandated to call LEA after a resident is missing after 3 hours. All residents did eventually return back to the facility and the LEA reports were called off by our staff.

STRTP Residents Property Destruction

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.

	CASA	Almklov
Jan-Mar 2021	\$300	\$1990
Apr-June 2021	\$0	\$560
Jul-Sep 2021	\$0	\$940
Oct-Dec 2021	\$500	\$665



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 2020/2021	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
January 2021	13	6=50%	6	2=33%	42%
February 2021	14	6=50%	8	5=63%	59%
March 2021	13	6=50%	6	5=83%	58%
April 2021	13	6=50%	6	5=83%	58%
May 2021	15	6=40%	6	5=83%	52%
June 2021	13	7=54%	7	5=71%	60%
July 2021	12	7= 58%	6	3=50%	56%
August 2021	13	6=46%	8	4= 50%	48%
September 2021	13	6=46%	9	4=44%	45%
October 2021	12	7=58%	7	3=43%	53%
November 2021	13	6=46%	6	2=33%	42%
December 2021	12	6=50%	7	3=43%	47%

We attribute this to AB 403 in the sense that there is a stronger push to have youth in foster care. Subsequently, only the youth with the most severe barrier behaviors are in group care and they are more likely to be under psychiatric care.

Bed Days = Total Available/Total Filled

	CASA	Almklov
January 2021	366/372=98%	186/186=100%
February 2021	312/312=100%	146/156=94%
March 2021	372/372=100%	186/186=100%
April 2021	346/360=96%	180/180=100%
May 2021	348/372=94%	186/186=100%
June 2021	347/360=96%	166/180=92%
July 2021	360/372=97%	170/186=91%
August 2021	359/372=97%	183/186=98%
September 2021	329/360= 91%	172/180= 96%
October 2021	352/372=95%	157/186= 84%
November 2021	351/360=98%	167/180= 93%
December 2021	358/372=96%	186/186= 100%

Occupancy Rate was 96% for Casa and 92% for Almklov for quarter.

Physical Restraints

	CASA	Almklov
Jan-Mar 2021	1	2
Apr-June 2021	2	5
Jul-Sep 2021	0	8
Oct-Dec 2021	0	3

STRTP Residents' Complaints

A California Benchmarking Initiative satisfaction survey was given to all 18 residents in December 2021, and 6-residents chose to complete the survey. The maximum score was 5, and the minimum score was 1. The overall average was 3.9 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 and last quarter was pretty much status quo. Not much changed with the overall satisfaction of the program.

There were zero complaints made by residents at both STRTPs in this quarter. Amazing work by our Direct Care Staff at both facilities for meeting the needs of residents during the entire quarter.

Youth directed Council Meetings are held weekly to obtain input from the youth regarding the program including likes, dislikes of food, staff, and activities.



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 <u>Attended All outings</u>	Number & % of different residents with substance abuse problems who <u>Refused at least one outing</u>
January 2021	8	0=0%	8=100%
February 2021	8	1=13%	8=100%
March 2021	8	1=13%	8=100%
April 2021	8	3=38%	5=63%
May 2021	8	4=50%	4=50%
June 2021	8	4=50%	4=50%
July 2021	6	4=67%	2=33%
Aug 2021	6	3=50%	3=50%
Sep 2021	6	4=67%	3=50%
Oct 2021	8	4=50%	4=50%
Nov 2021	8	1=13%	8=100%
Dec 2021	8	3=38%	5=63%

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 3 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 Fiscal YTD net income of \$ **135,647.87**

This can be attributed to a positive steady relationship with Counties needing care for youth placed in foster care.

Measure staff turnover:

This quarter saw 2 staff separated, and 3 staff hired.

Workers Compensation Claims:

There were 0 new workers' compensation claim this quarter.

Unemployment Claims:

There were 1 new unemployment claim this quarter.

Other liability insurance claims:

There were 0 new liability insurance claims.

Vehicles Accidents:

There were 0 vehicle accidents this quarter.

CCL Reviews - **FFA**

There were no citations this quarter.

A133 Financial Audit

The Audit for fiscal year 2020-2021 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.

Annual “Interested Party” Review

Two BoD members have “interested party” status, one having received compensation for work performed for the agency during this time period. Mike Conard received compensation for performing IT work for KBYH, and Bill Slocumb’s legal services were not compensated this year.

