

Polk County Mental Health and Disability Services Region

# **2021 Knowledge Empowers Youth**

Outcomes Evaluation

**IOWA** | **LAW**

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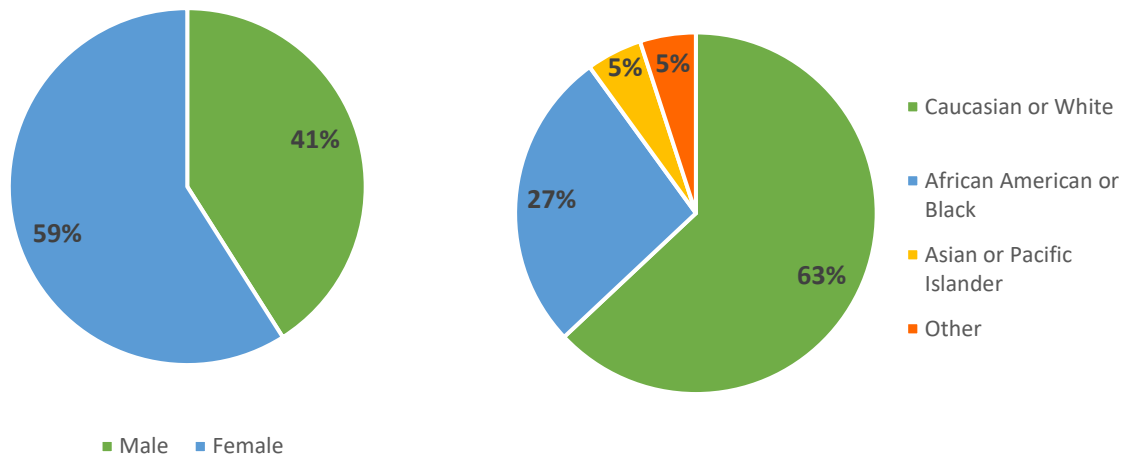
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## INTRODUCTION

This is a report on the findings of the independent evaluation of Community Support Advocates' (CSA's) Knowledge Empowers Youth (KEY) program from July 1, 2020, through June 30, 2021. KEY is a subsidiary integrated services program for young adults transitioning from the foster care system. The program officially began serving individuals as of January 1, 2006. The KEY program offers the same flexibility of services as the integrated services program. Services like assistance with career planning, financial management, benefits coordination (e.g., health insurance and rent assistance), education enrollment logistics, and miscellaneous supports (transportation, phones, school materials) have positive impacts on youth transitioning out of foster care because they face challenges in establishing stable and independent housing, employment, financial stability, and education (Rome and Raskin, 2019). Youth transitioning out of foster care experience employment and economic disparities, and about one-third to one-half of this population reports that their average annual incomes of \$8,000 are much lower compared to earnings of counterparts at \$18,300 (Scannapieco, Smith, & Blakeney-Strong, 2016). A range of 12% to 30% of this population reports using public assistance, and in a survey of youth in a program similar to KEY, 19% found information on resources to be valuable. Along with tangible supports, youth transitioning out of foster care particularly benefit from emotional supports (e.g., unconditional positive regard and empowerment) and connections to the community (Trejos-Castillo, Davis, and Hipps, 2015; Packard and Benuto, 2020). In a survey of participants in a program similar to KEY, the most beneficial service mentioned by nearly half of participants (48%) was empowerment activities like goal setting (Leathers et al, 2019). Youth transitioning out of foster care are at particular risk for incarceration, substance use, child birth, and—prominently—unstable housing (Liu, 2020; Rome and Raskin, 2019, Prince et al 2019). Specifically, youth transitioning out of foster care are vulnerable to involuntarily living with biological family or experiencing homelessness at rates reported between 11% to 46% (Liu, 2020; Rome and Raskin, 2019, Scannapieco, Smith, & Blakeney-Strong, 2016). KEY participants struggle to maintain and enjoy their independence from the foster care and, in some cases, the juvenile justice systems. The KEY program provides a unique source of support for these youth in transition.

**2021 KEY Participant Demographics by gender (left) and race (right)**



## Results Summary

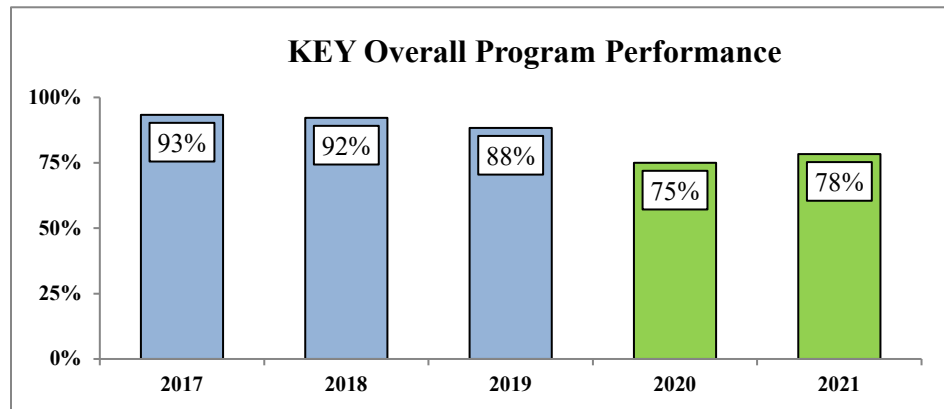
The KEY program earned an overall Meets Expectations rating for the FY21 fiscal year. In FY21, the program **excelled in ten outcome areas** and **met expectations in one additional area**. The program was **challenged in four outcome areas**.

Exceeds Expectations	Meets Expectations	Needs Improvement	Does Not Meet Minimum Expectations
<ul style="list-style-type: none"> <li>Community Housing</li> <li>Homelessness</li> <li>Involvement in the Criminal Justice</li> <li>Employment-Working Toward Self-Sufficiency</li> <li>Employment-Engagement Toward Employment</li> <li>Participant Satisfaction</li> <li>Negative Disenrollments</li> <li>Psychiatric Hospital Days</li> <li>Quality of Life</li> <li>Administrative</li> </ul>	<ul style="list-style-type: none"> <li>Adult Education</li> </ul>		<ul style="list-style-type: none"> <li>Participant Empowerment</li> <li>Access to Somatic Care</li> <li>Community Inclusion</li> <li>Emergency Room Visits for Psychiatric Care</li> </ul>

Consistent with previous evaluations, KEY participants report that they are very satisfied with the services that they receive, the staff who work with them, and the quality of their lives. In interviews, KEY participants elaborated on the positive impact of support and services they received from CSA through the COVID-19 pandemic.

Participants noted beneficial services such as opportunities to participate in the community, support during crises, accessible communication lines, and responsiveness to needs. Respondents also described service

impacts including improved resiliency and problem solving, and progress toward goals.



The evaluation results suggest that KEY participants in most ways were living typical young adult lives. Almost all KEY participants were living in and integrated into the community. Nine out of ten participants were living in safe, affordable, accessible, and acceptable housing. The KEY program reported no days homeless, 29 nights spent in jail, 38 psychiatric hospital days, one negative disenrollment, and 11 participants who participated in an educational activity directed toward employment. The program continued to be diligent in appropriately documenting outcome information and completing the level of functioning assessments to ensure that participants receive the services that they need and are eligible for. In addition, at least half of participants were employed at least five hours per week making at least minimum wage, and one third of participants were working greater than 20 hours per week.

However, the program struggled this year in several areas. One out of ten participants did not meet with a healthcare professional for a baseline physical examination. And only about half of participants met the Polk County Region's criteria for Community Inclusion and engaging in community-based activities. The program also saw a rise in visits (11 visits) to emergency departments for psychiatric reasons.

The program was also challenged this year in the Participant Empowerment outcome area, though they showed a marked increase in their score from FY20. This outcome is determined solely on file reviews. The major challenge to the outcome was lack of documentation of regular conversations about employment or education.

### **COVID-19**

An additional challenge this year was the COVID-19 pandemic. The Iowa state of emergency began March 9, 2020, with the Governor's Proclamation of Disaster Emergency, with gradual reopening starting with an April proclamation for outside businesses, and May proclamations for indoor businesses. The pandemic resulted in statewide job layoffs and furloughs, and many citizens were substantially confined to their residences for long periods out of the year.

In interviews, participants were asked three questions in addition to questions normally asked to assess satisfaction with the program.

#### **1. Have your needs been met by your care team since the onset of the COVID-19 measures requiring people to shelter in place?**

Of the 15 respondents who participated in the satisfaction interviews, 12 responded Yes, 2 responded "Some, Not All," and 1 responded "Other." When asked to elaborate, 6 respondents agreed that they were getting their needs met with little change in services. Seven other participants noted that they experienced changes in their face-to-face meetings, including having more difficulty in arranging meetings, taking longer to arrange meetings, and missing group activities. Two noted that they eventually were getting their needs met, but it took a while to get up to speed. Of those who responded that their needs were not being met, one indicated that they were still looking for employment. One participant was more focused on family. The other was not sure.

#### **2. Who initiated contact between you and your team since mid-March?**

Of the 15 respondents, 13 responded that contacts were initiated by the agency and 2 responded "Other." None responded "Participant Initiated." When asked to elaborate, two participants elaborated that a relative was a go-between but also indicated that the agency initiated contact.

#### **3. In what ways did you communicate?**

Of the 15 respondents, 2 responded that contacts were conducted via text, 3 responded by email, and 10 responded "Other." When asked to elaborate, 6 indicated that they were meeting in person. Other forms of contact were "video chat" (including Zoom), voice mail, and Facebook.

Selected quotations from these questions have been included in the Participant Satisfaction Outcome section below.

Additional Satisfaction Questions Related to COVID-19 Pandemic - System Results				
	Yes	No	Some, Not All	Other
Have your needs been met by your care team since the onset of the COVID-19 measures requiring people to shelter in place?	12	0	2	1
	Participant Initiated	Agency Initiated	Other	Neither Initiated
Who initiated contact between you and your team since Mid-March?	0	13	2	0
	Phone	Text	Email	Other
In what ways did you communicate?	0	2	3	10

**Background Information:** David Klein, Law, Health Policy & Disability Center (LHPDC) Director of Technology, and Tessa Heeren, LHPDC Assistant Research Scientist, were the primary individuals involved in completion of the evaluation. University of Iowa's Iowa Social Science Research Center (ISRC) conducted the interviews.

