

PERFORMANCE AND QUALITY IMPROVEMENT



Masonic Home for Children
Growing Hearts, Brighter Futures

2024 Fourth 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

KEY:



ON TARGET



CLOSE TO TARGET/PROGRESS MADE



TARGET NOT MET

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

1. Target was not met. Off campus, 3 personnel participated in the 'Chips Shots for Children' event, and 3 personnel participated in the Shriners Hospital toy donation. Residents did not partake in off-campus events or service projects.
2. Target was met. On campus, 55 residents and 46 staff attended Homecoming.

TARGETS MET: 1/2



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

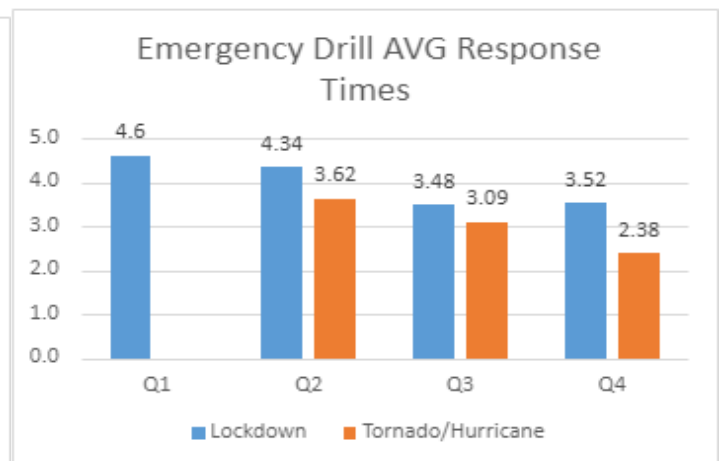
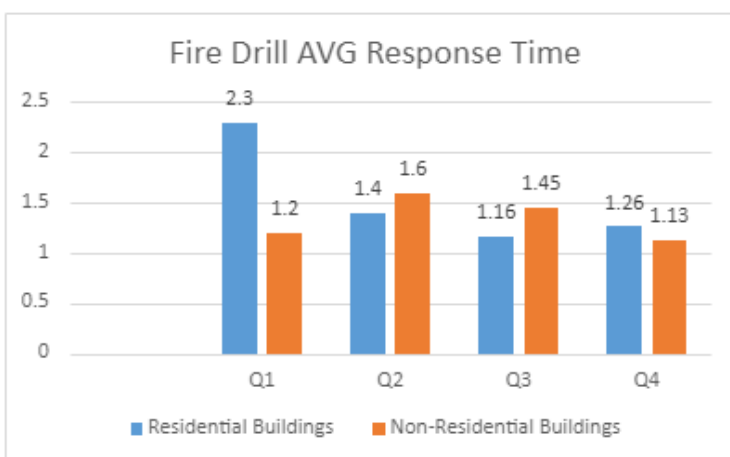
Progress

1. Target met. One campus-wide lockdown drill with an average response time under 5 minutes was conducted.
2. Target met - one campus-wide tornado/hurricane drill with an average response time under 3 minutes.
3. Target met. One fire drill for non-residential buildings was conducted with an average response time of 1 minute and 8 seconds.
4. Target met. Staff and residents in all 11 open residential cottages (100%) completed monthly fire drills that included one quarterly overnight drill, meeting the licensing requirements. 100% participation.
5. Personnel participation in the drills were as follows: 100% in fire drills, 98% in lockdown drill, and 96% in tornado/hurricane drill, missing targets 5 and 6 by a small margin.
6. Target met. All (100%) available residents participated in each event.

TARGETS MET 5/6 

Plan

Supervisors will address in meetings and individual supervision. Residential fire drill targets were met. Monitoring and addressing compliance will continue during supervision and team meetings.



