

PERFORMANCE AND QUALITY IMPROVEMENT



Masonic Home for Children
Growing Hearts, Brighter Futures

2024 Third Quarter Report

INTRODUCTION

Welcome to MHCO's Performance and Quality Improvement (PQI) process. This PQI Quarterly Report is the result of collaboration by staff from the different departments throughout the organization. The report is written for all stakeholders of MHCO including residents, resident families, staff, community members, board members, donors, and any individual interested in the organization. The PQI process provides opportunities for the agency to reflect on what is going well and where we can make changes. MHCO believes in building the competencies of the residents and staff by establishing expectations that are realistic and achievable.

Annually, MHCO establishes goals to work on in a similar way there are goals established for and with the residents during their stay with us. The goals have targets we strive to meet and plans for how to meet them. This report reflects the goals established for 2024 and the progress made toward meeting them. Data is collected on an on-going basis to provide evidence of progress. In this report the goals, targets, data, and plans are provided for review and feedback.

IMPROVEMENT PLANS

MHCO utilizes the PQI process to review what is going well and what improvements are needed. The agency continues to implement the trauma informed model of care that improves service delivery and will impact the census in the residential programs. Marketing strategies are being implemented to increase giving, the workforce, the census, and SGA printing. If you have any questions or feedback, please contact the PQI Coordinator via email or phone:

Gabriella Herr Wheat, MSW

gwheat@mhc-oxford.org

(217) 791-1200

Goal 1

Increase participation in community events and service projects that promote social responsibility and increase sustainability

Targets

1. Each quarter, a total of at least 3 residents and 3 personnel will participate in an off-campus community event or service project.
2. Each quarter, a total of at least 3 residents and 3 personnel will participate in an on-campus community event or service project.

Progress

The targets for this goal were exceeded this quarter.

1. Off campus, 36 residents and 12 personnel participated in the Mocksville community picnic, and 4 residents and 3 personnel participated in the “Literacy Race to Read” 5k run.
2. On campus, 45 residents and 30 staff members took part in the Public Service Appreciation Day event, and 8 residents and 10 personnel helped with moving furniture for the entire campus.

TARGETS MET: 2/2



Plan

- Continue marketing for Childcare Workers (CCWs) and residents through community involvement.
 - Continue to identify social opportunities on and off campus for residents to give back to others.
-

Goal 2

Increase familiarity with lockdown, weather, and fire emergency procedures to increase safety and security of residents and personnel

Targets

1. At least one campus-wide lockdown drill per quarter with an average response time under 5 minutes
2. At least one campus-wide tornado/hurricane drill per quarter with an average response time under 3 minutes
3. At least one fire drill per quarter for non-residential buildings with an average response time under 1 minute 15 seconds
4. 100% of open cottages/residential buildings have at least one fire drill per month (that includes one overnight – 12am-6am - fire drill per quarter)
5. Participation in each event by all personnel present on campus
6. Participation in each event by all residents present on campus

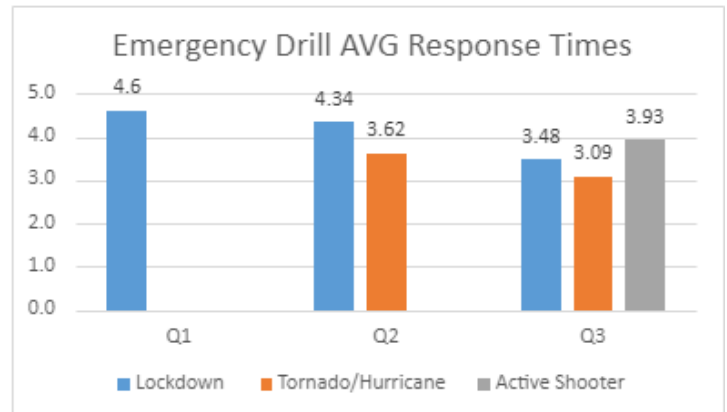
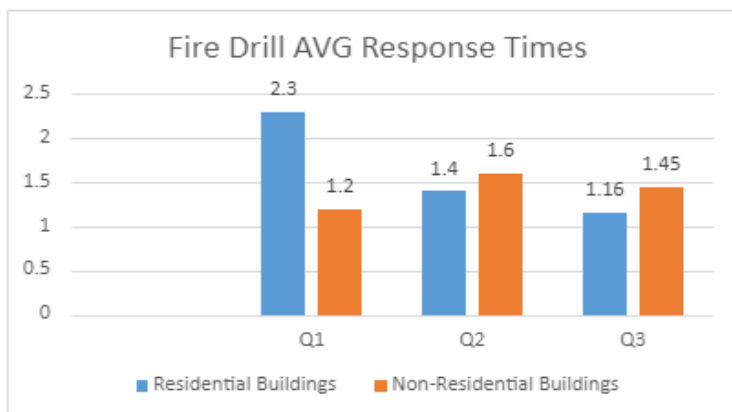
Progress

1. One campus-wide lockdown drill with an average response time of 3 minutes and 29 seconds was conducted, meeting the target.
2. One campus-wide tornado/hurricane drill with an average response time of 3 minutes and 5 seconds was conducted, missing the target by only 5 seconds.
3. Target was partially met as one fire drill for non-residential buildings was conducted this quarter. The targeted average response time was missed by only 30 seconds.
4. Staff and residents in all 11 open residential cottages (100%) completed monthly fire drills that included one quarterly overnight drill, meeting the licensing requirements and the target.
5. Participation in the drills were as follows: 100% in fire drills, 87% in lockdown drill, and 67% in tornado/hurricane drill, missing targets 5 and 6.

