

Jewish Family Services
Embracing Possibility.

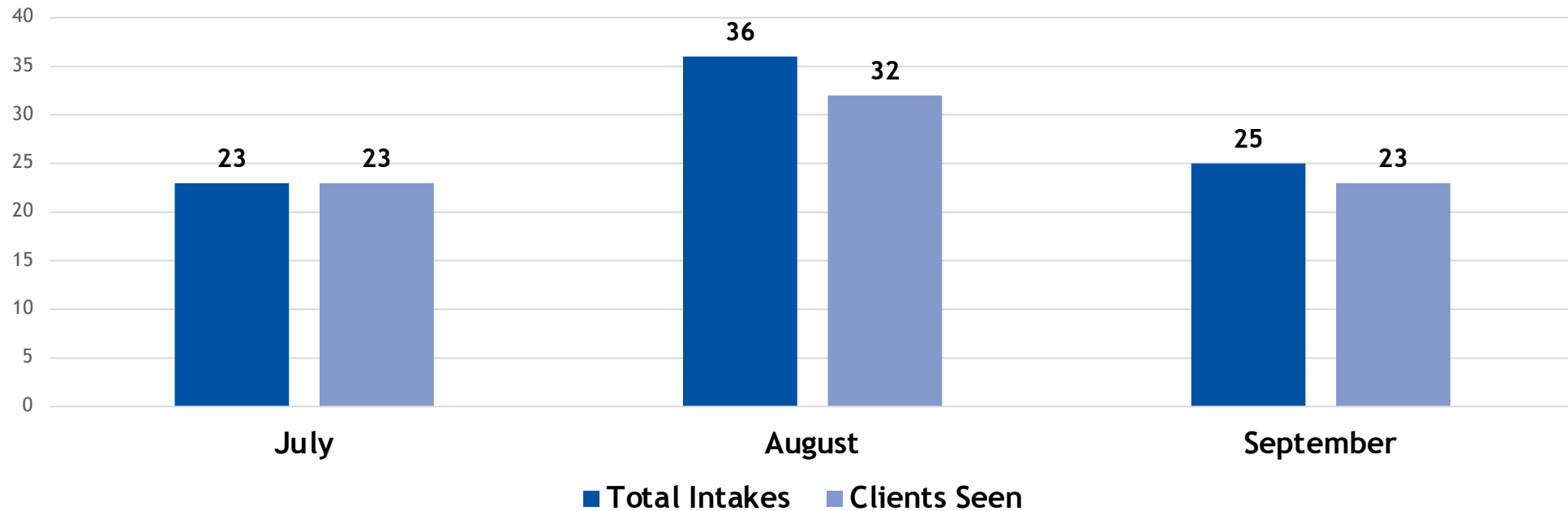
**Performance and Quality
Indicators/Improvement
October 27, 2023**

Agenda

1. Intake callers who became clients
2. Mental Health Client Satisfaction
3. Controllable Billing Adjustments
4. Quarterly Risk Management
5. Semi-annual HIPAA Compliance update
6. Annual Plan Update
7. Staff Satisfaction Survey

Intakes – July through September 2023

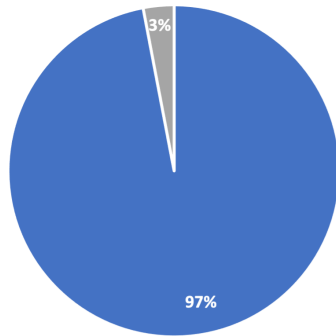
	Total Intakes	Needs Higher Level	No Response	Not Offered by Agency	Declined Services	Referred/ Transferred	Client Not Seen	Admitted
July-23	23	0	0	0	0	0	0	23
Aug-23	36	0	1	1	1	0	1	32
Sept-23	25	0	0	0	0	0	2	23



Mental Health Client Satisfaction

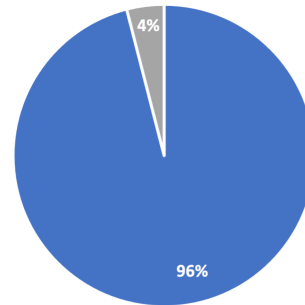
Since our last PQI reporting on this (in April) when we had no responses, we provided this survey electronically as well as via paper mail and provided it to both current clients and clients who were recently discharged. These changes increased our response rate and we received 30 total responses.