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

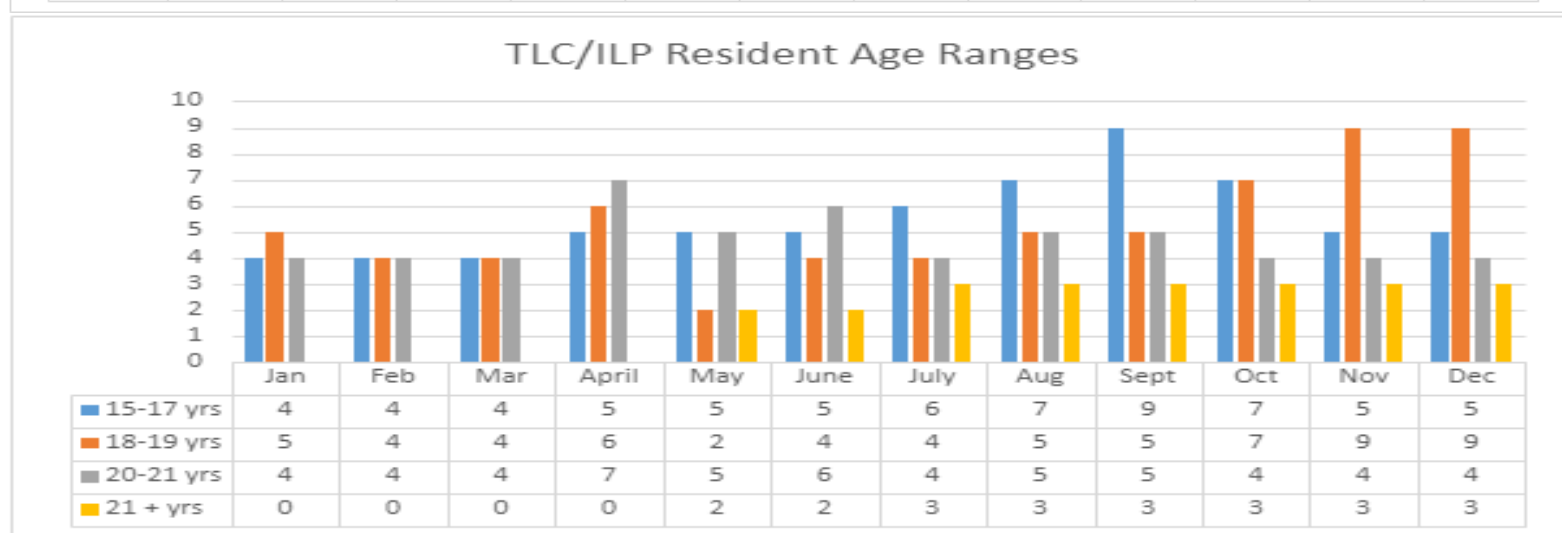
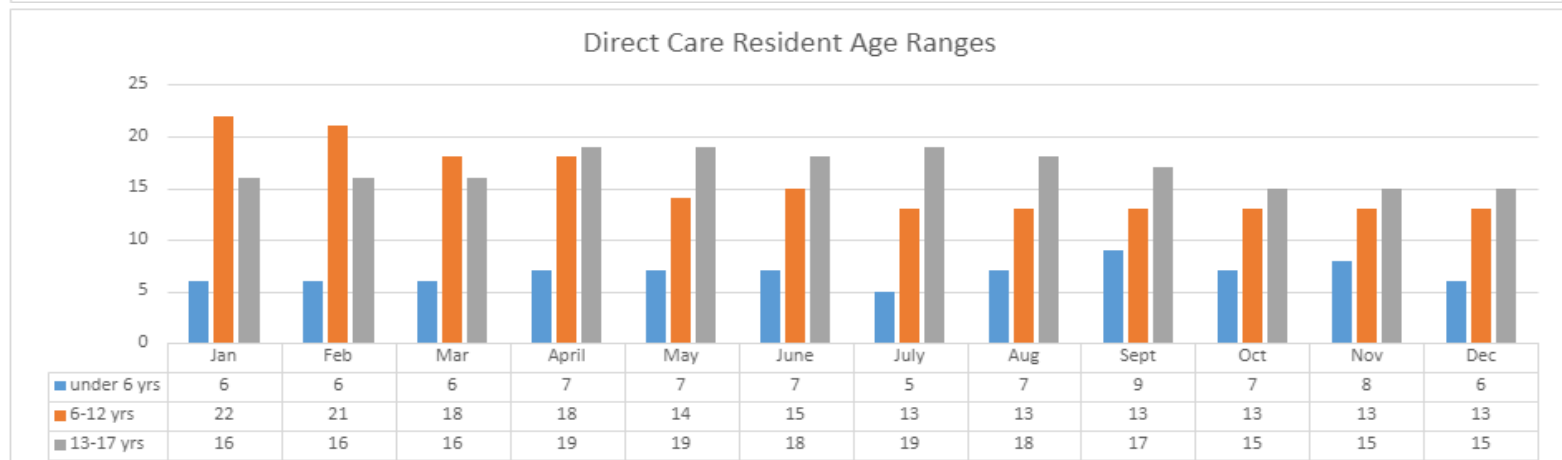
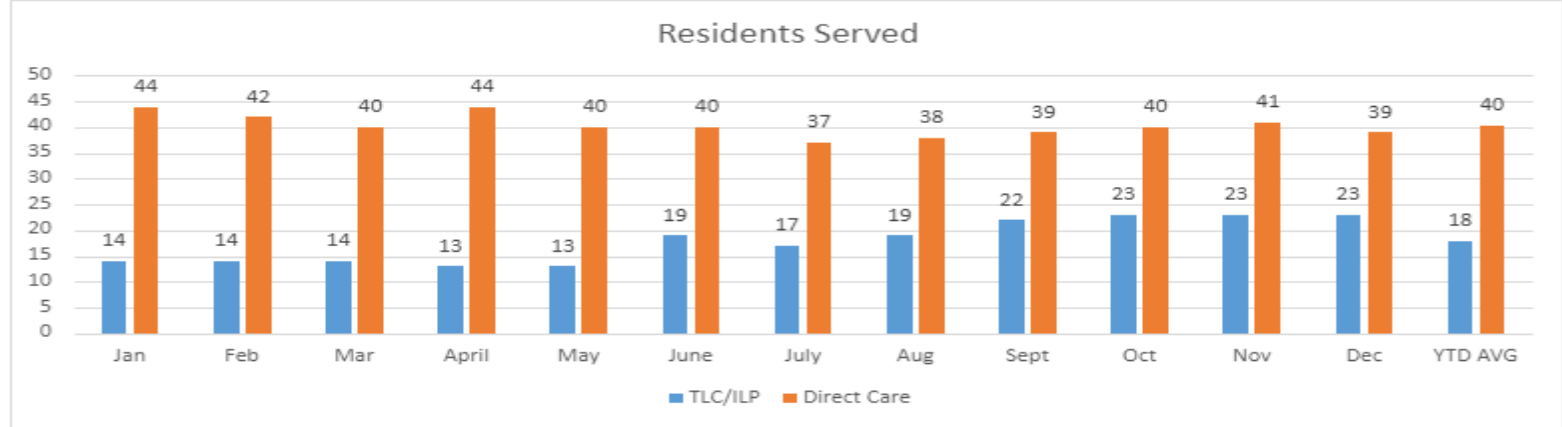
1. Target was exceeded with a monthly average of 18 residents in TLC/ILP by December 31, 2024.
2. Target was not met with a monthly average of 40 residents in Direct Care by December 31, 2024.
3. Target was not met. The monthly average of residents served this quarter was 40 (same as last quarter).
4. Target was exceeded as 86% of needs were met by CSC. A family received rental assistance, a mother was helped with finding a group home for her son, and 10 of 12 homeless people were linked with the Sheriff Office Deputy for safe delivery of meals purchased by the Shrine Club.
5. Target was exceeded. A total of 14 groups/classes were conducted this quarter (and more than 3 each month) including 7 Robotics Lab classes (by AA8 Corporation), 2 Girl Scouts meetings, 2 MOMS.P.E.A.K.S support groups (for mothers of special needs children), 2 German support groups, Education through Basketball classes, and a cooperative extension cooking class. Drop-in workspace included a retreat/meeting of Granville Little Theater, a meeting by the Granville County Coalition for Secured Housing, and a Cub Scouts meeting.
6. Target was exceeded. The CSC Coordinator engaged in 11 outreach/marketing activities (5 in October, 4 in November, and 2 in December) including 'Lunch n Lean' (Chamber of Commerce), Oxford United Methodist Church (Summer Literacy), Next Door Radio podcast (information about CSC), El Centro (connection made through Mayor Nurse), Orange Street Community Center, First National Bank – Henderson (financial literacy classes), Granville Department of Social Services (brochures about CSC), Granville Cooperative Extension (nutrition program), Housing & Community Resource Fair, and Granville Vance Health Department.