TARGETS MET 2/6 

Plan

Emails will be sent out to all employees, and reminders will be included in the daily memo. Emergency drills were discussed at Program meetings, and they will be discussed in the department head- and staff meetings. The importance of participation in the drills will be discussed in supervision and team meetings. Any technical areas to remediate will be identified. Supervisors were asked to meet with staff who do not respond as required with drills.



Goal 3

Increase Direct Care and TLC/ILP census to meet licensed residential capacity and provide services to families and individuals in the community through the Community Support Center

Targets

1. A monthly average of 16 residents in TLC/ILP by December 31, 2024
2. A monthly average of 42 residents in Direct Care by December 31, 2024
3. Increase the quarterly average number of residents served in Direct Care by one
4. 75% successful linkages to needed resources made for referred persons in the Community Support Center each quarter
5. Each month, at least 3 groups/classes will be facilitated through the Community Support Center by personnel or collaboratives
6. Each month, the Community Support Center personnel will conduct at least 2 outreach/marketing activities

Progress

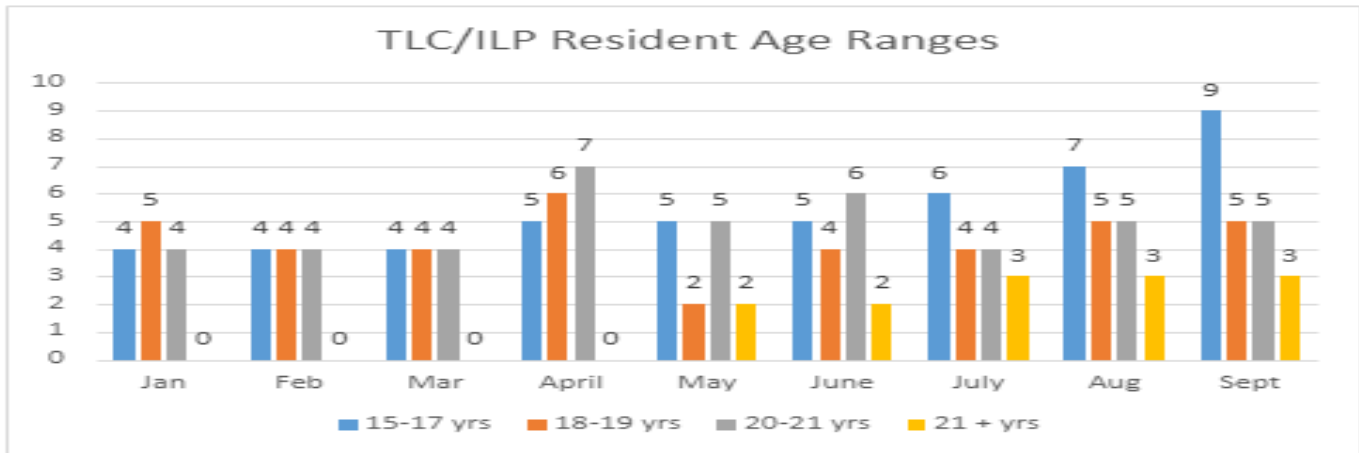
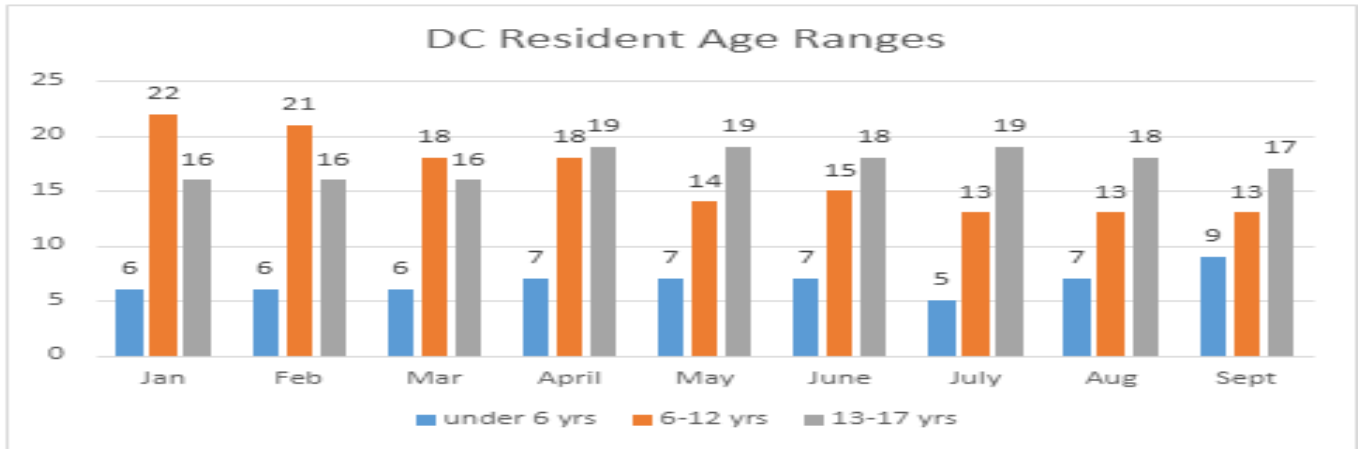
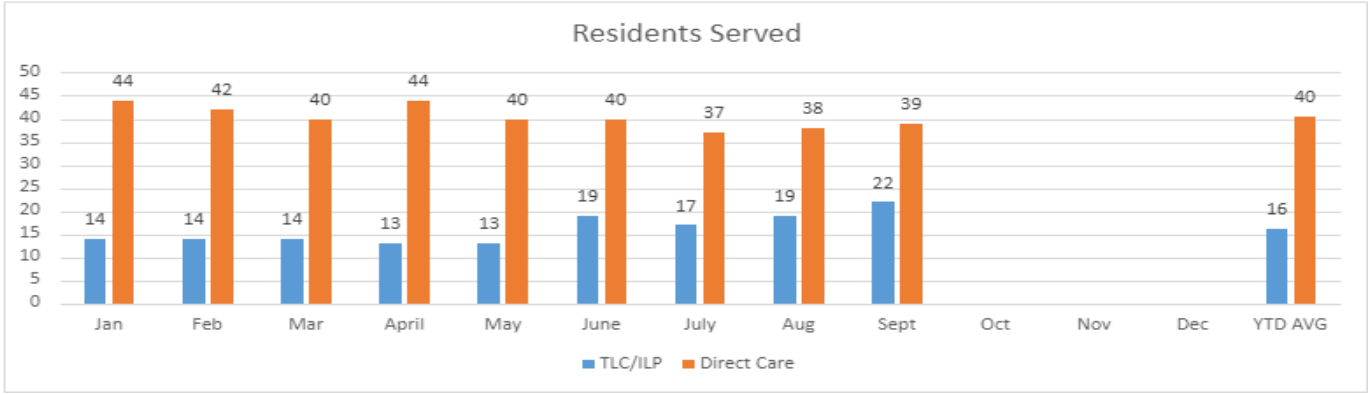
1. Target met with a monthly average of 16 residents YTD in TLC/ILP.
2. Progress made toward the target with a monthly average of 40 residents in Direct Care YTD.
3. The monthly average of residents served this quarter was 40 (42 last quarter). Target was not met.
4. 100% of needs were met by CSC, exceeding the target. A family of 6 (victims of domestic violence) received cash support from CSC in addition to assistance with access to clothing, household items, hygiene items, and beds. CSC provided 11 resources to a GCUW referred individual needing assistance with rent. Another individual was helped with apartment deposit. CSC helped a person with housing and linkage with Hope House.
5. Target was exceeded. A total of 16 groups/classes were conducted this quarter including two special needs support groups by MOMS.P.E.A.K.S., two health education classes by the Granville-Vance Health Department, nine 'Education through Basketball,' a network community event by the Granville County Chambers of Commerce, 'Aim High' and 'Park & Play' community events, and 'Power the Vote' voter registration.
6. Target was exceeded. The CSC Coordinator engaged in 23 outreach/marketing activities (5 in July, 10 in August, and 8 in September) including City of Oxford Board of Commission, United Way Worldwide; Housing Authority; Juvenile Crime Prevention Council; Families Living Violence Free; Mayor of Oxford; Guillermo Nurse & Latina Community Leader; Crime Stoppers Community Service Events; and GC Chamber Nonprofit Networking Event, etc.