Do you feel your clinician treated you with respect?



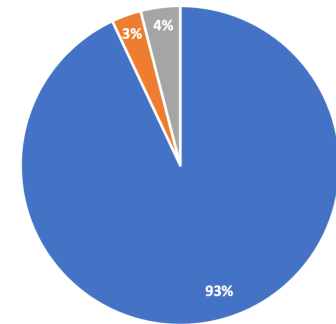
■ Agree or Strongly Agree ■ Neutral ■ Disagree or Strongly Disagree

Do you feel that the important issues regarding you were addressed during the clinical services process?



■ Agree or Strongly Agree ■ Neutral ■ Disagree or Strongly Disagree

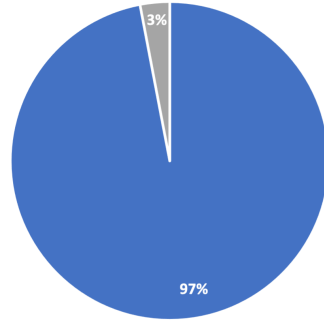
Do you feel that you were an important part of the overall process?



■ Agree or Strongly Agree ■ Neutral ■ Disagree or Strongly Disagree

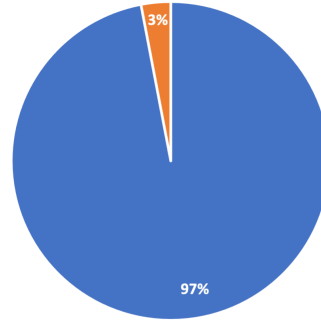
Mental Health Client Satisfaction

Did the clinician explain all forms and the entire process to you?



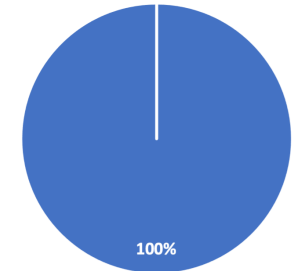
■ Agree or Strongly Agree ■ Neutral ■ Disagree or Strongly Disagree

Did the clinician give you the opportunity to ask questions, and did you feel that the process was collaborative?



■ Agree or Strongly Agree ■ Neutral ■ Disagree or Strongly Disagree

(Caregiver/Parent) Do you feel that the important issues regarding the child/client were addressed during the clinical services process?



■ Agree or Strongly Agree ■ Neutral ■ Disagree or Strongly Disagree

There is no adequate way to express the enormity of my respect and affection for [clinician]. Her knowledge, intuition and care of my needs have opened me to positive feelings and behaviors I could not have imagined possible. I am thankful each day for her continued care of my mental health needs.

Everyone in the office is extremely professional and helpful. We feel very comfortable and confident with [our child's] care. Great staff and doctor.

Controllable Billing Adjustments

Increasing billable services is a key goal in our strategic plan, and the Controllable Billing Adjustments report serves as a good monitor of our clinical program's billing processes.

These metrics offer specific detail in how we can improve our collections of earned revenue.

Examples of controllable losses: no authorization; out of timely filing

Examples of uncontrollable losses: contractual adjustment; contractual co-payment

Established Outcome: Controllable losses will remain at less than 5% each year

Controllable losses for FY23 = 2%

(FY 22 was 6% - 66% percent improvement from last year)

Quarterly Updates: Risk Management Review

Overview:

Risk management reviews, both internal and external, take place throughout the year. The CEO and COO manage these review procedures, and all findings related to critical incidents, accidents, and grievances are brought to the PQI Committee as part of a quarterly update.

