



Performance Quality Improvement

4th Quarter Meeting, FY21-22

November 16, 2022

8:30 a.m. – 12:30 p.m.

Meeting Report

In Attendance:

Julie Swindler
Elsira Bravo
Sharonda Crawford

Andres Torrens
Alexander Guanarita

Diana Cardona
Peter Thate
Melissa Wijngaarde

Absent: Stephanie Drennan

I. CEO, Finance, and Operations Updates

❖ Updates for quarter

CEO

- A Breast-Feeding Certification Training was held at the Families First's West Palm Beach office. There were 12 Families First staff members that attended and are now fully certified.
- Agency provided Medicaid training for staff which will help staff with documentation and processing claims. Ms. Swindler noted the training is very affordable and necessary as Medicaid billing increases.
- Julie attended the webinar, hosted by congresswoman Lois Frankel, regarding a briefing on the National Suicide Prevention Lifeline's transition to 988. This transition is a historic investment in mental health and a step towards a transformed crisis care system in America.
- On July 27th and 28th. The healthy Families graduation ceremonies were held in West Palm Beach and Belle Glade offices. There was a total of 59 graduates this year, the most in our history of Healthy Families. (21 from the Glades and 38 from the Coast)
- On August 3rd, the Child First study meeting with the Child First team at CSC showed positive change in participants that were involved in Child First. Since the study was during the pandemic, there was not a large group of participants as well as the model was altered for telehealth since home visits could not be conducted. Overall, CSC is pleased with the results and Child First will continue. Child First National has a new Director in Florida who lives in Martin County.

There are plans to expand Child First in the State of Florida. Our staff also participated in individual and family videos showcasing the program. Our agency and program received accolades for the quality of service by our teams.

- On August 31st, the agency had a visit from Gail Stein with the Department of Health to monitor the administrative and programmatic elements of the TOPWA program. The site visit went very well.
- Julie attended the Accreditation Task Force meeting with Nonprofits First. Todd L'Herrou went over the new tool with additional standards and a couple being eliminated. This is timely as the agency is engaged in a full review 2023.
- On September 29th, Diana Cardona, and Andres Torrens, attended a meeting with Connie Siskowski with the Caregiving Youth Project. Dr. Siskowski has been wanting to collaborate with our Kin Support Project. She has a staff on medical leave and wants our new employee in the Glades to help serve some of their families for the next three months. Based on population and area, it does make sense, so the team is working with their team to secure MOA and particulars on the work
- On September 30th, Melissa Wijngaarde and Julie met with Luciana Dias from Children's Services Council. Dr. Lisa Williams Taylor was asked to be part of a DCF focus group regarding partnerships with community stakeholders and how they could do their work better. Ms. Dias wanted us to give her input to share with Dr. Williams in preparation for her participation in the focus group.
- Staff completed cleaning up drives by end of September to coincide with fiscal year.
- Foundation Members made introductions to new business supporters for the upcoming luncheon: Geo Group Foundation - \$5,000; B.E. Blank and Company - \$1,500; Synovus Bank & Investments - \$2,000; Tire Kingdom - \$515.24; Hafer - \$500; The Falcon Group - \$375; First Republic Bank - \$1000; Dawson James - \$500; Ball Janik LLP - \$1,000; Sandhill Crane Golf Club - \$500; Donations amounting to \$305.84.
- Ms. Swindler reviewed the SWOT analysis and discussed the present Board of Directors' goal. There was discussion about the diversity of the board and how many board members the agency can have according to the By-Laws so this will be reviewed. Ms. Swindler will take the information from the SWOT analysis and formulate proposed goals to be reviewed by the Executive Committee at the December executive meeting.
- Ms. Swindler stated that the nominating committee will be meeting on November 30th to review officers for next year. The present officers are good with the rotation so discussion will be held regarding Secretary and Treasurer.

Finance

- It was noted that the agency received \$5,000 from TD Foundation and \$17,500 from Jose Antonio Grifols Lucas Foundation, both in support of Bridges to Success in July.
- The Committee reviewed the proposed budget for fiscal year 2023. The total annual budget is proposed to be \$6,211,957 which is an 8% increase over the

prior year. Some of the increases are the additional two therapists for the school project, one therapist for reentry, and expansion of the Kin Support Project to the Glades.

