



Youth Advocate Programs, Inc. & YAP Adult Services

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2016 – 2018 Performance and Quality Improvement Plan

YAP's PQI Philosophy

For forty years, Youth Advocate Programs, Inc. (YAP), a private, not for profit 501(c)(3) organization, has partnered with public agencies to provide safe, economical and effective community-based alternatives to compulsory placement for troubled youth. YAP was founded in 1975 and has always been headquartered in Harrisburg, PA. Today, YAP operates more than 100 programs serving over 12,000 youth and their families per year in 20 states. In addition, YAP has assisted in the development of sister programs in Australia, Sweden and Ireland, and provided support to like-minded youth agencies in Hawaii, Scotland, Guatemala and Sierra Leone. YAP is also working on funded projects with France and Argentina and has provided training in Spain, Morocco and Portugal. We continue collaboration with other European countries on how to bring our wraparound/advocacy model into their countries and improve best practices with youth.

Our mission is to provide individuals who are, have been, or may be subject to compulsory care with the opportunity to develop, contribute and be valued as assets so that communities have safe, proven effective and economical alternatives to institutional placement.

Our approach stems from the premise that even the most troubled individuals and families have strengths and capabilities that can and must be developed for both their own and our society's well-being.

Guiding the development of these strengths are YAP's Core Principles:

- Individualized service planning
- Cultural competence
- Partnership with parents
- Focus on strengths
- No reject, no eject policy
- Family empowerment
- Teamwork
- Community-based care
- Unconditional care
- Corporate and clinical integrity
- Giving back

YAP believes that by embracing the mission and living the core principles our programs will achieve positive outcomes for their youth and families. This ***Performance and Quality Improvement Plan***, and the activities it spawns provide guidance and a system of measurement to support our program directors in these efforts.

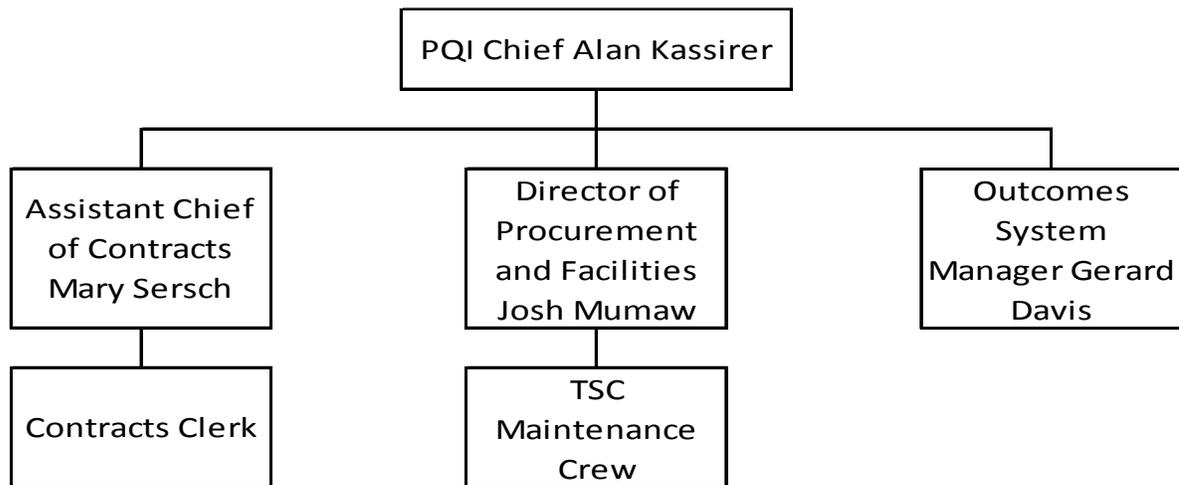
PQI Structure

Any true commitment to continuous quality improvement must begin at the top of the organization. YAP Chief Executive Officer (CEO) Jeff Fleischer has regularly shown his commitment to the process not just in his words but in his actions. Shortly after becoming CEO in 2003, Mr. Fleischer created what was then called the Quality Assurance department. The department was charged with answering the questions: Are we doing what we say we're doing and how well are we doing it? These two questions have spawned many new or upgraded activities.