**Procedures:** The following describes procedures for the FY2021 evaluation. Information was obtained from four sources:

- **Meetings with the program director and staff members**
- **File reviews**
- **Interviews with participants and family members**
- **Analysis of data submitted to the Polk County Region**

**Meetings.** In July 2021, LHPDC staff provided preliminary results of the file review and discussed discrepancies with the directors. A Zoom consultation was conducted with the directors in July to review the outcomes to date and receive their insights on agency performance for the year. Finally, an exit interview was held with Polk County Health Services staff and KEY agency staff in early August to review the complete report.

**File Reviews.** Using a similar process to the other Integrated Services Agency (ISA) programs, LHPDC randomly selected fifteen KEY files to review. File reviews were completed using the File Review Form (Appendix A). Although LHPDC usually conducts file reviews in two stages, the first in February and the second in June, this year, because of several issues with timing, the file reviews were conducted only during May. The expectation is that results reported regularly by the agency will be consistent with information in the file so that the Polk County Region has confidence in and can rely on the reported information. The Participant Empowerment outcome is based solely on the file review. As technical assistance, the program was provided with information from the file review. Information from the file review analysis is reported in Appendix E.

**Participant Interviews.** Usually in contrast to the evaluation for the other ISA programs, the program sets up face-to-face interviews with participants at their offices or phone interviews from the KEY offices. However, because of COVID-19, this year all interviews were conducted over Zoom, an

online meeting application. Of the 46 individuals who were enrolled in the KEY program in FY21, the evaluator interviewed 15. The interview questions are included as Appendix B of the report. Agree/disagree responses to the questions make up the statistics used for the Participant Satisfaction and Quality of Life outcome scores. Comments from the interviews are included in the Participant Satisfaction and Quality of Life outcome sections of the report. Although direct quotations are used, neither names of respondents nor staff members are included and gender of both respondents and staff members is randomly assigned to the quotations.

**Concerned Others Interviews.** Attempts were made to interview family members or concerned others of all KEY participants for whom contact information was provided. Contact information was provided for 5 family members or concerned others. Of the 5 contacts provided, the evaluator was able to interview 1 of the concerned others. Because of the low number of respondents, the Concerned Other Satisfaction outcome was not scored this year. The concerned others were contacted and interviewed via telephone. The concerned others interview questions are included as Appendix C of the report. Agree/disagree responses to the questions make up the statistics would have been used for the Family and Concerned Others Satisfaction outcome scores. Because only one concerned other was contacted this year, minimal comments from the interview are provided this year.

**Data Analysis.** In addition to data from file reviews and interviews, the evaluators were provided with the data that the program submits monthly to the Polk County Region.

**Scoring:** For 2021, outcomes were scored according to the following scale:

Exceeds Expectations	4
Meets Expectations	3
Needs Improvement	2
Does Not Meet Minimum Expectations	1

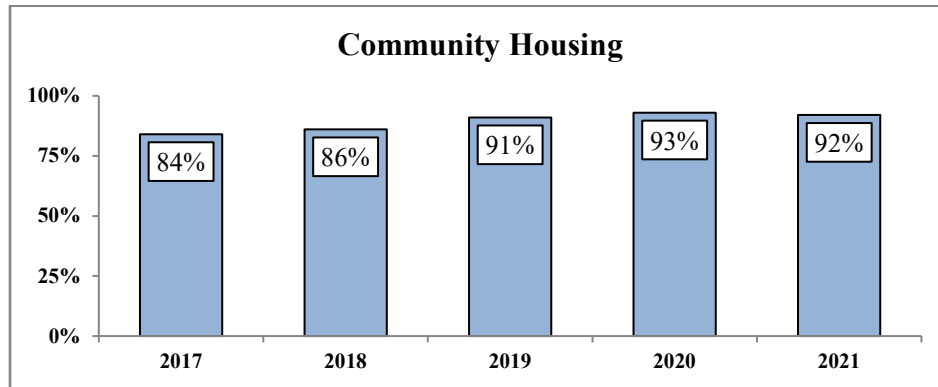
This scale aligns performance evaluation with contract expectations. Scores of one or two indicate unmet goal areas.

## OUTCOMES

This section of the report includes descriptions of and results for each outcome area. Evaluation results are discussed along with information from file reviews, participant and family member interviews, and meetings with program staff. Specific outcome criteria definitions are located in Appendix F.

## COMMUNITY HOUSING

**Outcome: Individuals with disabilities will live successfully within the community in safe, affordable, accessible, and acceptable housing.** The Polk County Region recognizes with this outcome that individuals with disabilities face challenges to find safe, affordable, accessible, and acceptable housing. The intent of this outcome is to assist individuals with disabilities in establishing a home that is personally satisfying, meets health and safety expectations, provides a barrier-free environment, and allows the individual to have the resources in order to meaningfully and fully participate in their community. To meet the outcome, individuals must meet all four criteria: safe, affordable, accessible, and acceptable.



Goal	Rating	Points
80% - 100%	Exceeds Expectations	4
70% - 79%	Meets Expectations	3
60% - 69%	Needs Improvement	2
Below 60%	Does not meet minimum expectations	1

Community Housing				
Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	93%	4	92%	4

**Comments:** Over nine of every ten KEY participants were living in safe, affordable, accessible, and acceptable housing this year steadily increasing from recent years. The program maintained its Exceeds Expectations rating for this outcome.

The agency reported that the agency values integrity. Some new staff focused on the definitions of the housing checklist and sometimes erred on the side of caution, categorizing participants as not meeting Community Living criteria when that may not have been necessary. This could have affected their score this year. The agency also reported that affordable housing is becoming harder to find, with at least one apartment building, who had before accepted Section 8 support, is now refusing this funding. The agency added that the KEY population, young adults, are generally good at using connections to find a place to stay with family and friends. It also helps that they have less history of evictions and criminal convictions.

The agency also reported that a few participants benefited from the COVID relief Economic Impact funding through a community action agency, based on loss of employment. Also, some benefited from the eviction moratorium. The agency praised the regional Housing Coordinator for her knowledge of

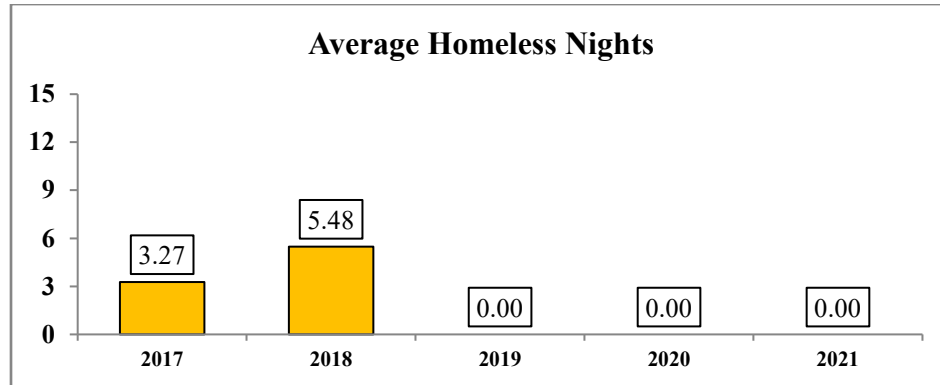


housing programs, advocacy for participants, and generally being a resource and knowledge base for the program.

In addition, the agency reported that they put effort into educating staff on the Section 8 process and participants about tenants rights, which was important because of the eviction moratorium, the need to submit paperwork to landlords, and connecting with Iowa Legal Aid if their situation escalated. Participants were able to access aid from the Economic Impact program (federal dollars for rent relief, local neighborhood organizations, and from mutual aid organizations locally, such as DSM Collective, North Des Moines Mutual Aid, and the Free Fridges program.

## HOMELESSNESS

**Outcome: Reduce the number of nights spent homeless.** The intent of this outcome is to provide adequate supports for people in the community. The outcome is measured by the average number of nights spent in a homeless shelter or on the street per individual per year.



Goal	Rating	Points
0 – 1 night	Exceeds Expectations	4
1.01 – 3 nights	Meets Expectations	3
3.01 – 10 nights	Needs Improvement	2
10+ nights	Does not meet minimum expectations	1

### Homelessness

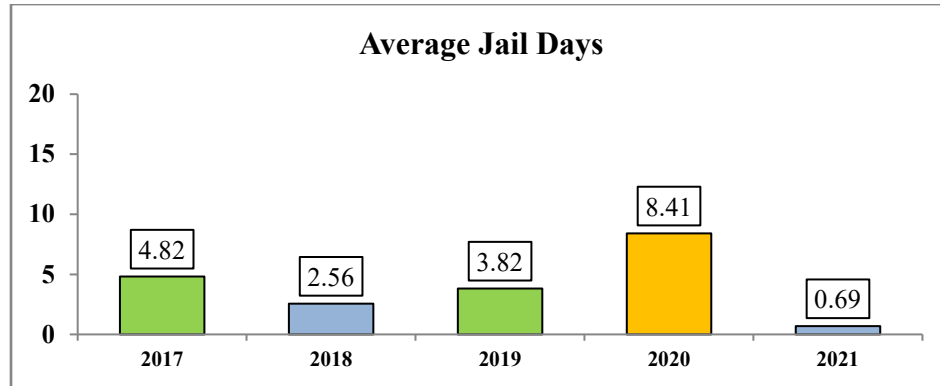
Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	0.00	4	0.00	4

**Comments:** Notably, for the third year no KEY participants spent a night homeless. Thus, the Homelessness Outcome Exceeded Expectations.

The agency reported being happy about a three-year streak in no one going homeless, which they would like to maintain. As with housing, this population is good at connecting with people who can help them out when they are struggling. They can find friends who will let them stay while looking for a place to live. Also, few have criminal convictions, which can make finding housing more difficult.

## INVOLVEMENT IN THE CRIMINAL JUSTICE SYSTEM

**Outcome: Minimize the number of days spent in jail.** The intent of this outcome is to provide adequate supports in the community to prevent offenses or re-offenses. The measure for this outcome is the average number of jail days spent per person per year.



