

Pressley Ridge Autism IBHS Groups Quality Improvement Report 2024

Intensive Behavioral Health Services are provided in a Group, non-ABA format to target coping skills or social skills at Pressley Ridge Westmoreland. An annual review is conducted regarding the quality, timeliness, and appropriateness of services. This report is a summary of the individual Quality Record Reviews, satisfaction surveys, assessment of service delivery, and adherence to service description. This report includes strengths as well as identification of the actions to address annual review findings. Families are notified in writing upon admission to services that a copy of this annual quality report may be requested by a youth, young adult or parent, legal guardian, or caregiver of a child, youth or young adult, A summary of the report is also available and is prepared by Pressley Ridge’s Organizational Performance Department. This report includes information from Social Skills and Coping Skills groups.

INDIVIDUAL RECORD REVIEW

All individuals had a Quality Record Review (QRR) within 180 days of start of services. The Clinical Director completed the reviews which focused on the areas of: Assessment, Treatment Planning and Review, Service Provision, Family Work, Community, and Aftercare/Discharge (if applicable). Agency benchmarks include 80% adherence to QRR.

Over the course of the year, the records remained stable in regard to scores exceeding the agency benchmarks of 80% for each domain. Assessments continued to show improvement with more documentation of sub-assessments being completed and in the electronic record (suicidality and trauma screeners). There was some improvement in the frequency of documentation of contact in the record. Families are provided copies of service documentation, but improvement is needed to show communication that occurs outside of the sessions.

| Quality Record Review Summary | | | | | | | |
|-------------------------------|----------------|--------------------------|-----------------------|-----------------|---------------|------------------|-------|
| FY24 Quarter 3 (Jan-Mar 2024) | | | | | | | |
| | Assessment Avg | Tx Planning & Review Avg | Service Provision Avg | Family Work Avg | Community Avg | Aftercare/DC Avg | Total |
| Overall Score by category | 99% | 100% | 99% | 97% | 100% | 91% | 99% |
| FY24 Quarter 4 (Apr-Jun 2024) | | | | | | | |
| | Assessment Avg | Tx Planning & Review Avg | Service Provision Avg | Family Work Avg | Community Avg | Aftercare/DC Avg | Total |
| Overall Score by category | 98% | 100% | 97% | 100% | 100% | 100% | 99% |

| FY25 Quarter 1 (Jul-Sep 2024) | | | | | | | |
|-------------------------------|----------------|--------------------------|-----------------------|-----------------|---------------|------------------|-------|
| | Assessment Avg | Tx Planning & Review Avg | Service Provision Avg | Family Work Avg | Community Avg | Aftercare/DC Avg | Total |
| Overall Score by category | 100% | 100% | 100% | 100% | 100% | 88% | 100% |
| FY24 Quarter 2 (Oct-Dec 2024) | | | | | | | |
| | Assessment Avg | Tx Planning & Review Avg | Service Provision Avg | Family Work Avg | Community Avg | Aftercare/DC Avg | Total |
| Overall Score by category | 97% | 100% | 100% | 100% | 100% | 100% | 99% |
| 2024 Summary | | | | | | | |
| | Assessment Avg | Tx Planning & Review Avg | Service Provision Avg | Family Work Avg | Community Avg | Aftercare/DC Avg | Total |
| Overall Score by category | 99% | 100% | 99% | 99% | 100% | 95% | 99% |

SERVICE DESCRIPTION

The IBHS service description checklist is utilized to audit compliance with the service description. The service description is also reviewed when the Operations Manual is updated.

Strengths of the service description review include adherence to target population served, admission/discharge/exclusionary criteria, staffing ratios, and maximum clients served per group. There were no changes to the service description during calendar year 2024.

The program continued to provide sessions at the maximum session length for 2.5 hours per group for Social Skills and 3.0 hours per group for Coping Skills.

The services currently being provided continue to not include a 19–21-year-old Social Skills group or a 4–6-year-old Social Skills group. Over the next year, groups will be added if there are enough referrals and staffing to support the group.

No additional areas for improvement were identified.

INDIVIDUAL AND FAMILY SATISFACTION – SOCIAL SKILLS

Program staff administers annual Pressley Ridge Client and Family Satisfaction Surveys. Surveys for Social Skills were completed during fiscal Quarter 2 (October-December). The information in the table below and responses to open ended questions are specific to Social Skills Group. Coping Skills results are included later in this report. Non-specific responses such as “I don’t know” or “nothing” were removed. Feedback from the surveys was shared with staff.

The following scale was utilized for both surveys:

1 = Disagree Strongly

2 = Disagree

3 = Agree

4 = Strongly Agree

| Family survey - 11 results returned | Average score out of 4 |
|---|------------------------|
| 1. I am satisfied with the overall quality of care and services my child received. | 3.8 |
| How well have our services... | |
| 2. helped your child to achieve their goals? | 3.6 |
| 3. helped your child to get along with others (family members, friends, etc.)? | 3.5 |
| 4. taught your child new skills such as life skills (health, hygiene, chores), parenting skills, coping skills, etc.? | 3.4 |
| 5. helped your child to have supportive people in their life? | 3.7 |
| The people helping my child at Pressley Ridge... | |
| 6. remained committed to working with your child no matter what. | 3.9 |
| 7. involved you or additional people they consider important in their treatment. | 3.7 |

Other questions asked of families included:

| | |
|--|----------|
| Is my child better off now than when I first started services at Pressley Ridge? | 100% Yes |
| Have you or would you recommend Pressley Ridge staff or services to others? | 100% Yes |

Open ended questions for families:

What was the most helpful about the services your child received?

“Helped my child interact with peers.”

“My son really enjoys his time with the group and has talked with family about the skills he's learned, and he is excited to use them to socialize with peers.”

“Feedback on what they are seeing - very helpful to know how she is responding/interacting.”

“He feels included in the group of peers and his highly motivated in the social group, so we see areas of improvement related to motivation as a result of the positive atmosphere.”

“Coping skills.”

“Getting more social interactions with others.”

“Helping him to interact appropriately with peers.”

“The ease of access and how readily support is available to my son.”

“<Client> seems to enjoy his time at Pressley. He is with kids that are closer to his age and developmental level.”

“Letting me know what the specific triggers are for my daughter.”