TARGETS MET 4/6 

Plan

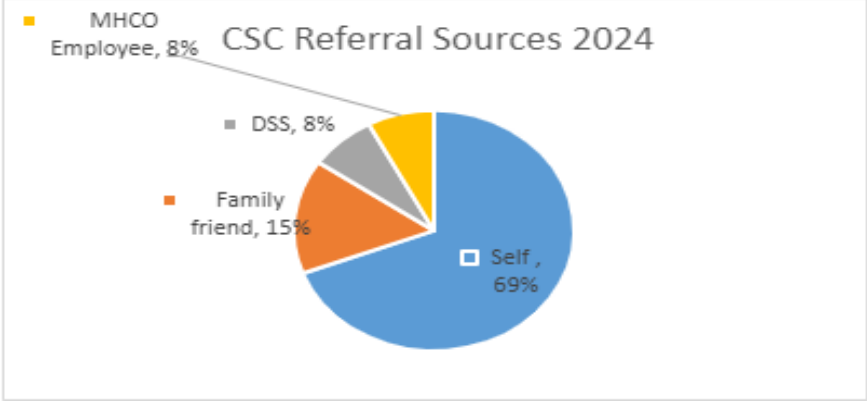
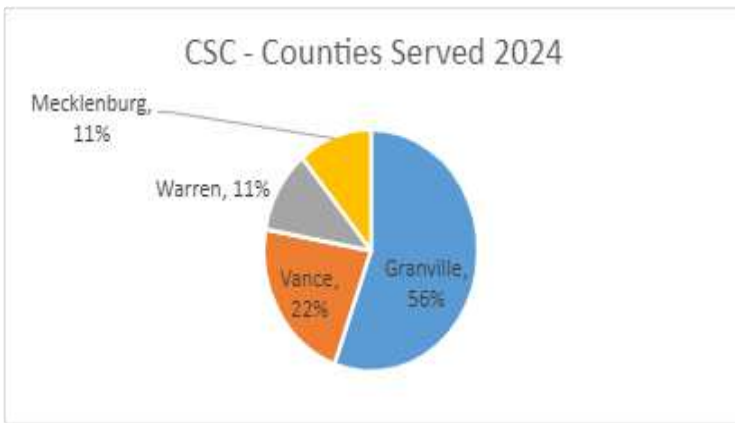
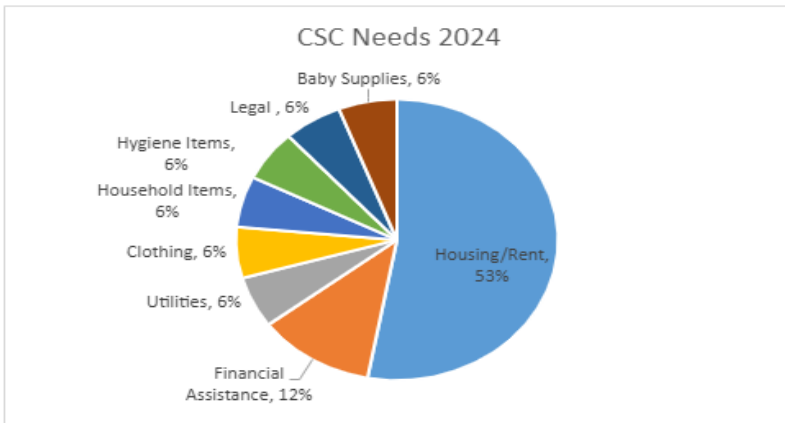
- Continue processing referral calls, making calls to prior referrals, and revisiting waiting list applications.
- Marketing efforts will be increased and include adding information to MHCO's website.

2024	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	YTD Total
Number of calls	15	10	11	22	23	32	22	18	8	23	18	22	224
Applications sent	2	1	5	3	11	10	6	7	3	6	5	14	73
Admissions	1	2	2	0	4	6	2	8	2	2	1	0	30
Discharges	1	4	0	3	3	5	5	0	4	0	2	0	27
Cottage moves	1	5	0	0	0	2	0	2	2	0	0	1	13



DC Ethnicity and Gender	Q1		Q2		Q3		Q4		YTD Discharged	
Black or African American	13	23%	12	27%	10	22%	5	15%	12	52%
White	33	58%	24	55%	28	62%	24	71%	9	39%
Hispanic	0	0%	0	0%	2	4%	2	6%	0	0%
American Indian or Alaska Native	0	0%	0	0%	0	0%	0	0%	0	0%
Multi-Racial	8	14%	8	18%	5	11%	3	9%	2	9%
Unknown	3	5%	0	0%	0	0%	0	0%	0	0%
Male	32	58%	24	55%	24	53%	14	47%	10	43%
Female	23	42%	20	45%	21	47%	16	53%	13	57%