YAP employs a hybrid PQI structure where some activities are centrally coordinated and others are managed at the regional and local levels. National PQI activities are led by Chief of Performance and Quality Improvement Alan Kassirer who has oversight responsibility for The Support Center's PQI team. The team's main responsibilities include:

- a. Maintaining and upgrading YAP's Outcomes Measurement System (OMS)
- b. Reporting our outcomes to internal and external stakeholders
- c. Managing all of YAP's contracts including those where YAP is contracted to provide service and those where YAP contracts with others to provide direct and ancillary services
- d. Managing YAP's leases to ensure that rented spaces meet our programs' needs, that terms and conditions minimize financial risk and ensure that renewals are handled within prescribed timelines
- e. Ensuring the accessibility and safety of YAP owned buildings and communicating with building owners to ensure that leased facilities are also safe and accessible
- f. Providing financial and service data to agency leaders that include indicators of future success and possible future challenges
- g. Managing YAP's procurement
- h. Maintaining YAP's COA accreditation

YAP PQI Team Organization Chart as of September, 2016



Managing integrity compliance is another key aspect of YAP's PQI process and structure. The Integrity Compliance Committee is chaired by Michele Gutshall, YAP's Compliance Officer. Committee members include YAP's Legal Counsel, CFO, Chief Information Officer, PQI Chief, Chief of Program Services, Human Resources Chief, Director of Behavioral Health Programs, Director of Monitoring and Audit and representatives from all YAP regions.

The Committee meets quarterly and review critical incidents, HIPAA compliance, client rights and the Agency's Integrity Compliance Plan. In addition, the Committee develops agency policies and procedures surrounding integrity compliance. Finally, a subset of the Committee reviews all special incident reports.

Recently some functions that had been housed in PQI have been transferred to integrity compliance in order to provide more seamless monitoring. Those functions include:

- a. Contacting families on a monthly basis to measure customer satisfaction and verify the integrity of the work being reported by direct service staff
- b. Auditing each of our advocate programs on a bi-annual basis
- c. Credentialing staff outside of PA, OH and MD
- d. Coordinating YAP's records management

YAP forms ad hoc committees as needed to study and solve a variety of quality related issues. In 2015, an ad hoc committee consisting of the PQI chief and several direct service leaders and practitioners developed a set of outcomes for individuals with developmental disabilities and those on the autism spectrum.

In March, 2016, YAP held strategic marketing and regional leadership meetings that led to the formation of a new committee that will study recruitment and retention of direct service staff. This

committee is co-chaired by YAP's HR Chief and Director of Staff Development and Training. The committee has recommended several enhancements to our recruitment and retention procedures. They are in the process of being implemented at this writing.

Upon purchase and installation of Social Solution's ETO software in 2016, the PQI chief will convene ad hoc committees to develop new outcomes measurements (or implement standardized ones) in six of YAP's service areas.

At least one YAP region has a standing Quality Improvement Committee that meets at least bimonthly to review performance and outcomes data. The Committee is chaired by New Jersey's Director of Quality Improvement and membership includes the VP of New Jersey Programs, YAP's PQI chief, Regional Directors, Program Directors, Assistant Directors and Administrative Managers from programs located throughout the State.

YAP's National Leadership and Regional Leadership teams meet periodically to review outcomes and financial data provided by the Fiscal and PQI Departments. CEO Jeff Fleischer reports outcomes and financial information to the Board of Directors on a regular basis.

Stakeholders

Stakeholders come from both inside and outside the Agency. YAP's Board of Directors, Executive Team, National Leadership Team, Regional Leadership Team and employees at all levels make up the internal stakeholders. Outside stakeholders include those receiving our service, those funding our programs, partner and like-minded organizations, our research partners, informal community leaders (i.e. the faith community, teachers, etc.), appropriate foundations and political leaders in the locations we serve.