“Everything is great!”

“Has learned many social cues he was not using before. He learned skills to help him make friends.”

What would improve services at Pressley Ridge?

“Maybe an option for parents to meet/gather in another room to compare notes and possibly set up play dates?”

“More clear communication about how sessions are structured/how to continue teaching at home.”

“More communication with parents.”

“Flexible times year-round. More facilities that are closer for parents.”

| Client survey – 34 results | Average score out of 4 |
|--|-------------------------------|
| Satisfied with overall quality of care and services received | 3.5 |
| How well have services... | |
| 2. helped you to achieve your goals? | 3.5 |
| 3. helped you to get along with others (family members, friends, etc.)? | 3.1 |
| 4. taught you new skills such as life skills (health, hygiene, chores), coping skills, etc.? | 3.2 |
| 5. helped you to have supportive people in your life? | 3.5 |
| The people helping me at Pressley Ridge... | |
| 6. remained committed to working with me no matter what. | 3.6 |
| 7. involved family or people I consider important in treatment. | 3.1 |

Other questions asked of clients included:

| | |
|---|---------|
| I am better off now, than when I first started services at Pressley Ridge. | 90% Yes |
| Have you or would you recommend Pressley Ridge staff or services to others? | 90% Yes |

Open ended questions for clients:

What was the most helpful about the services you received?

- “I like to go grow.”
- “I like playing new games.”
- “The games.”
- “Be more social.”
- “I do fun things with people.”
- “You have lots of games. It makes me braver to go up and ask others to play.”
- “The support and making new friends. Games have helped me with coping skills and teaching. I’ve learned various social skills and have been exposed to diverse environments.”
- “I like to play with my friends in group.”
- “Games.”
- “Army guys.”
- “Sharing tablet with peers.”
- “Games.”
- “I feel good being here.”
- “The adults.”
- “Engaging with friends.”
- “Legos.”

What would improve services at Pressley Ridge?

- “I like to go grow friend.”
- “Talking to friends more.”
- “Larger group (12-15 people). Lenient staff (letting kids use slang terms), letting the kids pick the lessons.”
- “Have a neutral option on this survey.”
- “Turtle Tag!”
- “Have more games.”
- “Worries and angry.”
- “Let us play games from the closet.”
- “Get toy Star Wars.”
- “Less people.”
- “More technology to play games on.”
- “Sleeping time!”
- “If they let me have all of my stuff at my seat.”
- “More old things.”
- “More employees and kids,”
- “Have a neutral option on this survey.”

The agency’s benchmarks include 95% (3.8) satisfaction with services, which was met with the family surveys, and 90% (3.6) for the other survey items.

Strengths identified in the families' comments were similar to previous surveys and relevant to the services being provided and indicated they understood the purpose of the service. Positive comments included: support, feedback received, ease of access, and specific skills learned.

Families and clients continued to provide a lower rating to the question, "How well have services taught you new skills such as life skills (health, hygiene, chores), coping skills, etc.?" Some of the comments included suggestions to teach hygiene skills, as in previous years. While beneficial to the clients, several suggestions are not able to be incorporated into a mental health treatment plan, for example focusing on hygiene. Other areas for improvement as identified by the families included more feedback requested.

The clients' responses provided positive feedback which was relevant to the nature of the service (e.g., making friends, interacting with others, improving skills). As in past years, some of the comments were out of scope of what is relevant for the service (specific toys or food). Other areas the clients identified for improvement were reflective of strategies implemented within the group (such as being asked to put items away in order to focus on interaction with others)

ASSESSMENT OF SERVICE DELIVERY – SOCIAL SKILLS

Overall individual progress is tracked to indicate including how many clients have progressed on goals and how many did not improve. This information provides feedback on how the individual is doing in relation to the specific group and can be utilized to make informed clinical changes such as moving the child to a different group.

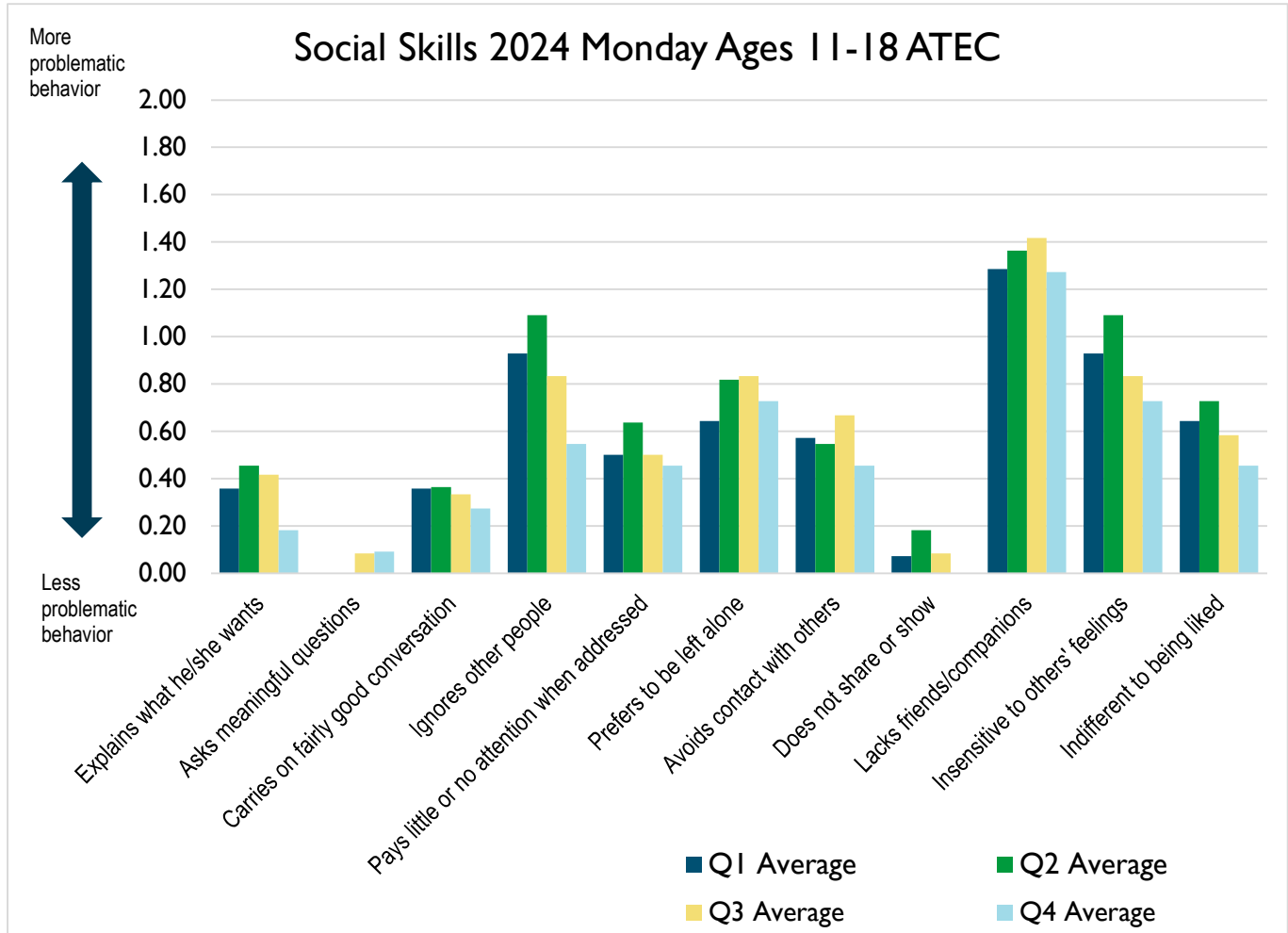
| Social Skills Group |
|------------------------------------|
| 44% showed progress on three goals |
| 22% showed progress on two goals |
| 24% showed progress on one goal |
| 9% did not progress on goals |