- The agency is currently working with a consultant to credential staff who are billing for Medicaid.
- The finance committee decided to purchase a buffered note as was discussed and will be discussing the possibility of moving to a new bank.

Operations

- The agency received the Continuous Improvement grant to pay for the consultant group, Novus insights. Elsira will be replacing Renee as the new Compliance & Quality Assurance Director and continue to work with consultant after contract is signed.
- Agency will continue to offer staff the opportunity to participate in racial equity training on a voluntary basis and not mandate this training. When such training is offered with respect to equity, staff will be informed of such training and make staff aware that participating in and completing said training will be voluntary. All agency training will be clearly spelled out and the staff will be informed ahead of the training for the staff to make an informed decision with respect to whether they choose to attend.
- The agency has identified a training for staff to complete with respect to cyber security. The agency will take the next steps to have IT move this training forward and will be required for all staff to complete at least twice per year.
- Two conference rooms in the Forest Hill office continue to be accessible to the staff of Families First but the MAPP room on the second floor is still in question as the new landlord may need this space for their clients. The procedure for signing out the conference rooms continues to be the same, but it will be confirmed with the new landlord as the approval for getting the room confirmed appears to be taking some time.
- A list of staff who are to receive FOB cards has been sent out to the new building landlord. All staff who are currently working in the WPB office will receive a FOB card. Three senior staff members Julie Swindler, Andres Torrens, and Alexander Guanarita will also receive codes to access the building if the FOB cards stop working. Additionally, they will each receive keys to the building.
- The application has been completed and will be uploaded into the COA portal. One document, the Child First full report, was too large to upload and therefore, will be sent in a subsequent email.

Grants

- 13 grants written in this quarter totaling \$370,781
- 2 grants were new requests
- 9 grant award notifications are still outstanding totaling \$255,781
- 2 have been awarded for \$60,000
- 4 grant notifications coming in that were carried over from the 3rd quarter, amounting to \$27,500
- There were 2 requests declined this quarter carried over from the 3rd quarter.

II. Development Department

- The annual Children's Day Luncheon will be held on Friday, November 4, 2022.
- 35 sponsors committed to the 16th annual luncheon for a total of \$86,000 in pledges and payments.
- Held a gift gathering hosted by board member, Mary Aguiar, where \$3k in items were donated to the silent auction for this year's luncheon. Over 40 items have been donated to this year's silent auction.
- Luncheon video was filmed and edited, highlighting a client from the BTS program.
- We were invited by the Cigna Foundation to submit a first-time grant proposal for BHS. Grant request was for \$104k.
- Submitted first time BTS grant request to Publix Charities for \$17k.
- Submitted Impact 100 grant LOI for IMH
- Attended training for Impact the Palm Beaches grant and Impact 100 Palm Beach County

III. Workforce Stability

❖ Attrition

- Separations-
 - BTS- 1; voluntary- tenure 2 years, 8 months
 - HF- 4; voluntary- tenure 4 years, 9 months; 1 year, 10 months; 6 years, 9 months; 5 years, 3 months.
 - BHS- 2; voluntary- tenure 4 years, 11 months; 4 months
 - GEN- 1; voluntary- tenure 4 years
- New Hires-
 - IMH-1; new position
 - BHS- 3; 2 new positions; 1 position filled in two months
- Promotions-2
- Currently 66 employees

❖ Staff Morale

- Families First orientation videos are now complete and available to staff. These videos will help give a more informed understanding of agency programs, departments, and initiatives to assist during onboarding.

Child First:

- Child First came together in July to finish our in-person Conscious Discipline training as a group. We learned a lot, had a lot of fun, and shared a lot of laughs
- We celebrated Dalecia's full licensure in July 2022 by going to breakfast together at First Watch.

- In August, most of the Child First team participated in an in-person 20 Hour Breastfeeding Counselor Course that all staff reported to learn a lot from and enjoy.
- Child First celebrated quarterly birthdays and our 100% CPPA score by going to lunch at The Cheesecake Factory together.