The areas covered in these reports to the committee include:

- facility safety issues;
- any serious illnesses, injuries, or deaths;
- situations where a person was determined to be a danger to themselves or others

Update for the past quarter (July, August, September):

There were no critical incidents, accidents, or grievances in this past quarter

Additional Risk Management Note: Quarterly fire drill was conducted successfully

Semi-annual HIPAA Compliance Update

An audit of our Electronic Health Record (EHR) is required to be completed every six months. Currently, our Director of Behavioral Health Services runs this audit monthly. Additionally, all employees complete a HIPAA 101 at onboarding and receive a reminder about policy and compliance annually at an all-staff meeting.

The audit checks for the following things:

- Review to ensure staff members are only looking at clients on their own caseload
- Any unauthorized access into client charts

Results of compliance review since January, 2023:

# of Unauthorized Visits	Action Taken
0	N/A

2023 Annual Plan Update

JFS creates an Annual Plan each year to operationalize the broader Strategic Plan goals.

The Management Team meets leading up to the new calendar year to create draft Annual Plan goals, with input from their teams. This plan is then approved by the CEO and shared with the Board President. We are almost through our 2023 Annual Plan, year one of our new Strategic Plan. The Management Team will start meeting to create the 2024 Annual Plan once our COO returns from leave in November.

The following slides give a brief overview of our progress this year. A more in-depth progress update was provided in August to the Board President and President of the Strategic Planning Committee.

2023 Annual Plan Update

1. Financial Management

- We continue to navigate the major change in financial management to CLA which has helped us make slow and steady progress so far this year.
- Of the 11 expected outcomes: 5 achieved, 6 in process

2023 Annual Plan Update

2. Policies, Processes, and Procedures

- We focused the first part of the year on completing our COA accreditation process, which resulted in JFS's re-accreditation
- Re-accreditation involved a full review, revision, and sharing out with staff of all agency policies and procedures
- Of the 5 expected outcomes in this area: 3 achieved, 2 pending (these remaining two involve staff meetings that are scheduled but have not yet occurred, so we will complete all outcomes in this category)

2023 Annual Plan Update

3. Storytelling

- We are enlisting the help of a consultant to provide expertise and recommendations as we develop our story telling strategies
- We issued an RFP, reviewed and discussed 3 proposals, met with two finalizes, and selected our consultant, Scout Collective, to lead the storytelling project with JFS.
Project start date is January 2024
- The timeline for achieving our storytelling outcomes in this first year will be expanded into our 2024 Annual Plan due to a longer than expected processes to select the best consulting firm for this project. Of the 5 expected outcomes: 1 achieved, 4 in process (the remaining 4 involve the support of the chosen consultant to complete)

2023 Annual Plan Update

4. Board Engagement

- The board has completed a self-evaluation, and President is working on regular communications to keep the board aware of the happenings at JFS
- Of the 2 expected outcomes: 1 achieved, 1 in process (all Board Members have committee assignments and underutilized committees have been re-activated, we will know at the end of the calendar whether Board Meeting attendance increased this year)