Of the 64 total clients served, 10 were not included in data due to 4 being discharged soon after starting and 6 began at the end of the year and did not have enough data to report.

For clients who have made progress on goals, target criteria were changed to reflect progress, new goals were identified, or the client discharged. For clients' goals that were not met, the goals and/or target criteria were changed. Three of the clients who did not progress on goals were discharged due to need for a higher level of care or due to lack of engagement in the program. One of the clients who did not progress on goal had recently moved to an older age group, so showed regression due to not being as comfortable around a new group of peers.

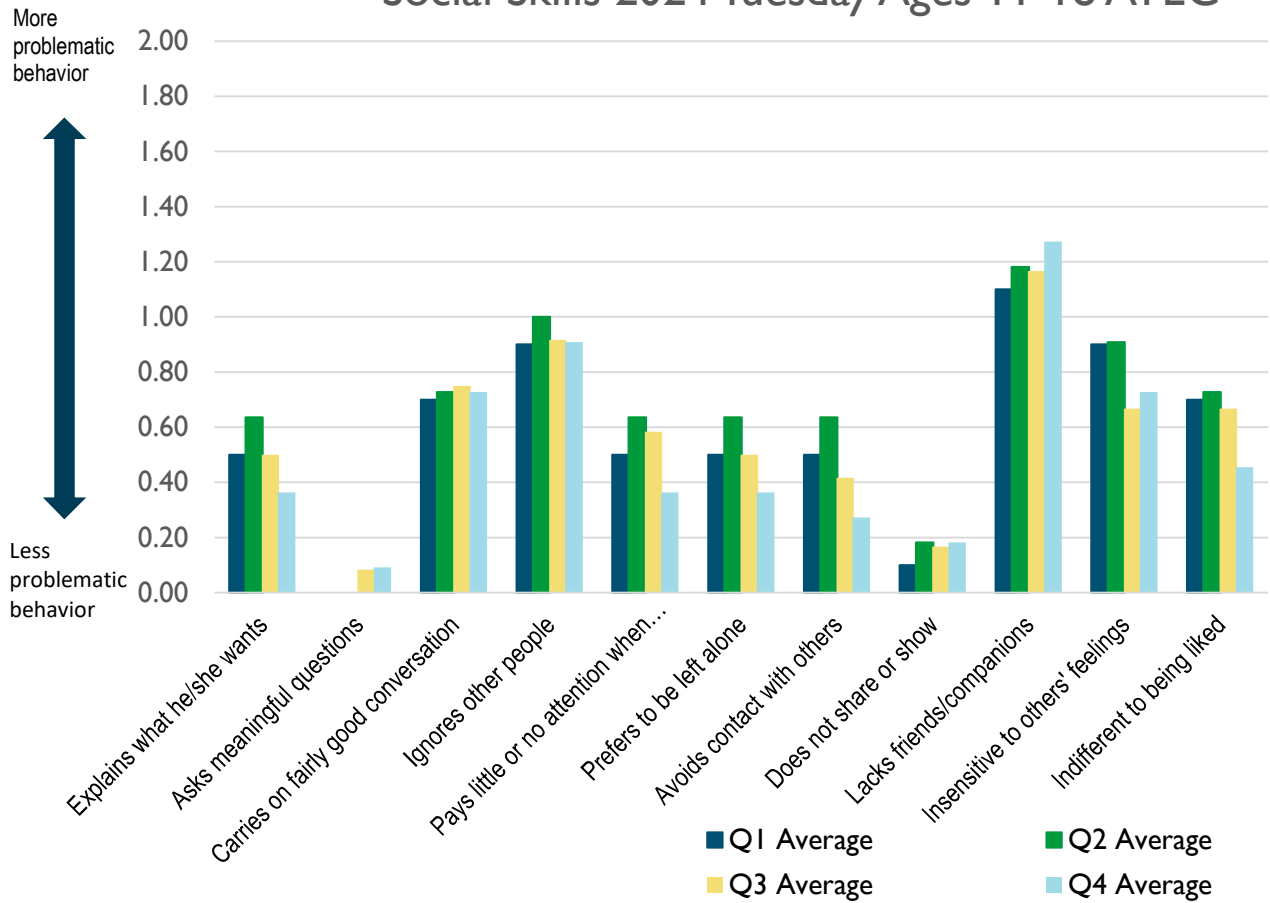
An Autism Treatment Evaluation Checklist (ATEC) is completed quarterly per client. Data from the ATEC is tracked per client and can also be utilized to make informed decisions about the specific client as well as the function of the each of the four specific groups. Clients are grouped both according to age and areas of clinical need. Individual data on ATEC scores was taken quarterly and averaged per group, to show progress and areas of

need for each group. A lower score shows less need. Since children are admitted and discharged on a rolling basis, the specific clients in each group may change during the year. The following charts show the groups' strengths and needs as a whole throughout 2024 and can be interpreted as a snapshot of each group's clinical strengths and needs.