Healthy Families:

- Sharonda Crawford, Healthy Families program manager, spoke with each person on the Healthy Families staff to speak with them about how they feel.
- The feedback from them was that they enjoy the work that they do.
- They feel supported by their supervisor, and their only concern is their current salaries.
- I did advise of the open communication policy, and they can contact me at any time

TOPWA:

- Staff also met virtually for our monthly staff meeting on July 19th.
- In August the TOPWA Team worked together on identifying outreach strategies to enroll new moms. The team met for the TOPWA monthly staff meeting and the Supervisor was able to attend a tour of FoundCare to discuss collaboration and referral services. The staff also attended the 501 Update Training for HIV/AIDS.
- In September TOPWA's team came together to celebrate Nadine's Birthday, as well as her work Anniversary with Families First. Staff also coordinated and attended our first group outreach sessions. One in the Delray area on September 11th and the other in Belle Glade on Sept 30th.
- The TOPWA Supervisor met with each Outreach working in the field in the months of August, and September. This supervisor was able to shadow and provide positive feedback and kudos for the hard work done by each worker in person.

Behavioral Health Services:

- The BHS team are meeting bi-weekly to discuss cases. Staff volunteer to present a case during the BHS meetings and receive feedback from clinicians and family service coordinators on interventions, treatment planning, follow-ups, and case management
- Due to the end of the fiscal year, clinical director met with program supervisors, data coordinator, and intake specialist to gather data
- In this quarter, clinical director met with program supervisors for chart reviews. Six of seven chart reviews were compliant.
- BHS licensed staff are in the process of being credentialed with Medicaid. Families First is working with a consultant for these services.
- Clinical director met with Center for Creative Education to explore the possibility of a partnership.
- Tabitha attended the Back-to-school Carnival at Village Academy

- BHS team attended the BHS staff meeting and received training in Maternal Mental Health

Kin Support:

- KSP team continue to engage in monthly support groups.
- In the month of September, KSP staff distributed care packages for grandparents' day
- Khalilah attended the Back-to-School Carnival event at Village Academy
- KSP team attended the BHS staff meeting and receiving training in Maternal Mental Health
- As KSP expands to the Glades, Khalilah and Marcela have been conducting first interviews. Their input has been very important to continue the team cohesion they have created. They are looking forward to finding the right candidate for this position

❖ Staff Survey

- Staff satisfaction surveys were sent out at the beginning of September and received a 77% submission rate. Staff will be presented findings during their program meetings by Compliance and Quality Assurance Director. Report summary can be seen below:

Review

- Based on overall sections conducted the highest concern arose from benefits and salary. With an increase of inflation during this fiscal year and mental health illness on the rise as an epidemic nationwide, social workers and therapists have become an essential and in-demand profession. With 25% of staff not satisfied with salary, 98% are in agreeance with benefits that includes: health coverage, vision, and 401k.
- Finding other means of revenue that can still meet needs of staff and clients to be served should be considered to continue to support overall retention.
- The strongest categories that showed little to no negative reviews reported were Agency culture, support, and equity and diversity.
- During the fiscal year many initiatives and protocols have been put in place to support staff through equity and diversity. A core team was created and completed a year-long training to initiate conversations and progress towards a more equitable workplace. Agency has been informed and trained throughout the year on the subject and continues to be reported from staff as one of the agency's biggest strengths.
- While staff is encouraged to support the families, they serve it has been Families First priority to equally do the same for staff. Illness and work-life balance have been a challenge to many programs. By keeping open lines of communication with leadership and offering continued support and understanding staff retention has continued to remain relatively high.

Summary

- With a high response rate this staff survey was thoroughly analyzed to depict strengths and weaknesses of the overall staff culture. The methodology uses a content analysis approach based on gathered data collected from constant contact. Survey was divided into 7 different categories and open-ended questions that were coded for accuracy in response patterns.
- Staff shared agency engagement and being in-tune with needs of staff has had an overall positive impact on staff satisfaction.
- Work-life balance and having options of how to conduct work to reduce stress is something staff would like agency to consider moving forward as more agencies have shifted to hybrid models.
- Promoting growth opportunities through training for clinicians and staff to meet personal and professional goals can prevent staff turnover.
- More clear and concise processes for staff have been addressed for onboarding by individual programs by creating their own order of operations. The agency has also created a series of videos for better overview of program and initiatives at the agency level.
- Agency will continue to promote engagement by more frequent check-ins with staff and addressing weaknesses throughout the new fiscal year.