TARGETS MET 4/6 

Plan

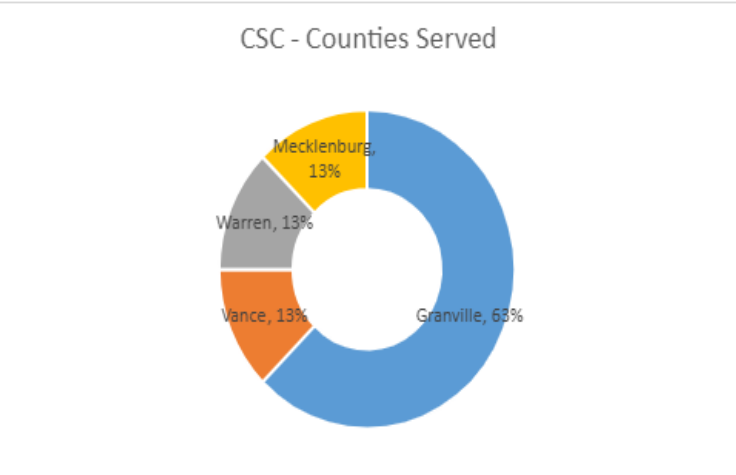
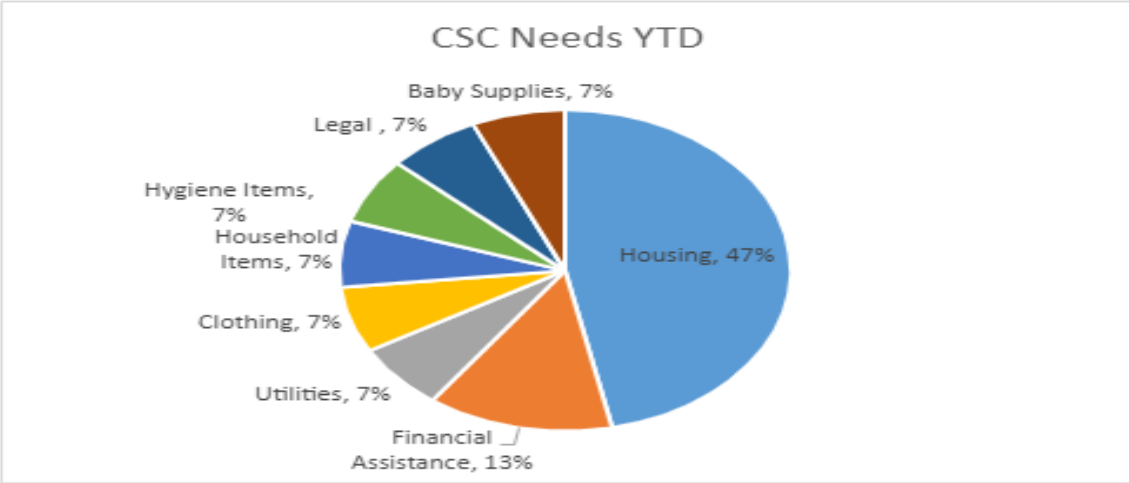
- Continue processing referral calls, making calls to prior referrals, and revisiting waiting list applications.
- An additional TLC cottage was opened for more residents.
- Marketing efforts will be increased and include adding information to MHCO's website.
- The marketing and fund development personnel recently recorded and posted informational material on Facebook.