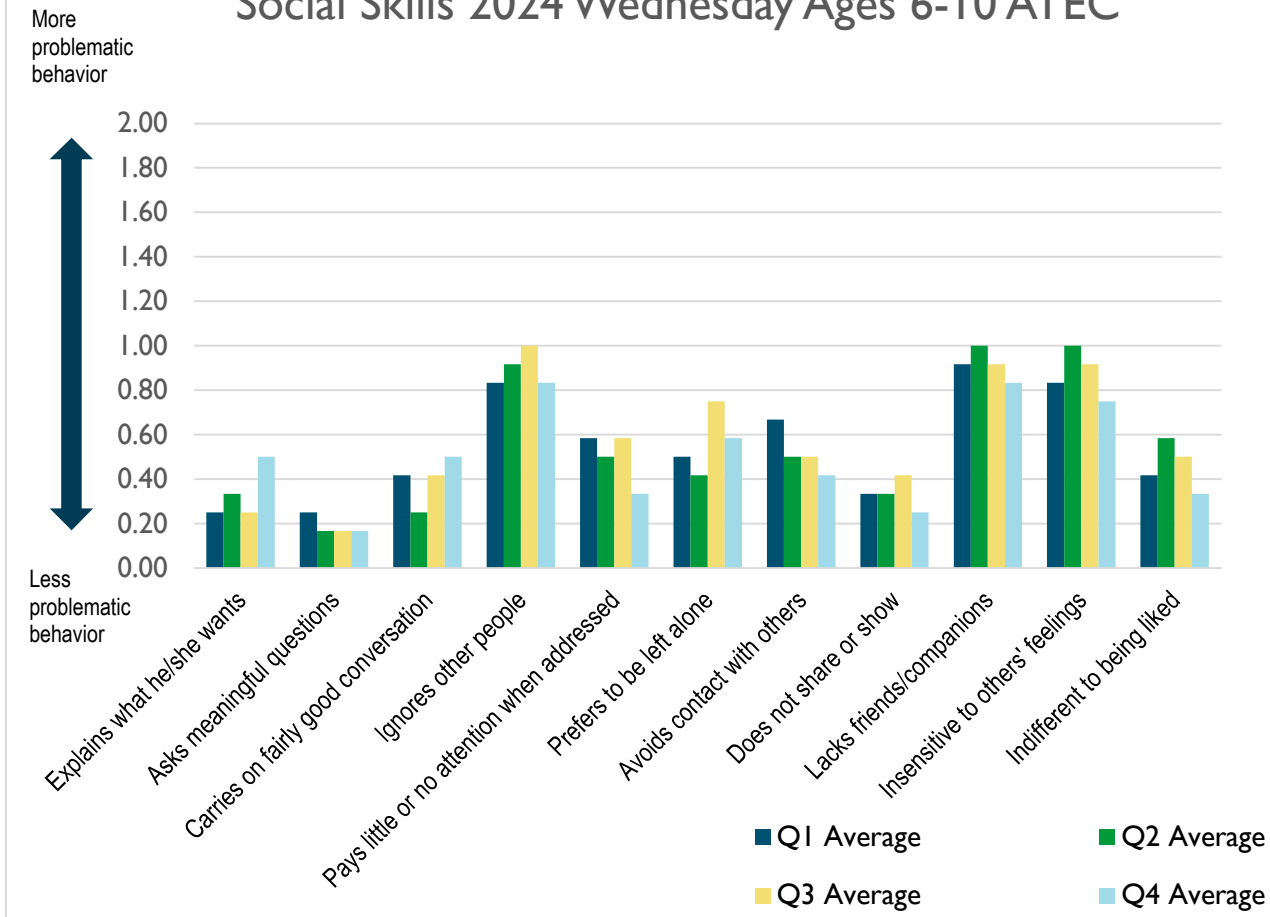
ATEC scores from Monday's group (ages 11-18) show strengths in asking meaningful questions and sharing with others. As a whole, the group improved ability to engage with others and carry on conversations. The groups' needs include the need to work on increasing awareness of how their words affect others and decreasing preference of being alone.