Goal	Rating	Points
0.00 – 2.99 day	Exceeds Expectations	4
3.00 – 7.49 days	Meets Expectations	3
7.50 – 9.99 days	Needs Improvement	2
10+ days	Does not meet minimum expectations	1

Jail Days				
Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	8.41	2	0.69	4

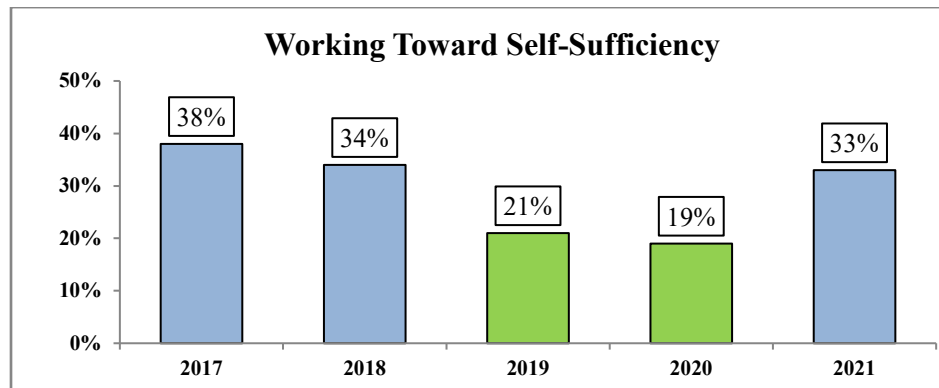
**Comments:** The KEY program reported a decrease in jail days from FY20, changing their rating to Exceeds Expectations for FY21. The program reported a total of 29 nights in jail, accrued by six participants. One participant spent 13 nights in jail during the year, and one spent 12 nights.

The agency reported that they were happy to have a big improvement from the prior year. One participant was on probation prior to enrollment in the program, and when confronted with a stressful situation, avoided it, changed addresses, and was arrested at work. This participant is not on probation, and the probation officer coordinates with KEY staff so they can join meetings.

## EMPLOYMENT OUTCOME – WORKING TOWARD SELF-SUFFICIENCY

**Outcome:** The number of individuals engaged toward employment during the year will increase.

The Polk County Region recognizes that employment is not only a profound issue for the disability community but a key to self-sufficiency. The Polk County Region has developed two employment outcomes with the intent to increase both the employment rate and earned wages. Employment–Working Toward Self-Sufficiency requires being employed 20 or more hours per week and earning at least minimum wage. Engagement Toward Employment requires working 5 or more hours per week and earning at least minimum wage. The employment outcome is measured during four weeks of the year in two reporting periods (typically October and April). Note that prior to FY18 reporting was conducted over four one-week reporting periods (quarterly).



Goal	Rating	Points
33% - 100%	Exceeds Expectations	4
18% - 32%	Meets Expectations	3
12% - 17%	Needs Improvement	2
Less than 12%	Does not meet minimum expectations	1

### Employment Outcomes

Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	19%	3	33%	4

**Comments:** This year, the KEY program increased their employment rating with a score of 33% in FY21 from the score of 19% in FY20 for the Working Toward Self-Sufficiency outcome. This changes the outcome to an Exceeds Expectations rating this year. Twelve out of 37 eligible participants on average were working at least 20 hours per week and earning at least minimum wage.

The agency reported that the program improved from last year. Notably, employment was not greatly affected by COVID. If anyone lost a job, they were quickly rehired, and once businesses started rehiring, the participants further benefited. The agency added that the KEY population are generally successful at getting hired.

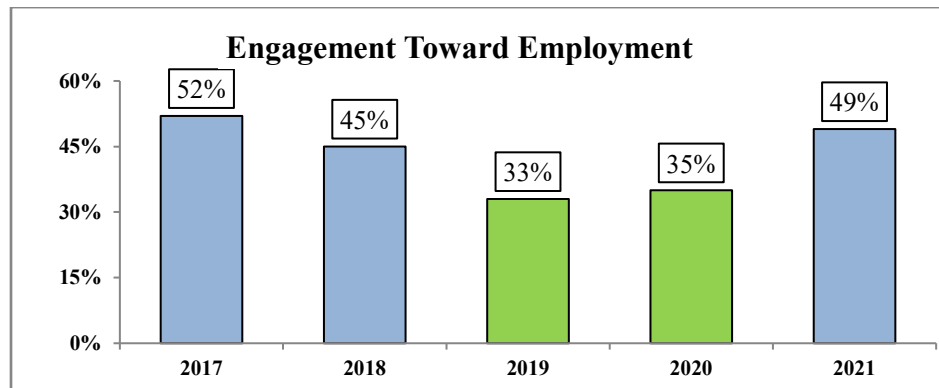
The agency reported that they collaborate with Connect 2 Careers classes, training, and paid internships. The staff attended orientation and provided transportation so participants could attend. They remarked that this program was good for youth, especially those who were hesitant about working. The program helped the staff maintain relationships during the lockdown, so they were ready to engage when the community opened up.

Staff added that they have strong technology skills, which helped them help participants apply for jobs online, create resumés, and practice interviewing. For one participant, staff communicated with the employer, gave suggestions and training advice, and were able to turn a high stress situation into a low stress one.

## EMPLOYMENT OUTCOME – ENGAGEMENT TOWARD EMPLOYMENT

**Outcome:** The number of individuals engaged toward employment during the year will increase.

The Polk County Region recognizes that employment is not only a profound issue for the disability community but a key to self-sufficiency. The Polk County Region has developed two employment outcomes with the intent to increase both the employment rate and earned wages. Employment–Working Toward Self-Sufficiency requires being employed 20 or more hours per week and earning at least minimum wage. Engagement Toward Employment requires working 5 or more hours per week and earning at least minimum wage. The employment outcome is measured during four weeks of the year in two reporting periods (typically October and April). Note that prior to FY18 reporting was conducted over four one-week reporting periods (quarterly).



Goal	Rating	Points
40% - 100%	Exceeds Expectations	4
18% - 39%	Meets Expectations	3
12% - 17%	Needs Improvement	2
Less than 12%	Does not meet minimum expectations	1

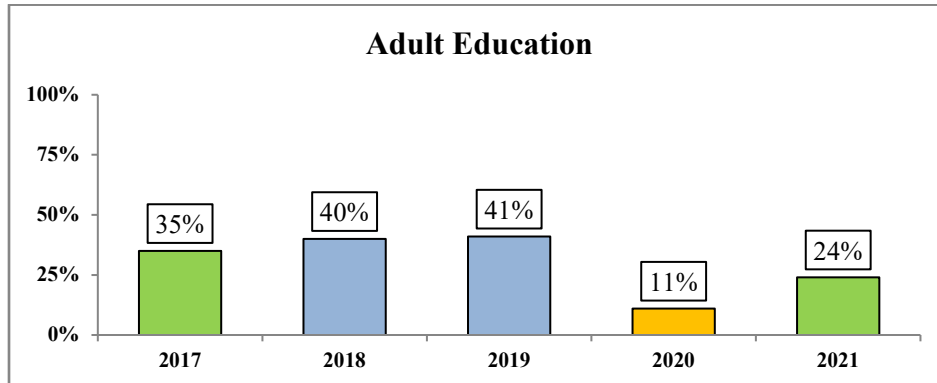
### Employment Outcomes

Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	35%	3	49%	4

**Comments:** The score for the KEY program also changed for the Engagement Toward Employment outcome area, increasing the rating to Exceeds Expectations. About half (18) of eligible participants (37) were working at least 5 hours per week and earning at least minimum wage.

## ADULT EDUCATION

**Outcome:** The number of individuals receiving classes or training provided by an educational institution or a recognized training program leading to a certificate or degree will increase. The Polk County Region recognizes with this outcome that education has an important impact on independence, employment, and earnings. Their intent for this outcome is to increase skill development. The outcome is measured by the percentage of employable individuals involved in training or education during the fiscal year.



Goal	Rating	Points
40% - 100%	Exceeds Expectations	4
20% - 39%	Meets Expectations	3
10% - 19%	Needs Improvement	2
Less than 10%	Does not meet minimum expectations	1

### Education

Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	11%	2	24%	3

**Comments:** KEY increased their score this year in education. The score of 24% changes the rating to Meets Expectations for the Adult Education outcome area. This year, 11 of the program's eligible participants were engaged in an education activity.

The agency reported that a few more participants were involved in higher education this year. Although the Des Moines Area Community College (DMACC) had closed their High School Equivalency Test (HiSET) program and did not offer it online, participants were able to participate in the Connect 2 Careers program, offered by the nonprofit Children & Families of Iowa.

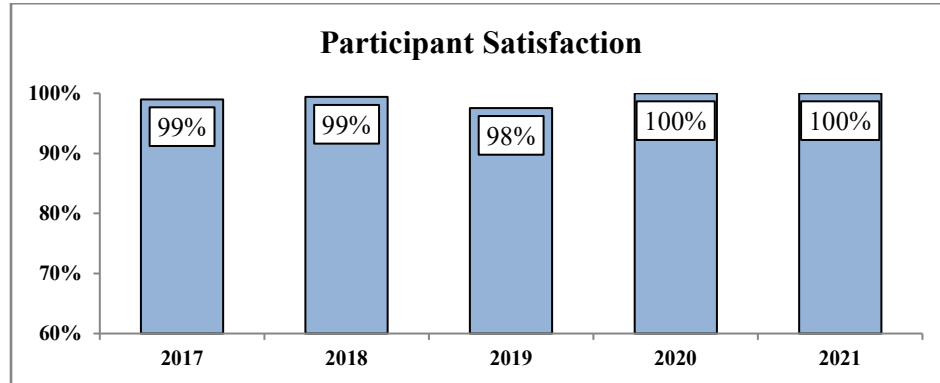
Staff reported that one staff was a graduate student and familiar with financial aid and the educational system, which was helpful this year. One participant was needing a sense of purpose and craving something more in life. Fortunately, DMACC started a new program, called the Young Adult Program, which helps youth get education certificates without needing a FAFSA because the program has no cost. The agency has developed a "symbiotic" relationship with the program, staff learned about DMACC resources, and KEY was able to promote its presence with DMACC.

The agency also reported that they focused on empowerment, using motivational interviewing to help participants identify their values and use positive affirmations postcards to support them during stressful times, such as during tests, and to celebrate victories.



## PARTICIPANT SATISFACTION

**Outcome: Individuals will report satisfaction with the services that they receive.** Individuals supported are the best judges of how services and supports are meeting their needs. Participant satisfaction is based on interviews by the independent evaluator of fifteen program participants from each agency. The Polk County Region's expectation is service excellence and expects that the vast majority of individuals will rate their program's service in the highest category.