The section on PQI structure illustrates how employees at all levels are included in the PQI process. Involving external stakeholders has been more challenging but progress is being made:

1. Clients, parents, teachers, informal supports (i. e. teachers, coaches, faith leaders, etc.) and representatives of funding sources such as probation officers are often involved in Child Family Teams which develop and implement Individualized Service Plans for our young people.
2. Outside research is an increasingly important facet of YAP's quality improvement effort. Among our research partners who have or will report on YAP's outcomes are the University of Texas San Antonio, the John Jay College of Criminal Justice, Advanced Analytics Company, the Crime Lab at the University of Chicago, Chapin Hall (also part of the University of Chicago), Impact Justice and the American Institutes of Research. Representatives of these organizations lead the process of developing research plans, work with YAP staff to determine the best locations for research and report the impact of YAP services on those clients involved.
3. YAP's Policy and Advocacy Center has also integrated external stakeholders into our mission to deinstitutionalize young people with the family and community support they need. An Advisory Board of experts in deinstitutionalization and policy work is comprised of a combination of select YAP Board members and former social services administrators, lobbyists and advocates currently working on issues in line with YAP's mission. Our National Policy Director also works

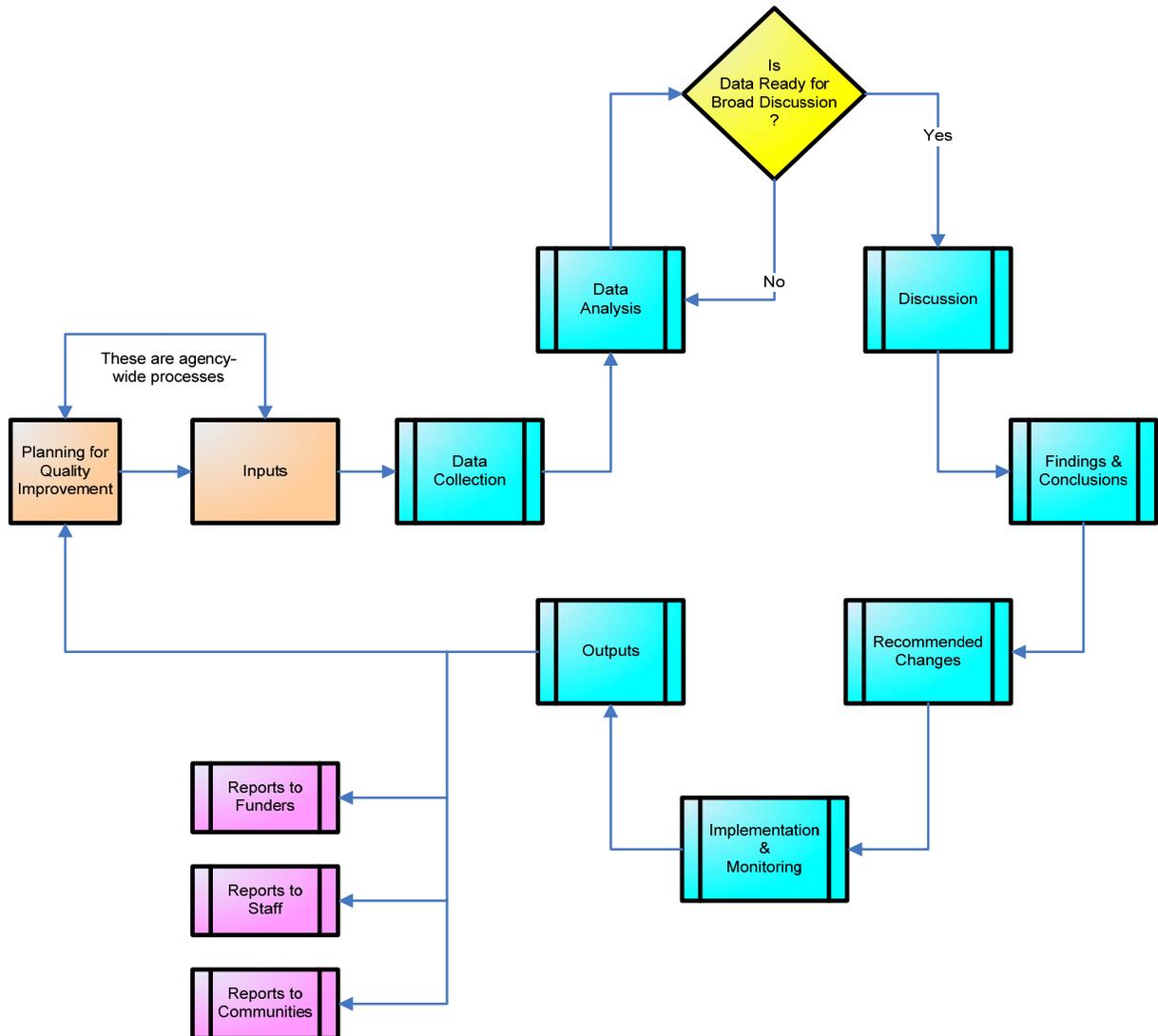
with Advisory Board members and other advocates to draft and release publications, blogs and work with media to highlight YAP's positive outcomes with young people and family with complex needs.

