Arizona Administrative Code, R9-10-1004 (2) and the accreditation standards outlined by the Council on Accreditation requires a documented report be submitted to the board that includes information about concerns regarding the delivery of services, the results of compliance and quality improvement audits, performance improvement activities and successes to assist us in our commitment to quality improvement. Also, a review of the efficacy of the agency's compliance and quality improvement program is required in determining if any changes or improvements need to be made to the agency's compliance, performance and quality improvement processes. Information from our behavioral health and child welfare programs and services is provided.

This annual report is aligned with AzCA's fiscal calendar and provides the requisite information from October 1, 2020 – September 30, 2021.

Behavioral Health Programs

Quality of Care Concerns, Complaints, & Grievance issues appear to cross multiple sites, and seem to be related to case management staffing. The primary issues appear to be (1) not responding to the health plan's requests for post-hospital discharge plan in a timely manner; (2) youth turning 18 without services in place/TAY planning occurring; and most frequent (3) clients who do not have assigned case managers (or who are transitioned to a new case manager but not receiving follow-up) leading to disruptions in their current services or referrals.
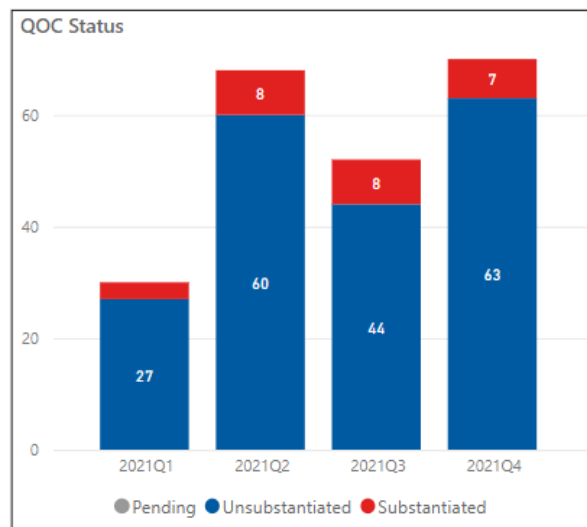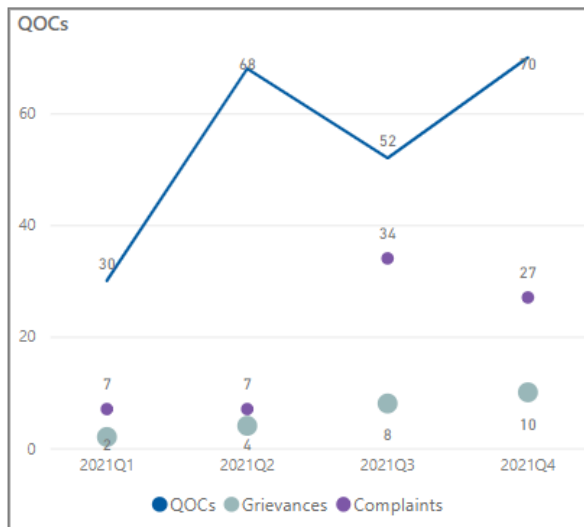
Site	# of Complaints	# of Grievances	# of QOCs
Apache Junction	3	5	24
Buckeye	3	0	4
Casa Grande	0	2	6
Chandler	15	3	27
Florence	1	1	4

AzCA – FY21
Performance & Quality Improvement Annual Report

Site	# of Complaints	# of Grievances	# of QOCs
Gilbert	0	0	0
Lake Havasu	0	0	0
Maryvale	9	1	22
Phoenix	12	8	16
Nogales	0	0	1
Sierra Vista	7	0	10
Surprise	9	2	26
Tucson	8	0	37
Yuma	1	0	13

External Audits (BH)

United Healthcare completed an audit on March 26, 2021. A total of 11 member records were reviewed in their entirety, ranging in age from 6 to 16. AzCA received high marks in the following areas: medical necessity. The following areas were not audited due to previously receiving a passing score: coordination of care, initial treatment plan, discharge planning and progress notes. Areas of concern, which necessitated a Performance Improvement Plan, include:

- Comprehensive assessment – ensuring the diagnosis is supported by the assessment, assessment is comprehensive and appropriate services are recommended based on the assessment of functional impairment/skills.
- Psychiatric evaluation – ensuring the diagnosis is supported by the psychiatric evaluation and evaluation is comprehensive.
- Treatment plan – ensuring services provided match treatment plan, treatment plan is modified based on progress or lack of progress and progress towards goals is adequately documented.

Performance Improvement Plans (PIP's)
The following Performance Improvement Plans (PIP's) were developed with a focus on all opportunities for improvement of BH programs in FY21:

- Improve training and staff knowledge to ensure quality services are provided to clients and reflected in chart documentation.
- Maintain chart compliance of externally referred specialty clients by completing internal assessment and service planning.
- Increase compliance for annual psychiatric evaluations by identifying clients not seen in over a year and clients needing an evaluation by greatest risk.
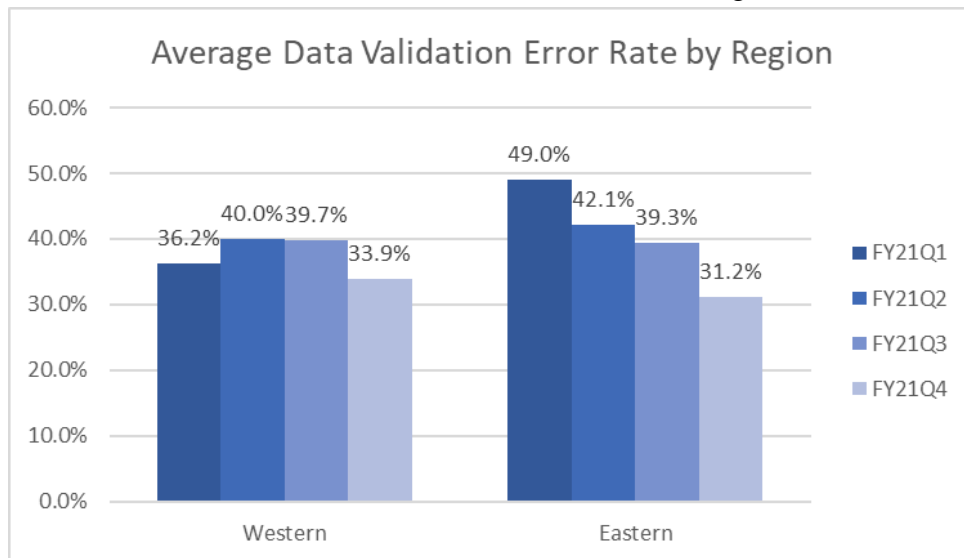
- Coordination with hospital discharge teams and improve current processes for discharge planning.
- Improve Assessment/Individualized Service Plan compliance, closures of inactive clients, and staff responsiveness to improve overall site compliance.
- CMDP collaboration protocol and documentation that demonstrates use of the 12 principles confirming that teams are working collaboratively with families.
- OOH process and packet completion to ensure process is followed and packet documentation is unique to the client.
- Increase staff accountability to completion of meaningful service outreach with families.
- Improve training and staff knowledge regarding using the translation code.
- Improve the Data Validation error rate and reduce the number of corrections staff receive.
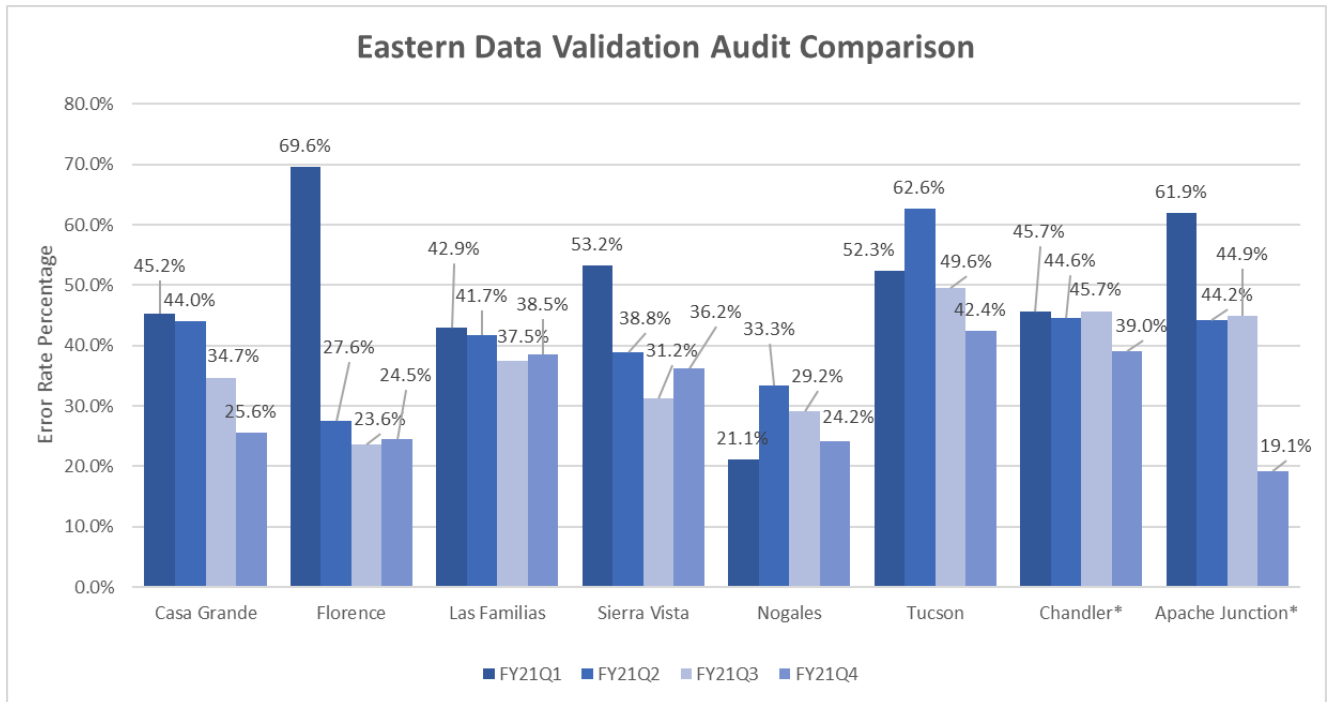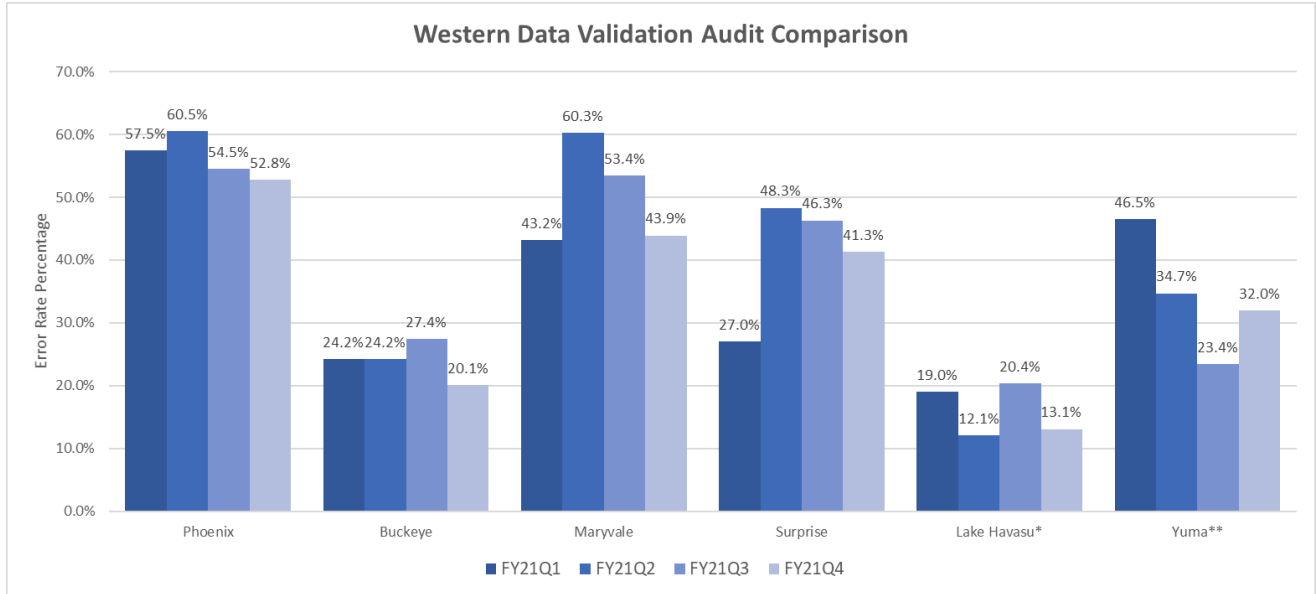
Data Validation

The Data Validation Team hired a second Data Validation Specialist at the end of the calendar year 2020, this effectively doubled the number of notes that were audited in the last three quarters of FY21. There were just over 12,000 encounters reviewed for the fiscal year. Data Validation Audits are instrumental in targeting systemic billing issues. Audit results and recommendation are reviewed with the Chief Behavioral Health Officer, Regional Directors, and Site Administrators on a quarterly basis. In addition, individual support and education is provided to staff (as needed) as they make corrections to documentation and billing errors.