Goal	Rating	Points
95% - 100%	Exceeds Expectations	4
90% - 94%	Meets Expectations	3
85% - 89%	Needs Improvement	2
Below 85%	Does not meet minimum expectations	1

**Participant Satisfaction**

Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	100%	4	100%	4

**Comments:** KEY participants continue to report being very satisfied with the services they receive and the staff that support them, retaining an Exceeds Expectations rating. Of the fifteen participants, when asked if they agree with eleven statements of satisfaction (see Appendix B), no one disagreed with a statement. In interviews, KEY participants elaborated on the positive impact of support and services they received from CSA through the KEY program. Themes from responses fit into three main themes: *effective services, positive relationships with agency or staff, and positive impacts of services.* Representative comments include:

### ***Effective Services***

*I feel like I have people that I can reach out to if I need something and knowing that I don't have to do the things that I find the most difficult alone.*

*She helped me get rental assistance. That is huge. If I didn't have that, my whole social security check would go to rent. She helped me get a table for my apartment. I couldn't get food stamps if it wasn't for her.*

*[I'm satisfied with] the help. A lot of people struggle finding resources. They don't know how to fill out an application for food stamps. It's overwhelming. I really appreciate, with KEY, that they help us accomplish those things.*

*Probably just transportation to places I need to get to. There isn't a lot I ask for. I try to be independent, but they give me a backup. Like if I need to get to a job interview, or other appointment, they are there.*

*I applied for a position at [employer]. They helped me with ideas of what would be a good fit for me. They were good ideas.*

### **Positive Relationships with Agency or Staff**

*They are giving me more opportunities [socially]. And they are fun to be around, so having them around makes me more comfortable.*

*I recommend them to other people, and I don't generally do that. I am not comfortable with a lot of people, but I have been with this program, and I like them.*

*I get the sense they really care ... versus other services [where] it has been more of a business relationship.*

*I want people to know they are always on time, always respectful, and they always help you with what you need.*

### **Positive Impacts of Services**

*I probably am getting along better with my family. I'm not having as many frequent hospitalizations so there's not as much stress and difficulty in my relationships.*

*Before KEY, I thought that everything was a crisis. Now I decide, "this is a crisis" and "this is not a crisis."*

*I did start going to church again, so that was actually a pretty huge thing. And I'm trying ... I did go to an art group and so I'm like getting out more in the community. I'm making more of an effort to get out there, so I guess it has kind of improved in that way.*

No KEY participants interviewed shared concerns or negative experiences with the KEY program or staff.

A few participants shared suggestions about how they would change the KEY program, mainly commenting on more frequent contact with staff, more social gathering opportunities, and improving staff turnover.

*Staff turn-over. I've been with KEY a long time and I have had many workers. That is hard. But it's one thing I would change.*

*I would still like more [contact].*

*Not always, sometimes I wish there was a little bit more in-person. I mean, I know things have been hard because of the pandemic, but still, I do wish that they would be able to see me more often. I text them and they sometimes make time to see me.*

## COVID-19

Participants shared how the pandemic and subsequent quarantine and social distancing recommendations (beginning March 2020) impacted their personal lives, program goals, and receipt of services. Participants commented on changes to circumstances, such as:

Participants reported satisfaction with support and services delivered via physically distant modes but look forward to restoring in-person individual meetings, community-based social events, and employment support.

Representative examples include:

*They were still able to give me rides ... they were just very careful. They had masks on and backseats. So they understood COVID, and they were up to the challenge. There were not any [unmet needs] that I can think of.*

*Just the group get-togethers, [I would restore those]. I think COVID and being isolated is really bad for mental health. We all need interaction.*

*We just didn't see people in-person as much at the time. We could video call. I have a laptop. I can't think of anything [any needs that were unmet].*

*I wish we still had the get-togethers [at KEY]. I remember we went bowling and to the zoo and I miss those. Maybe if KEY group gets vaccinated, we could all get together.*

*For a while there was no in-person services, which was really hard.*

*It just took longer, and I could not see them or always talk to them. So it was hard to find time to meet with them. I like to be in-person, so I did miss some Zoom calls.*

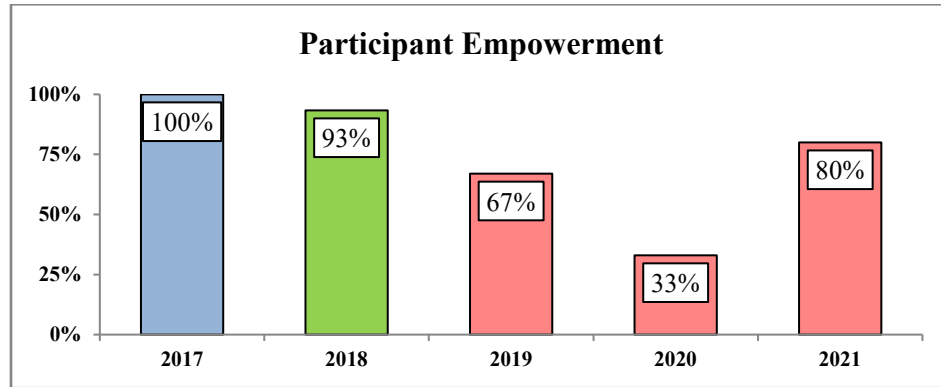
*I was at job training when COVID hit. They had training for cooking and cleaning rooms. That ended when COVID hit. If they [restore] that, I would be willing to go back. Right now, I'm looking for anything.*

*It didn't really change [with COVID]. If I needed something, I would reach out and we would find a way to meet in a good amount of time or talk on the phone.*

The agency reported that they continue to look for ways to improve their services. The agency praised their staff for their ability to meet people where they are at, particularly as the use of telehealth contact added extra requirements. Staff worked on connecting with participants. The agency added that participants had more contact with staff.

## PARTICIPANT EMPOWERMENT

**Outcome:** Individuals supported will achieve individualized goals resulting in feeling a sense of empowerment with the system. The Polk County Region recognizes with this outcome that individuals should be treated with respect, allowed to make meaningful choices regarding their future, and given the opportunity to succeed and the right to fail. Empowerment is based on the file review.



Goal	Rating	Points
95% - 100%	Exceeds Expectations	4
90% - 94%	Meets Expectations	3
85% - 89%	Needs Improvement	2
Below 85%	Does not meet minimum expectations	1

**Participant Empowerment**

Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	33%	1	80%	1

**Measurement:** The outcome is calculated as the percent of files reviewed that meet all four of the following criteria.

- Whether there was evidence that the participant was involved in setting the goals,
- Whether individualized, measurable goals were in place and what services the agency planned to provide to achieve the goals,
- Whether employment or education goals were addressed with the participant, or community integration if the participant is eligible for Level 5 or 6 supports, and
- Whether goals were regularly reviewed with respect to expected outcomes and services documented in the file.

**Comments:** Participant empowerment has been a strength of the KEY program. However, for the third year, the program has been challenged, scoring 80% this year, putting the Participant Empowerment rating at Does Not Meet Minimum Expectations but a notable increase from 33% from FY20. Of 15 files reviewed, 12 files met all four outcome criteria. The biggest reason for the score this year is that for three files, there was not sufficient documentation that the minimum expectation was met for regular discussions of employment or education (or community inclusion for those eligible for Level 5 or 6 supports).

Based on the file review, most participants had either an employment goal or education goal, where goals included getting or maintaining employment, volunteering, and starting or completing educational goals

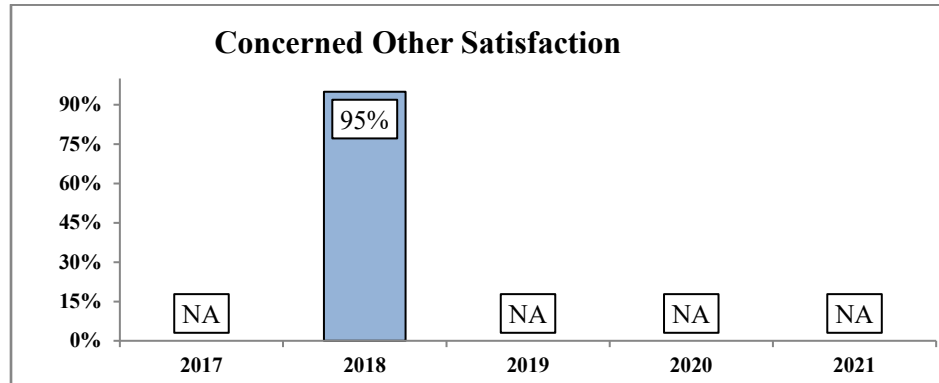
(high school, GED). Other common goals included getting into the community, maintaining or improving mental or physical health, getting or improving housing, being more independent, and learning to manage their finances. One wanted to improve their reputation, and one wanted to change to adult services.

The agency reported that discussions about employment and education were limited this year, though the program showed a “huge” improvement over last year. They have a “brand new” team this year, and they expect that the training process will continue to show progress. But this year, the focus was more on individual crises, rather than employment or education.

The staff reported that they realigned everything this year. They took care of sign-in sheets that didn’t get filed from the previous year and are working toward better documentation, for example. They did struggle with having regular conversations about employment or education as part of empowerment, but they believe the conversations happened but did not get documented. Usually these would be “I’m not ready to work” conversations and would not have been the focal point of the conversations.

## FAMILY/CONCERNED OTHER SATISFACTION

**Outcome: Families/Concerned Others will report satisfaction with services.** The intent of this outcome is to know how the families feel about the supporting agency and to ensure the supporting agency is providing the individuals supported and his/her family member with the needed services and supports. Family/concerned others' satisfaction is based on interviews by the independent evaluator of family members of fifteen program participants from each agency's program. The Polk County Region's expectation is service excellence. They expect that the vast majority of family members will rate their agency's program services in the highest category.



Goal	Rating	Points
95% - 100%	Exceeds Expectations	4
90% - 94%	Meets Expectations	3
85% - 89%	Needs improvement	2
Below 85%	Does not meet minimum expectations	1

**Family/Concerned Other Satisfaction**

Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	NA	NA	NA	NA

**Comments:** A primary purpose of the KEY program is to support these young adults who are aging out of the foster care system and who do not have family support. The program provided the evaluators with contact information for five family or concerned others who agreed to be contacted. One individual responded to the survey calls and completed the survey. Because of the low number of responses, as with previous years, this outcome was not scored, and just one edited comment from the interview is provided.

The one KEY participant concerned other participated shared largely positive experiences, noting that the participant's needs were being met and positive impacts of services, along with a concern for staff turnover.