4. Additionally, YAP has launched the Safely Home Campaign, a nationwide, inclusive movement to safely care for all youth and young adults in their home communities and with their families by reducing and preventing unnecessary out-of-home placements and creating safer, more supportive communities for at-risk young people. The Campaign is focused on young people 0-25, including young people with the most complex needs, advocates for redirection of funds from institutions to communities and families and relies on collaboration with advocates who support strengthening families and improving youth outcomes and public safety. To date, we have over 20 external, national partners who have joined YAP in supporting the Campaign, and are working to recruit others.
5. Many of YAP's contracts have outcomes requirements built in. Some of these interim and longitudinal indicators have been worked into YAP's outcomes measurements and others are reported through reports directly to those funding sources. With the recent increase in Social Impact Bond funding, it's becoming common for government officials, foundation representatives and YAP personnel work to work together to develop the outcomes indicators and goals.
6. YAP is in the process of revamping its outcomes system with the licensing of ETO software. This gives us the opportunity to include more stakeholders in the outcomes process. Several of our research partners are involved in identifying outcomes to be measured and the wording of questions. In addition, as we develop specific outcomes for individual programs, our plan is to include information from our contracts and from our referring authorities in the outcomes surveys.

Additional work needs to be done to recruit outside stakeholder participation in some of the committees and workgroups outlined above. These efforts are ongoing.

The Quality Improvement Cycle

YAP's performance & quality improvement efforts are based on the Quality Improvement Cycle. Requests for quality measurements and recommendations may come from anywhere in the Agency or from external stakeholders. Normally the requests are filtered through the National Leadership Team or the Regional Leadership Team to the proper committee or workgroup for analysis and action. The committee or workgroup will then follow the process shown below to gather and analyze data, recommend changes, if needed, based on the data, measure the results of the changes and report results of the process.



Thanks to the Council on Accreditation for their [Steps in the Improvement Cycle](#) drawing that was used to create this diagram.

PQI Activities

Outcomes Measurement and Reporting

YAP is committed to measuring both interim and longitudinal client outcomes. The Agency's original outcomes measurement system was implemented in 2004 and measured change from entry to discharge on over 10,000 clients per year. In 2008 the outcomes system was upgraded to include additional questions that improved our ability to measure our families' success and the quality of the service we provide.

In 2010, YAP expanded its outcomes measurement system to include surveying families at three, six and 12 months post discharge. While the program has allowed YAP to learn much about the impact of our services, we are continuing to explore ways of reaching a larger percentage of our families one year after discharge.

In 2014, the John Jay College of Criminal Justice published a series of four issue briefs that were based on data from YAP's internal outcomes system. These briefs covered the areas of keeping young people out of secure facilities and in the community, finding and securing employment, arrest and the intensity and flexibility of our service. All four issue briefs showed positive outcomes for young people served by YAP's programs. YAP's outcomes are also available on our website (www.yapinc.org) and in 2016 will be included in YAP's Annual Report.

In 2016 YAP licensed ETO (Efforts to Outcomes) software from Social Solutions, Inc. to house its next generation of outcomes measurement. ETO will allow us to be more flexible in the outcomes we measure. The current system stands alone and is hard coded with only one questionnaire. The next generation will allow for multiple questionnaires for different populations and different geographical locations. YAP's information technology (IT) and PQI teams are currently working with Social Solutions' programmers to develop YAP's version of ETO. The first wave of ETO implementation will take place in January, 2017 and implementation will continue throughout 2017 and be an ongoing process.