TLC/ILP Ethnicity and Gender	Q1		Q2		Q3		Q4		YTD Discharged	
Black or African American	10	71%	16	80%	19	86%	18	86%	5	71%
White	2	14%	3	15%	2	9%	2	10%	1	14%
Hispanic	0	0%	0	0%	0	0%	0	0%	0	0%
American Indian or Alaska Native	0	0%	0	0%	0	0%	0	0%	0	0%
Multi-Racial	2	14%	1	5%	1	5%	1	5%	1	14%
Unknown	0	0%	0	0%	0	0%	0	0%	0	0%
Male (total)	9	64%	15	75%	16	73%	14	67%	3	43%
Female (total)	5	36%	5	25%	6	27%	7	33%	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. Target was exceeded. All 30 DC residents available attended on-campus education.
2. Target was exceeded. All 11 available TLC/ILP residents attended on-campus education.
3. Target was met. All 13 DC residents in need of academic support received it this quarter.
4. Target was met. One TLC/ILP resident in need of academic support this quarter received it this quarter.

1 st Grading Period 2024-2025			
CAMPUS AVERAGES		TROUTMAN AWARDS	
Alumni Cottage	72	# Students on Honor Roll	9
Eller Cottage	83	# Students on Honorable Mention	11
Gray Cottage	84	# Students who maintained 90 or above from last grading period	2
Jefcoat Cottage	79	# Students who increased GPA +5 points since last report card with a C/70 average	N/A
Kimel Cottage	77		
Master Mason Cottage	86		
Temple Cottage	86		
Williams Cottage	81		
Bemis Cottage	92		
Campus Average	82		

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.

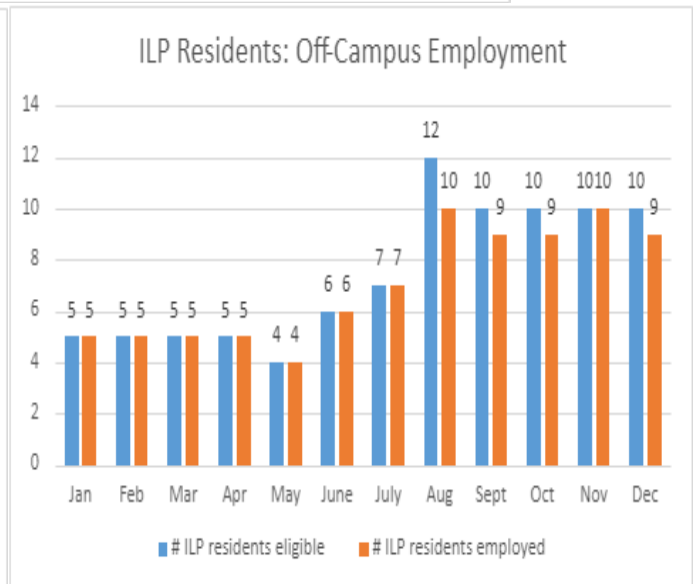
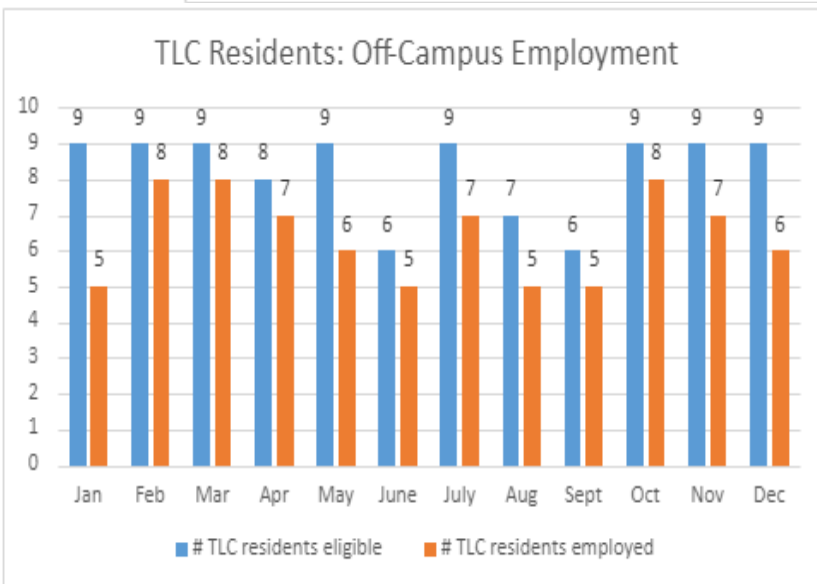
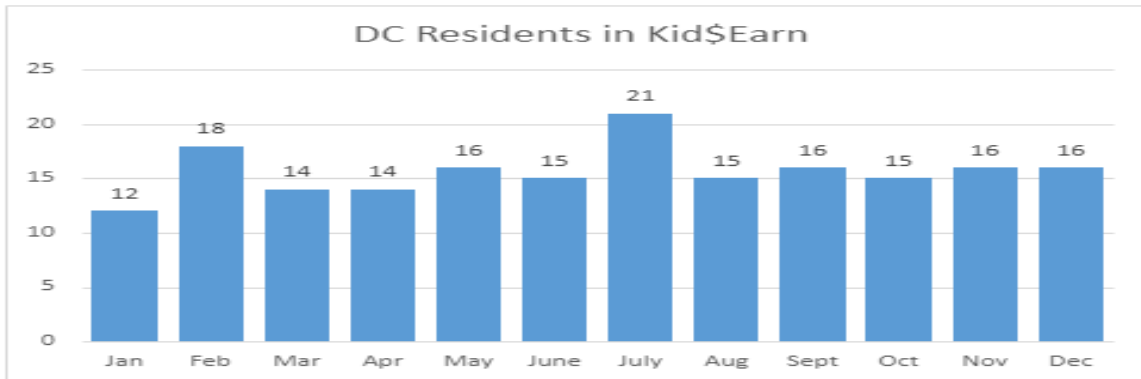
Progress