*I'm going to credit a lot of people ... quite a few of his workers have been able to work with him regarding his emotional control. He has been hospitalized in the past for violent outbursts, but he's now the person who calms other people down. We're really proud of him and how he has been able to turn things around and social skills in general.*

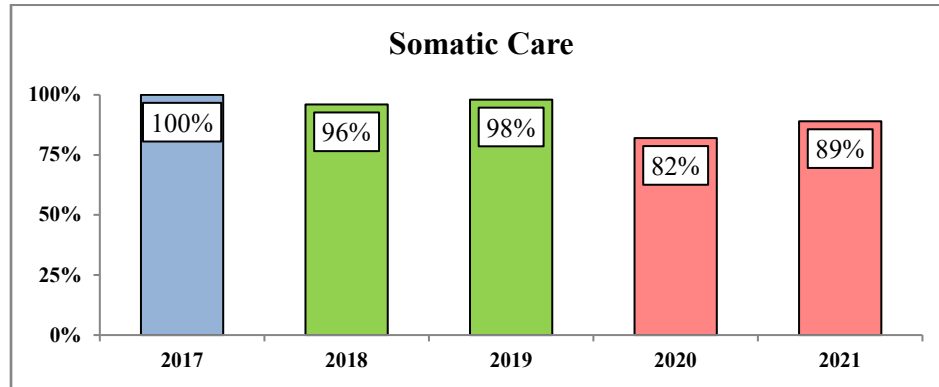
The agency reported that referrals for the program used to come almost exclusively from the foster care system. Now referrals from the foster care system are only about 10%, with the rest of referrals coming

from other programs (e.g., Integrated Health Homes), including Iowa Lutheran and Broadlawns inpatient staff. This may have had an effect on family and concerned others involvement with participants. In addition, the youth are resistant to having their parents involved in services.

The agency remarked that family and concerned other involvement ebbs and flows, and largely depends on how much the participants want them to be involved. The program has an annual review of a social supports form, showing natural supports outside of staff, and staff provide participants support for increasing or re-establishing connections with these natural supports. One barrier, however, is that youth do not want their closest friends to be involved in their social services.

## ACCESS TO SOMATIC CARE

**Outcome: Individuals supported will be linked to and receive somatic care.** The intent of this outcome is to ensure that people have accessible and affordable health care. This outcome is measured as the percentage of individuals having documentation supporting involvement with a physician.



Goal	Rating	Points
100%	Exceeds Expectations	4
95% - 99%	Meets Expectations	3
90% - 94%	Needs Improvement	2
Below 90%	Does not meet minimum expectations	1

Somatic Care				
Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	82%	1	89%	1

**Comments:** The KEY program did not have documentation of contact with health providers at the level of previous years. Documentation that participants had ongoing care from a specialist or saw a primary care physician during the year was at 89% for the Access to Somatic Care outcome area, resulting in a Does Not Meet Minimum Expectations rating. Forty-one of the 46 eligible individuals who participated in the program this year obtained somatic care.

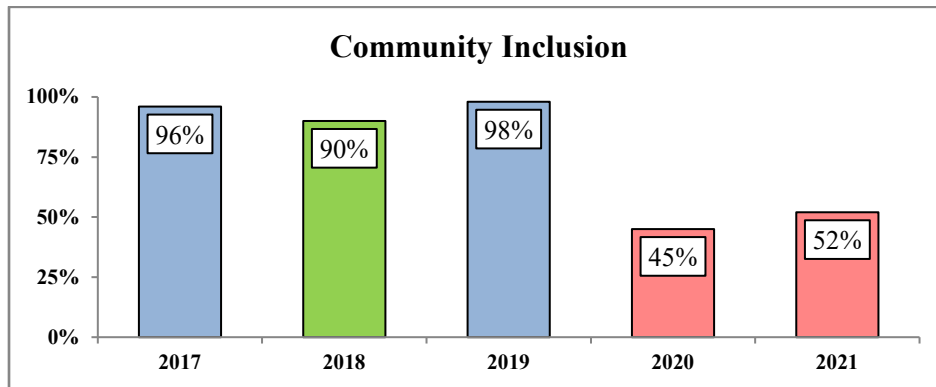
The agency noted that they were one person getting somatic care away from scoring Needs Improvement, illustrating how only a few people can have an effect on a small program. Only two participants can miss somatic care for them to meet expectations (above 90%). Four participants did not get somatic care. Staff added that from the perspective of this young population when nothing appears to be going wrong, why go to the doctor?



## COMMUNITY INCLUSION

### Outcome: Individuals supported will participate in and contribute to the life of their community.

People with disabilities spend significantly less time outside the home, socializing and going out, than people without disabilities. They tend to feel more isolated and participate in fewer community activities than their nondisabled counterparts [Source: The National Organization on Disability (N.O.D.)]. The intent of this outcome is to remove barriers to community integration activities so people with disabilities can participate with nondisabled people in community activities of their choice and become a part of the community. The outcome is measured as the percent of participants who exhibit ongoing involvement in community inclusion activities. Ongoing involvement is defined by involvement in any one category area (spiritual, civic, or cultural) three times during the year. Activities must be person directed, integrated, and community based (not sponsored by a provider agency).



Goal	Rating	Points
95% - 100%	Exceeds Expectations	4
90% - 94%	Meets Expectations	3
60% - 89%	Needs Improvement	2
Below 60%	Does not meet minimum expectations	1

Community Inclusion				
Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	45%	1	52%	1

**Comments:** The KEY program did not perform as highly this year as in years prior to COVID-19 at supporting participants to be active and involved in their communities, though the score was somewhat higher than FY20. Only 52% of participants reported participating in inclusion activities three times during the year resulting in a Does Not Meet Minimum Expectations rating.

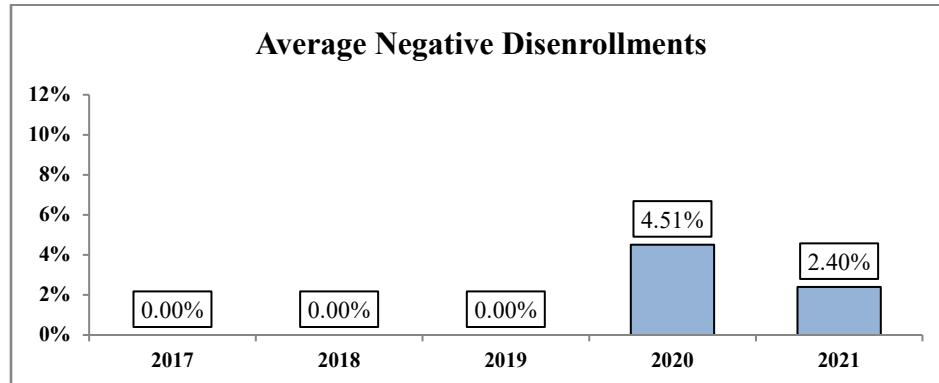
None of the files sampled for file review included participants who claimed credit for the Community Inclusion outcome. One KEY participant was documented as attending the July 4 fireworks in the files reviewed. The review did not locate documentation of other inclusion activities this year.

The agency reported that the KEY population were active in their community meeting and socializing with their friends, but because these activities tended to be in private settings, they did not conform to the definition of Community Inclusion activities and could not be scored.

The agency noted that several participants wanted to get in to talk therapy, and they were able to do it this year because of telehealth, where more could participate. Staff suggested that the COVID experience may have changed the way people do things forever for people who have access to online connections. For these people, online connections work for them. The agency encouraged Polk County have clearer definitions for virtual Community Inclusion activities.

## NEGATIVE DISENROLLMENT

**Outcome:** The agency will not negatively disenroll individuals qualifying for the program. The intent of the outcome is for agencies to develop trusting and meaningful relationships with their participants, ensuring continuity of care and avoiding loss of services for individuals because of their complex needs. This outcome is measured as the percentage of individuals who were negatively disenrolled. Negative disenrollments occur when services are terminated because an individual refuses to participate, is displeased with services, is discharged to prison for greater than 6 months, or the agency initiates the discharge.



Goal	Rating	Points
0% - 5%	Exceeds Expectations	4
5.01% - 15%	Meets Expectations	3
15.01% - 23%	Needs Improvement	2
Above 23%	Does not meet minimum expectations	1

### Negative Disenrollment

Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	4.51%	4	2.40%	4

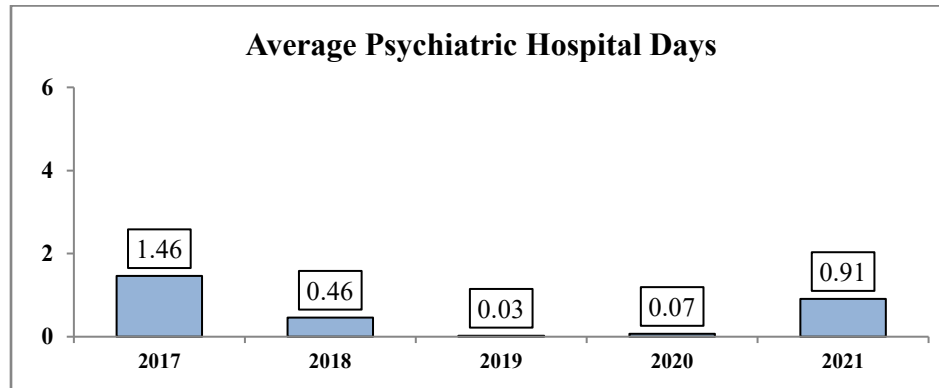
**Comments:** KEY Exceeded Expectations for the Negative Disenrollment outcome area. There was one negative disenrollment for the year for the program.

The agency reported that they had one referral who was not in the program long and never really engaged.

Staff added that they strive to engage and re-engage participants as they ebb and flow in their mental health. People need to engage the most when their mental health is at its lowest, which is also the time they need it the most.

## PSYCHIATRIC HOSPITALIZATIONS

**Outcome: Reduce the number of psychiatric hospital days.** The intent of this outcome is to provide adequate supports in the community so people can receive community-based services, reducing their need for hospitalization. This outcome is measured as the average number of nights spent in a psychiatric hospital per individual per year.



