

# 2015-2016 ASFC Performance Feedback

ASFC continued to receive outstanding audit scores in 2015 and demonstrate our dedication to excellence. Out of 100% total possible, ASFC scored 85% during our 2015 APS audit.

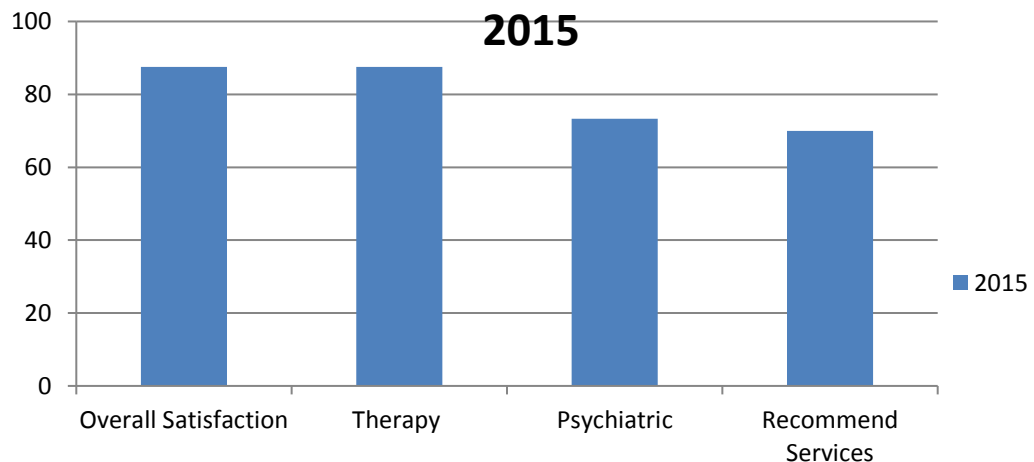
**Accessibility:** ASFC evaluates how it can best meet the treatment needs of clients/consumers and remove any potential barriers to receiving services. Our center is secured for safety of staff and clients who are on-site. All areas are wheelchair accessible and ASFC uses Homedic devices to soundproof for the benefit of privacy/confidentiality. While ASFC continually evaluates to increase accessibility, we also have a Suggestion Box and ideas for improving our accessibility are always welcome. ASFC, for example, partners with Georgia Relay for improved provision of services for our hearing impaired clients. ASFC continues to provide the majority of CORE services (professional therapy and paraprofessional/skills training) in-home/in-community to reduce/prevent a barrier due to transportation problems.

**Satisfaction** feedback from stakeholders is an important factor for consideration by ASFC leadership. Stakeholders include clients/consumers and families, referral sources, community partners, and staff/employees.

## Feedback from Stakeholders include the following methods.

**1. Client Satisfaction Surveys** ASFC distributes satisfaction surveys to persons served/guardians. The survey identifies date of survey and allows for respondents to remain anonymous. During 2015 these surveys were received using Survey Monkey. Annual results are below in the graph.

\*based on average percentage score given by respondents



## 2. Quality Assurance Calls

Consumers and/or referral sources may receive a call from leadership staff to determine level of satisfaction, identify and address concerns, and determine whether an adjustment to services/treatment plan is indicated.

2015 SUMMARY: We had positive responses from our QA Calls (46 calls). These calls contain standard questions about how services are going, relationship with therapist or paraprofessional, items needing to be addressed, needs being met, and open comment area. For this year the majority of QA calls yielded positive responses. We use this feedback to let our staff know when they are doing well and also to catch any quality issues that may present and address those as quickly as possible.

## 3. Client Complaint/Grievances

ASFC has the responsibility to investigate complaints/grievances and resolve any problems that may arise. ASFC wants to give you a formalized way to express your concerns (ie, file a grievance) to management.

Please click [Consumer Concern Form](#) to download; once you have filled in the information, please email it to the [State Privacy Officer](#).

## 4. Referral Source Survey

ASFC surveys people who refer consumers (ie, DFCS, primary care physicians, etc) to ASFC via Survey Monkey. In addition to Survey Monkey, these referral sources may be given survey links during marketing efforts and face-to-face/telephonic inquiries.

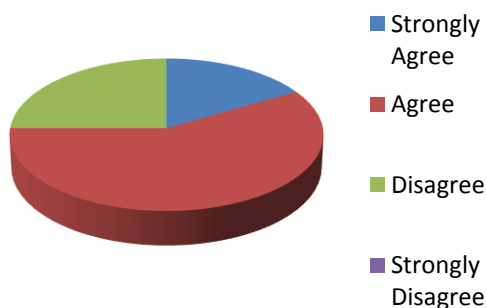
Please take a moment to let us know how we are doing by completing linked survey.

[Click here to take the Referral Source Stakeholder Survey.](#)

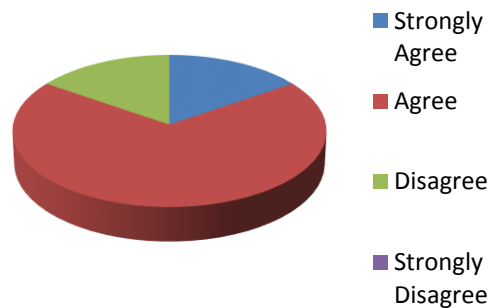
## 5. Employee Feedback

Employee feedback is gathered through several methodologies including: employee satisfaction surveys, annual training surveys, performance evaluations, and employee grievance procedures. The first three quarters of 2016 [Staff Satisfaction Survey](#) showed:

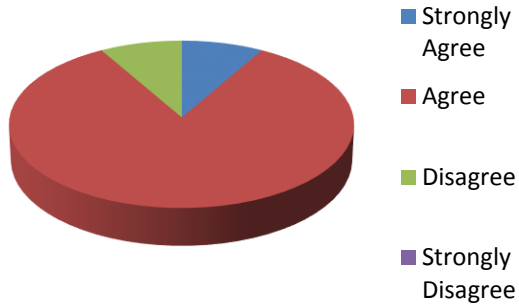
**Supervisor Available  
With Solutions**



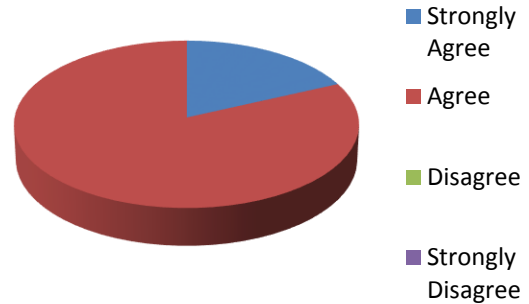
**Regular Training  
Opportunities**



## Effective Policy



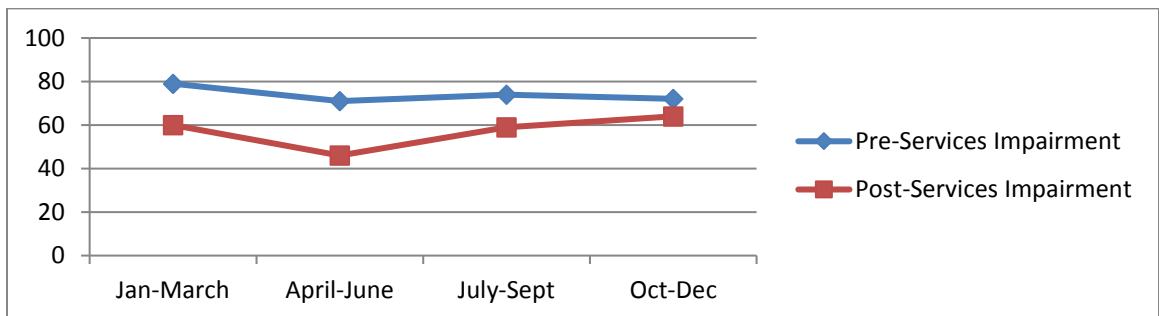
## Quality Care Provided



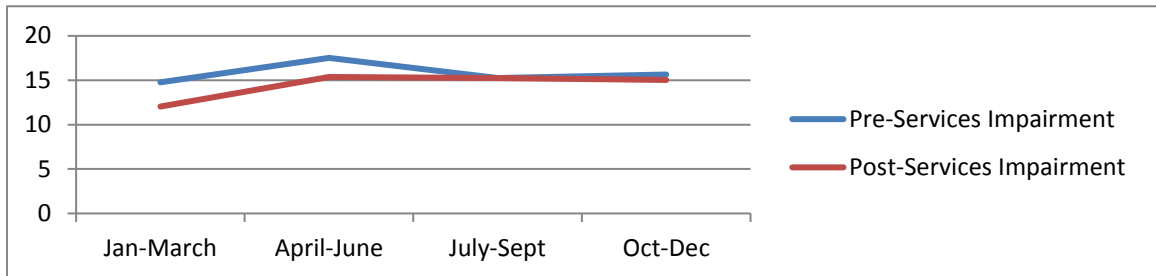
**Risk Management** ASFC complies with laws about mandatory reporting (ie, abuse and neglect, imminent safety risk, etc) and incident reporting. ASFC staff receive initial and ongoing training in the area of mandated reporting and incident reporting. Identified risk areas are reviewed by Leadership for trending and risk management activities to promote a safety and healthy environment within the community.

**Outcome Measurement** ASFC measures treatment outcomes via Medicaid-preferred functional measurement tools. For the majority of 2015 this was through CAFAS and LOCUS.

***For children and adolescent Medicaid consumers/clients***, ASFC utilize a pre- and post-services rating of the CAFAS (Child and Adolescent Functional Assessment Scale). The CAFAS is a rating scale for overall behavior in 8 areas including home, school, community, substance abuse, etc. **The higher the score, the more impairment. 2015 showed increased function in consumers after services.**



***For adult Medicaid consumers/clients***, ASFC utilizes a pre/admission and post/discharge rating on the LOCUS (Level of Care Utilization System). The LOCUS Scale is a functional rating scale of six clinical dimensions (risk of harm, functional status, co-morbidity, recovery environment, treatment history, and engagement) to determine an appropriate level of care in one of six levels of care in Georgia. **The higher the score, the more impairment. Overall consumers showed improvement after ASFC services in 2015.**



**Internal Review For Quality** In addition to stakeholder input, ASFC leadership staff reviewed records/charts and perform compliance reviews. Overall findings concluded having met or exceeded standards.

Professional/Therapy staff are appropriately credentialed and licensed in accordance with standards of the Georgia Composite Board of Professional Counselors, Social Workers and Marriage and Family Therapists, COA, and Medicaid standards. ASFC only recruits therapy clinicians who hold at least a master's degree in psychology, counseling, clinical social work.

Paraprofessional staff possess at least a bachelor's degree. We on an ongoing basis for licensed professionals to maximize quality.

In addition to clinical services, ASFC completed peer review for psychiatric services to evaluate and enhance performance improvement in medication management. Overall findings concluded also having met professional standards in this area.