THE OUTCOME Puzzle: Powered by Client Voice (Not Plutonium)

Exploring the power of client voice in driving continuous quality improvement and creating meaningful outcome metrics for success.

CQI Conference October 2025



Introductions



Amanda Smith-Chonko
Evaluation Coordinator

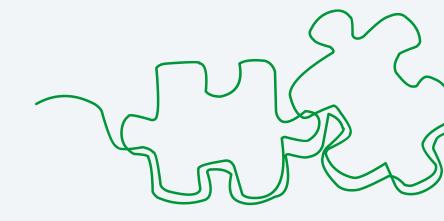


April Wall-ParkerResearch Coordinator

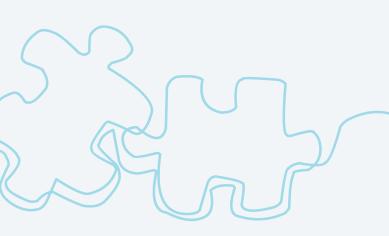


Kimberly LohrfinkSenior Research Coordinator

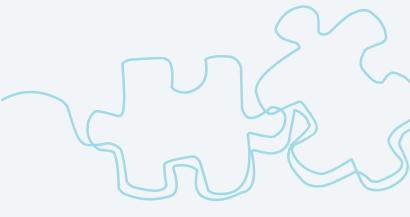
Overview



- 1 Hands-On Activity
- Why Client Voice Matters
- 3 Methods for Capturing Client Voice
- 4 Applying Client Feedback to Outcome Metrics
- 5 Lessons Learned & Implementation Challenges
- 6 Future Directions
- 7 CONNECTIONS
- 8 Q&A



Learning Objectives



Recognize the value of client voice in developing meaningful outcomes.

2 Explore ways to integrate client input into outcome metrics.

Identify challenges and solutions in clientcentered outcome design. "To do whatever it takes to create success for children and families."

PRESSLEY RIDGE

We're a social services organization serving diverse youth and families across many communities. Our service array includes:













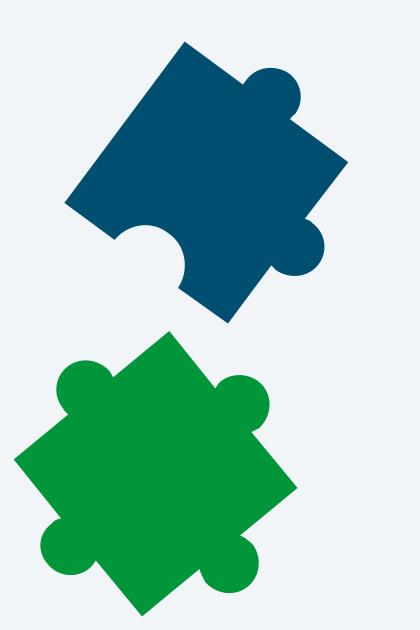


HANDS ON ACTIVITY

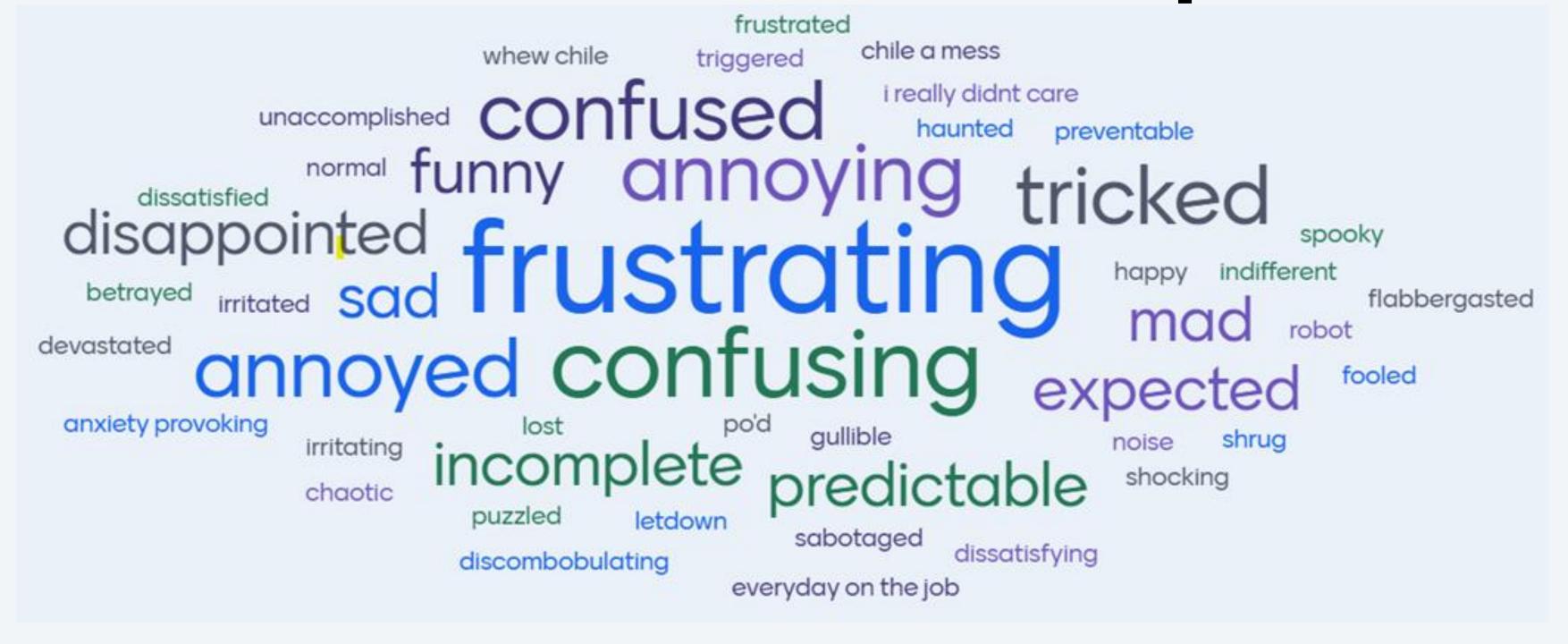
Post Activity Questions

- How did it feel when the puzzle didn't fit or wasn't complete?
- What assumptions did you make?

What could the missing or incorrect piece represent?



How did it feel when the puzzle didn't fit or wasn't complete?



It was going to be easy

That I had what I needed

None

That I could easily handle it

It would be easy

They did this on purpose

That someone else in the room had our missing piece

Someone stole my piece!

This was intentional

Would be quick

That I didn't need extra help

Someone took it

That I would have a satisfying time finishing the puzzle.

Someone else had the missing piece

Missing pieces

That I would be able to complete the task with ease.

That this would reflect a client's experience

Something was wrong with the puzzle.

That someone else in the room had the piece I didn't have

This is not going to be as straightforward as it would appear

That we were supposed to work with others

Easy

Someone made an error

This was a dollar store puzzle

Show less

This was the plan so yall could prove a point

Seeing doesn't mean you really see it!

Presenters were trying to teach us a lesson

That we had all the pieces

That we would need to collaborate to complete it

Somehow we would figure it out

That the robot noise made it disappear.

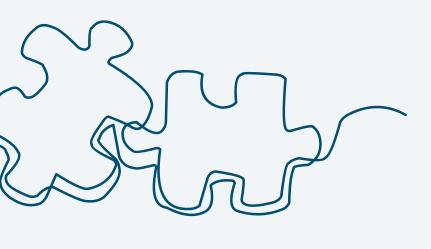
That someone else had it

Something was wrong

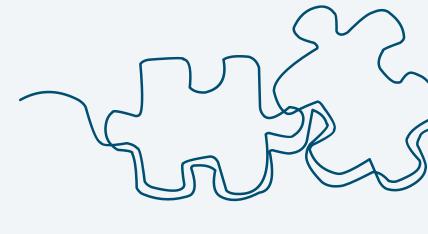
Everything I needed was already there

What could the missing or incorrect piece represent?