Internal Data Validation Audits showed the following error rates for FY21:

Average Data Validation Error Rate by Region

Region	FY21Q1	FY21Q2	FY21Q3	FY21Q4
Western	36.2%	40.0%	39.7%	33.9%
Eastern	49.0%	42.1%	39.3%	31.2%

Western Data Validation Audit Comparison

Error Rate Percentage

Site	FY21Q1	FY21Q2	FY21Q3	FY21Q4
Phoenix	57.5%	60.5%	54.5%	52.8%
Buckeye	24.2%	24.2%	27.4%	20.1%
Maryvale	43.2%	60.3%	53.4%	43.9%
Surprise	27.0%	48.3%	46.3%	41.3%
Lake Havasu*	19.0%	12.1%	20.4%	13.1%
Yuma**	46.5%	34.7%	23.4%	32.0%

Eastern Data Validation Audit Comparison

Error Rate Percentage

Site	FY21Q1	FY21Q2	FY21Q3	FY21Q4
Casa Grande	45.2%	44.0%	34.7%	25.6%
Florence	69.6%	27.6%	23.6%	24.5%
Las Familias	42.9%	41.7%	37.5%	38.5%
Sierra Vista	53.2%	38.8%	31.2%	36.2%
Nogales	21.1%	33.3%	29.2%	24.2%
Tucson	52.3%	62.6%	49.6%	42.4%
Chandler*	45.7%	44.6%	45.7%	39.0%
Apache Junction*	61.9%	44.2%	44.9%	19.1%

Data Validation – Year in Review

In most cases, the error rate per site was significantly higher than the standard of 10% or less. However, the error rate did decrease throughout the fiscal year 9.3% overall for the agency (Eastern and Western combined).

Key activities and initiatives from the last year:

- As previously mentioned, by hiring a second Data Validation Specialist, the team was able to focus on providing consistent monthly auditing for every site statewide. In additional the Data Validation Team was able to increase the number of notes being reviewed significantly.
- The Data Validation Team increased the Data Mining Program. The Data Mining Program is the agency's process for adding a Program Integrity focus to the Quality and Compliance aspects of billing and documentation. This allows the team to focus on the specific concerns at hand and work to prevent any post-billing issues. Currently this includes monthly review of the following reports: duplicate charges, client transportation charge errors, word count analysis, no billing with charges submitted, social determinants of health being billed as primary, physical health diagnosis being billed as primary, inaccurate diagnoses based on client age, and unfinished notes.
- One of the identified focuses for FY21 was to provide quarterly data to Site Administrators on the completion of the Supervisor Audit Tool. This was successful initially as data was provided following the first two quarters. However, due to the national pandemic, staffing shortages, and high turnover, the agency has had to focus on prioritizing client care. In order to prioritize, the agency evaluated where additional time could be put back into supervisors schedules. This has resulted in the Supervisor Audit Tool being temporarily suspended.
- The Data Validation Team created a mini-training series consisting of five targeted training areas. These were created while working a performance improvement plan. Topics included case management, documentation, family support/skills training, medical necessity, and place of service. The training series has been delivered to many of the sites throughout FY21.

Focus on upcoming year:

- Data Validation Team will work to develop reporting that will focus on assessments being completed following a new diagnosis. This is one of the top clinical errors found in Data Validation Auditing.
- In coordination with the Revenue Cycle Director, the Data Mining Program will be reviewed to determine where overlap in work could be occurring between the Data Validation Team and Claims Team. In addition, we will continue to monitor for further Data Mining opportunities.
- The Data Validation Team will continue to focus on consistent auditing to provide valuable feedback to Site Administrators on a quarterly basis. The Data Validation Team will focus on creating recommendations that are useful and training resources supportive of those recommendations.

Child Welfare Programs

Permanency

The agency completes an annual licensing review for renewal of our adoption services and child placing licenses with the Arizona Department of Child Safety (DCS) Office of Licensing and Regulation (OLR). The licensing renewal process includes a review of supporting documentation, a walk-through of one of our sites (Phoenix), a review of client files and personnel files. Client file reviews are completed to determine compliance with regulatory requirements. Personnel file reviews are completed to determine if the agency meets hiring, training and other human resource related requirements. The on-site review commenced on April, 8, 2021. The review was success with one area of improvement noting that training needs to be more clearly defined. The licenses were renewed without delay.

In addition to the annual licensing review process, OLR conducts quarterly site review visits for each of the foster care program locations. These visits include a randomized review of both family and personnel files. Family file reviews are conducted to ensure compliance with Foster Care Licensing requirements, and contractual obligations by checking for general compliance items such as current fingerprint cards, current CPR/First Aid certifications, current vehicle registration and insurance, adequate contact notes, required quarterly monitoring visits, etc. Personnel file reviews are conducted to ensure the agency meets hiring, training and other human resource related requirements.
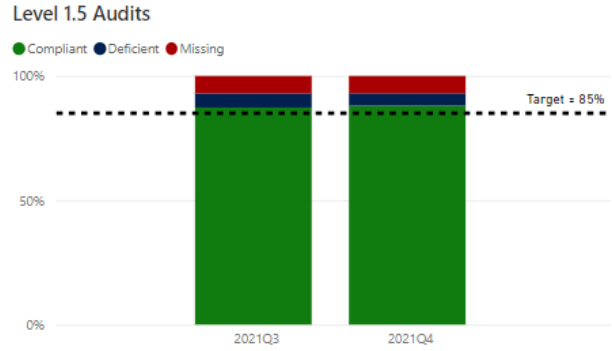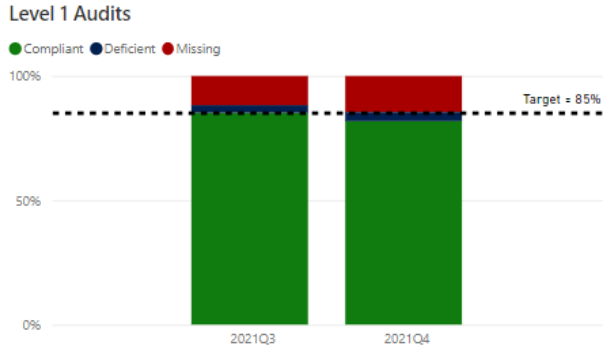
Four visits took place this fiscal year, one in each quarter: Q1: Lake Havasu and Yuma; Q2: Prescott and Sierra Vista; Q3: Gilbert; and Q4: Sierra Vista and Tucson. The reviews during quarters 1 – 3, continued to show a need for increased monitoring of expireables management. Program leadership collaborated with OLR to develop an action plan to help improve performance in this area. The review during quarter 4 was noted by the reviewer to demonstrate "marked improvement and evidence of the work being done internally" to improve the agency's management of expireables. The action plan has been permanently integrated into program operations