2024	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	YTD Total
Number of calls	15	10	11	22	23	32	22	18	8	161
Applications sent	2	1	5	3	11	10	6	7	3	48
Admissions	1	2	2	0	4	6	2	8	2	27
Discharges	1	4	0	3	3	5	5	0	4	25
Cottage moves	1	5	0	0	0	2	0	2	2	12



DC Ethnicity and Gender	Q1		Q2		Q3		YTD Discharged	
Black or African American	13	23%	12	27%	10	22%	12	52%
White	33	58%	24	55%	28	62%	9	39%
Hispanic	0	0%	0	0%	2	4%	0	0%
American Indian or Alaska Native	0	0%	0	0%	0	0%	0	0%
Multi-Racial	8	14%	8	18%	5	11%	2	9%
Unknown	3	5%	0	0%	0	0%	0	0%
Male	32	58%	24	55%	24	53%	10	43%
Female	23	42%	20	45%	21	47%	13	57%

TLC/ILP Ethnicity and Gender	Q1		Q2		Q3		YTD Discharged	
Black or African American	10	71%	16	80%	19	86%	5	71%
White	2	14%	3	15%	2	9%	1	14%
Hispanic	0	0%	0	0%	0	0%	0	0%
American Indian or Alaska Native	0	0%	0	0%	0	0%	0	0%
Multi-Racial	2	14%	1	5%	1	5%	1	14%
Unknown	0	0%	0	0%	0	0%	0	0%
Male (total)	9	64%	15	75%	16	73%	3	43%
Female (total)	5	36%	5	25%	6	27%	4	57%



Goal 4

Increase skills and opportunities through participation in educational experiences

Targets

1. 90% of available Direct Care residents will attend on-campus educational groups/classes quarterly
 2. 90% of available TLC/ILP residents will attend on-campus educational groups/classes quarterly
 3. 100% of Direct Care residents who need academic support will receive it quarterly
 4. 100% of TLC/ILP residents who need academic support will receive it quarterly
-

Progress

1. Of the 36 DC residents available, 33 (92%) participated and the target of 90% was exceeded.
2. All 10 (100%) available TLC/ILP residents participated and the target of 90% was exceeded.
3. All 12 DC residents in need of academic support received it, meeting the target.
4. TLC/ILP residents were not in need of academic support this quarter.

The on-campus educational groups/classes included Cyber Security (TenPlus), Tutors Summer Enrichment, Stehle Study types, Tutors read-alouds, and Gorham ice cream lab.

The campus average data for the first grading period and the Troutman awards information were not available at the time of the completion of this report but will be included in the 2024 4th quarter PQI Report.

TARGETS MET 4/4 

Plan

- Continue to incorporate the CARE trauma language and concepts into resident education.
 - Continue to offer resident education to all program residents.
 - Continue to offer educational support and opportunities for learning and achievement.
-

Goal 5

Increase vocational skills through participation in Kid\$Earn and other work experiences

Targets

1. A monthly average of 13.0 residents will participate in Kid\$Earn each quarter.
2. 75% of ILP/TLC residents will work off campus each quarter.