In 2012, YAP's Pennsylvania leadership contracted with the University of Maryland's Division of Services Research which was later spun off into Advanced Metrics Company to implement the Child and Adolescent Needs and Strengths (CANS) in our PA-OH-MD programs. This implementation of outcome data collection yielded four issue briefs that showed a decrease in our clients' juvenile justice concerns, improvement in their Life Functioning, a decrease in Risk Behaviors and improvement in Strengths for youth referred for truancy issues. Expansion of YAP's use of the CANS in our Delaware and Indiana programs is planned for 2016 and additional use of the CANS is under consideration. CANS will be delivered to YAP as part of the ETO implementation.

Current Measures and Outcomes

What is Being Measured?	Why is it Being Measured?	Indicators & Data Sources	How Frequently?	Who is Responsible?	Tool/How Will Data be Collected	How will Data be Aggregated & Reports Generated?	Who Reviews & Interprets Results? When?	Who Makes Recommendations to Whom? When?	Who will Implement & Oversee Recommended Changes
Change in participant living situation from entry to discharge & beyond	The cornerstone of YAP's mission is to keep participants from congregate care placements and shorten placements when congregare care is ordered.	<p>Goal 1: At least 85% of participants to live in community settings at discharge and post discharge.</p> <p>Goal 2: More participants reside in community settings at discharge and post discharge than at entry.</p> <p>Goal 3: Year to year increase in percentage of participants residing in community settings at discharge.</p>	Entry, discharge, 6 months post discharge & 12 months post discharge	Regional and local leaders and staff members	<p>YAP's entry, discharge and post discharge forms.</p> <p>These are being updated at this time for implementation in ETO in 2017.</p>	<p>Reports from YAP's proprietary outcomes system done by PQI.</p> <p>With the implementation of ETO, dashboards will be available on demand and PQI will continue generating periodic reports.</p>	<p>The PQI Chief reviews all reports and then sends the reports, along with interpretation to national, state, regional and local leaders.</p> <p>The CEO and PQI Chief report the information to the Board of Directors.</p>	<p>The PQI chief makes recommendations to national, state and regional leaders who then pass along recommendations, along with their own, to local leaders.</p>	Local program directors are responsible for implementing changes as instructed by their state and regional leaders.

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Recidivism while enrolled and beyond	YAP works with thousands of legal system involved participants each year. Reducing recidivism is a main goal for many funding sources and is also a key factor in keeping participants from congregate care placements.	<p>Goal 1: Fewer than 10% of participants are arrested while enrolled.</p> <p>Goal 2: Year to year decrease in the percentage of participants arrested</p> <p>Goal 3: Fewer than 10% of participants are adjudicated on preexisting or new felony charges while enrolled.</p> <p>Goal 4: Fewer than 15% of participants are adjudicated on preexisting or new misdemeanor charges while enrolled.</p>	Entry, discharge, 6 months post discharge & 12 months post discharge	Regional and local leaders and staff members	<p>YAP's entry, discharge and post discharge forms.</p> <p>These are being updated at this time for implementation in ETO in 2017.</p>	<p>Reports from YAP's proprietary outcomes system done by PQI.</p> <p>With the implementation of ETO, dashboards will be available on demand and PQI will continue generating periodic reports.</p>	<p>The PQI Chief reviews all reports and then sends the reports, along with interpretation to national, state, regional and local leaders.</p> <p>The CEO and PQI Chief report the information to the Board of Directors.</p>	The PQI chief makes recommendations to national, state and regional leaders who then pass along recommendations, along with their own, to local leaders.	Local program directors are responsible for implementing changes as instructed by their state and regional leaders.