Young Adult Services Audits

Overall Compliance   Level 1 = 84%   Level 1.5 = 88%

Level 1 Audits

● Compliant ● Deficient ● Missing

Level 1.5 Audits
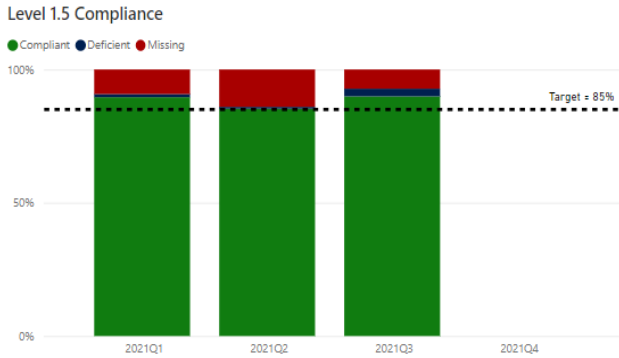
● Compliant ● Deficient ● Missing

Family Preservation

Overall Compliance   Level 1 = 85%   Level 1.5 = 88%

Level 1 Compliance

● Compliant ● Deficient ● Missing

Level 1.5 Compliance

● Compliant ● Deficient ● Missing
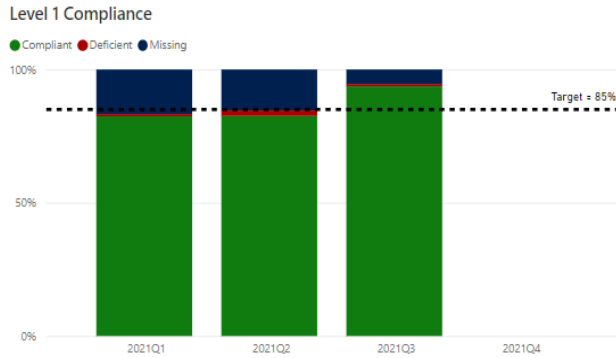
Parent Aide / Supervised Visitation

Overall Compliance   Level 1 = 64%   Level 1.5 = 75%

Level 1 Audit Results

● Compliant ● Deficient ● Missing

Level 1.5 Audit Results

● Compliant ● Deficient ● Missing
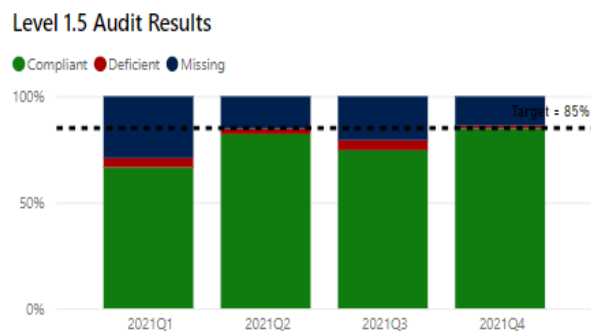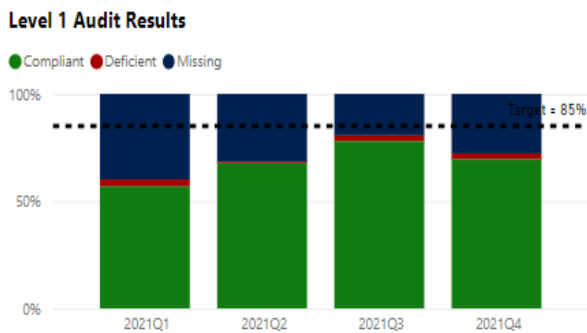
Agency-Wide CPQI Updates

The CPQI team continues to build upon the Power BI framework for program evaluation with program-specific dashboards for all programs. They are now the primary tool for data review in quarterly PQI meetings. Program dashboards typically include basic business metrics (referral / closure trends, reasons for closure, etc.), as well as metrics designed to trend compliance, client satisfaction, and functional outcomes as identified in each program's logic model. In addition to each program's dashboard, there are several other supportive dashboards referenced by many programs, such as one for Critical Incidents. This has been a collaborative effort with program and IT as we continue to respond to the programs' need for easily-accessed and understood data in order to effectively manage their programs.

Outcomes

Each program or service measures outputs and outcomes. Outcomes are the observable, measurable effects of the service we provide. Some outcomes measure a change in clinical status, while others measure a change in permanency or quality of life. Tools that measure client satisfaction, clinical and functional measures, and other relevant outcome measures have been developed and results are reviewed on a quarterly basis.

Program specific outcomes include:

- Adult Adolescent Printing Inventory (AAPI)
- Child and Adolescent Service Intensity Instrument (CASII)
- Protective Factor Survey (PFS)
- University of Idaho Survey of Parenting Practice (UISSP)
- Perception of Care Surveys
- Client Engagement
- Family Connections
- Retention - Disruption
- Successful Closure

In the next several pages is a comprehensive overview of program specific outcome details.

Functional Outcome Measures Project Report

The Ohio Scales have been tested and NextGen has been modified. CPQI, Program, and Employee Learning and Development are finalizing training documents. Training will begin in February.

The tool will measure change in Client Functioning, Problem Severity, and Hopefulness.

Client Qualitative Responses

- *Alicia Whitaker, NP Orr, Dr. Hines, and all the office staff are wonderful!*

- *My children have had some great individuals working with them, but they don't just open up to anyone. When they do, it seems like the staff keep leaving.*

- *Amazing doctors and staff! Very helpful and professional.*

- *Behavior coaching and therapy have been excellent. However, we have had many issues with case management.*

- *Dr. Ali and Nelli have always been great and helped our family immensely. They are awesome and we love them.*

- *Kudos to Kiersten Wells; she has been such a great support to us as a case manager and now a counselor! We couldn't have done this without Danielle the NP or Kiersten. They rock! Now – the agency just needs to work on keeping the case managers around. It is awful to need to keep introducing ourselves & our stories to a new person every 2-3 months.*

86%
Client Overall Satisfaction
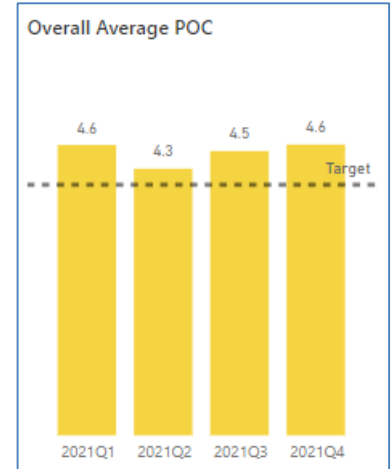
74%
Referral Source Satisfaction