Social Skills 2024 Tuesday Ages 11-18 ATEC



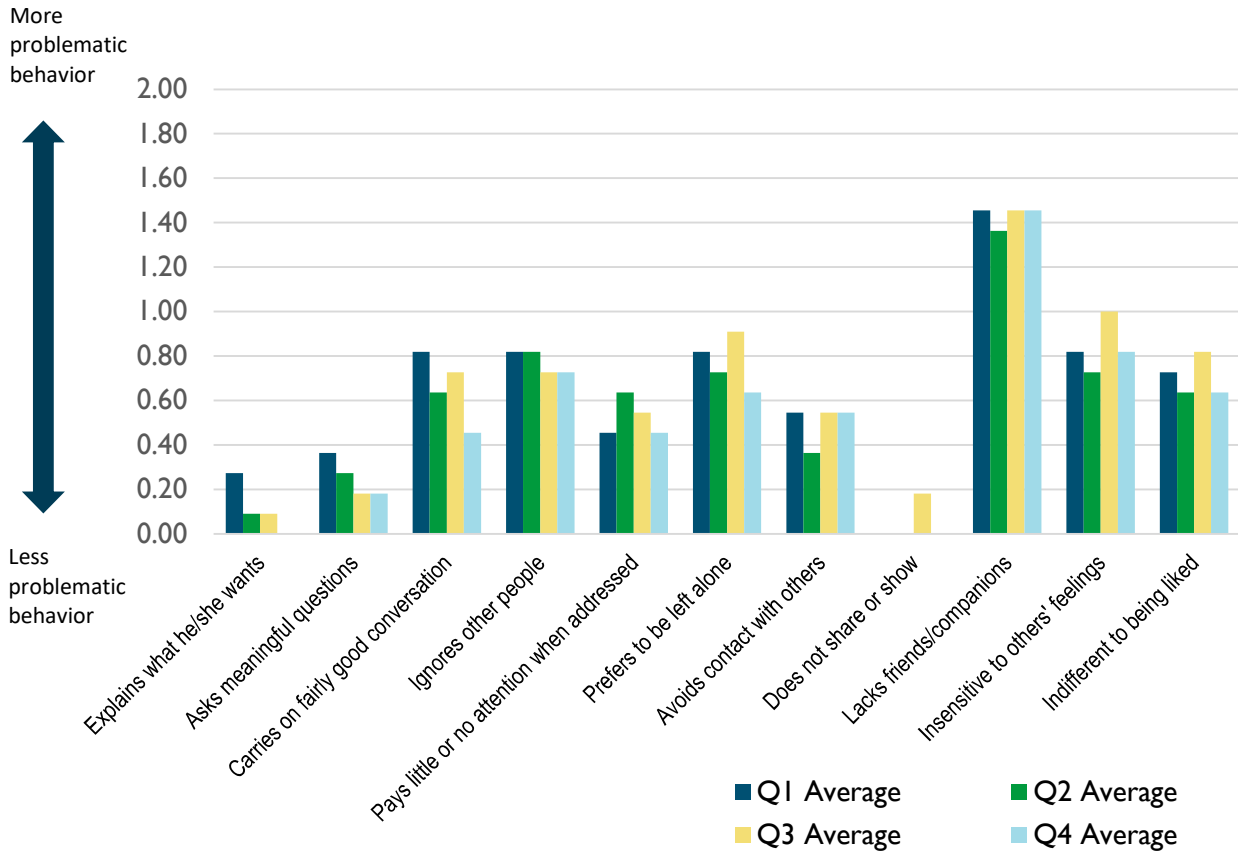
Tuesday Social Groups also serves ages 11-18. They also have strengths related to asking meaningful questions and sharing with others. Compared to Monday, they require more support with carrying on conversations. As a whole group, they showed improvement interacting with others by not avoiding contact Lacking friends continues to be a need for the group as last year. There is also a need to continue to work on understanding words' effect on others.

Social Skills 2024 Wednesday Ages 6-10 ATEC



Wednesday's group is from ages 6-10 and is the only group comprised of younger children. The group remained relatively consistent in both enrollment and performance over the year, with strengths and mirroring the 11-18 groups. The younger group does have difficulty at times asking meaningful questions and sharing with others as compared to the older groups' clients.

Social Skills 2024 Thursday Ages 11-18 ATEC



The Thursday group is also ages 11-18. As a group, their overall strengths included explaining what he or she wants and sharing with others. The group showed improvement in ability to carry on conversations and paying attention when being addressed. Children in this group continue to have the need to make and maintain friendships with others.

Individuals from an 11-18 group may be moved to a different group if they are a better fit due to goals and needs. For example, the Monday evening group overall has fewer needs carrying on a conversation, so a client who starts in Thursday group may switch to Monday night if it is determined to be a better fit. Three clients moved to a different group during 2024 due to a change in needs. Often, when a client switches to a different group, there may be a slight regression in goals as they adapt to new-to-them peers.

COPING SKILLS GROUP OUTCOMES

GROUP OVERVIEW

The following is a summary of Pressley Ridge’s Coping Skills Group (formerly Summer Therapeutic Activity Program, or STAP) held during the summer of 2023 from 06/12/2024-08/07/2024. Of the 20 openings, 20 clients attended. All 24 sessions were held for three hours each session.

Similar to Social Skills Groups, Coping Skills Group is for children and adolescents who have received a DSM-5 diagnosis of F84.0 Autism. An appropriate child for Coping Skills Group has a stated clinical need to increase: self-regulation, executive function, attribution retraining, and/or sensory awareness (in relation to self-monitoring).

Demographics:

| | |
|-------------------------------|---|
| Number of participants | 20 clients |
| Gender | Male – 14 Female – 6 |
| Ages | 7 – 2 clients 8 – 3 clients 9 - 3 clients 11 – 2 clients 12 - 1 client 13 - 1 client 14 – 2 clients 15 – 2 clients 16 – 4 clients |

ASSESSMENT OF SERVICE DELIVERY – COPING SKILLS

Out of 24 sessions, the average number of sessions attended was 19.

The following table shows the attendance breakdown for the sessions, out of a total of 20 children:

| Number of sessions attended | Number of children |
|------------------------------------|---------------------------|
| 22-24 sessions | 8 |
| 19-21 sessions | 4 |
| 16-18 sessions | 3 |
| 13-15 sessions | 3 |
| <12 sessions | 2 |

As in previous years, parent participation during Coping Skills Group included signing and returning feedback forms regarding the client’s participation for the day. The percentage of sessions attended was similar to the last two

years (79% compared to 81% and 76%). Sessions missed were due to either illness or family vacations. Performance was measured by increase or decrease of prompt level required to meet the goal. The following table displays a breakdown of overall individual performance on short term goals.

| Individual Performance on Short-Term Goals, Coping Skills Group, 2024 | | | |
|---|-------------------------|-----------------------------|--|
| | Total clients out of 20 | Sessions attended out of 24 | Discussion |
| Number of clients showing progress on 2 goals | 13 | 10 | 15-year-old male was able to show progress responding to potentially frustrating situations with an appropriate level of emotional response and by utilizing coping skills. |
| | | 22 | 8-year-old male showed improvement with self-regulation and problem-solving skills. |
| | | 14 | 16-year-old male showed progress with regulating his reactions and being able to follow through with expectations. |
| | | 18 | 16-year-old male showed an increase in independence on both goals including regulating his emotions in response to others and reacting in a manner relevant to the situation. |
| | | 19 | 11-year-old male showed progress on both goals in regard to verbalizing his thoughts and feelings to others as well as contributing/giving feedback during team building activities. |
| | | 15 | 16-year-old male met goals of following through during non-preferred/less preferred activities and expressing thoughts and feelings to others. |
| | | 24 | 14-year-old male showed progress on understanding how his words affect others and responding calmly to differing perspectives. |
| | | 22 | 7-year-old male worked on impulse control and maintaining engagement during interactive activities. He showed a decrease in prompting on both goals. |
| | | 23 | 13-year-old female met her goal of displaying impulse control in a group setting as well as working collaboratively with others. |
| | | 20 | 15-year-old male showed progress utilizing coping skills when frustrated and increasing perspective taking skills. |
| | | 23 | 16-year-old female showed improvement with responding to situations in a manner appropriate to the situation and following through with multiple step directives. |

