Because every child deserves a childhood.
This report is based on data from a total of 5,849 satisfaction surveys which represents 14% of the clients served at Astor who were eligible to complete a survey during the agency’s fiscal year. This number includes some clients who were in more than one Astor program, as a client or caregiver enrolled in multiple programs may have completed more than one survey for each service. Overall satisfaction was high and rates did not change much over the reporting period (between 92% to 97% satisfied). Most programs exceeded the target satisfaction rate of 90%. Selected survey findings are described in this report.

As the largest number of clients served at Astor during the survey period were enrolled in the Outpatient Clinics (OPCs), a similar proportion of the total surveys were from OPC programs. The remainder of the surveys were completed by consumers in relatively small programs, some of which represented fewer than 1% of the total amount. See the program breakdown on the following page.
The chart below shows consumer satisfaction levels according to line of business, survey respondent (client or caregiver), and individual survey questions.

The highest overall satisfaction levels this reporting period were found in the clinical programs. Lower levels were seen in programs serving youth placed in residential care outside of their homes which is consistent with patterns in previous years at Astor and in children’s services in general. However, the Out of Home Placement consumer satisfaction rates increased from 72% last year to 78% this year.

Both clients and caregivers showed high levels of overall satisfaction, as is displayed in the chart below. It is important to note that these rates are based on a larger number of caregivers (4,584 surveys) than clients (1,265 surveys) agencywide.

Rates of satisfaction per survey question were very close, all exceeding the 90% target for the agency. A newly added survey question asking how well respondents feel Astor is doing with “Respecting what’s important to your family,” was intended to elicit levels of satisfaction with diversity related issues and had the highest level of satisfaction.

Clients and caregivers who completed satisfaction survey were also able to make comments in response to the prompt, “Would you like to share your experience or ideas for improvement?” Comments were often program or employee-specific and both positive and negative experiences were shared. Themes mentioned in constructive feedback included desire for better communication about getting services in place and about progress in treatment. Positive feedback tended to involve appreciating the support Astor provided during the pandemic and praise for specific employees who were highly effective in their work.
Astor's underlying philosophy is that the best incident management plan is to avoid the incident altogether. When incidents do occur, Astor reviews all aspects of each incident that threaten the life, health, or welfare of our clients via the agency's integrated quality improvement process including the agency Incident Review Committee.

The following chart shows that the number of serious incidents agency-wide have increased in 2020-2021 (236) from the fiscal year 2019-2020 (189). Astor continues to utilize the agency Incident Review Committee as a driving force to make positive changes in incident management responses.

The number of incidents involving psychiatric decompensation significantly increased this fiscal year (113) compared to last 55). Throughout this fiscal year efforts have continued towards improving the agency’s high-risk process in hopes of reducing suicide attempts. Efforts included ongoing utilization of a sub-committee that conducted a self-assessment using the Zero Suicide Initiative and the sub-committee completed several action steps identified through the assessment, including training all agency personnel on suicide prevention and awareness. Astor continues to utilize a suicide risk sub-committee of the Incident Review Committee, which reviews every suicide attempt and makes treatment recommendations to the program leaders. Unfortunately, despite all the agency efforts, suicide attempts increased drastically this fiscal year. Leadership discussed this increase throughout the year and found that the pandemic significantly impacted client’s well-being, which has been seen throughout the state as well. Thankfully there were no sentinel events reported in 2020-2021.

Dangerous client behaviors increased slightly which are expanded upon in a separate graph. All other incident types declined, with the most significant reduction in other incidents 2020-2021 (19) from the fiscal year 2019-2020 (32).
The graph at right presents a breakdown of the subtypes of the category of dangerous client behavior incidents. Incidents within the dangerous client behavior incidents increased this year, (53 in 2020-2021 compared to 43 in 2019-2020). This increase was primarily within the Rhinebeck programs with missing patient or running behaviors by children (35 in 2020-2021 compared to 22 in 2019-2020). Positively, there were no fights reported in 2020-2021 compared to 9 in 2019-2020.
Overall, Allegations of Abuse/Neglect decreased this year (45 in 2020-2021 compared to 53 in 2019-2020). A majority of the cases have been unsubstantiated. The graph below represents the 39 allegations of abuse/neglect cases that have final determinations, and it outlines that 30 of the 39 (77%) cases have been unsubstantiated. The remaining 9 (23%) cases with determinations have been substantiated. There are currently 6 cases from 2020-2021 that are pending determinations from The Justice Center. In 2019-2020, 74% (39) of cases were unsubstantiated and 26% (14) cases were substantiated.