1. Target exceeded. A monthly average of 16 DC residents participated in Kid\$Earn.
2. Target exceeded. 93% of eligible ILP residents and 78% of eligible TLC residents worked off-campus. Combined, 89% of eligible TLC/ILP residents worked off campus this quarter.

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

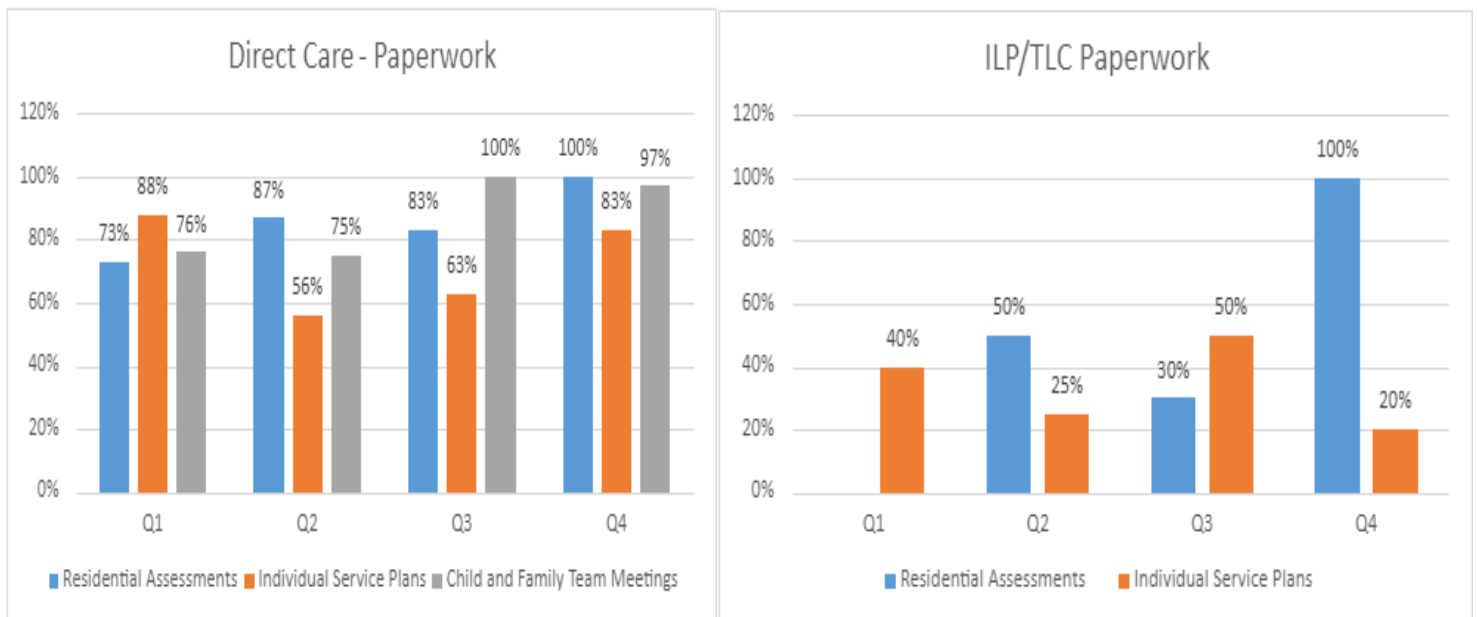
Progress

1. Target met. 100% Direct Care and TLC/ILP assessment activities and documentation were completed on time.
2. Target not met. 83% of Direct Care and 20% of TLC/ILP (51% combined) service planning activities and documentation were completed by the due date.
3. Target not met. 97% of the Child and Family Team Meeting documentation was completed within the expected timeline in DC.