Row Labels	Average of Overall Results
Strongly Agree	56%
Agree	30%
Neutral	10%
Disagree	1%
Strongly Disagree	1%

IV. Safety and Security

- ❖ COVID Positive Clients for the quarter: **49**
 1. There has been a 38% decrease from last year during the same quarter for clients testing positive.

Program	4 th Quarter 2021 (79)	4 th Quarter 2022 (49)
BHS	13	1
BTS	2	0
CF	7	3
HF	37	41
KS	19	3
TOPWA	1	1

- ❖ Staff testing positive for COVID-19 for fourth quarter: **7**
 1. The current staff vaccination rate is at 74%

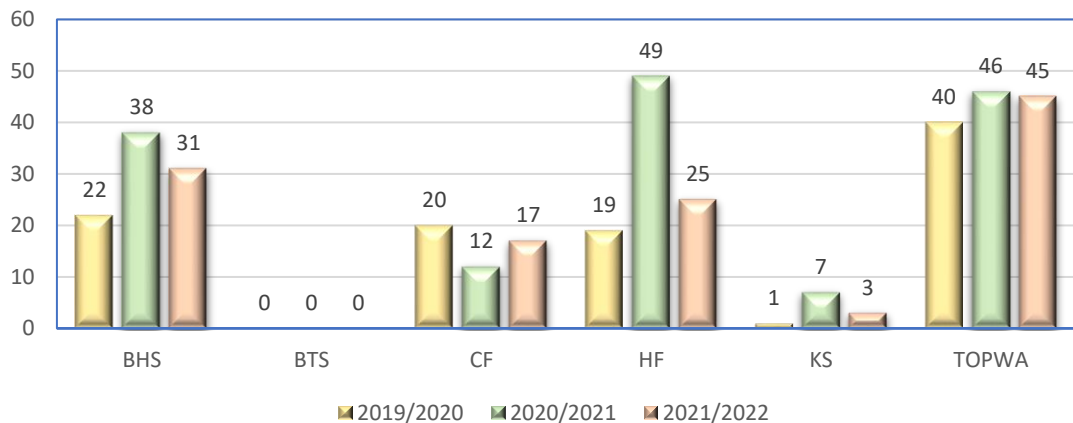
2. Agency has consulted with lawyer regarding the requirement for new employees to be vaccinated. Based on recommendation moving forward data will no longer be collected for new fiscal year should healthcare professionals advise otherwise.

❖ Risk Management Concerns

- With an increase in remote and hybrid working models’ cyber security has become crucial in supporting staff from attacks. CSC will be supporting agencies that provide a recurring form of training in cyber security. Upon review of curriculum, Ninjio has been selected to provide this service for the agency beginning next fiscal year.
- Agency will be tracking and reporting on cyber security beginning next quarter to ensure cyber security risk management.

V. Client service numbers – 4th Quarter Comparisons

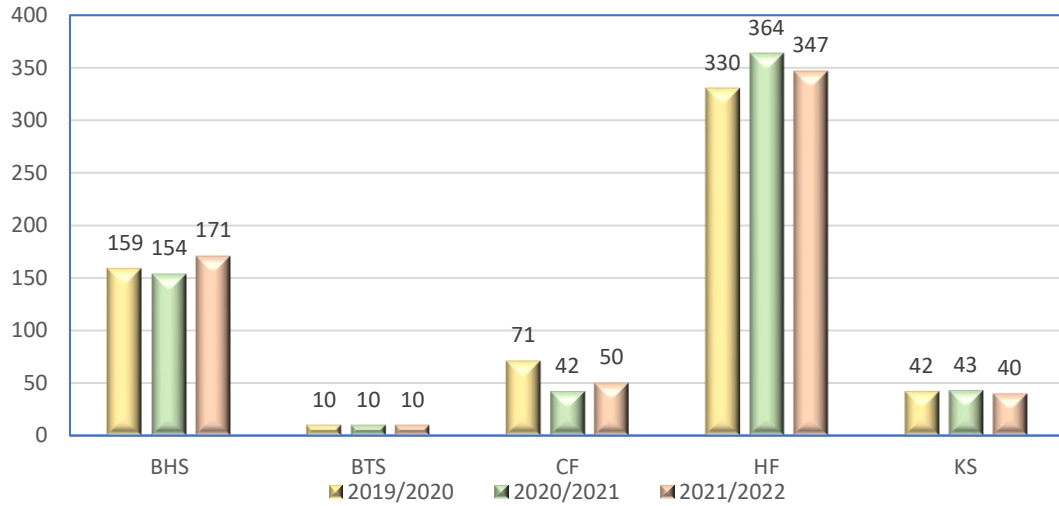
Comparison numbers of clients/cases opened in 4th quarter