Goal	Rating	Points
0.00 – 1.99 day	Exceeds Expectations	4
2.00 – 4.99 days	Meets Expectations	3
5.00 – 5.99 days	Needs Improvement	2
6 + days	Does not meet minimum expectations	1

### Psychiatric Hospitalizations

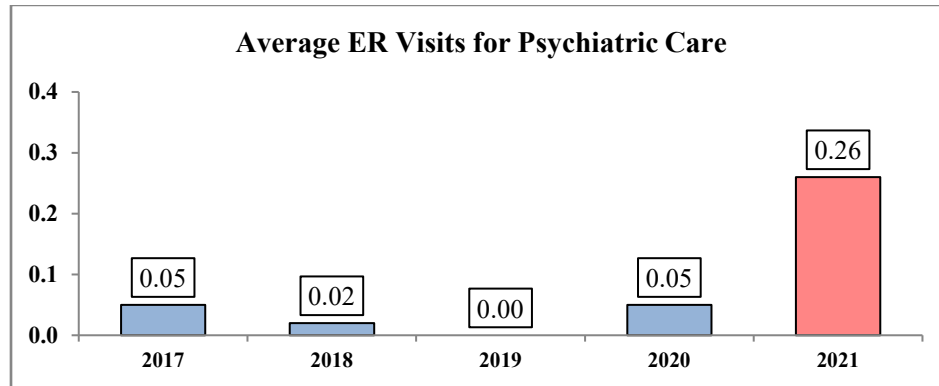
Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	0.07	4	0.91	4

**Comments:** The KEY program maintained its Exceeds Expectations rating in the Psychiatric Hospitalization outcome area. With 38 bed days reported in PolkMIS for psychiatric hospitalizations during the year, the program reported increased stays as compared to last year. One participant experienced 34 days hospitalized this year.

The agency reported that there was one individual who spent 34 nights in the hospital (and some in the ER). This person had more than 20 police calls in one month for suicidal ideation. The person has had more than 100 hospitalizations in the last five years. Now the symptoms are better managed, so there are fewer crises. Staff are offering contact via phone daily, where they talk about triggers, process the day, and list things to do in the evening to cope. The participant has recently gone as long as a full month without the ER or hospital.

## EMERGENCY ROOM VISITS FOR PSYCHIATRIC CARE

**Outcome: Reduce the number of emergency room visits for psychiatric purposes.** The intent of this outcome is to provide adequate supports in the community so that people do not access psychiatric care through the emergency room (ER). The outcome is measured as the average number of emergency room visits per individual per year. Emergency room visits are measured as the number of times the individual goes to the emergency room for psychiatric reasons, is observed, and returns home without being admitted.



Goal	Rating	Points
0 – 0.06 visit	Exceeds Expectations	4
0.07 – 0.10 visit	Meets Expectations	3
0.11 – 0.19 visits	Needs Improvement	2
0.20+ visits	Does not meet minimum expectations	1

**Emergency Room Visits**

Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	0.05	4	0.26	1

**Comments:** The KEY program was challenged this year in supporting participants in being connected to community providers for psychiatric care, rather than using emergency rooms. This year the program reported that 2 participants visited the emergency room for psychiatric care for a total of 11 visits, resulting in a Does Not Meet Minimum Expectations rating. One of these individuals was seen in the ER for psychiatric reasons 10 times this year.

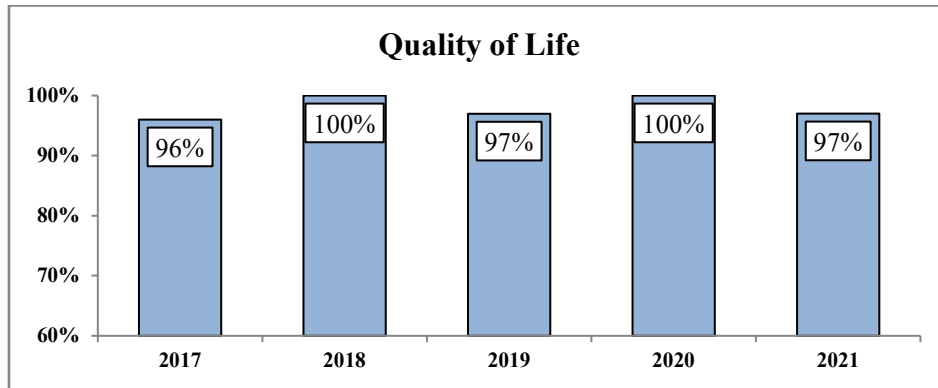
The agency reported that there was one individual who visited the ER frequently prior to enrollment. The police were being called out nearly every night. While KEY services reduced the frequency of crisis interventions, this individual still required some emergency stabilization, as the individual experienced frequent feelings of self-harm. This participant was often in the Crisis Observation Center in a collaboration with the therapist and probation officer.

The agency reported that this is what they created the KEY program for, for individuals who come out of placement and fall through the cracks, like the ones who repeatedly access the ER and hospitalization. Staff added that the team has adopted motivational interviewing techniques, which is working well with individuals who use the ER frequently. This population (youth) want “to do their own thing” and may be defiant of accepting direct suggestions from the team.

The agency added that there are several participants who are transitioning, and staff are providing specific trainings for these people. Staff recognize them as human beings and open to using names and pronouns of participants' choice.

## QUALITY OF LIFE

**Outcome: Increase participant satisfaction with housing, employment, education, and recreation/leisure activities.** The Quality of Life outcome is based on participant interviews. To assess satisfaction with quality of life, the independent evaluator asks participants to rate their satisfaction in the areas of housing, employment, education, family relationships, and recreation and leisure activities.



Goal	Rating	Points
95% - 100%	Exceeds Expectations	4
85%-94%	Meets Expectations	3
80%-84%	Needs Improvement	2
Below 80%	Does not meet minimum expectations	1

Quality of Life				
Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	100%	4	97%	4

**Comments:** KEY participants reported being very satisfied with improvements in the quality of their lives since entering the program, maintaining their Exceeds Expectations rating. Fifteen survey respondents answered 7 questions and provided descriptions about how participation in the KEY program contributed to their quality of life.

All of the comments were praise. No responses included content which could be categorized as concerns or suggestions.

### Improved outcomes

Within praise of the program, members talked about how their outcomes had improved and how they were able to make progress towards and achieve goals.

Representative comments include:

*I have more control over some of my anxiety. I have more control over seeking jobs myself. But they still help me with motivation. I have more motivation.*

*We've set up routines, so I have something to go to instead of calling on-call all the time.*

*They help me with my school work and they communicate with my teachers.*

*I had a problem with drinking. I've been sober for two weeks. They helped me get into a group, a class on drinking, and that helped.*

*I'm kind of off-and-on with my family. Since [staff name], my relationship with my mom has gotten a lot better.*

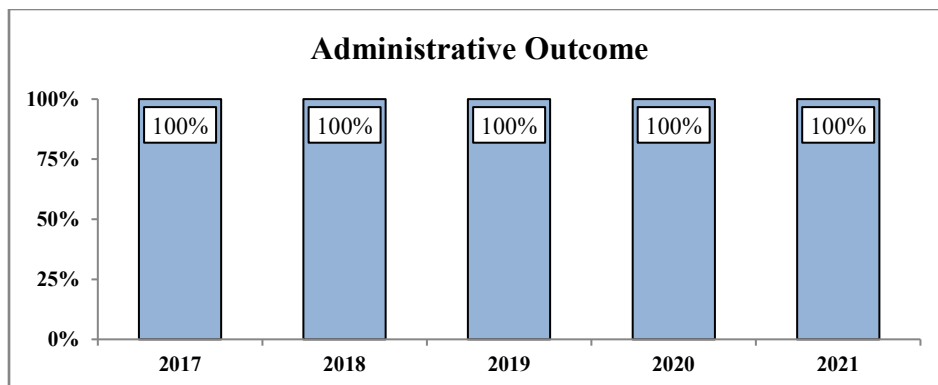
The agency reported that there were not a lot of opportunities for social situations this year, and it was hard to increase face-to-face contacts.

Staff added that they use tools such as positive behavior support (PBS), motivational interviewing, and other skills and resources to connect and engage participants to find strengths within individuals to live their best life.



## ADMINISTRATIVE OUTCOME AREAS

**Outcome:** Annually at the time of the individual's plan review (staffing), agency staff should complete a level of functioning assessment.



Goal	Rating	Points
97% - 100%	Exceeds Expectations	4
93% - 96%	Meets Expectations	3
89% - 92%	Needs Improvement	2
Below 89%	Does not meet minimum expectations	1

### Administrative Outcomes

Organization	2020 Results	2020 Score	2021 Results	2021 Score
KEY	100%	4	100%	4

**Comments:** The KEY program maintained its Exceeds Expectations rating again this year, with annual assessments of level of functioning completed for all KEY participants.

The agency reported that the team does a good job of tracking and making sure individuals have empowerment plans in place and incorporating those pieces annually.

## ***SUMMARY OF PROGRAM PERFORMANCE TABLE***

<b>2021 Outcome Summary</b>	<b>KEY Results</b>	<b>KEY Score</b>
Community Housing	92%	4
Homelessness	0.00	4
Involvement in the Criminal Justice System	0.69	4
Employment – Working Toward Self-Sufficiency	33%	4
Employment – Engagement Toward Employment	49%	4
Education	24%	3
Participant Satisfaction	100%	4
Participant Empowerment	80%	1
Concerned Other Satisfaction	NA	NA
Access to Somatic Care	89%	1
Community Inclusion	52%	1
Negative Disenrollments	2.40%	4
Psychiatric Hospital Days	0.91	4
Emergency Room Visits for Psychiatric Care	0.26	1
Quality of Life	97%	4
Administrative	100%	4

<b>Outcome Summary Comparison</b>	<b>Percentage</b>	<b>Total Points</b>
2020 Total (based on 60 possible)	75%	45
2021 Total (based on 60 possible)	78%	47

### **2021 Scale**

**88% – 100% Exceeds Expectations**  
**75% – 87% Meets Expectations**  
**63% – 74% Needs Improvement**  
**Below 63% Does Not Meet Minimum Expectations**

## APPENDIX A: FILE REVIEW FORM

### IOWA

#### Administrative

##### Q1.1. File Review Start Date

##### Q1.2. File review status

- ☐ First round (July-February)  
☐ Second round (March-June)  
☐ Final disposition (post discrepancy meeting)

##### Q1.3. Integrated Service type

- ☐ ISA  
☐ FACT  
☐ KEY

##### Q1.4. Reviewer

- ☐ Amy Blessing  
☐ Helaina Graves  
☐ Tessa Heeren  
☐ David Klein  
☐ Other

##### Q1.5. Member Identification

PolkMIS ID	<input type="text"/>
Participant First Name	<input type="text"/>
Participant Last Name	<input type="text"/>
Alias	<input type="text"/>
Date of Birth	<input type="text"/>
Age	<input type="text"/>
Date of Enrollment	<input type="text"/>
Agency	<input type="text"/>
Staff First Name	<input type="text"/>
Staff Last Name	<input type="text"/>

##### Q1.6. Are the Member ID fields above consistent with PolkMIS sample list?

- ☐ Yes  
☐ No

#### Polk MIS events

##### Q2.1.

Enter the Date(s) listed in PolkMIS

Enter NA if event isn't documented in PolkMIS during the reporting period (July 1 2020 - June 30 2021)

If an event type has more than one status, enter the most recent and active status

	Polk MIS Event List
	Date(s)
LOCUS / LOF	<input type="text"/>

## Polk MIS Event List

Date(s)

Housing Status (write in event type(s))

Employment status (write in event type(s))

Education

Somatic Care

Community Inclusion

Homelessness

Jail

Negative Disenrollment

Psychiatric Emergency Department

Psychiatric Hospitalization

## Q2.2. PolkMIS events notes

## Level of Functioning

## Q3.1. Level of Functioning (LOCUS/ICAP/SIS)

	Date(s)		PolkMIS and document consistent?		Assessment		
	PolkMIS	LOF document	Yes	No	LOCUS	ICAP or SIS	Document missing
Most Recent Level of Functioning	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Q3.2. LOF is 5 or 6?