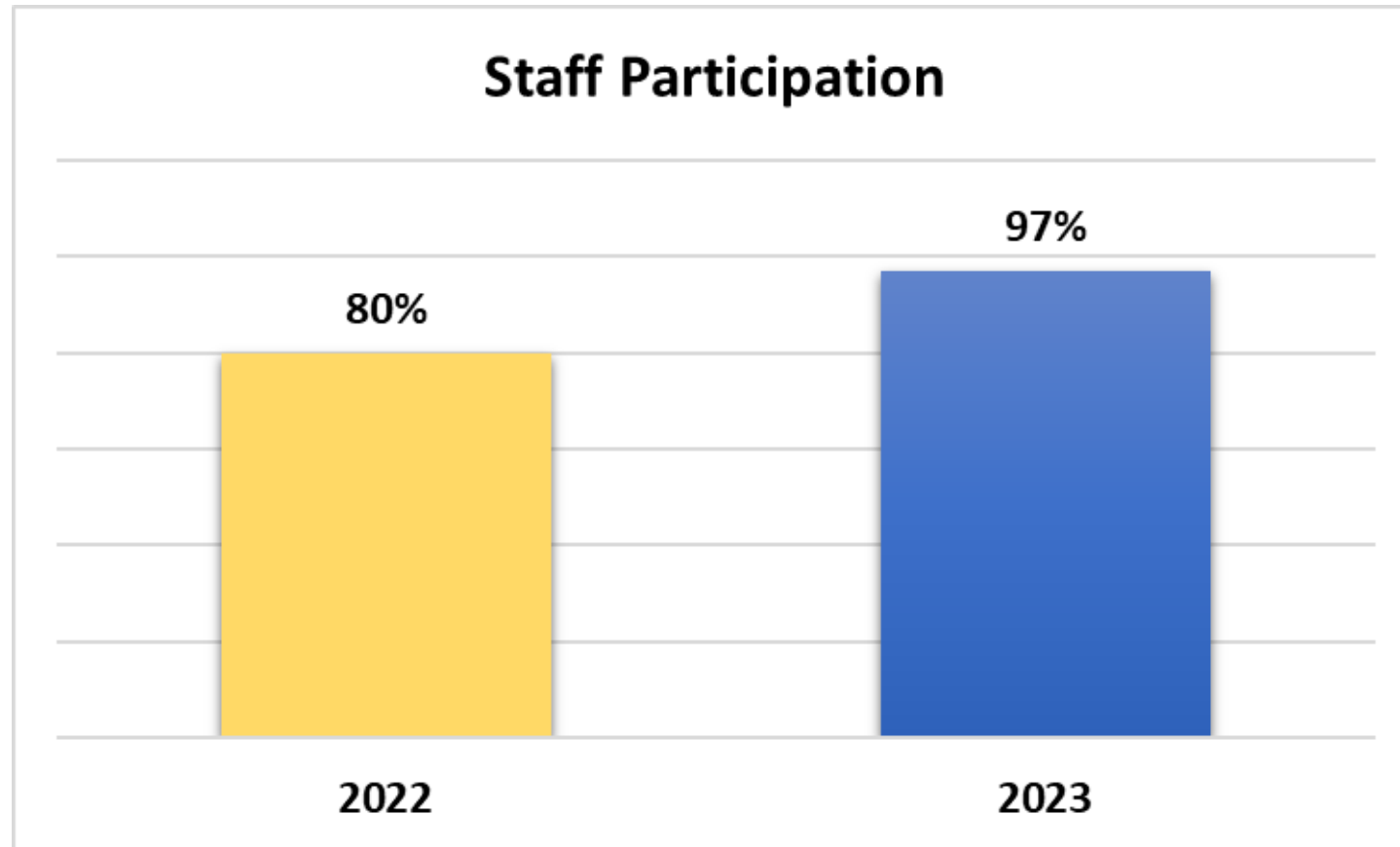
Staff Satisfaction

The Leading Edge Employee Experience Survey is intended to help individual organizations understand and improve how their employees experience work. The survey helps Jewish nonprofit leaders and managers identify organizational strengths as well as growth areas that can be addressed to improve workplace culture.

- tool that solicits honest and confidential input
- learn about issues, trends, and insights
- identifying organizational strengths
- identify growth areas that can be addressed to improve workplace culture

Overview of results for this year's survey were shared at the Oct. All-Staff Meeting

JFS Response Rate



33/34 eligible employees
completed the survey
this year!

Strengths

The overall responses were really positive this year.

Out of the questions asked on both last year's and this year's survey, the positive responses (agree or strongly disagree) increased on **97%** of the questions.

Leading Edge identified three notable responses to highlight:

"My organization provides high-quality programs and services to our constituents"

"I have colleagues who I can turn to for support"

"I generally enjoy my job."

Areas for Growth

There are always areas for improvement, even with overall positive results. We discussed with the staff the following areas for growth that Management identified. For many of these areas, the results were still mostly positive, but we want to continue prioritizing them for staff.

- Accountability
- Psychological Safety
- Professional Development Opportunities
- Resources needed to do work
- Salary and benefits

Each area was discussed in detail with staff and management provided our next steps in addressing these areas for growth.



Next PQI: January 2024