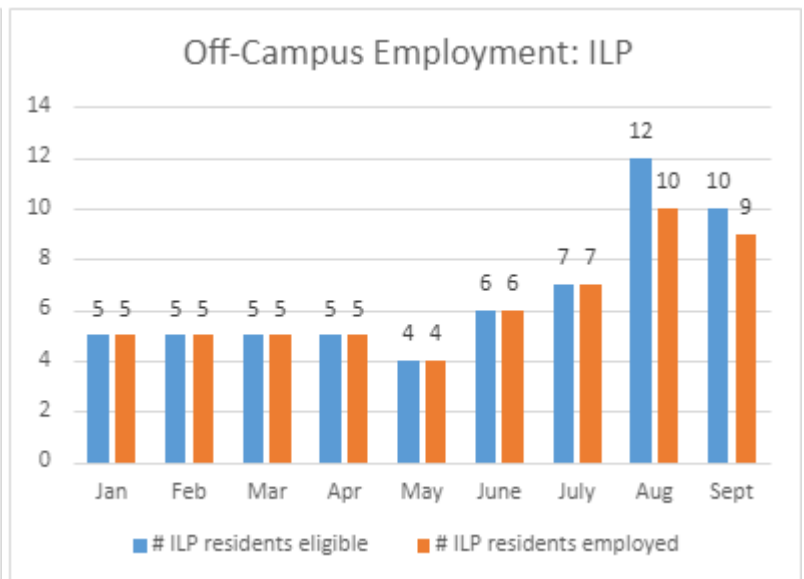
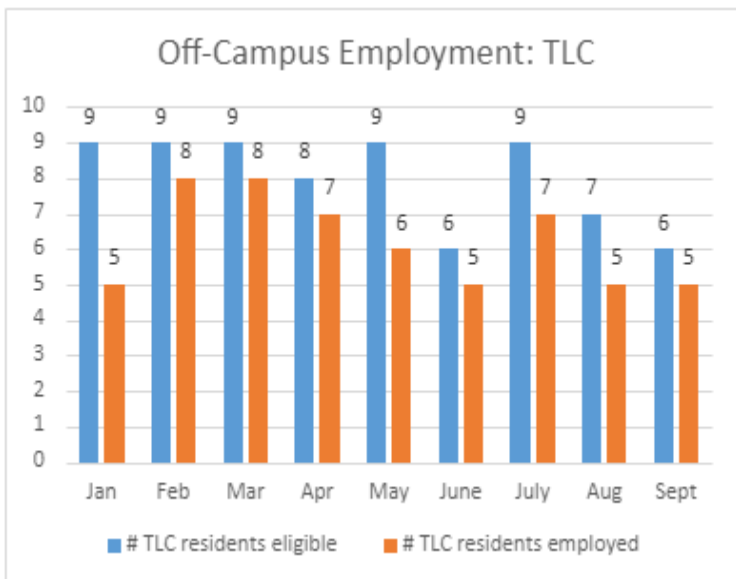
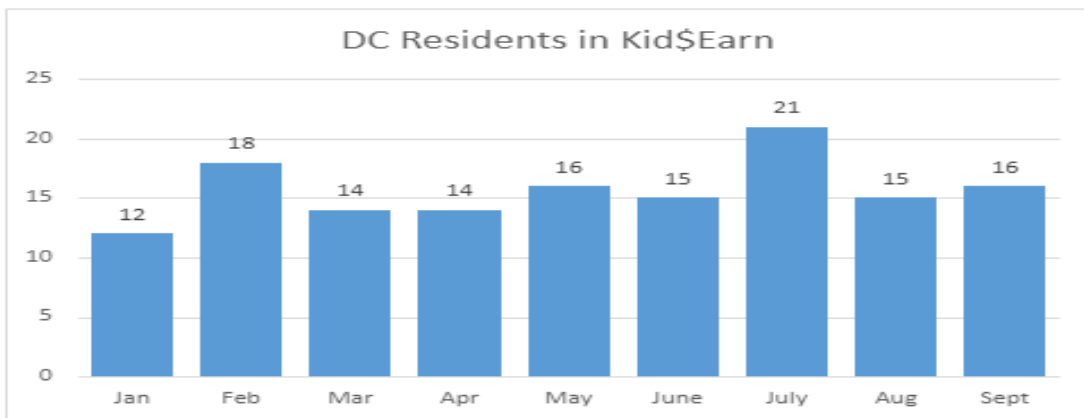
Progress

1. A monthly average of 17 DC residents participated in Kid\$Earn, exceeding the target of 13.
2. 90% of eligible ILP residents and 77% of eligible TLC residents worked off-campus. Combined, 84% of eligible TLC/ILP residents worked off campus this quarter, exceeding the target of 75%.

TARGETS MET 2/2 

Plan

- Continue providing additional education and support to residents in seeking employment on or off campus.
- Continue to discuss barriers and challenges with residents in program teams to incorporate into service planning.



Goal 6

Improve program advancement based on achievement of independent living skills

Targets

1. 100% of assessment activities and Resident Assessment documents are completed by the due date
 2. 100% of service planning activities and Individual Service Plan documents completed by the due date
 3. 100% of Child and Family Team meetings and documentation completed by the due date
-