TARGETS MET 1/3 

Plan

Assessments were on time; the late ISPs for DC were from one team and that has been addressed through supervision. ILP late ones have also been addressed through supervision.



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

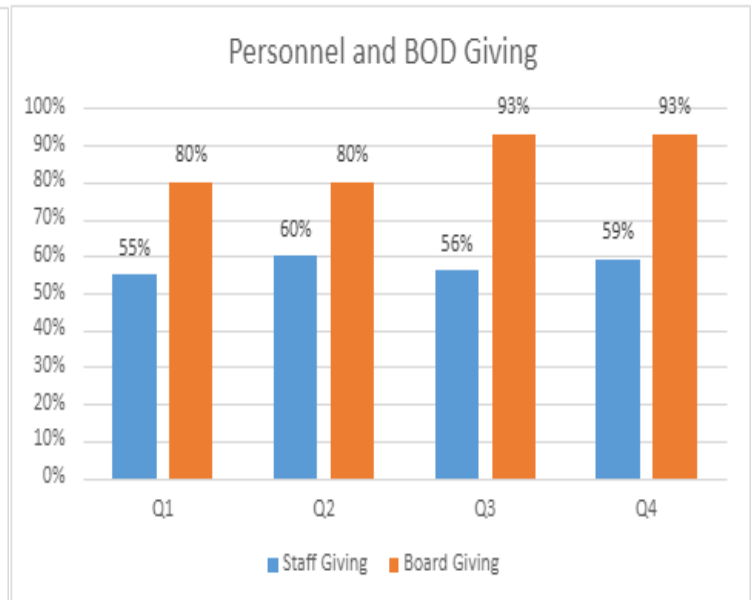
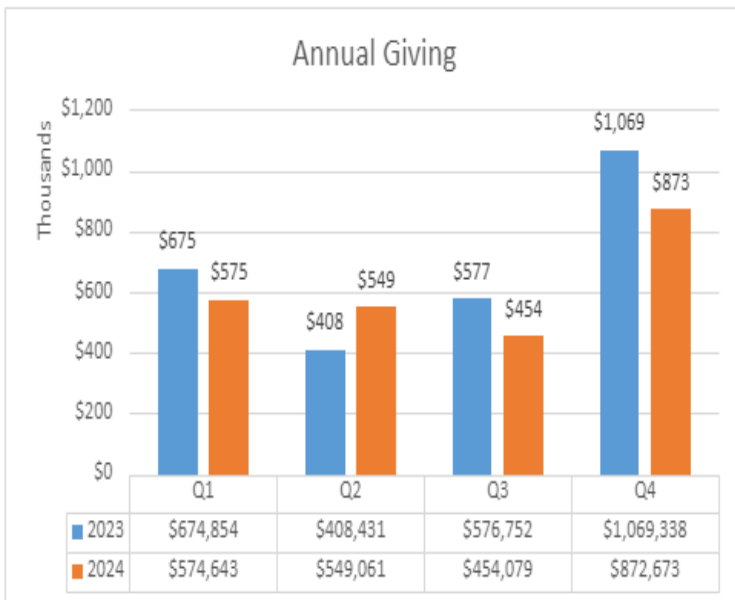
1. Target exceeded with 93% increase in the dollar amount of giving compared to the last quarter.
2. 35 personnel (59%) donated to MHCO, missing the target of 75%. 33 personnel give recurring donations.
3. 14 BOD members (93%) donated to MHCO, missing the target of 100%. 7 BOD members give recurring donations.
4. The total number of donors giving recurring payment this quarter was 26, a decrease by one from last quarter.