Narrative for clients/cases opened:

All six program are currently meeting demand of clients. During the fourth quarter Healthy Families number of clients to be served per contract has been revised by funder and will begin to be adjusted in new fiscal year.

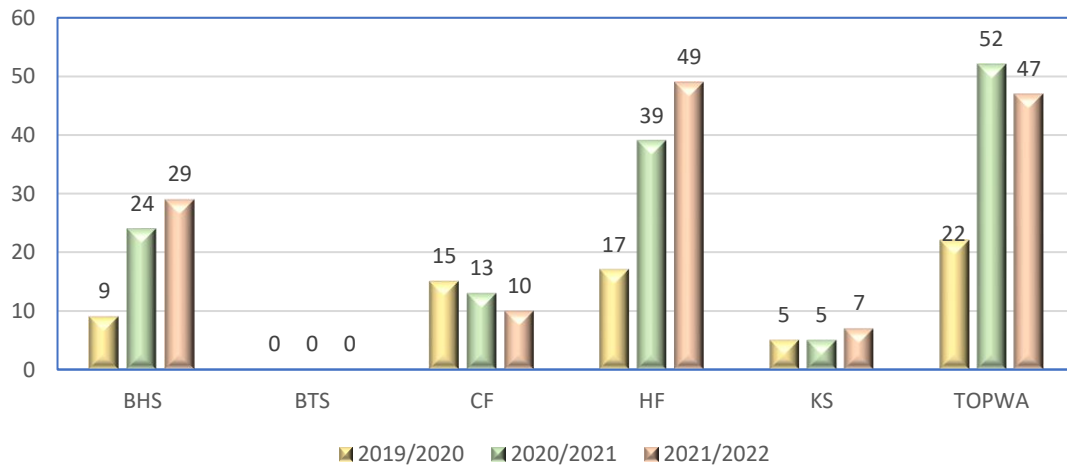
Comparison numbers of clients served in 4th quarter



Narrative for clients/cases served graph:

BHS experienced an increase in clients served for the fourth quarter with the return to school as well as more advocacy for mental health services for students. TOPWA has no reporting due to the nature of the program.

Comparison numbers of clients/cases closed in 4th quarter



Narrative for clients/cases closed graph:

During this quarter HF had the highest graduation rate of families during a quarter compared to previous years.