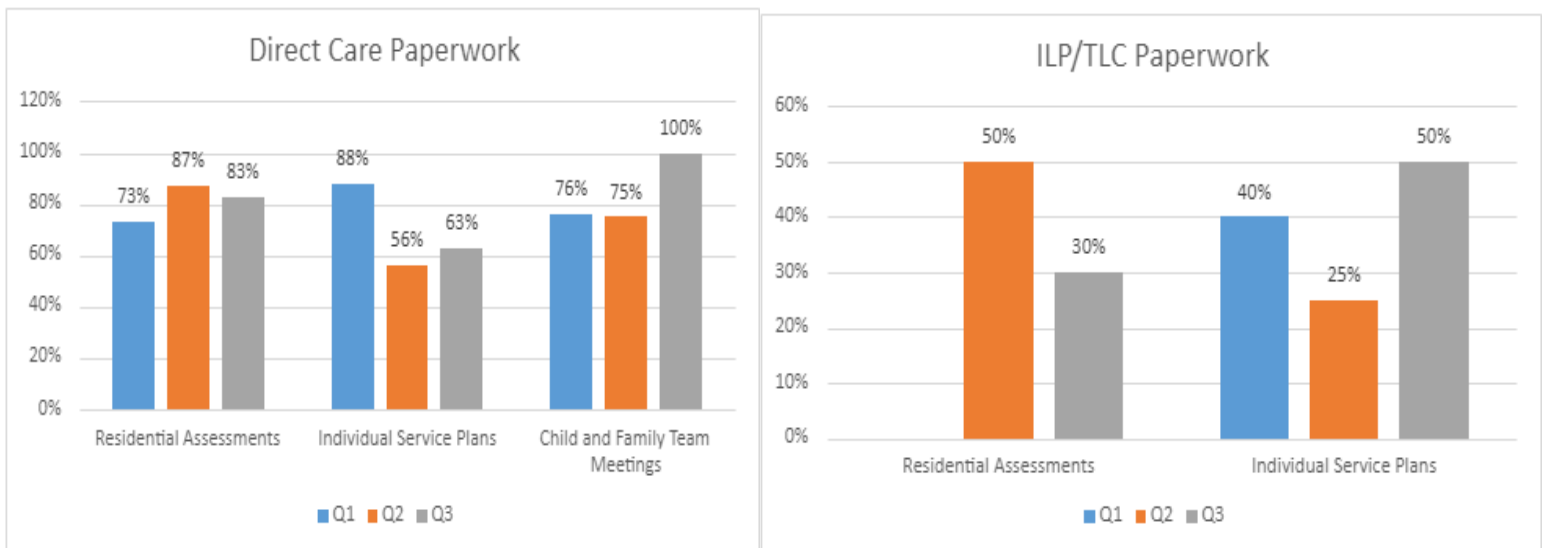
Progress

1. 83% of Direct Care and 30% of TLC/ILP (57% combined) of assessment activities and documentation were completed on time. Target was not met.
2. 63% of Direct Care and 50% of TLC/ILP (57% combined) of service planning activities and documentation were completed by the due date. Target was not met.
3. In DC, 100% of the Child and Family Team Meeting documentation was completed within the expected timeline. Target was met.

TARGETS MET 1/3 

Plan

Improvements continue to be made. In both programs, all but 1 of the late reports were behind between 1 and 5 days. Continued supervision and monitoring will occur.



Goal 7

Increase annual giving to reduce reliance on planned gifts

Targets

1. 10% increase in dollar amount of giving quarterly (excluding legacy gifts)
2. 75% of staff to donate at least once to MHCO annually
3. 100% of members of the Board of Directors to donate at least once to MHCO annually
4. 15 new donors giving a \$10 monthly recurring payment quarterly

Progress

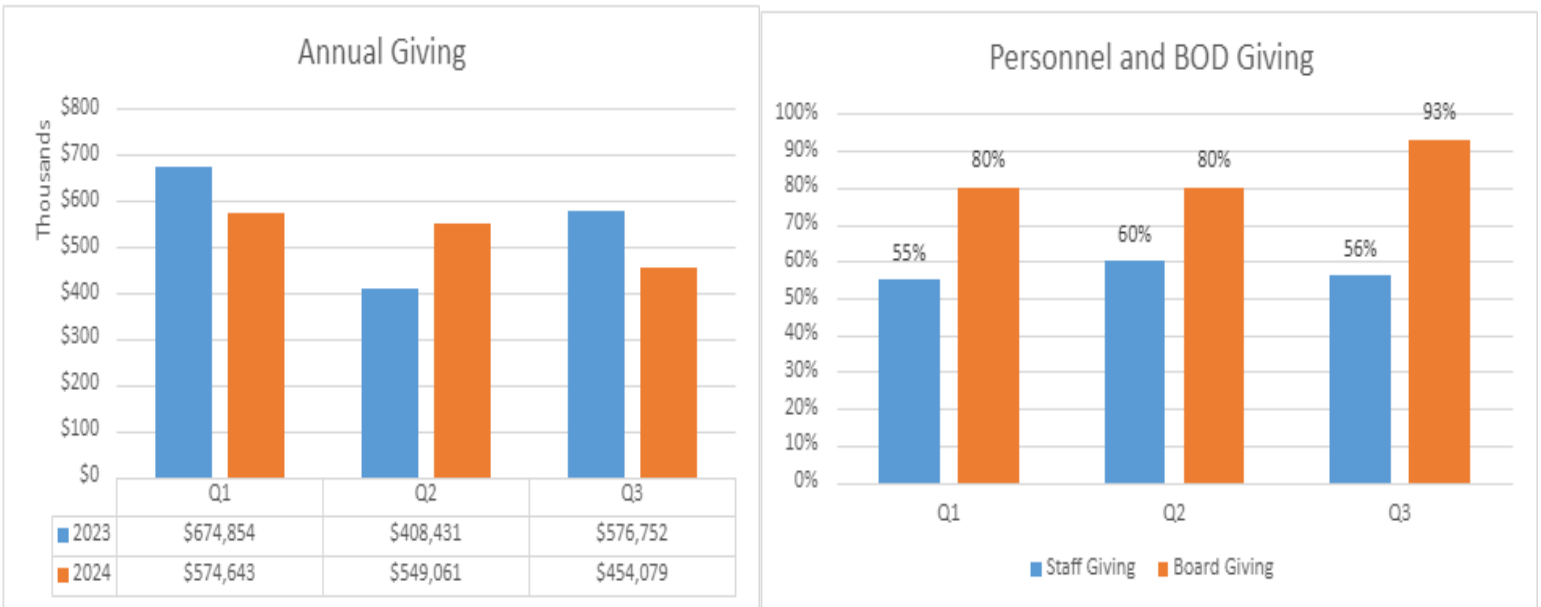
Progress was made toward two targets, and two targets were not met this quarter.