Closure Reasons

Site Name	Successful	Unable to Impact	Unsuccessful
Apache Junction	36.74%	12.83%	50.43%
Buckeye	38.14%	9.97%	51.89%
Casa Grande	44.08%	13.06%	42.86%
Chandler	34.01%	15.54%	50.45%
Flagstaff MMWIA	50.00%	16.67%	33.33%
Flagstaff OP	66.67%	11.11%	22.22%
Florence	52.46%	16.39%	31.15%
Gilbert	25.00%	50.00%	25.00%
Lake Havasu City STAR	17.39%	13.04%	69.57%
Las Familias	41.10%	6.85%	52.05%
Maryvale	33.15%	11.14%	55.71%
Nogales	52.70%	5.41%	41.89%
Phoenix	33.71%	12.21%	54.07%
Sierra Vista	26.04%	13.61%	60.36%
Surprise	21.69%	10.77%	67.54%
Tucson	39.46%	14.82%	45.72%
Yuma	8.63%	42.45%	48.92%

ARIZONA'S CHILDREN ASSOCIATION

Neurosequential Model of Therapy (NMT)

CMR

Pre: 1.42
Post: 2.06
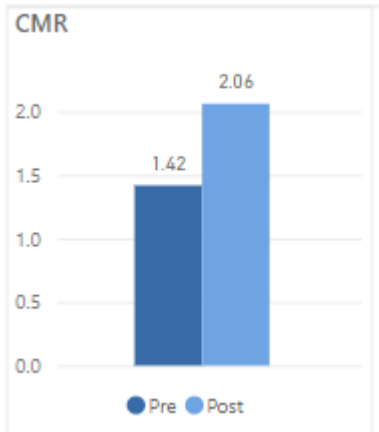
Average Wait for Services

1.54

Weeks

Overall Average POC

2021Q1	2021Q2	2021Q3	2021Q4
4.6	4.3	4.5	4.6

Target

Client Qualitative Responses

- *It is too soon to say whether my children are progressing towards their goals just yet, but I do feel well-equipped after working with Carrie.*

- *Michelle has helped our family tremendously. My daughter's behavior is improving at home and at school. This has been life-changing.*

- *The strategies I have been able to implement with my son have been very effective. It has been a great experience all around and life-changing in a MOST positive way!*

- *The assessment was really thorough and gave me different perspectives simply by going through it. I was able to follow up with Carrie a couple of times when behaviors changed, to modify or redirect certain behavior choices with new plans. I felt very supported and have highly recommended this to many other parents.*

ARIZONA'S CHILDREN ASSOCIATION

Foster and Adoption Services

Of those attending initial training in the last year:

79%
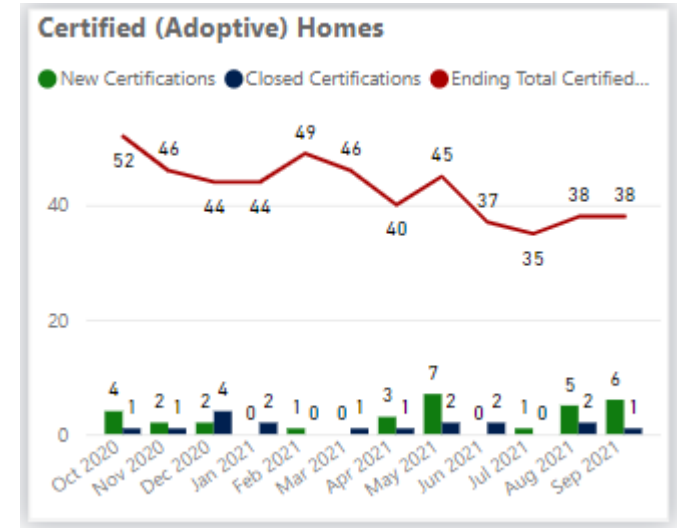Feel initial training is effective

94%
Feel able to parent effectively

100%
Overall Satisfaction with services from AzCA

Inquiries vs. Training Start

● Inquiries ● Training Starts

	2021Q1	2021Q2	2021Q3	2021Q4
Inquiries	246	377	269	216
Training Starts	54	65	18	32

Certified (Adoptive) Homes

● New Certifications ● Closed Certifications ● Ending Total Certified...

Ending Total Certified: 52, 46, 44, 44, 49, 46, 40, 45, 37, 35, 38, 38

	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021	Mar 2021	Apr 2021	May 2021	Jun 2021	Jul 2021	Aug 2021	Sep 2021
New Certifications	4	2	2	0	1	1	3	7	0	1	5	6
Closed Certifications	1	1	4	2	0	0	1	2	2	0	2	1

Client Qualitative Responses

- *We try to be flexible and accommodating with parent visits and relationships; sometimes that makes it challenging to allow our children to have full life experiences and juggle other commitments.*

- *Carmen Pekau was our first licensing worker and was absolutely phenomenal! She gave us so much support and understanding being new foster parents. We have recently been assigned to Colleen Teague who has been wonderful also. In a short time, she has shown us so much attention and been such an amazing support system for us. She takes her time explaining the process to us and making sure we are ok.*

- *The challenges we experienced is feeling like our voice as foster parents didn't matter. We are expected to advocate for these children in our care, but with no real voice. The system is set up in a way that makes foster parents feel unheard and unseen.*
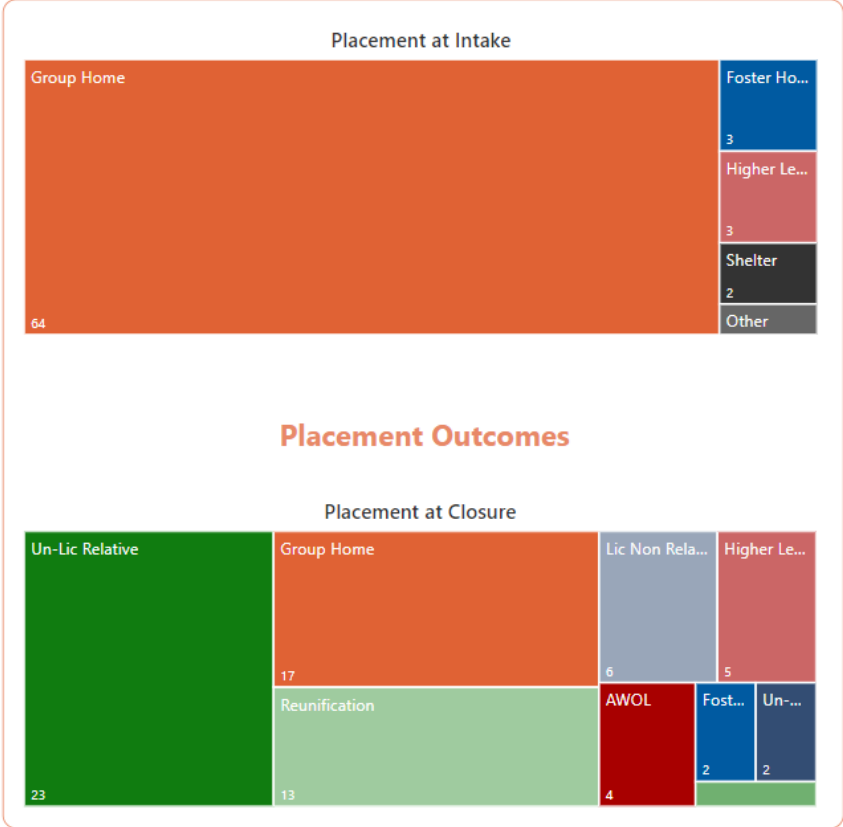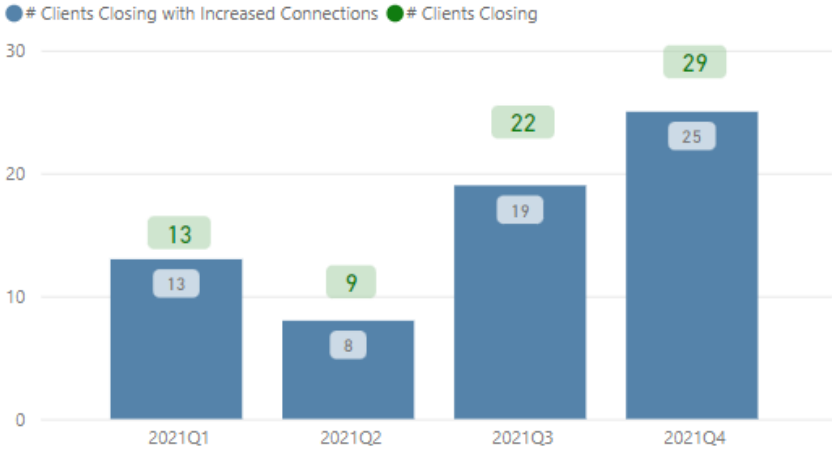
ARIZONA'S CHILDREN ASSOCIATION