VI. Program updates; additional agenda items

- PQI discussion:
 - Behavioral Health Services (BHS): the therapist that left the agency was due in part to challenges that were faced with working with the school; the administration of the school (LSMS) recruited the staff working at the school and appeared to have impacted on keeping staff at this school; when the therapist left the agency, we decided to no longer continue to work at LSMS and asked to be assigned to a new school. A serious concern continues to be identifying and hiring clinical staff. One of the therapists who was a co-located therapist was promoted to a supervisory position and we moved another therapist over to the co-located position at Loxahatchee ES. The search for qualified mental health professionals continues to be a major challenge but apart from one position.
 - Kinship Support Project (KSP): The KSP program has been progressing very well and continues to do well.
 - Child First: A Care Coordinator resigned her position with Child First to accept a position within the agency as the director of quality assurance. A FSW from the Healthy Families was also promoted to a Care Coordinator within the Child First program. Because the staff was replaced immediately, there were no vacancies and there was no interruption to the services to clients.
 - Healthy Families: A very busy final quarter. Some staff left the agency due to moving out of the County and this posed a significant hardship for the program due to the challenges in hiring replacements. It took a longer time identifying and hiring staff but all staffing positions apart from one has been filled. Some additional challenges include salary requirements on the part of applicants which include higher salaries and tuition reimbursement. Another challenge continues to be the capacity number for the program and this new requirement is a challenge for the program. An analysis of the program reveals how well the program is doing and how committed the staff are with maintaining the high quality of services to the clients.
 - Bridges to Success (BTS): BTS: a new staff member was hired in the third quarter, and she hit the ground running. She entered the BTS program and immediately familiarized herself with the program, its operations, and the clients. She started attending the county meetings and became familiar with the operations of the program's data system and the county employees working in the housing world. All ten units remain filled, and we had no vacancies in the fourth quarter. There were a couple of families that required a notice of cure (warnings) and after the NOC was issued, the families made the ...the necessary corrections and adjustments to their homes.
 - TOPWA: All of the staff have been trained in Rapid Testing. The transition has been a real challenge for staff and for the agency, specifically due to needing P&P related to biohazard waste and the collection of this waste. Meetings will be scheduled to develop additional partnerships and mentors to in the community to look to for assistance. The staff of the TOPWA program continue to receive support especially due to them feeling a little uneasy about completing this testing and not doing testing as we used to. The forms that we used to use are not electronic and paper will slowly be decreased. Time will be saved due to not having to drive the paperwork to the Health Department and now data is being entered on a more regular basis.
 - Infant Mental Health: The IMH program was started in the last quarter and continues to grow. A full-time staff member was hired and has started to work at

completing assessments and intaking clients within 10 schools where there is a head-start program. The program continues to grow, and we have started to admit clients to the IMH program. A total of approximately 14 referrals have been received and it is expected to continue to grow. Data reporting as well as program updates will begin for the 2022-2023 fiscal year.

VII. Quarterly Program Report Updates

- ❖ Monitoring, Site Visit, and Report Updates:
 1. TOPWA Monitoring, August 2022
 2. TOPWA monitoring report received September 22,2022

- ❖ Quarterly Data Reports:
 3. BHS
 4. BTS
 5. CF
 6. HF
 7. KS
 8. TOPWA

VIII. Risk Assessment Review Committee

- ❖ Staff incidents – 2

- ❖ Client Incidents – 3
 - BHS – 0
 - BTS - 1
 - CF – 1
 - HF –1
 - KSP – 0
 - TOPWA – 0

- ❖ Client Incident Types:
 - Child abuse/neglect: 1
 - Aggressive/abusive behavior – 1
 - Accident/injury – 0
 - Other – 2
 - Law violation -0

- ❖ Client Incidents 4th Quarter comparison by Year

Program	2019/2020 (20)	2020/2021 (7)	2021/2022 (3)
BHS	1	3	0
BTS	1	0	1
CF	5	0	1
HF	12	0	1
KSP	1	3	0
TOPWA	0	1	0

Type	2019/2020	2020/2021	2021/2022
Risk for harm self/others	4	0	1
Aggressive/Abusive Behavior/Assault	6	0	0
Accident/Injury	1	0	0
DCF/Hotline	6	1	0
Child Abuse/Neglect	2	5	1
Death	0	0	0
Legal/Law Violation	0	0	0
Medical emergency	1	0	0
Other	2	1	1
Sexual harassment/battery/assault	2	0	1
Substance/Drug abuse	0	0	0

**1 client reported 2 grievances during one incident account during this quarter*

- ❖ Risk Assessment Committee incident review for 4th quarter
See discussion notes attachment following quarterly reports