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School Attendance	Regular school attendance is an important part of preventing participants from being placed in congregate care environments.	Goal 1: A higher percentage of participants have graduated high school or are attending school regularly at discharge than at entry discharge. Goal 2: Year to year increase in the percentage of participants who had graduated high school or were attending school regularly at discharge.	Entry, discharge, 6 months post discharge & 12 months post discharge	Regional and local leaders and staff members	YAP's entry, discharge and post discharge forms. These are being updated at this time for implementation in ETO in 2017.	Reports from YAP's proprietary outcomes system done by PQI. With the implementation of ETO, dashboards will be available on demand and PQI will continue generating periodic reports.	The PQI Chief reviews all reports and then sends the reports, along with interpretation to national, state, regional and local leaders. The CEO and PQI Chief report the information to the Board of Directors.	The PQI chief makes recommendations to national, state and regional leaders who then pass along recommendations, along with their own, to local leaders.	Local program directors are responsible for implementing changes as instructed by their state and regional leaders.
Retained Earnings	Retained earnings allow YAP to grow and serve more participants.	Goal 1: Programs should retain at least 2% of revenue after all expenses are paid. Goal 2: Year to year increase in retained earnings.	Monthly	Regional and local leaders are responsible for meeting the goal. The CEO, CFO and PQI staff report this information.	Data is collected in YAP's Blackbaud accounting system.	The CFO reports monthly to the Executive Team and to state and regional leaders. PQI enhances the information with a quarterly dashboard that includes several financial reports.	The CEO, CFO and PQI chief review and interpret the reports and send them to national, state regional and local leaders. The CEO and CFO report the information to the Board of Directors	The CEO, CFO and PQI chief make recommendations to national, state and regional leaders who then pass along recommendations, along with their own, to local leaders.	Local program directors are responsible for implementing changes as instructed by their state and regional leaders.

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Revenue	Increasing revenue means programs can serve more participants and therefore are likely to keep more participants from being placed in congregate care	<u>Goal:</u> Year to year increase in revenue. .	Quarterly	Regional and local leaders are responsible for meeting this goal. The CEO, CFO and PQI staff report this information.	Data is collected in YAP's Blackbaud accounting system.	The CFO makes monthly reports to the Executive Team and to state and regional leaders. PQI enhances the information with a quarterly dashboard that includes several financial reports.	The CEO, CFO and PQI chief review and interpret the reports and send them to national, state regional and local leaders. The CEO and CFO report the information to the Board of Directors	The CEO, CFO and PQI chief make recommendations to national, state and regional leaders who then pass along recommendations, along with their own, to local leaders.	Local program directors are responsible for implementing changes as instructed by their state and regional leaders.
Wages and Salaries	Over 75% of YAP programs that keep wages and salaries to under 60% of revenue have retained earnings and fewer than 25% of programs that have wages and salaries over 60% of revenue have retained earnings	<u>Goal:</u> Wages and salaries should account for no more than 60% of revenue. .	Quarterly	Regional and local leaders are responsible for meeting this goal. Fiscal and PQI staff report this information.	Data is collected in YAP's Blackbaud accounting system.	The CFO makes periodic reports to the Executive Team and to state and regional leaders. PQI enhances the information with a quarterly dashboard that includes several financial reports.	The CEO, CFO and PQI chief review and interpret the reports and send them to national, state regional and local leaders. The CEO and CFO report the information to the Board of Directors	The CEO, CFO and PQI chief make recommendations to national, state and regional leaders who then pass along recommendations, along with their own, to local leaders.	Local program directors are responsible for implementing changes as instructed by their state and regional leaders.

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Write-Offs	Write-offs reflect billing errors, unbillable service and/or less than optimal communication with funding sources. They have a direct impact on retained earnings.	Goal 1: Write-offs should not exceed one percent of revenue. Goal 2: Year to year decrease in write-offs.	Quarterly	Regional and local leaders are responsible for meeting this goal. Fiscal and PQI staff report this information.	Data is collected in YAP's Blackbaud accounting system.	The CFO makes periodic reports to the Executive Team and to state and regional leaders. PQI enhances the information with a quarterly dashboard that includes several financial reports.	The CFO, fiscal staff, billing staff, state, regional and local leaders review and interpret the results.	The CEO, CFO, fiscal staff, billing staff and state, regional and local leaders work together to recommend changes.	The team of fiscal staff, billing staff, national, state, regional and local leaders are responsible for implementing changes to reduce write-offs.
Service Provision	The amount of service provided directly impacts outcomes and retained earnings. Increases in revenue per hour of service also positively impact retained earnings.	Goal 1: Year to year increase in hours of service provided Goal 2: Year to year increase in revenue per hour of service.	Quarterly	Regional and local leaders are responsible for meeting the goal. Fiscal and PQI staff report this information.	Hours of service are collected in YAP's job cost and electronic health record software programs and revenue per hour is calculated as revenue/hours of service.	The CFO makes periodic reports to the Executive Team and to state and regional leaders. PQI enhances the information with a quarterly dashboard that includes several financial reports.	The CFO, fiscal staff, billing staff, state, regional and local leaders review and interpret the results.	The CEO, CFO and PQI chief make recommendations to national, state and regional leaders who then pass along recommendations, along with their own, to local leaders.	Local program directors are responsible for implementing changes as instructed by their state and regional leaders.