Fostering Sustainable Connections

Clients Closing with Increased Connections
89%

Client Qualitative Responses

- *You guys are great and it is a great program!*
- *Leo very much enjoys working with Dylan.*
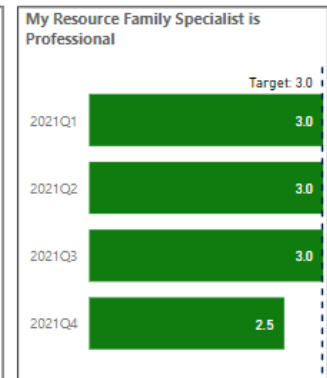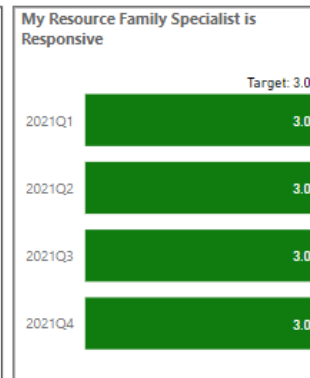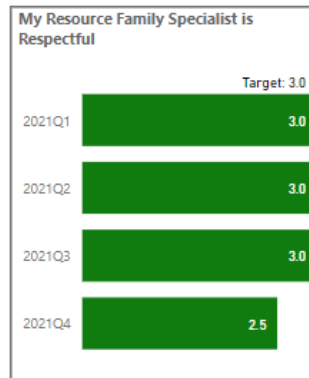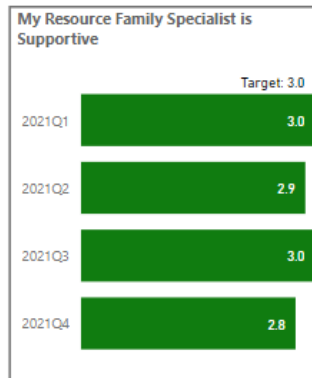- *It has been very helpful to be in this program.*
- *I love it and it is final!*

Clients Closing with Increased Connections

● # Clients Closing with Increased Connections ● # Clients Closing

Placement at Intake

Group Home	Foster Ho...
64	3
	Higher Le... 3
	Shelter 2
	Other

Placement Outcomes

Placement at Closure

Un-Lic Relative	Group Home	Lic Non Rela...	Higher Le...
23	17	6	5
	Reunification 13	AWOL 4	Fost... 2 / Un-... 2

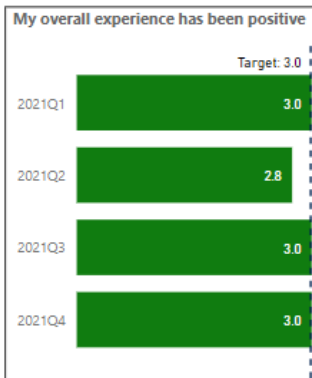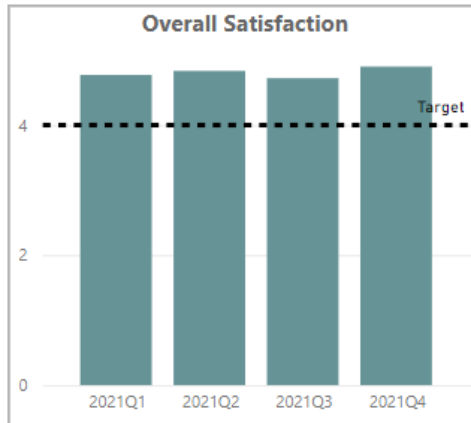ARIZONA'S CHILDREN ASSOCIATION

ICPC / HACS / KINSHIP

Client Qualitative Responses

- *I love AzCA! I have worked with two licensing workers so far and felt that both of them were extremely compassionate, knowledgeable, and helpful throughout my licensing journey. Keep up the amazing work!!!!!*

- *Lynette is absolutely wonderful! Our family has been so blessed to have her be a part of our kinship adoptive journey. She has always been there to help navigate our needs and direct us as challenges or circumstances arise.*

- *Ms. Walker was amazing. She was considerate, helpful, and really made my family feel as though we were genuinely important – not just another case file. I appreciate Judith Walker very much.*