Why Client Voice Matters





Traditional KPI development is a top-down approach

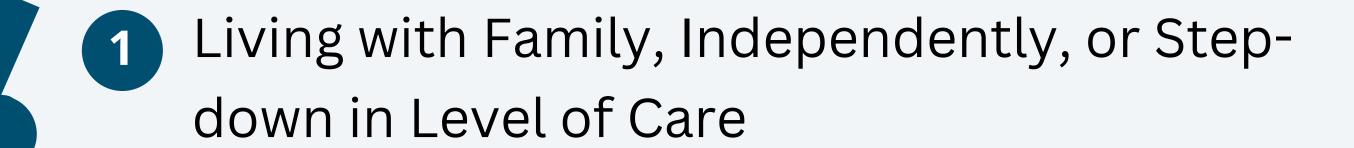


Limited client input (Carnochan et al., 2013)



Positive outcomes when clients are heard (McCaffrey & Garcia, 2023)

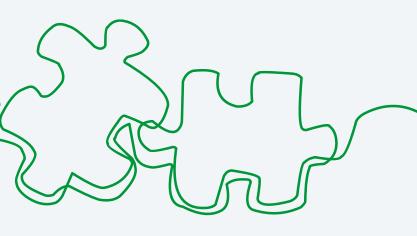




- Positive Change and Growth
- Youth and Family Satisfaction with Services

Methods for Capturing Client Voice

- Focus groups
- Surveys
- Closing the feedback loop
- Inclusive and ethical practices



Four Questions

That they are safe, happy,
healthy and have all that they
need physically and emotionally.
Being able to openly and
honestly communicate as a
family.

That my mental health condition is well-managed and I'm developing the coping skills I need to be successful in life.

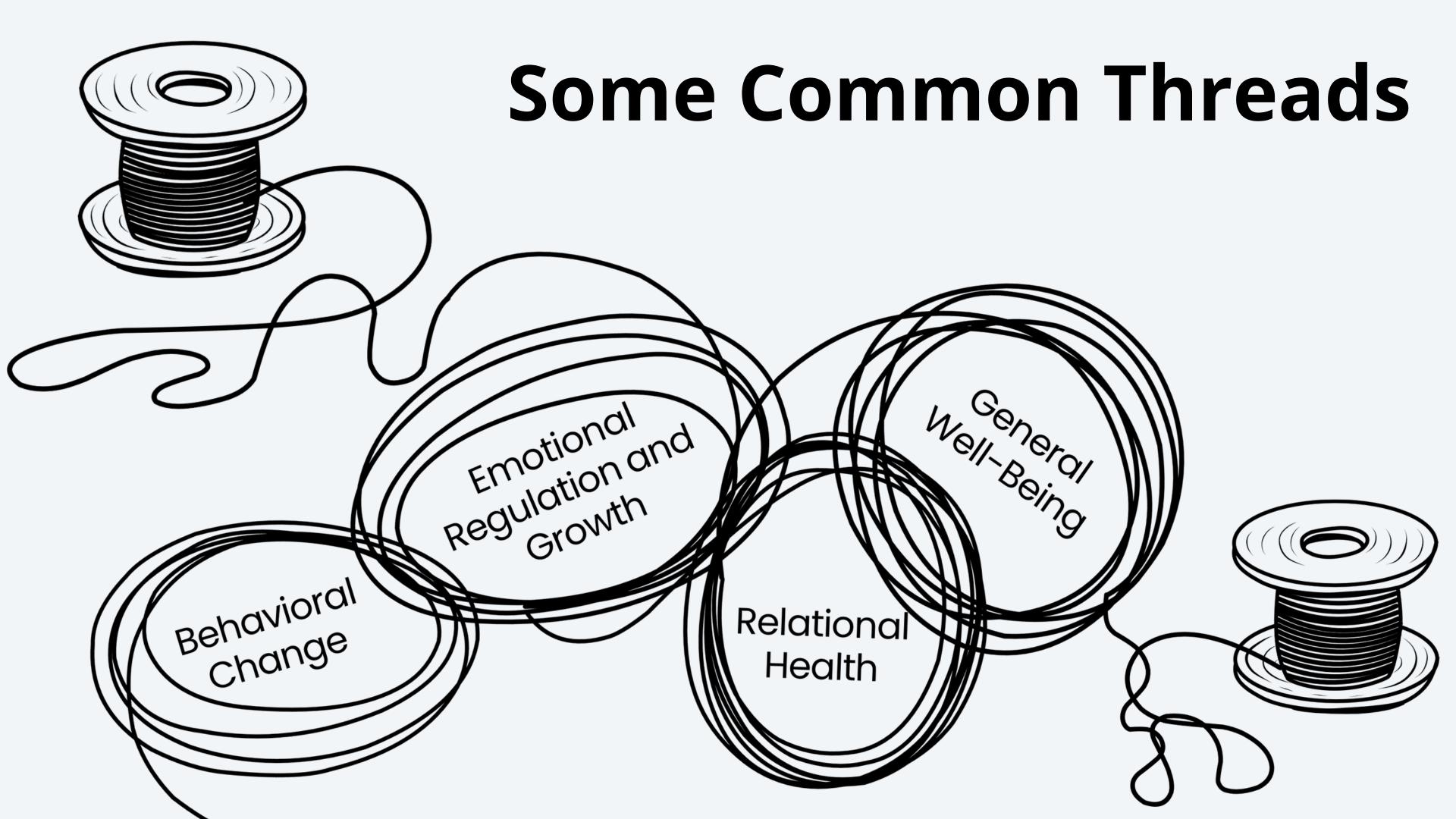
Emotional control. Clear communication. Being a family unit.