| | Total clients out of 20 | Sessions attended | Discussion |
|---|--------------------------------|--------------------------|---|
| Number of clients showing progress on 2 goals (cont.) | 13 | 23 | 14-year-old male showed progress identifying concerns and communicating needs with others and utilizing a coping strategy when frustrated. |
| | | 21 | 11-year-old female met both of her objectives including effectively communicating with others and utilizing coping skills |
| Number of clients showing progress on 1 goal | 4 | 12 | 12-year-old male did not make progress on identifying emotions but was able to meet his goal of collaborating with others. He did not attend after mid-July due to medical reasons. |
| | | 15 | 8-year-old female increased ability to show flexibility in challenging situations. She continues to need to work on demonstrating theory of mind by acknowledging varying perspectives/viewpoints. |
| | | 20 | 9-year-old male showed progress utilizing a coping strategy when frustration but continues to need to work on being able to adapt to change in novel situations. |
| | | 23 | 9-year-old female showed improvement effectively communicating needs to others but continued to require consistent support with self-regulation skills. |
| Number of clients showing progress on 0 goals | 3 | 16 | 8-year-old male worked towards goals of waiting his turn and accepting feedback as well as problem-solving. He was less independent as he became comfortable with the program, needing more assistance with accepting feedback and outcomes as he became focused on “winning” and less agreeable with collaborating with peers. |
| | | 23 | 9-year-old female did not show progress and was working on identifying triggers and emotions as well as utilizing a coping skill when upset. She had been more successful during the earlier part of the summer though was able to communicate she was experiencing difficulties at home towards the end of the sessions. |
| | | 17 | 7-year-old male worked on utilizing coping skills in frustrating situations and demonstrating impulse control during team building and/or non-preferred activities. A variety of antecedent interventions (e.g., front loading expectations) were attempted, but unsuccessful. |

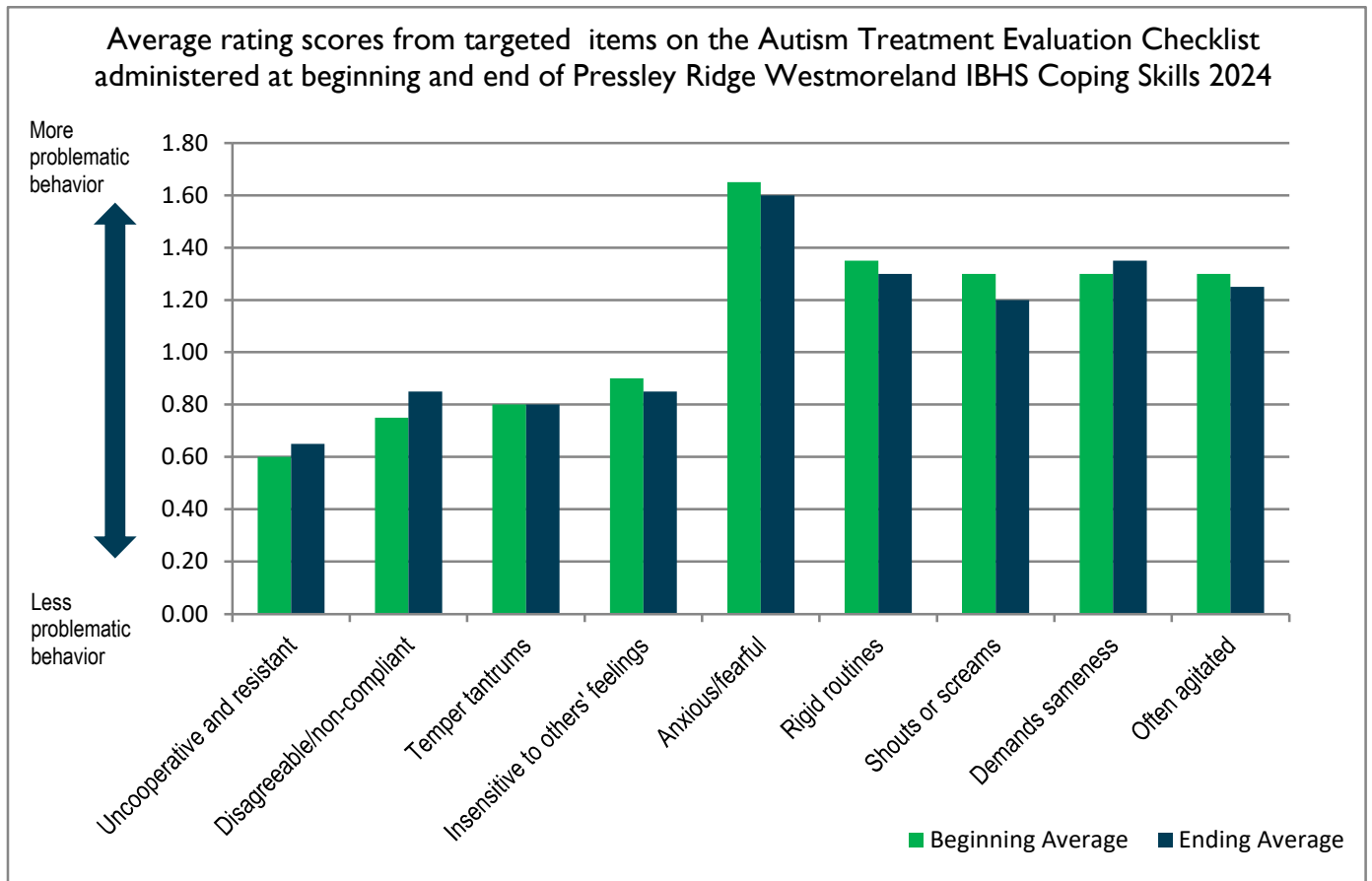
Thirteen out of 20 clients made measurable progress on goals as shown by decrease in prompt level needed for success. The trend in goal performance is similar to Coping Skills Groups sessions. Some clients became more familiar with the routine, other peers, and staff, which contributed to success. With the exception of two clients,

all who improved on both goals attended at least 75% of the sessions. Attending scheduled sessions increases the clients' familiarity with the routine and staff and enables them to build off of emerging skills.