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 December 31, 2021

Total Current Assets:	\$1,728,912.72
Total Current Liabilities:	\$528,004.38
Total Current Checking/Savings:	\$915,446.84

Health and Safety Committee Minutes — 17 January 2022

The Health and Safety Committee Meeting convened at 9:00 AM via Zoom teleconferencing. Chairman contacted members for any input to the committee report prior to this meeting.

Joe G. Ortega	Safety Officer / Chairman
Kathy Irwin	Member
Trina Smith	Member
Michael O’Doherty	Member (Not present)

Opening Remarks. This Safety Meeting met with members via Zoom. The Chairman

informed members that CEO directed designated members to review their areas for COA. In the area of safety, I found that our Safety Manual required updating and we needed to determine what safety training should be required of employees. The COA topic will be presented to the Safety Committee as we continue to refine our procedures.

Old Business

There is no update on recommendation introduced by Mr. O'Doherty on an emergency disaster plan. He asked the committee if we had an emergency disaster plan, or similar, which would provide for maintaining stocks of emergency supplies. To the knowledge of the Chairman, no such plan exists. Other members also were unaware of such plan. This idea is definitely worth exploring. We will present this idea to the STRTP Director and Adoptions Director for consideration.

An update was given to committee members on topics submitted last quarter. Trina reported that work began on the laundry room floor at Almklov.

The Adoptions Director was informed about missing tiles in front of KBYH Building B.

No update has been received.

Mr. O'Doherty was unavailable to attend the meeting. However, he submitted the following information:

1. EJ Construction was selected to do the repairs and improvements at the Almklov House Laundry Room: that were reported last meeting by Trina Smith.
2. No change regarding existing tile at Admin due to construction about to begin.
3. Parking lot continues to deteriorate in condition and will be repaired during construction.
4. Handicap Parking sign still not installed due to the construction about to begin.

New Business. There was no new business introduced. The Chairman introduced an recommendation to move the committee to the Tuesday on the first week following the end of the quarter. This would permit committee to submit reports to coincide with the PQI Reports. Committee members concurred.

Recommendations to KBYH CEO:

1. Recommend that parking lot be considered for repair.
2. Instruct Maintenance install handicap sign.

Next meeting is scheduled for April 5, 2022, at 9:00 AM via Zoom.

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
Month ↓					
January 2021	1	0	1	4	0
February 2021	0	0	2	4	0
March 2021	2	0	2	5	0
April 2021	1	0	0	4	0
May 2021	0	0	2	8	0
June 2021	1	0	1	5	0
July 2021	1	0	0	5	0
August 2021	0	0	0	2	0
September 2021	0	0	0	2	0
October 2021	0	0	1	1	0
November 2021	1	0	0	2	0
December 2021	0	0	0	0	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
January 2021	30	1	1	30
February 2021	30	0	0	30
March 2021	30	1	0	31
April 2021	31	1	0	32
May 2021	32	1	2	31
June 2021	31	0	1	30
July 2021	30	0	1	29
August 2021	29	0	0	29
September 2021	29	0	1	28
October 2021	28	0	2	26
November 2021	26	0	1	25
December 2021	25	0	0	25

ISFC INTAKE/DISCHARGE

MONTH	# INTAKE	# DISCHARGE	# TOTAL IN PROGRESS
January 2021	3	0	17
February 2021	1	0	18
March 2021	1	2	17
April 2021	4	1	20
May 2021	0	3	17
June 2021	0	0	14
July 2021	1	2	14
August 2021	0	2	14
September 2021	3	1	16
October 2021	0 FFA/1 Contract	1 FFA/0 Contract	15 FFA/1 Contract
November 2021	2 FFA/1 Contract	4 FFA/0 Contract	13 FFA/2 Contract
December 2021	5 FFA/0 Contract	0	18 FFA/2 Contract

ISFC DISCHARGE/LENGTH OF STAY

QUARTER	YOUTH	DISCHARGE OUTCOME	LENGTH OF STAY (WEEKS)	DATE OF DISCHARGE
Jan-Mar 2021	PV	Juvenile Hall	22 weeks	3/21/21
	KO	Juvenile Hall	8 weeks	3/26/21
Apr-Jun 2021	JS	Reunification	12 weeks	5/7/21
	IR	Runaway	79 weeks	11/12/19
	EN	Runaway- STRTP	11 weeks	3/2/21
July-Sep 2021	NS	Runaway	11 weeks	4/16/21
	TO	14-day notice	6 weeks	7/1/21
	JO	Graduated	105 weeks	7/13/21- still in Resource Home
	JM	Transitioned to THP	56 weeks	8/26/21
	PM	Reunified with parents	14 weeks	8/23/21
Oct-Dec 2021	RS	Juvenile Hall	4 weeks	9/28/21
	JJ	Adoptive placement	50 weeks	10/29/21
	BT	Grandparents	46 weeks	11/1/21
	DO	Graduated-still in placement	59 weeks	11/10/21
	GO	Jamison	7 weeks	11/10/21
	JC	Garudated-AB12	88 weeks	11/15/21