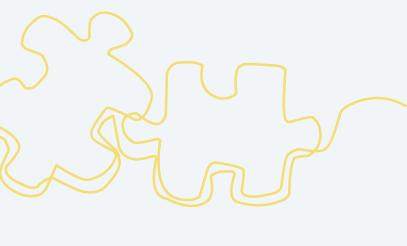
I'm planning ahead of time like a job, sports, getting my driver's license.

She's smiling more, wants to go to school, her grades are good, and she's willing to change.

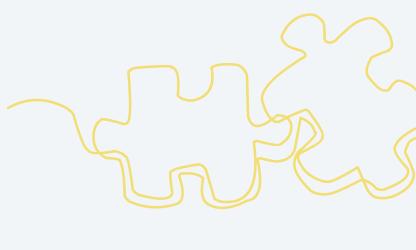
Having someone I can look to and trust.

Someone to support and love me.

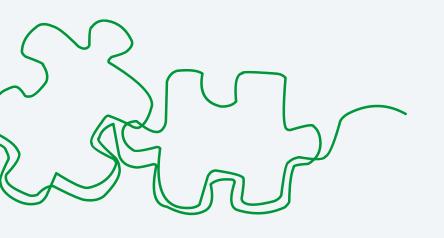




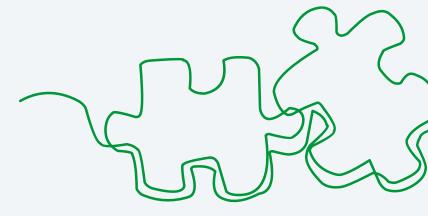
Applying Feedback to Outcome Metrics



- Translating data into actionable KPIs
- Examples from Pressley Ridge
- Integrating into QI cycles and reporting







Education Service Line

IEP-based academic and behavioral progress; discharge to more, same, or less restrictive educational setting

Transition Age Youth Service Line

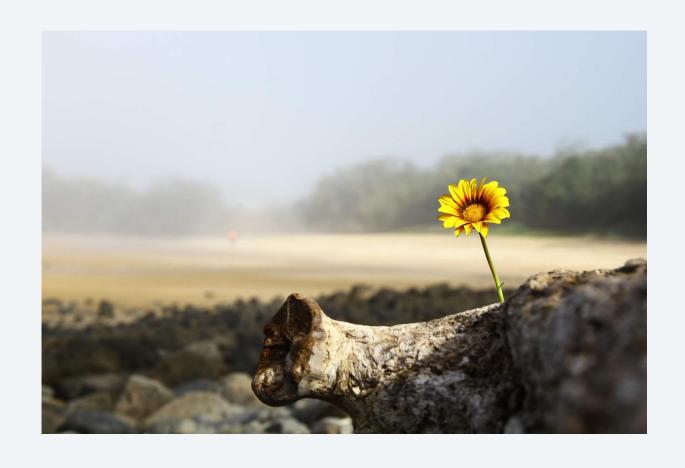
Housing stability, employment and mental health goals