1. There was a decrease in the dollar amount of giving compared to the last quarter in 2024, missing the target.
2. 33 personnel (53%) donated to MHCO this quarter, missing the target of 75%. Notably, 33 personnel give recurring donations to MHCO, an increase from 27 in the last quarter.
3. Six additional BOD members donated to MHCO this quarter, for a total of 15 YTD (93%). 14 BOD members give recurring donations to MHCO, an increase from 9 in the last quarter.
4. The total number of donors giving recurring payment year-to-date is 27. There was one new donor added this quarter, missing the target.

TARGETS MET 0/4 

Plan

Fund development and marketing personnel have recently posted a video recording on Facebook and marketing efforts continue. Google Ads for Nonprofits will continue to be utilized to drive more views and activity to our website, raise awareness, attract donors, and track marketing efforts.



Printing Income

Targets

1. General public printing total between \$475K and \$500K annually
2. 1.25% increase in Masonic and related printing compared to the same quarter in 2023

Progress

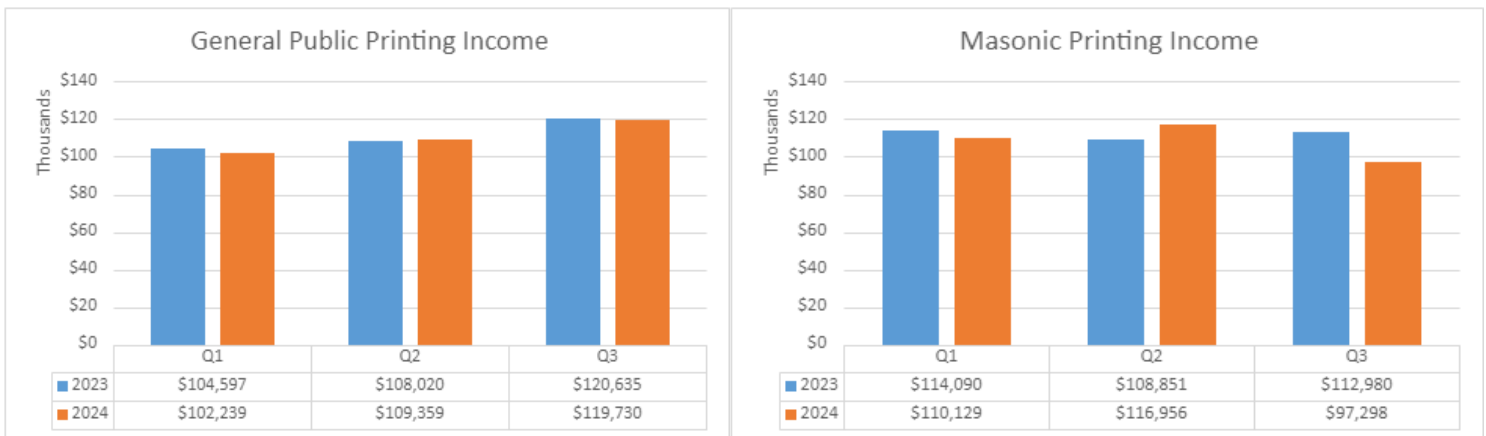
1. Progress was made toward the annual target with \$331,328 of general printing income YTD.
2. Masonic and related printing compared to the same quarter in 2023 decreased by 14%. Target not met.

TARGETS MET 0/2



Plan

Masonic printing has increased including printing the NC Mason and Amran Today and there are continued plans for 2024.



KEY:



ON TARGET



CLOSE TO TARGET/PROGRESS MADE



TARGET NOT MET

FILE REVIEWS

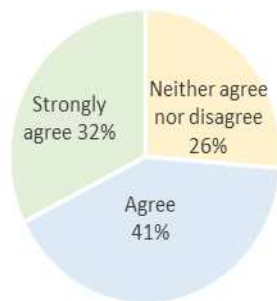
YTD 66 files (including medical files) were reviewed (hard copy and electronic system): 49 DC and 17 ILP (open & closed). 80% of all files reviewed, exceeding the requirements. Remediation of deficiencies in progress.