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Participant and Family Satisfaction	Participant and family satisfaction is an indicator of the quality of our service. It also allows us to verify that service was provided as stated.	Goal: At least 95% of participants and families report that they are satisfied with YAP's service	Monthly	Monitoring and auditing staff members. Monitoring and Auditing is part of YAP's integrity compliance team.	Telephone monitors located outside of YAP's offices attempt to call each family once a month to get satisfaction feedback. When monitors can't reach families, return postage paid letters are sent that ask the same set of questions.	Data is aggregated in YAP's proprietary system and reports are generated by Monitoring and auditing staff members.	The director of monitoring and auditing and the integrity compliance officer interpret the data and report it to national, state, regional and local leaders..	The CEO, and monitoring and audit director make recommendations to national, state and regional leaders who then pass along recommendations, along with their own, to local leaders.	Local program directors are responsible for implementing changes as instructed by their state and regional leaders.

Notes

1. YAP acknowledges that arrest and adjudication alone are not complete measures of recidivism. In an effort to improve the quality of our outcomes measurements, YAP has licensed ETO software from Social Solutions for implementation in 2017. Among the many enhancements will be a decision tree developed by the PQI chief and several members of the regional leadership team that will better measure recidivism. Once implemented, the new measurements will be benchmarked and new goals implemented. YAP hopes to have new goals in place by the beginning of 2018.
2. The implementation of ETO will also allow YAP to develop and benchmark impact goals for the year after discharge. The agency is also revising our procedures on post discharge contact to increase the percentage of participants reached and thereby increase the reliability of the data.
3. Hours of service provided is not a reliable measurement of service provision in all YAP programs. Some contracts are billed on a cost-reimbursement basis and others are billed on a per diem basis. These billing types don't lend themselves to easy measurement of hours. YAP's leadership teams discuss this regularly and hope that our new electronic health record and billing system will provide us with ideas on how to better measure service provision in these contracts.
4. Percentage of service (hours provided/hours prescribed) has been temporarily discontinued as a goal because of the above mentioned issue and because YAP is still working to develop reports that measure this in the new system.

Measurements to be Benchmarked and Implemented during the Term of this Plan

- Additional outcomes for all clients – implementation 2017
- Specific outcomes for juvenile justice clients – implementation t/b/d
- Specific outcomes for child welfare clients – implementation t/b/d
- Specific outcomes for ASD/DD clients – implementation 2017
- Specific outcomes for CSEC clients – implementation t/b/d
- Specific outcomes for YAPWORX clients – implementation t/b/d
- Specific outcomes for clients with Drug & Alcohol use issues – implementation t/b/d
- Specific outcomes for school based YAP programs – implementation t/b/d
- Child and Adolescence Needs Assessment (CANS) in selected locations – implementation 2017
- Others to be determined

Reporting

The cornerstone of the reporting process will be an annual report summarizing all the quality improvement activities taking place throughout the agency. This report will be made available to the board of directors, senior management, regional and local leadership, youth and families served and external stakeholders such as funding sources, advisory boards and government entities. It will also be available to the general public via www.yapinc.org. In addition to the annual report, YAP will prepare and distribute ad hoc reports on specific performance and quality improvement topics throughout the year. These reports may be used for internal purposes only or they may be released to the public.

Review of the Process

On an annual basis, the PQI team will review its work from the previous year and determine what re-work needs to be done on the process. This work may include adding and changing measurements, adding and changing benchmarks, assessing the team's strengths and weaknesses and identifying those barriers that stand in the way of the team doing its best possible work for YAP. In order to do this in the best possible way, the team will reach out to the following groups of individuals for feedback:

- Stakeholders including Referring Authorities, clients & families and our Advisory Boards
- YAP's Board of Directors
- YAP's Executive, National Leadership and Regional Leadership teams.
- YAP's business center workgroup