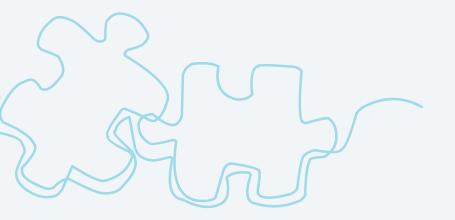
Residential Service Line

Improving well-being, pro-social behaviors, coping and life skills

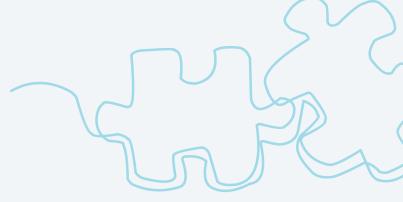
Connection to Hope

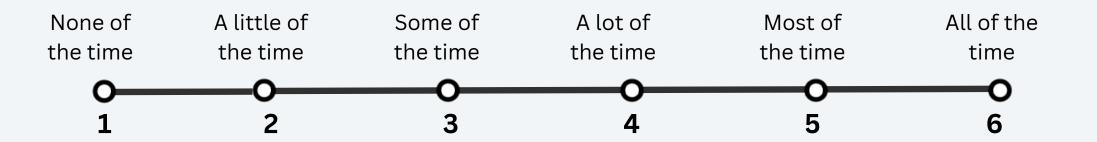
Hope is the single best predictor of individual well-being (Gwinn, 2018), is culturally and regionally transcendent (Senger, 2023), and influences positive treatment outcomes (Counted et al., 2022).





The Hope Scale





- 1. I think I am doing pretty well.
- 2. I can think of many ways to get the things in life that are most important to me.
- 3. I am doing just as well as other kids my age.
- 4. When I have a problem, I can come up with lots of ways to solve it.
- 5. I think the things that I have done in the past will help me in the future.
- 6. Even when others want to quit, I know that I can find ways to solve the problem.

Notes: The **Agency** subscale score is the sum of items 1, 3, & 5; the **Pathways** subscale score is the sum of items 2, 4, & 6. **Hope** is the sum of the three **Pathways** and three **Agency** items. Scores can range from a low of 6 to a high of 26.

Agency Score ____ (Add items 1, 3, and 5)
Pathways Score ___ (Add items 2, 4 and 6)

Total Hope Score ___ (Agency Score + Pathways Score)

Connection to Self

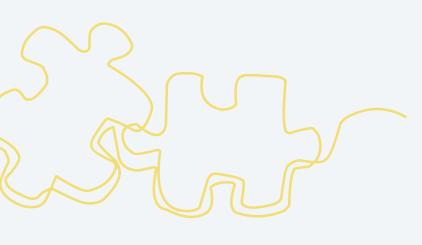
Effective emotional self-regulation and coping skills are associated with mental health well-being, quality of life, and reduction in symptomology (Menefee, Ledoux, & Johnson, 2022).



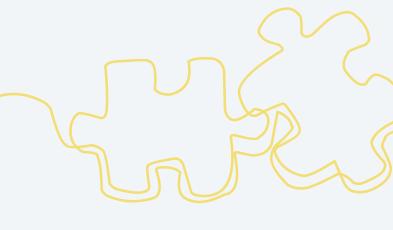
Connection to Others

Possessing relational health is associated with improved mental health across generations (Saeri et al., 2018). Moreover, relational health can serve as a protective factor by aiding trauma recovery/healing (Schneider et al., 2017) and by reducing the risk of death by suicide (Tsai et al., 2015).





Relational Health Scale



Celedonia et al., (2025) developed a definition of relational health based on a participatory research study.

Good Communication

Trust

Support

Shared Interests

Honesty

Having Fun

Creation of a new scale based on these characteristics (in pilot phase).

Connection to Communities

The Social Determinants of Health (SDoH) include myriads of non-medical factors that influence an individual's health and safety outcomes. These factors can influence up to 55% of health outcomes and reduce health inequities (WHO, 2024).