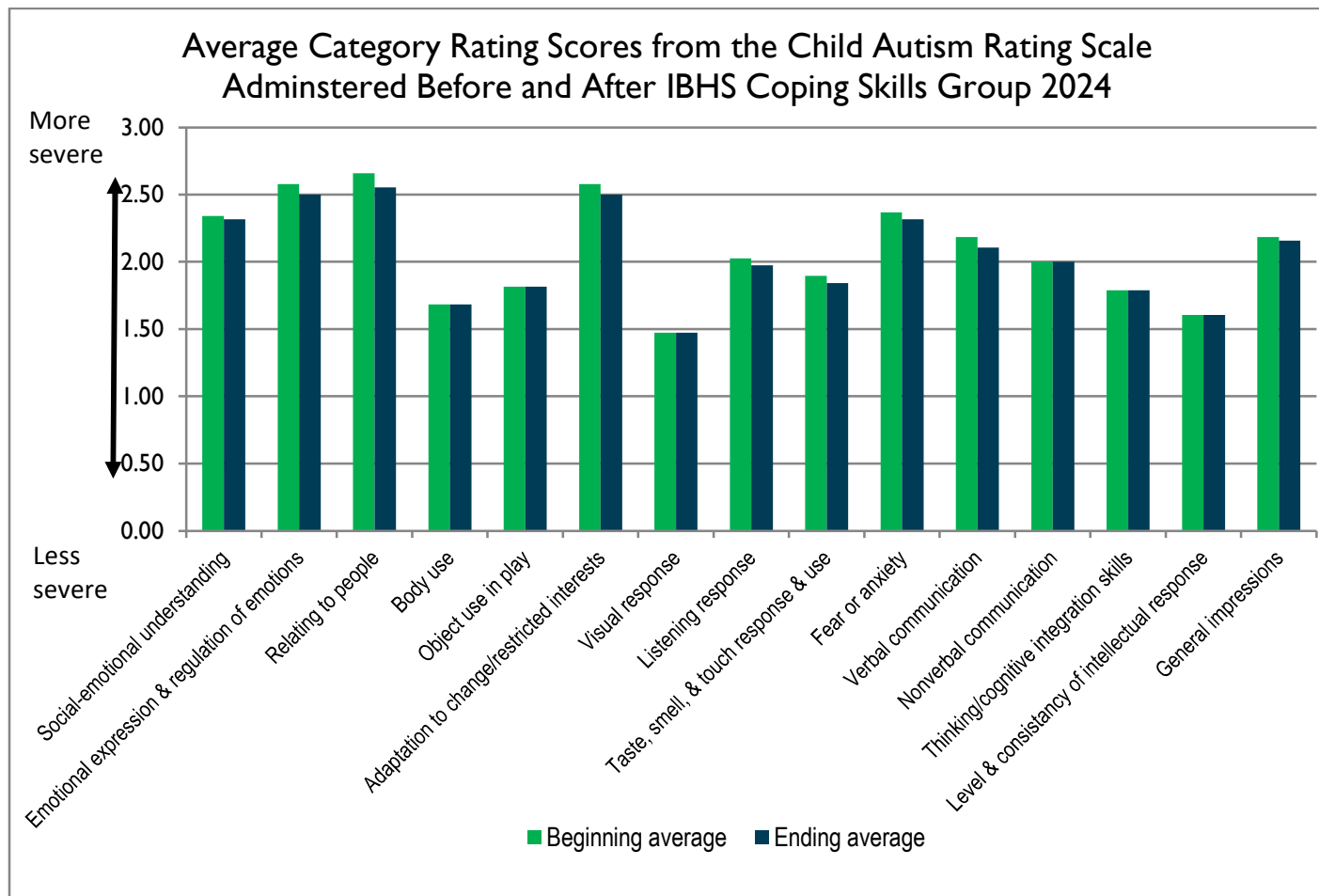
Four clients showed progress on one goal and three did not show progress on goals by the end of the sessions. Of these seven clients, one had to end the program early due to medical reasons. The other six were under the age of 10. The topics presented in Coping Skills are adapted to meet the age level of the clients in group, however, this provides valuable insight into adapting the lessons and activities further in order to meet the needs of the clients.

The Autism Treatment Evaluation Checklist (ATEC) and Child Autism Rating Scale (CARS) were administered prior to the beginning of Coping Skills Group and at the end for each client. For the ATEC, the chart below represents average scores on targeted items within the scale. Those items relate to behaviors and skill deficits identified within the clients' treatment plan goals. They also relate to activities within the Eclipse curriculum which the program used for skill development in the categories of self-regulation, executive functioning, attribution, and sensory awareness.

As in previous years, the clients showed a decrease in problematic behavior on items targeted in the sessions, most notably: Insensitive to others' feelings, Anxious/fearful, and Rigid routines. There was an increase in Demands sameness and Disagreeable/non-compliant which has also occurred in previous years as clients become more comfortable with the routine and staff.



The Child Autism Rating Scale (CARS) was also administered prior to and at the end of the sessions. Average scores on each data point are shown in the chart below. Regarding items which were addressed within the sessions, the most positive overall changes were seen in emotional expression and regulation of emotions, relating to people, the adaptation to change, and in verbal communication.



INDIVIDUAL AND FAMILY SATISFACTION – COPING SKILLS

Families and clients were administered Pressley Ridge satisfaction surveys at the conclusion of the program. The results are outlined below. Questions for clients were similar to those asked of families. There were 20 surveys administered to families and 20 administered to clients.

The following scale was utilized for both surveys:

- 1 = Disagree Strongly
- 2 = Disagree
- 3 = Agree
- 4 = Strongly Agree

| Family survey – 12 results returned | Average score out of 4 |
|---|-------------------------------|
| 1. I am satisfied with the overall quality of care and services my child received. | 3.9 |
| How well have our services... | |
| 2. helped your child to achieve their goals? | 3.5 |
| 3. helped your child to get along with others (family members, friends, etc.)? | 3.4 |
| 4. taught your child new skills such as life skills (health, hygiene, chores), parenting skills, coping skills, etc.? | 3.3 |
| 5. helped your child to have supportive people in their life? | 3.7 |
| The people helping my child at Pressley Ridge... | |
| 6. remained committed to working with your child no matter what. | 3.9 |
| 7. involved you or additional people they consider important in their treatment. | 3.9 |

Other questions asked of families included:

| | |
|--|----------|
| Is my child better off now than when I first started services at Pressley Ridge? | 92% Yes |
| Have you or would you recommend Pressley Ridge staff or services to others? | 100% Yes |

Open ended questions for parents:

What was the most helpful about the services your child received?