- *Lynette made the adoption process run smoothly by always being there for my family. AzCA is a great organization to work with.*
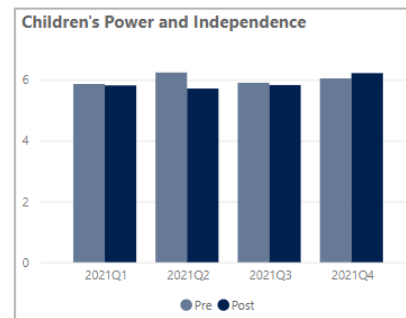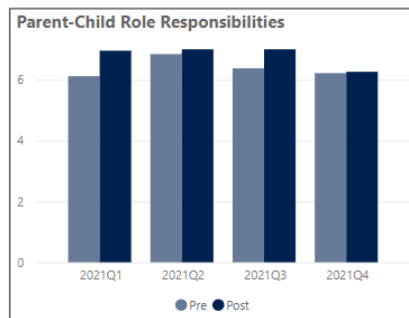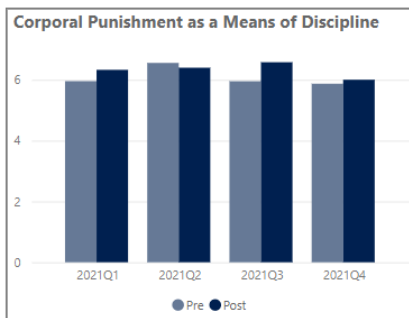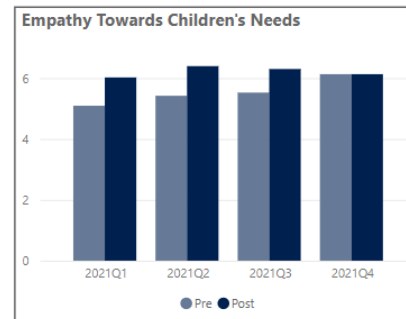
My overall experience has been positive		My Resource Family Specialist is Supportive		My Resource Family Specialist is Respectful		My Resource Family Specialist is Responsive		My Resource Family Specialist is Professional	
	Target: 3.0		Target: 3.0		Target: 3.0		Target: 3.0		Target: 3.0
2021Q1	3.0	2021Q1	3.0	2021Q1	3.0	2021Q1	3.0	2021Q1	3.0
2021Q2	2.8	2021Q2	2.9	2021Q2	3.0	2021Q2	3.0	2021Q2	3.0
2021Q3	3.0	2021Q3	3.0	2021Q3	3.0	2021Q3	3.0	2021Q3	3.0
2021Q4	3.0	2021Q4	2.8	2021Q4	2.5	2021Q4	3.0	2021Q4	2.5

ARIZONA'S CHILDREN ASSOCIATION

Family Preservation

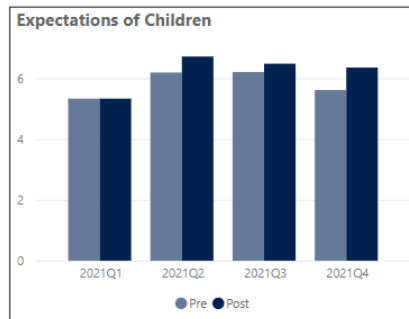**Overall Satisfaction**

Client Qualitative Responses

- *I was not happy when I was told I had to do in-home services I knew it would be time consuming. But services were supportive and enjoyable, not a burden at all. Staff were great and easy to work with. It was more beneficial than I thought it would be.*

- *Due to COVID it was good to be able to communicate by videoconference and email – that was very convenient.*

- *I feel much more adequate to help my kiddos the best way possible.*

- *I feel DCS dropped the ball on this situation, but AzCA was great talking and listening with us at our visits.*

- *Patty was so kind, empathetic and helpful. Tabatha has become a highlight for my kids. They enjoyed having weekly time to create together. She taught us all excellent breathing skills and equipped us with helpful resources.*
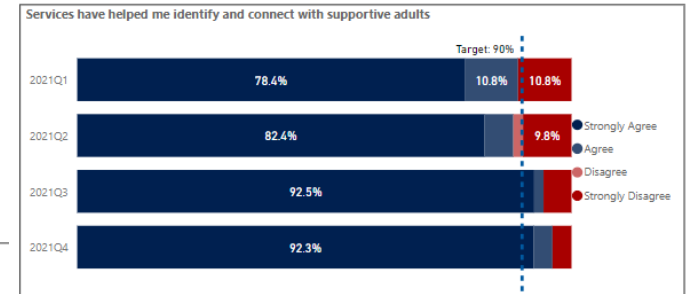
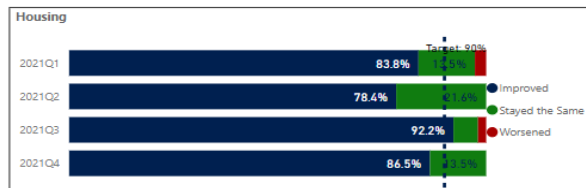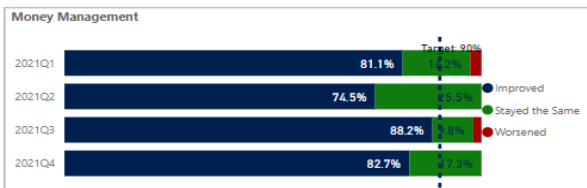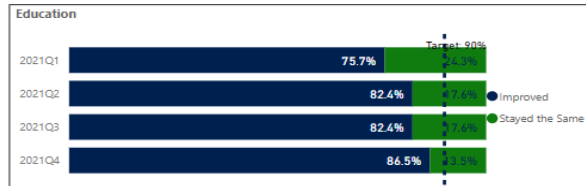**Adult Adolescent Parenting Inventory (AAPI) Statewide Data**

Expectations of Children

Empathy Towards Children's Needs

Corporal Punishment as a Means of Discipline

Parent-Child Role Responsibilities

Children's Power and Independence
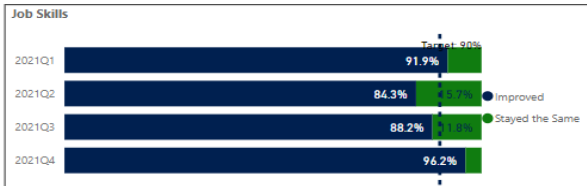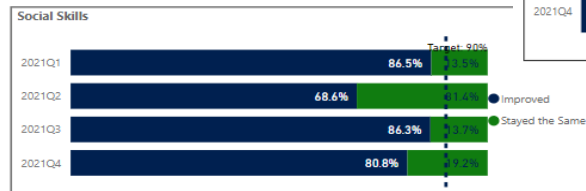
ARIZONA'S CHILDREN ASSOCIATION

Young Adult Services

Client Qualitative Responses

- *When I first started working on my skills training, I had little to no skills in health and wellness, housing, life skills or employment and career planning. I knew nothing about finances and employment now I can easily manage my finances and get a job without any difficulty.*

- *The STD part of Health and Wellness is stupid. Most youth hear about it twice a year, every year, thus you should make it optional instead of having to go through it.*

- *Jeanne has helped me so much and has supported me through my whole journey to transition back. She has been my strongest supporter and has not only helped me but my parents. I am so thankful to have been given her support.*