BEHAVIORAL HEALTH SERVICES
Fourth Quarter Report, July 2022 - September 2022

Date: October 2022

PROGRAMMATIC CAPACITY and DELIVERABLES									
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of clients enrolled & carried over	155		186		169		140		
# of clients opened - Adult 1st box Child 2nd box	3	44	0	38	3	24	2	29	8 135
# of clients served	202		224		196		171		
# of clients closed - Adult 1st box Child 2nd box	0	16	0	55	0	56	6	23	156
Successful closures	8		39		46		24		117
Closure before completing services	8		16		10		5		39
# targeted to be served	135		135		135		135		
PROGRAMMATIC OUTCOMES									
	QTR 1		QTR 2		QTR 3		QTR 4		YEAR AVG
OUTCOME INDICATORS	#measured	#achieved	#measured	#achieved	#measured	#achieved	#measured	#achieved	
80% reduction in mental health symptoms	16	12	55	41	56	46	29	24	
Percentage achieved	75%		75%		82%		83%		79%
80% stability of placement	16	16	55	55	56	56	29	29	
Percentage achieved	100%		100%		100%		100%		100%
80% stability in school	16	15	55	55	56	56	29	29	
Percentage achieved	94%		100%		100%		100%		98%
Challenges impacting outcomes	Challenges impacting outcomes- There were a total of 29 discharges for this quarter. Clinical director established an Order of Operations Manual for staff. This will aid towards helping staff process documentation in a timely manner, along with understanding successful and unsuccessful outcomes. Of the 29 discharges 26 achieved a reduction in mental health symptoms. There were no disruption in stability in school and home placement.								

HOUSEHOLD COMPOSITION	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
Types of household (unduplicated)					
Single Parent	21	26	17	23	87
Married Couple	25	12	10	5	52
Cohabiting couple	0	0	0	0	0
# of Children	108	78	62	79	327
# of Adults	94	88	58	66	306
PROGRAM OVERVIEW					
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS				
# of files audited	0	15	6	7	28
Most notable key accomplishment(s)	<p>The BHS program has proven to be successful in reducing behavioral/mental health symptoms along with improving interpersonal relationships in the home, school, and with peers. Youth were less likely to offend, reoffend, or engage in criminal activity when a support system was set in place and provided consistently. The Y.E.S. contract was intended to serve 60 youth; however, through this program the agency admitted 114 youth and served a total of 199 youth. Additionally, during this contract period, there were a total of 134 discharges, which resulted in over 90% of success rate throughout the contract period. In this quarter, the clinical director established the Order of Operations Manual and reviewed with BHS team members to help align and streamline clinical documentation and its process to ensure documents and data are being submitted in a timely manner. BHS bi-weekly meetings have begun to take place and it is taking time for staff to adjust to these meetings, while feeling comfortable to express and share ideas as a team. The meetings were created to provide feedback on case consultations. These meetings are also a place to update and inform BHS team staff of program and agency updates.</p>				
Most notable challenge(s)	<p>In the BHS PARED program, we struggled to meet our numbers due to having the behavioral health therapist position vacant for more than a month. It was challenging to find qualified candidate to meet the needs of the community. In this quarter, BHS program supervisor and clinical director completed 7 chart reviews. Of 7 chart reviews 1 was out of compliance and it is being addressed with this clinician to bring this chart to compliance. Chart reviews are currently under revision and review with the collaboration of the quality assurance director. During this period, we had a clinician resign from her clinical position and abandon her position with Families First and the students she was serving at the school. This loss will cause a delay of services in the Belle Glade community.</p>				
ANECDOTAL STORY TO SHARE					
<p>The following story was shared by the clinician at Pine Grove: Client's family migrated to America Fall 2021 and client started 4th grade. Client presented with concerns of adjusting to a new school environment and frustrations connected to the language barrier. Therapist was able to support client in native language regarding his concerns. Client has made great strides with processing emotions attached to the transition. Client successful completed 4th grade on target and is now completing 5th grade. Client was recently announced as student of the month. Client is actively making positive strides every day.</p>					

BRIDGES TO SUCCESS
Fourth Quarter Report, July 2022 - September 2022

Date: October 2022

PROGRAMMATIC CAPACITY and DELIVERABLES									
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		YEAR END
# of families carried over	10		10		10		10		
# of families opened	0		0		0		0		0
# of families served	10		10		10		10		
# of families closed	0		0		0		0		0
Successful closures	0		0		0		0		0
Closure before completing services	0		0		0		0		0
# families targeted to be served	10		10		10		10		
CLIENTS & HOUSING UNITS (new per quarter)	QTR 1		QTR 2		QTR 3		QTR 4		YEAR END
# of Families	10		10		10		10		10
# of Children/dependents	16		16		16		16		16
# of Adults	18		18		18		18		18
Single	9		9		9		9		
Married	0		0		0		0		
Co-habituating	1		1		1		1		
COMMENTS									
PROGRAMMATIC OUTCOMES									
Outcome Indicators	QTR 1		QTR 2		QTR 3		QTR 4		YEAR AVG
	#measured	#achieved	#measured	#achieved	#measured	#achieved	#measured	#achieved	
80% of 10 families will maintain housing within the program or exit to safe, affordable permanent housing.	10	10	10	10	10	10	10	10	
Outcome #1 % Achieved	100%		100%		100%		100%		100%
80% of 10 families will maintain or increase their income including wages and/or benefits.	10	5	10	5	10	9	9	8	
Outcome #2 % Achieved	50%		50%		90%		89%		70%