- ☐ Yes  
☐ No (1-4)

## Q3.3. Level of Functioning notes

## Housing

## Q4.1. Housing Checklist and PolkMIS Events

Additional housing events can include

- Change of address
- Change in CL criteria
- Housing checklist completion

PolkMIS Event type		Date		Checklist Meets CL Criteria		Polk MIS meets CL Criteria		Does file documentation agree with PolkMIS event?	
		PolkMIS	Checklist	Yes	No	Yes	No	Yes	No
<input type="text"/> ✓	Annual Documentation	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="text"/> ✓	Additional housing event 1	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

PolkMIS Event type		Date		Checklist Meets CL Criteria		Polk MIS meets CL Criteria		Does file documentation agree with PolkMIS event?	
		PolkMIS	Checklist	Yes	No	Yes	No	Yes	No
<input type="checkbox"/> Additional housing event 2		<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Additional housing event 3		<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Additional housing event 4		<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Additional housing event 5		<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Q4.2. Home visits**

Enrollment Date:

*Home visit criteria: no more than 90 days lapse between home visits*

	Addressed 4 times throughout year? Enter at least one date for each quarter				Not applicable Request not to visit at home	Home Visits Score	
	~July-Sept	~Oct-Dec	~Jan-Mar	~Apr-June		Total found	Total expected
Home Visits phone and video call meet criteria	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

**Q4.3. All housing events agree and documented? If no, explain in notes**

- ☐ Yes  
☐ No

**Q4.4. Housing notes (documentation source, address, relocation dates, checklist details, etc.)**

**Employment and Wage Reporting****Q5.1. Employment**

Select all applicable employment statuses during the reporting period and write in dates of active status

From PolkMIS:

Employed

☐ Employed (includes Competitive, Does not meet criteria, CWE for MEPS, Enclave, Self Employed, Supported Employment, Workshop)

☐ >=20'/wk & >=min wage 
☐ 5'-19'/wk & >=min wage 

Inactive employment

☐ Unemployed (includes Engaged, not engaged, education skills/training) 
☐ Not in Labor Force (includes LOS 5/6, retired) 
**Q5.2. Does the participant's PolkMIS status indicate any type of Employment in the fall (10/18/20 - 10/31/20) or spring (4/16/21 - 4/30/21) reporting periods?**

- ☐ Yes, fall reporting period  
☐ Yes, spring reporting period  
☐ No, neither reporting period

**Q5.3. Hours worked and wages**

	Hour and wage reporting			Source of wage reporting	All hour and wage information included and consistent across PolkMIS and agency?	
	Hours worked (over 2 week time period)	Wage (per hour)	Date verified		Yes	No
Fall Reporting Period (10/18/20 - 10/31/20)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="v"/>	<input type="radio"/>	<input type="radio"/>
Spring Reporting Period (4/16/21 - 4/30/21)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="v"/>	<input type="radio"/>	<input type="radio"/>

**Q5.4. Employment and Wage and Hour reporting comments****Examples:***Dates active in each employment status**Change in Job**Documentation inconsistencies*

**Education****Q6.1.****Education**

	Dates		Educational activity details	Documented in file?		Agrees with Polk MIS?		If no, type of discrepancy	
	From PolkMIS	From file		Yes	No	Yes	No	Over-reported (Claimed in MIS but not Documented)	Under-reported (Documented, but not claimed in MIS)
Education	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Q6.2. Education notes**

**Participant Empowerment****Q7.1. Empowerment plan goals**

	Goals and services	
	From empowerment plan(s), enter participant goals	From reviewer notes, enter services provided that are aligned with goals
Empowerment plan 1 goals	<input type="text"/>	<input type="text"/>
Empowerment plan 2 goals (if provided and unique from empowerment plan 1 goals)	<input type="text"/>	<input type="text"/>

	Goals and services	
	From empowerment plan(s), enter participant goals	From reviewer notes, enter services provided that are aligned with goals
Empowerment plan 3 goals (if provided and unique from empowerment plan 1 and 2 goals)		

### Q7.2. Empowerment Discussion Quarterly Expectations

Enrollment Date:

	Addressed 4 times throughout year? Enter at least one date for each quarter				Empowerment discussions	
	~July-Sept	~Oct-Dec	~Jan-Mar	~Apr-Jun	Found	Expected
Employment or Education discussed						
Community Inclusion discussed						

### Q7.3. Empowerment planning

	Yes	No
Individualized and measurable goals are in place (see Q7.1)		
<ul style="list-style-type: none"> <li>Empowerment plans provided for entire reporting period (July-June)</li> <li>Empowerment plan meeting held during reporting period, date(s)</li> </ul>	<input type="radio"/>	<input type="radio"/>
Documentation supporting consumer involvement in goal development		
<ul style="list-style-type: none"> <li>Client signature included on each plan (or appropriate notation), provide date(s)</li> </ul>	<input type="radio"/>	<input type="radio"/>
Empowerment discussions (employment, education, community inclusion) regularly held (Q7.2)	<input type="radio"/>	<input type="radio"/>
Documentation in the file reflecting services delivered (see Q7.1)		
<ul style="list-style-type: none"> <li>Monthly contact maintained throughout evaluation period (Q11.1)</li> </ul>	<input type="radio"/>	<input type="radio"/>

### Q7.4. Participant Empowerment score (Q7.3 total)

Score achieved	
Score expected	4

### Q7.5. Participant Empowerment comments

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### Somatic Care

#### Q8.1. Somatic care

	Dates		Somatic care	Documented in file?		Agrees with Polk MIS?		If no, type of discrepancy	
	From PolkMIS	From file		Details, describe discrepancy if applicable	Yes	No	Yes	No	Over-reported (Claimed in MIS but not Documented)
Somatic Care				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Q8.2. Somatic Care notes**

**Community Inclusion**

**Q9.1. Community Inclusion**

	Dates		CI details from file  Activities	Documented in file?		Agrees with Polk MIS?		If no, type of discrepancy	
	From PolkMIS	From file		Yes	No	Yes	No	Over-reported (Claimed in MIS but not Documented)	Under-reported (Documented, but not claimed in MIS)
Community Inclusion	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Q9.2. Community inclusion notes**

*Include any activities that were reported as community inclusion, but do not meet criteria*

**Adverse Experiences**

**Q10.1. Adverse experiences**

	Event reported in Polk MIS?	Event documented in file?		Do PolkMIS events agree with file?	
	Date, if applicable	Yes	No	Yes	No
Homelessness	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Jail	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Negative Disenrollment	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Psychiatric Emergency Room Visits (not admitted)	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Psychiatric Hospitalizations	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Q10.2. Adverse Experiences notes**

**Routine Expectations**

**Q11.1. Routine contact**

**Enrollment date:**

	Were services provided and documented?		
	Yes	No	NA
Monthly contact initiated by agency and documented?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Were services provided and documented?

	Yes	No	NA
Dates of program enrollment consistent between PolkMIS and Agency?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Notes are original (not copied and pasted)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Q11.2. Routine contact notes**

**Reviewer Notes****Q15.1. Finalize reviewer notes**

Include details such as

- Date of contact
- Method of contact (Include location if face-to-face)
- Notable events related to participant circumstances (e.g. transportation, health, housing, major relationships)
  - Safety Concerns
  - Substance Use
  - Housing Issues, change in meeting checklist criteria
  - Change in Employment
  - Education
  - Goal planning, annual meeting
  - Relocation, moved, change households
  - Somatic care
  - ED visits
  - Hospitalization
  - Homelessness
  - Jail
  - Negative disenrollment
  - Transportation Issues
  - Changes to health
- Include details such as dates, sources, context about notable events if applicable

Examples of "other" notable events can be anything that affects a participant's treatment or progress, such as:

- Relationship issues
- Trauma
- Medication mismanagement
- Unable to be located
- Change in program status (on hold status, disruptions in Medicaid eligibility)
- Notes about participant, but not direct contact (such as provider-to-provider communication, or MCO communication)
- 

Note discrepancies such as

- Gaps in contact for longer than 30 days
- Repetitive notes (copied and pasted repeatedly)
- Notes do not match participant file
- Inconsistencies between PolkMIS documents and agency documents
- Mismatch between services and activities and participant goals (when goals are provided)
- Logical inconsistencies
- Date inconsistencies
- Missing documentation

**Q15.2. Review notes from previous sections****Q15.3. Final status summary**

- ☐ No discrepancies to report
- ☐ Potential discrepancies to discuss or clarify
- ☐ Discrepancies present - scores affected

**Q15.4. Please provide all information from your file review needed to understand the context and nature of discrepancies found**

*Include dates of case notes and how the file is discrepant. For example, how notes and PolkMIS event don't match, lack of documentation supporting requirements, or how notes indicate requirements have not been met.*

**Start each new discrepancy with \*\* to keep separate**

## ***APPENDIX B: PARTICIPANT SATISFACTION SURVEY QUESTIONS***

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Participants are asked whether they agree or disagree with the following eleven questions. The agency receives a point for every question that the participant agrees with (i.e., is satisfied). Participants are also asked additional questions about quality of life indicators and ideas for improving their ISA program.

B2. My staff helps me get the services I need.

B3. I know who to call in an emergency.

B6. My staff talks with me about the goals I want to work on.

B7. My staff supports my efforts to become more independent.

B8. My staff are willing to see me as often as I need.