Files Reviewed	Q1		Q2		Q3		YTD	
	open	closed	open	closed	open	closed	#	%
DC	9	3	10	2	5	20	49	84%
ILP	2	2	2	3	5	3	17	71%
Total	16		17		33		66	80%

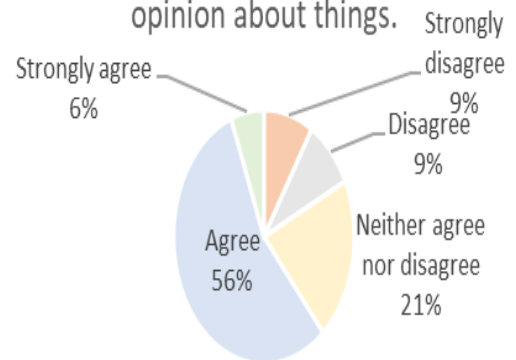
RESIDENT SURVEY RESULTS 2024

	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree	Total
I feel comfortable and safe here.	11	14	9			34
Adults who work here listen to me and ask my opinion about things.	2	19	7	3	3	34
Adults here treat me with respect and are fair to everyone.	6	11	12	2	3	34
I know whom I can ask for help here.	8	21	4	1		34
My privacy is respected here.	8	14	9	2		33
I get enough to eat and drink.	21	8	4	1		34
The rooms and buildings here are clean.	8	15	11			34
I am included in the planning of the services that I receive.	2	13	7	4	8	34
The adults who work here help me see my family.	6	10	13	2	3	34
Adults here treat me with respect and are fair to everyone.	8	15	9	2		34
While living here, I receive services that help me and help me make positive changes in my life.	8	19	6	1		34

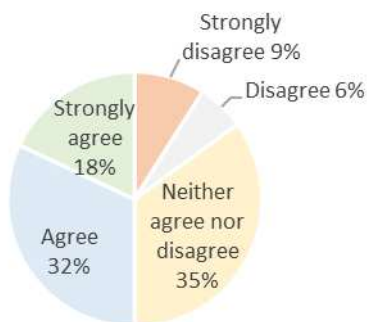
I feel comfortable and safe here.



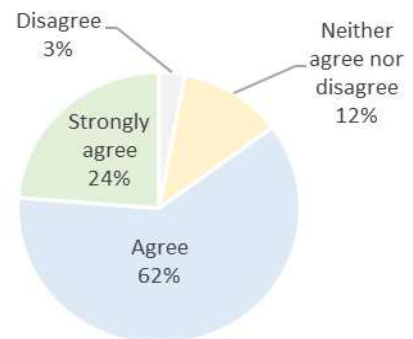
Adults who work here listen to me and ask my opinion about things.



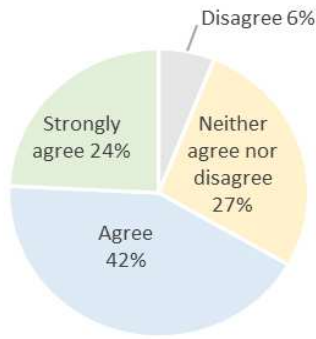
Adults here treat me with respect and are fair to everyone.



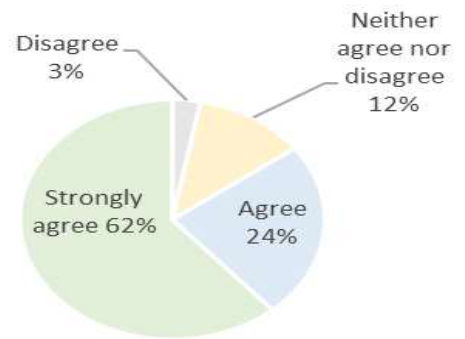
I know whom I can ask for help here.



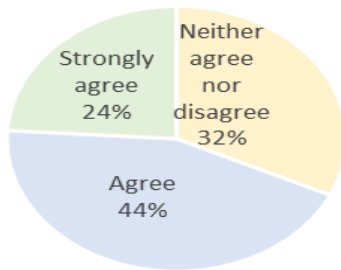
My privacy is respected here.



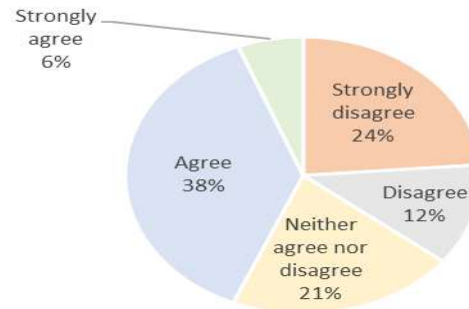
I get enough to eat and drink.



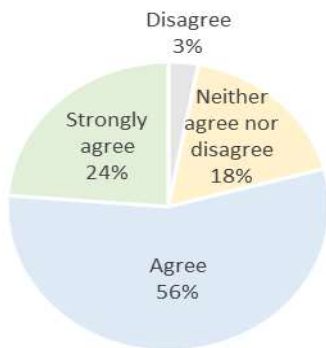
The rooms and buildings here are clean.



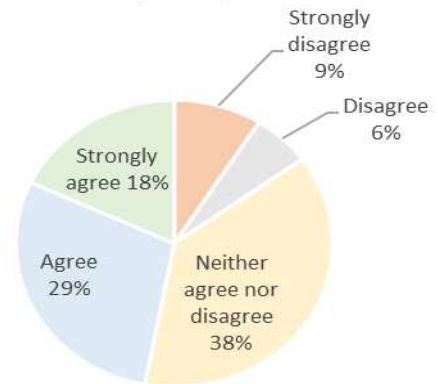
I am included in the planning of the services that I receive.



While living here, I receive services that help me and help me make positive changes in my life.



The adults who work here help me see my family.



Most frequent answers to open-ended question:

“Things I like at MHCO” - pool, trips and events, I have my own room, good people, houseparents, good food, everything.

“Things that I want to get better at MHCO” - nothing, bigger pool, more events, houseparents, privacy.

Detailed responses to open-ended questions can be requested from the PQI Coordinator.