In efforts to reduce allegations of abuse/neglect against Astor employees, Astor has enhanced employees mandated reporter training following allegations of abuse/neglect to improve employee knowledge around such events, this training is provided regardless of the cases outcome. In addition, a portion of the Residential Onboarding is designated to reviewing The Justice Center and educating new hires on avoiding being named in allegations of abuse/neglect. The Justice Center continues to utilize their 72-hour hold system and expanded it to the RTC in 2020-2021, which allows agencies to submit video and supporting documentation of an incident in efforts to have the incidents reviewed and then reduced to significant incidents rather than abuse/neglect.
Astor’s underlying philosophy is to prevent using physical interventions with clients. A comprehensive review of all aspects of each restraint takes place through the program’s debriefing process.

The chart below shows that the number of restraints decreased in 2020-2021 (232) from the fiscal year 2019-2020 (486). Astor continues to include the reduction of restraints as a performance improvement goal and the agency is in the process of outlining a plan for implementing a restraint reduction program in the coming years. In addition to program leadership, executive leadership reviews data on restraints regularly. However, our employees are also keenly aware that if a child is in a position of imminent risk to self or others, it may be necessary to re-strain that child. Program leadership has been focusing on contributing factors to restraints in efforts to reduce restraints and leadership has also focused on enhancing the structured activities in hopes to reduce restraints. Day Treatment programs did not utilize restraints in 2020-2021, which is a reduction compared to 9 in 2019-2020.

SERIOUS AND INTERNAL INCIDENTS

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No restraints have occurred in Day Treatment since October 2019. Day Treatments continue to utilize an approval process for restraint use and by regularly debriefing with program employees as well as an executive debriefing.

RTC had the most significant decrease in restraint use this fiscal year compared to last (58 in 2020-2021 compared to 162 in 2019-2020), which is excellent to see as RTC had shown a significant increase in 2019-2020 when compared to the previous year. RTF decreased restraint use as well (92 in 2020-2021 compared to 218 in 2019-2020). ALC showed a slight decrease in the use of restraints (82 in 2020-2021 compared to 97 in 2019-2020).

It is important to note that in the ALC, 70 or 85% of the restraints involved 14 repeat clients, with one repeat client having 14 restraints and another 13 restraints.

Eighty-seven or 95% of the RTF restraints involved 10 repeat clients, four repeat clients had 11 or more restraints. Fifty-five or 95% of the RTC restraints involved 10 repeat client and one repeat client had 14 restraints.

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The Residential programs and the ALC are conducting reviews of all restraints and continue to analyze restraint contributing factors to look for areas of improvement that trigger clients most often. Program employees are also working on improving communication around restraints and are reevaluating the need for utilizing Red Flag meetings. In addition, a recent regulation change for the RTC has resulted in development of a RTC restraint incident review committee which is intended to review compliance with restraint guidance and provide program with feedback on how to reduce use of restraints in the future. Through the various reduction efforts, it is anticipated that restraints will continue to decline in years to come.
FLU SHOTS

As in years past, Astor continues to be committed to joining the national fight against influenza and has implemented a policy to monitor how many of our employees have been vaccinated. Astor’s goal is to improve the number of agency employees that receive the influenza vaccination by 10% percent each year.

In order to implement such a policy, we utilized survey data beginning in 2012 to obtain the number of employees who received/did not receive the vaccine and the reasons for choosing not to. Annually in the fall, Astor has an education campaign for employees that has not received the vaccine and addresses the reasons why they did not, in hopes that this will increase employees participation to be vaccinated in the winter.

The first chart below shows that the percentage of employees who received the vaccine increased this fiscal year (61.2% in 2020-2021 compared to 56.7% in 2019-2020).

Although data collection shows that more employees received the vaccine this fiscal year compared to last year, Astor only improved their percentages by 4.5%. It is important to note that far fewer employees responded to the survey for 2020-2021 (327), then in 2019-2020 (541) so it is difficult to truly determine if Astor improved its vaccination rate.

It is Astor’s goal to improve employee vaccination rates by at least 10% this coming year.
The chart below is a comparison of the last two fiscal years on what employees said were reasons why they did not receive the vaccine. Most employees that did not receive a vaccine reported that they did not want the vaccine (43%), it was not needed (14%) or it makes them sick (9%).

The 2020-2021 flu season was an unusual year, considering the nationwide pandemic. This may have impacted employees receiving the vaccine. The availability of health services was limited in some areas due to staffing and service closures. In addition, employees were also more fearful of entering community settings which may have decreased employees receiving the vaccine in 2020-2021. In the coming year we intend to have vaccine locations available as we had in previous years, so employees can access the vaccine at agency locations. We are also keeping the survey open longer in the spring in efforts to gather more responses.

During this fiscal year, there continued to be adjustments and reposting of our services, as a result of the ongoing pandemic. We continued to serve children via tele-mental health services as well as in-person via our clinics. At the same time, prepared to pivot once again for when children are back in school.