From Past to Present



2021

Created impact statements for service lines

2022

Met with programs to discuss outcomes 2023

Finalized the first service line specific discharge outcomes form

Conducted research with clients and other stakeholders

finalized three line discharge <u>outcomes</u> forms

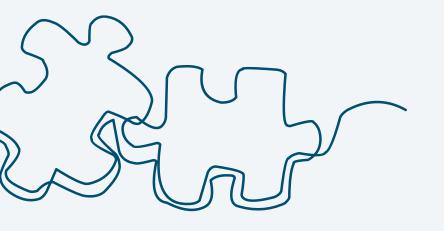
Researched scales relevant to findings from research

2025

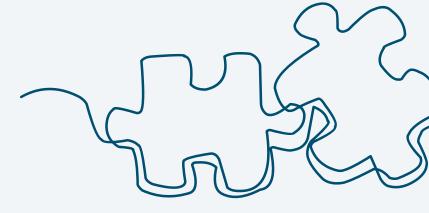
Created and other service

2024

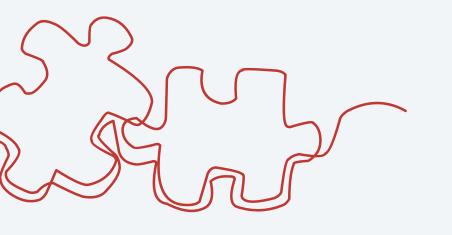
Launched new Organizational Outcomes to all **Programs**



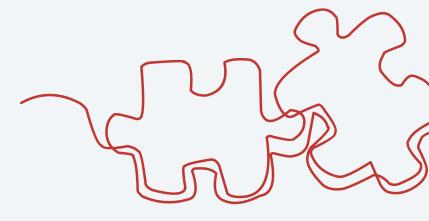
Lessons Learned



- Organizational readiness and alignment
- Data complexity and buy-in
- Sustaining changes over time

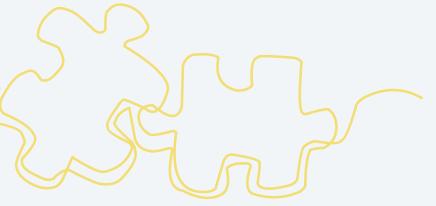


Future Directions

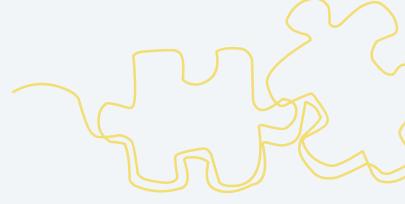


- Scaling client voice organization-wide
- Implications for QI frameworks

CONNECTIONS



Scenarios



Youth Name: Jayden

Age: 15

Background

Jayden has been in and out of foster care homes since the age of eight due to neglect and parental substance abuse. He struggles with trust and often acts out in school, leading to suspensions and strained relationships with peers and teachers.

Strengths

- 1. Creative and artistic; loves drawing and graffiti art
- 2. Protective of younger children in care
- 3.Deep thinker, though often quiet
- 4.Good at board and video games
- 5. Wants to apply creative talents to making video games professionally
- 6.Loyal to a small friend group

Challenges

- 1. Task avoidant when facing non-preferred assignments
- 2.Is aggressive when things go badly at home or school
- 3. Has a history of bio parents cancelling planned visits
- 4.Removed from the foster home where his sibling lives due to frequent aggression
- 5. Removed from the biological home due to neglect,

Youth Name: Lila

Age: 11

Background

Lila lives in a residential treatment facility after being removed from her home due to physically aggression and suicidal ideation. She struggles with trust and emotional regulation, often withdrawing from staff and peers. She continues to experience intense fear and anxiety, especially at night.

Strengths

- 1. Highly creative and imaginative, loves to draw
- 2. Empathetic towards peers in similar situations
- 3. Observant and often picks up on others' moods
- 4.Introvert, loves to read
- 5. Loves animals, wants to explore professional options
- 6.Exceptionally intelligent

Challenges

- 1. Experiences frequent nightmares and sleep disturbances
- 2.Has difficulty trusting adults due to past physical and emotional abuse
- 3. Withdraws when overwhelmed emotionally
- 4. Hesitant to form new relationships, fearing they won't last
- 5. Feels isolated, making it hard to connect with peers and staff

Q & A

Final Reflection

What's the missing piece in your organization's outcome puzzle?



Contact Us



Amanda Smith-Chonko

asmithchonko@pressleyridge.org



April Wall-Parker

awallparker@pressleyridge.org



Kimberly Lohrfink

klohrfink@pressleyridge.org