TARGETS MET 1/4 

Plan

The PQI Subcommittee reviewed baseline data and discussed revising targets 1 and 4 to bring them into alignment with more realistic expectations. Fund development and marketing efforts continue.

	2024	Q1	Q2	Q3	Q4
# of staff who donated		32	35	33	35
# of BOD who donated		12	12	14	14
# of staff - recurring donation		32	27	33	33
# of BOD - recurring donation		9	9	7	7



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

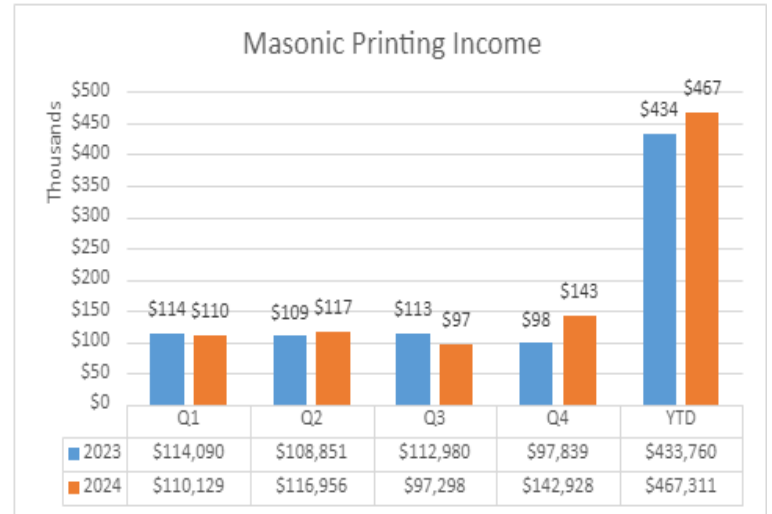
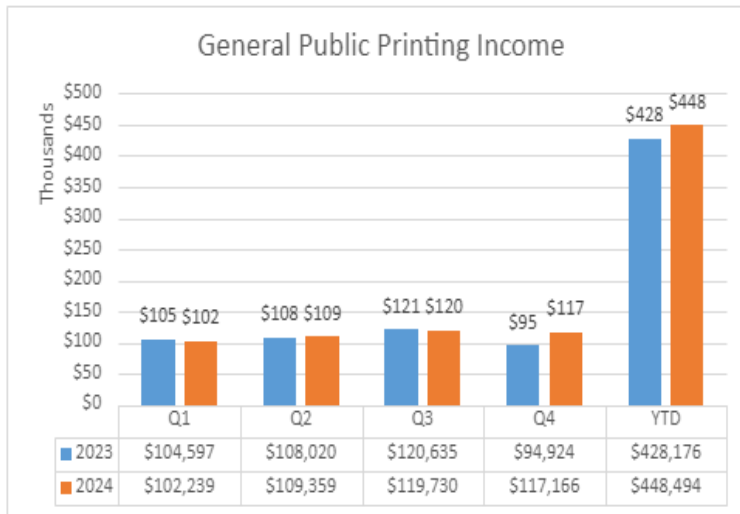
Progress

1. Target not met. However, there was an increase in the dollar amount from last year and progress was made.
2. Target exceeded with a 46% increase in the dollar amount compared to the same quarter in 2023.

TARGETS MET 1/2 

Plan

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



FILE REVIEWS

To date, 100% of all resident files have been reviewed, exceeding the requirements by licensing and COA. This included the review of files for open and closed cases in DC, TLC, and ILP.

Case Files	Q1		Q2		Q3		Q4		Total
	open	closed	open	closed	open	closed	open	closed	
DC	9	3	10	2	5	20	7	8	64
ILP	2	2	2	3	5	3	12	1	30
Total	16		17		33		28		94