B9. When I need something, my staff are responsive to my needs.

B10. The staff treat me with respect.

B11. If a friend were in need of similar help, I would recommend my program to him/her.

B12. I am satisfied with my staff.

B13. I am getting the help and support that I need from staff and agency.

B18. I have medical care available if I need it.

To assess improvement in quality of life, participants are asked the following seven questions. Agencies receive one point for each statement that the participants agrees with (i.e., is satisfied).

B5A1 I deal more effectively with daily problems since I entered the program.

B5A2 I am better able to control my life since I entered the program.

B5A3 I am better able to deal with crisis since I entered the program.

B5A4 I am getting along better with my family since I entered the program.

B5A5 I do better in social situations since I entered the program.

B5A6 I do better in school and/or work since I entered the program.

B5A7 My housing situation has improved since I entered the program.

## ***APPENDIX C: CONCERNED OTHERS SATISFACTION SURVEY QUESTIONS***

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Family members are asked whether they agree or disagree with the following ten questions. The agency receives a point for every question that the participant agrees with (i.e., is satisfied). Family members are also asked for their ideas for improving their family member's KEY program.

B1 My family member and I know my family member's KEY staff.

B2 I am confident that our KEY staff provides me with resources about programs and services that are beneficial to my family member and family.

B3 Our KEY staff helped us in obtaining access to the services that our family member needs.

B4 My family member's KEY staff contacts me, when appropriate, so I feel informed.

B5 KEY staff are available to assist me when issues or concerns with services arise.

B7 My family member's input into the service plan was well-received and his or her ideas were included in the plan.

B8 The KEY program staff treats my family member with dignity and respect.

B9 I am satisfied with my family member's KEY worker.

B10 My family member is getting the services she or he needs.

B11 If I knew someone in need of similar help, I would recommend the KEY program.

## ***APPENDIX D: EXAMPLES OF COMMUNITY INCLUSION***

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### **Spiritual**

### **Civic**

### **Cultural**

Attended Fourth of July fireworks

\* Note: None of the files sampled for review claimed Community Inclusion. What is listed includes any community inclusion activities described in the files.

***APPENDIX E: KEY FILE REVIEW RESULTS***

Outcome Area	Specific Outcome	KEY		
		Frequency	Expected	Accuracy
<b>Level of Functioning</b>	File and PolkMIS Agree	15	15	100%
<b>Housing</b>	File and PolkMIS Agree	13	15	87%
<b>Education</b>	File and PolkMIS Agree	15	15	100%
<b>Employment</b>	File and PolkMIS Agree	9	9	100%
<b>Empowerment</b>	All Goal Components Present	12	15	80%
<b>Somatic Care</b>	File and PolkMIS Agree	15	15	100%
<b>Community Inclusion</b>	File and PolkMIS Agree	15	15	100%
<b>Homelessness</b>	File & PolkMIS Agree	15	15	100%
<b>Jail</b>	File and PolkMIS Agree	15	15	100%
<b>Negative Disenrollment</b>	File & PolkMIS Agree	15	15	100%
<b>ER Visits</b>	File and PolkMIS Agree	15	15	100%
<b>Psychiatric Hospitalizations</b>	File and PolkMIS Agree	15	15	100%

## *APPENDIX F: OUTCOME CRITERIA*

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**Community Housing:** Community housing is assessed annually and after each housing change (e.g., move or change in criteria). To meet the outcome, individuals must meet all four criteria: safe, affordable, accessible and acceptable.

A living environment meets safety expectations if all of the following are met [or if an intervention is addressed in the individual's plan/action to resolve the situation has been taken]: (a) the living environment is free of any kind of abuse (emotional, physical, verbal, sexual, and domestic violence) and neglect, (b) the living environment has safety equipment (smoke detectors or fire extinguishers), (c) the living environment is kept free of health risks, (d) there is no evidence of illegal activity (selling/using drugs, prostitution) in the individual's own apartment or living environment, and (e) the individual knows what to do in case of an emergency (fire, illness, injury, severe weather) [or has 24-hour support/equivalent]. All living situations with abuse are considered unsafe, even if a plan is in place.

A living environment meets affordability expectations if no more than 40% of the individual's income is spent on housing (i.e., cost of rent and utilities), or if they receive a rent subsidy. The Polk County Region has set this criterion at 40% of income to be consistent with the U.S. Department of Housing and Urban Development's Housing Choice Voucher Program (Section 8) requirements. Income sources include Employment Wages, Public Assistance, Social Security, SSI, SSDI, VA Benefits, Railroad Pension, Child Support, and Dividends. Starting FY16, the Affordability criteria for Community Living was broadened to allow for participants to pay more than 40% of their income to rent and utilities provided that (1) the individual is on the Section 8 waiting list and is aware that they will either need to move or will not be eligible for Polk County Rent Subsidy should they be offered Section 8 and (2) the individual is able to pay bills to ensure their basic needs are met.

A living environment meets accessibility expectations [or has 24-hour equivalent] if the living environment allows for freedom of movement, supports communication (i.e. TDD if needed), and supports community involvement (i.e. being able to reach job and frequently accessed community locations without use of paratransit or cabs).

A living environment meets acceptability expectations if the individual (rather than guardian) chooses where to live and with whom. There may be a number of parameters (i.e. past decisions, earned income) which may limit individuals' choices, but the environment should be acceptable at the point in time when choices are presented. Individuals with guardians should participate and give input into their living environment to the greatest extent possible.

**Homelessness:** The outcome is measured by the average number of nights spent in a homeless shelter or on the street per individual per year. For the purposes of this outcome, transitional shelters are not considered a shelter. A transitional shelter is a program and/or residence in a shelter where the individual pays toward rent and/or is developing skills to acquire housing.

**Involvement in the Criminal Justice System:** The measure for this outcome is the average number of jail days utilized per person per year. Jail days are measured by the number of nights spent in jail. Jail time assigned for offenses committed prior to enrollment in the program is not included in the calculations.

**Employment Outcomes:** Employment— Working Toward Self-Sufficiency is measured as the percentage of employable individuals working 20 hours or more per week and earning the minimum wage or greater

during the specified reporting weeks. Engagement Toward Employment is measured as the percentage of employable individuals working at least 5 hours per week and earning the minimum wage or greater during the specified reporting weeks. The employment outcomes do not apply to individuals between 18 and 64 who have been assessed a level of support of 5 or 6, involved in an ongoing recognized training program (secondary school, GED, or post-secondary school), or individuals 65 or older who choose not to work (i.e., are retired).

Because employment may vary during the year, the employment outcome is assessed during specific weeks of the year. The final outcome is the average of participants who were working toward self-sufficiency or engaged toward employment during these reporting weeks.

**Education:** The outcome is measured by the percentage of employable individuals involved in training or education during the fiscal year. A recognized training program is a program that requires multiple (3 or more) classes in one area to receive a certificate to secure, maintain, or advance the individual's employment opportunities.

**Participant Satisfaction:** Participant satisfaction is based on interviews by the independent evaluator of fifteen program participants from each agency. The interviewer asks program participants questions regarding access, empowerment, and service satisfaction. Participants are asked eleven questions concerning their satisfaction with their caseworker, agency program and services. A point is awarded for each question for which the participant reports being satisfied (i.e., agrees with the question). Occasionally, people chose not to respond to all questions. A program's score is based on the percentage of points achieved out of the total possible points for the program given the number of responses.

**Family and Concerned Other Satisfaction:** Family/concerned others' satisfaction is based on interviews by the independent evaluator of family members of fifteen program participants from each agency's program. The interviewer asks questions regarding access, empowerment, and service satisfaction. Family members are asked ten questions. A point is awarded for each question for which the family member reports being satisfied (i.e., agrees with the question). Occasionally, family members choose not to respond to all questions. A program's score is based on the percentage of points achieved out of the total possible points for the program. Similar to participant satisfaction, the Polk County Region's expectation is service excellence. They expect that the vast majority of family members will rate their agency's program services in the highest category.

**Access to Somatic Care:** This outcome is measured as the percentage of individuals having documentation supporting involvement with a physician. Someone is linked to somatic care if the person has had an annual physical, if any issues identified in the physical exam needing follow-up are treated, if ongoing or routine care is required, or if the individual sees a doctor for a physical illness. The independent evaluator also discussed somatic care with participants and family members during interviews.

**Community Inclusion:** The outcome is measured as the percent of participants who exhibit ongoing involvement in community inclusion activities. Ongoing involvement is defined by involvement in any one category area three times. The categories are spiritual, civic (local politics & volunteerism), and cultural (community events, clubs, and classes). An activity meets the definition if it is community-based and not sponsored by a provider agency, person-directed, and integrated. Individuals can participate in activities by themselves, with friends, support staff persons, or with natural supports. Activities sponsored by or connected with an agency serving people with disabilities and everyday life activities do not count toward activities for the purposes of this outcome area. The evaluator will also verify community activities through file reviews.



**Negative Disenrollment:** This outcome is measured by the percentage of individuals who were negatively disenrolled. Disenrollment is the termination of services due to an individual leaving the program either on a voluntary or involuntary discharge. Negative disenrollments occur when an individual refuses to participate, is displeased with services, is discharged to prison for greater than 6 months, or when the agency initiates discharge. Neutral disenrollments occur when the individual no longer needs services or is no longer eligible, leaves Polk County, dies, has a change in level of care, or is incarcerated due to activity prior to enrollment.

**Psychiatric Hospitalizations:** This outcome is measured as the average number of nights spent in a psychiatric hospital per individual per year. If an individual is hospitalized under an 812 (competency to stand trial), then the days spent at Cherokee or Oakdale are counted as jail days; however, if the individual is hospitalized as a 229 (voluntary or involuntary psychiatric hospitalization), then those days are counted as psychiatric bed days.

**Emergency Room Visits for Psychiatric Care:** The outcome is measured as the average number of emergency room visits per individual per year. Emergency room visits are measured as the number of times the individual goes to the emergency room for psychiatric reasons, is observed, and returned home without being admitted.

**Quality of Life:** The Quality of Life outcome is based on participant interviews. To assess satisfaction with quality of life, the independent evaluator asks participants to rate their satisfaction in the areas of housing, employment, education, family relationships, and recreation and leisure activities. Individuals are asked seven questions. A point is awarded for each question for which the individual reports being satisfied (i.e., agrees with the question). Occasionally, individuals chose not to respond to all questions. A program's score is based on the percentage of points achieved out of the total possible points for the program.

## *APPENDIX G: REFERENCES*

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