- *My worker always made sure I was getting the most out of the training.*

- *I learned ways to teach myself how to stay calm in different situations.*
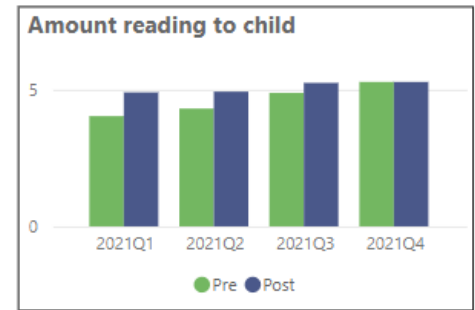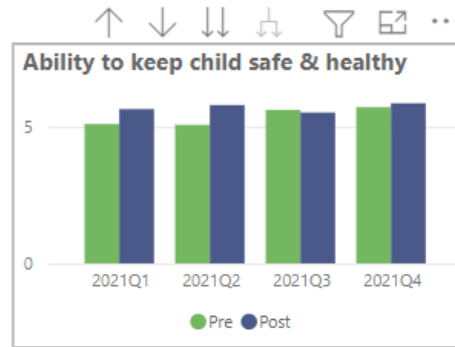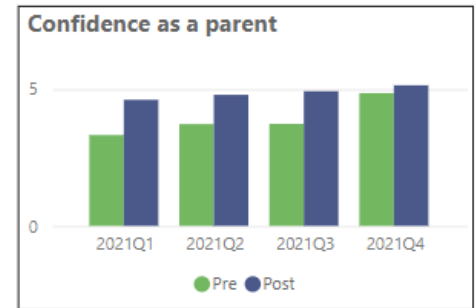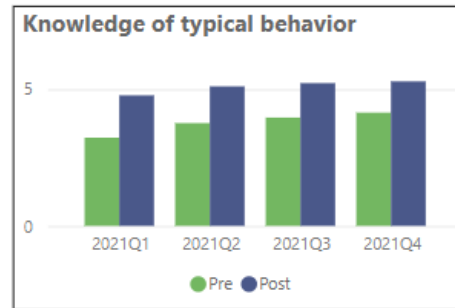
- *I got my dream job at 18 with her help!*

Services have helped me identify and connect with supportive adults

Target: 90%

2021Q1	78.4% / 10.8% / 10.8%
2021Q2	82.4% / 9.8%
2021Q3	92.5%
2021Q4	92.3%

Legend: Strongly Agree, Agree, Disagree, Strongly Disagree

Youth self report on skill acquisition:

Social Skills

Target: 90%

2021Q1	86.5% / 13.5%
2021Q2	68.6% / 31.4%
2021Q3	86.3% / 13.7%
2021Q4	80.8% / 19.2%

Legend: Improved, Stayed the Same

Job Skills

Target: 90%

2021Q1	91.9%
2021Q2	84.3% / 15.7%
2021Q3	88.2% / 11.8%
2021Q4	96.2%

Legend: Improved, Stayed the Same

Education

Target: 90%

2021Q1	75.7% / 24.3%
2021Q2	82.4% / 17.6%
2021Q3	82.4% / 17.6%
2021Q4	86.5% / 13.5%

Legend: Improved, Stayed the Same

Money Management

Target: 90%

2021Q1	81.1% / 14.2%
2021Q2	74.5% / 25.5%
2021Q3	88.2% / 7.8%
2021Q4	82.7% / 17.3%

Legend: Improved, Stayed the Same, Worsened

Housing

Target: 90%

2021Q1	83.8% / 13.5%
2021Q2	78.4% / 21.6%
2021Q3	92.2%
2021Q4	86.5% / 13.5%

Legend: Improved, Stayed the Same, Worsened

ARIZONA'S CHILDREN ASSOCIATION

Parents As Teachers
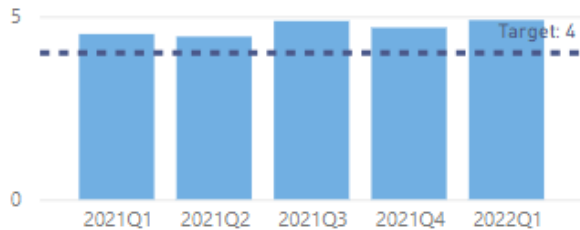
Client Qualitative Responses

- *I would like to thank the team for putting forth the effort during the pandemic. We still got to connect with families and connect as parents. I really appreciate all the hard work that my parent educator does for our family.*

- *Having a sounding board for me has been huge. Having a person versed in child development, child behavior, etc. that I can talk to, bounce thoughts off of is a huge benefit.*

- *Learning activities I can do with my kids and helping me have a better understanding of child development and what to expect while also giving me suggestions with how to deal with the unexpected.*

- *This program has helped me find resources that I need for my children and helped me build more confidence in myself as a parent.*

- *Can't wait to do in person visits again!*

Family Education

I will use at home:

- *Acknowledging my children's feelings and giving them words to describe how they are feeling.*

- *The ideas for building on our relationships with language and literacy are wonderful.*

- *Asking more questions while reading, focusing on more open-ended questions, and using fun voices to read the stories!*

Average Completion Rate by Curricula

1-2-3 Magic
79.7%

First Five Years
81.2%

Kinder Prep A
77.8%
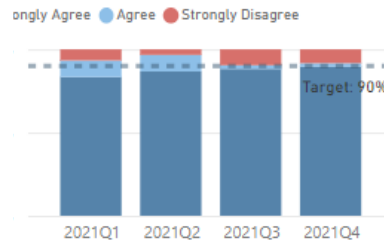
Kinder Prep B
61.4%

Raising a Reader
70.5%

STEP
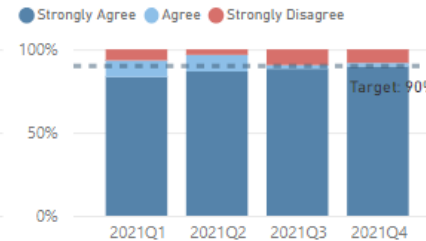80.7%

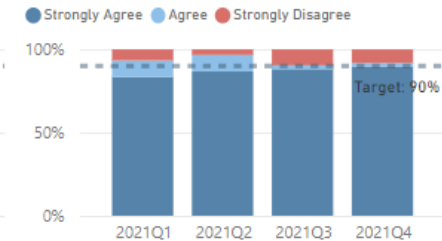**Systematic Training for Effective Parenting (STEP)**
34.4%

Wired for Success
100.0%

Practical Suggestions
Strongly Agree Agree Strongly Disagree

Target: 90%

2021Q1 2021Q2 2021Q3 2021Q4

Community Resources
Strongly Agree Agree Strongly Disagree

100%

50%

0%

Target: 90%

2021Q1 2021Q2 2021Q3 2021Q4

Would Recommend
Strongly Agree Agree Strongly Disagree

100%

50%

0%

Target: 90%

2021Q1 2021Q2 2021Q3 2021Q4

Client Qualitative Responses

- *I appreciate the virtual format of the class, but it is still a little challenging for some students to want to interact with others through a screen.*

- *My instructor was patient with me since I was not able to do the classes on certain days. She went out of her way to teach the classes on different days for me so I could catch up. She's awesome!*

- *I would like to see examples of co-parenting.*

ARIZONA'S CHILDREN ASSOCIATION