“Helping <client> try and use his coping skills.

“<Client> loved the program and we implemented some of the coping skills at home.”

“The written feedback. <Client> either doesn’t remember or is purposefully not telling us about what happened at Pressley Ridge, so the feedback helped.”

“The communication between staff and parent.”

“The dedication to helping <client> achieve his goals is fantastic.”

“Helps <client> grow in her social skills and learning how to cope with her problems.”

“<Client> is learning how to communicate her feelings better and be more respectful. It is a work in progress, but the staff is so good with her.”

“It is positive, team focused and centered on what the client needs. It has allowed him to excel where other programs just plateaued. The program would not be as effective if it wasn’t as enjoyable as it is!”

“Flexibility and communication.”

We are happy with the service wish she could go every day!

What would improve services at Pressley Ridge?

“Nothing to improve but would love to see the kids do a field trip during the summer program.”

“More detailed information on what strategies specifically worked for <client>. Some of the correspondence was general/vague and it would be helpful to know exactly what he did wrong and exactly what strategies helped him to cope.”

“Being able to talk or ‘debrief’ when we pick him up after each session.”

| Client survey – 17 results returned | Average score out of 4 |
|--|-------------------------------|
| Satisfied with overall quality of care and services received | 3.8 |
| How well have services... | |
| 2. helped you to achieve your goals? | 3.5 |
| 3. helped you to get along with others (family members, friends, etc.)? | 3.5 |
| 4. taught you new skills such as life skills (health, hygiene, chores), coping skills, etc.? | 3.5 |
| 5. helped you to have supportive people in your life? | 3.5 |
| The people helping me at Pressley Ridge... | |
| 6. remained committed to working with me no matter what. | 3.6 |
| 7. involved family or people I consider important in treatment. | 3.5 |

Other questions asked of clients included:

| | |
|---|---------|
| I am better off now, than when I first started services at Pressley Ridge. | 94% Yes |
| Have you or would you recommend Pressley Ridge staff or services to others? | 88% Yes |

Open ended questions for clients:

What was the most helpful about the services you received?

”Skills.”

“Learning new skills.”

“Time that I can play.”

“Coping skills.”

“I got in Pressley Ridge because it helps me a lot and I am so happy.”

“Being in the classroom.”
“Miss Jackie, Miss Jen, and Mr. Z.”
“Talk with me.”
“Anger management.”
“Life Skills. How to control things in some situations.”
“Sensory breaks,”
“The kind staff and kids.”
“They listen to me to know what I need.”
“Being good.”

What would improve services at Pressley Ridge?

“Water balloons!”
“Learning more!!!”
“More play time.”
“More coping skills,”
“Be positive and be social.”
“Draw pretty sunsets.”
“More fun activities.”
“Get along with kids.”
“More sensory things.”
“Shoot some hoops.”

Both client and parent surveys had positive responses. Some of the clients’ feedback was related to goals they were working on. Some of the suggestions from parents and clients were very similar to previous years’ surveys and are not possible due to the parameters of the service description (e.g., trips into the community or working on hygiene). There is not an opportunity to change the questions as they are utilized across the agency, though more explanation to clients and families may be needed regarding items on the survey such as hygiene.

The outcomes of the Coping Skills group were similar to previous years. As recommended last year, attendance protocols were reviewed with families prior to the start of the summer sessions. Attendance and engagement were similar as in previous years. Most children showed progress on both goals. Reasons for the children under ten not progressing as much as their older peers will be continued to be examined and changes will likely include adapting lessons further in order to increase opportunities for success.

OVERALL SUMMARY – SOCIAL SKILLS AND COPING SKILLS

Pressley Ridge Autism Groups has been providing Intensive Behavioral Health Services since January 18th, 2021. This past year, the program continued to grow in census and served 64 unique clients during the calendar year, similar to 2023’s 68 clients served. Each of the four Social Skills groups were at capacity for most of the year. The Coping Skills group filled all 20 available openings, attending an average of 19 out of 24 available sessions.

Service delivery, individual record review, and service description review of the Social Skills and Coping Skills group sessions remained consistent with 2023. The service description added a preschool-aged Social Skills group towards the end of 2023, but it has not yet started. In Social Skills, progress on individual goals as well as overall needs of each group remained consistent as in previous years. Client and family satisfaction also met agency

benchmarks, with specific feedback given regarding strengths and areas needed for improvement. Communication with families was targeted as an area of improvement from last year's Quality Improvement Report and though showed improvement, it will remain. Though service documentation is sent home with clients and parents have the opportunity to schedule a discussion if desired, it was also found that some clients were not providing the written documentation to the families (particularly if they had difficulty during a session).

A summary of strengths and needs identified in this report are below:

Strengths:

- Quality Record Reviews continued to be at or above agency benchmarks.
- There was adherence to the service description, and it did not change during 2024.
- Enrollment was steady throughout the year.
- Positive comments from the surveys demonstrated understanding of nature of the service.
- Data from ATECs show each groups' specific performance.
- Most clients showed progress on at least one goal in both Social Skills and Coping Skills groups.

Actions to address findings:

- Continue to meet agency benchmarks for Individual Record Reviews and Satisfaction Survey.
- Continue to run regular reports in electronic health record to identify any missing sub-assessments (Suicidality and Trauma)
- Consider expanding to include 19–21-year-old group and preschool-aged group.
- Continue to document additional pertinent communication in Contact Notes in electronic health record.
- Adapt Coping Skills Group lessons further to increase opportunities for success for clients under 10 years old.
- Examine client responses to satisfaction surveys to determine if any of their suggestions can be incorporated in a clinical manner (e.g., specific topics)
- Ensure copies of service documentation are provided directly to the families.
- For parent surveys in Social Groups, provide more opportunity for survey response time in order to increase quantity of returned surveys.

This report was completed 02/28/25 and can also be found online at:

<https://www.pressleyridge.org/services/autism-services/>