In March 2021, KBYH was selected to be the contract provider to provide ISFC services for Kern County Resource Parents. This contract had been delayed due to the Kern County Department of Human Services encountering obstacles in getting their program statement approved by the state, however, in October 2021 KBYH received its first referral and now has two ISFC contract placements.



SUPERVISED VISITATION PROGRAM

SVP Referrals

Month	Number of Referrals	Number of Scheduled Visits	Number of Visits Cancelled/No Show
January 2021	43	213	40
February 2021	42	217	42
March 2021	52	275	45
April 2021	51	273	24
May 2021	55	294	30
June 2021	49	313	48
July 2021	56	292	23
August 2021	58	303	51
September 2021	66	304	39
October 2021	69	280	34
November 2021	72	252	47
December 2021	55	276	41

Serious Incidents

Month	Incident
January 2021	None
February 2021	None
March 2021	None
April 2021	None
May 2021	None
June 2021	None
July 2021	None
August 2021	None
September 2021	None
October 2021	None
November 2021	None
December 2021	None

On 8/31/20, KBYH launched a Supervised Visitation Program that started with 2 spaces and is now providing 5 spaces plus an outdoor play area. The number of scheduled visits and actual visitation hours steadily increased during the inception of the program, to the extent that Kern County approved additional spaces and funding. More recently, Kern County requested a proposal from KBYH for a second site. The proposal will be reviewed in January 2022. The program has seen a number of successes, including biological parents meeting their child for the first time, several successful reunifications, and improved family relations. The SVP now includes five full-time employees and two coordinators.

ADOPTIONS

	Contract FE Referrals	KBYH FE's assigned
January 2021	8	1
February 2021	11	1
March 2021	12	1
April 2021	4	1
May 2021	8	0
June 2021	9	1
July 2021	8	1
August 2021	14	0
September 2021	10	0
October 2021	9	1
November 2021	10	0
December 2021	7	1

The number of Family Evaluation referrals has remained static and are consistently being completed within the contracted time frame of 30 days. Kern County quarterly reports reflect that KBYH remains compliant with contract expectations. The Family Evaluation contract will be going back out for RFP in January 2022.

	Contract Psychosocial Assessment/FE Referrals Completed (average time frame in weeks)	KBYH Psychosocial Assessment/FE's Completed (average time in weeks)
January 2021	3.9	N/A
February 2021	4.0	4
March 2021	3.8	4
April 2021	3.9	N/A
May 2021	4.0	4
June 2021	3.8	4
July 2021	3.9	1
Aug 2021	3.8	0
Sep 2021	4.0	0
Oct 2021	3.9	1
Nov 2021	4.0	0
Dec 2021	3.8	0

Family Evaluation Satisfaction Survey

All surveys were positive.

Client Records/FFA, STRTP

An STRTP file review as completed on 11/22/21. Two files from Almklov and three file from Casa de Ninos were reviewed. The results of the review are attached. All files were in good order overall, however, items that were not checked off on the checklist were not present in the file. This may be due to the client being relatively new, the item is not applicable, or it has yet to be completed. I discussed this with Mark Dominguez on 11/22/21 and advised that he review the checklists to determine if any follow up was warranted. There were no other concerns currently.

On November 29, 2021, we conducted a file review for KBYH FFA. This review is intended to satisfy our Accreditation Standards set by COA. The tool we utilized in this review was the COA Case Record Checklist form.

After reviewing a large sample of client's files (20) it was found that most of them were maintained in good order and very easy to follow based on the new COA Case Record Checklist form. However, we found that some of the files were missing required documentation (Please see COA Checklist Form).

Resolution: I would recommend that all KBYH's forms be completed upon intake or set a standard that the placing county has so many days to review, sign, and return required intake docs.

Resolution: At this point in time, the COA Case Record Checklist Form that we utilized for this audit needs to be reformatted. For this reason, areas such as Quarterly Reports, OTC Medication Sheets, and Statement of Dangerous Behaviors are no longer requirements for FFA files.

Staff records

The employee file review was conducted, and all were complete.

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