Challenges impacting outcomes	In the last quarter, two families reported a total loss of income due in part to the pandemic and cut in hours or loss of job. Several other families continue to report a challenge in maintaining their income and although their household income has decreased somewhat, they were able to maintain some form of income to meet their needs. A family was excluded for wages and benefits due to currently attending school and having no change from previous quarter.
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PROGRAM OVERVIEW

FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	YEAR END
# of files audited	0	6	8	3	17

ACCOMPLISHMENTS & CHALLENGES	COMMENTS (current quarter)
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Most notable key accomplishment(s)	<p>The new BTS coordinator, Euratta Eastmond, started working with Families First in June and settled into this new position rather quickly. She inspected all the units in the program and within one month of being in the program, she was successful in making sure that all of the BTS units passed their inspections (with the exception of 1 unit). The unit that failed its inspection required so many repairs that it was in the program’s and client’s best interests to relocate them to a new unit. A new apartment was located for the family and the family was relocated one month later.</p> <p>Another notable accomplishment is the fact that some of the residents appear to be quite motivated in transitioning out of permanent supportive housing if possible. Two of the program's clients have successfully entered a vocational training program and several others have located employment opportunities where they are getting closer to becoming financially independent.</p>
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Most notable challenge(s)	<p>Since taking on the position of BTS Coordinator, Ms. Eastmond has hit the ground running with the clients. Returning to in-person meetings has been a challenge for Ms. Eastmond in that the families had become used to meeting with the coordinator virtually. Physical inspections of the units took place virtually throughout the pandemic and physical visits to the units did not occur regularly, and as a result, many of the inspections of the units failed shortly after Ms. Eastmond began her employment. She made it a point to physically visit all of the units as soon as she started working for Families First and made assessments of what was needed and what needed to be taken care of. Many of the units failed inspections and one family needed to be relocated because their unit did not pass it's inspection and the repairs that needed to be made were so severe that the agency did not renew the lease with the landlord and a new unit was located. Another notable challenge has been in the availability of affordable housing. None of the 10 families served by the BTS program have been able to move out of the BTS program due to the lack of affordable housing.</p>
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ANECDOTAL STORY TO SHARE

MC, a mother of three adult children entered the program as a single mother in 2011 with her three children. MC has been stable within the program ever since and has been thriving physically and mentally. MC spends 8-12 hours Monday through Friday volunteering throughout the community. She shows great leadership as she helps distribute food and personal items to the homeless in the Western Community of Belle Glade. MC uses her situation to motivate others, she is very generous and does not mind lending a helping hand whenever she could. In August 2022, MC purchased her first vehicle which she uses to get around and assist others. She used to rely on receiving bus passes every month but no longer requires a bus pass. MC is on a path to achieving greater independence from the BTS program and becoming self-sufficient.

CHILD FIRST
Q4 July 1 through September 30, 2022

PROGRAMMATIC CAPACITY and DELIVERABLES										
REFERRALS, ENROLLMENTS and DISCHARGES	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE	
# of Clients enrolled and carried over	28		35		35		33			
# of clients carried over who were NOT enrolled, but enrolled in the Qtr.	5		4		4		0			
# of Clients referred, accepted & enrolled from HomeSafe	17		9		10		14		50	
# of Clients referred, accepted & enrolled from HMHB	0		0		1		3		4	
# of enrolled Clients served	50		48		50		50		198	
# of Enrolled Clients discharged in quarter	15		14		17		10		56	
Successful closures (clients enrolled 60+ days and had at least 4 home visits by the clinician)					10		3		13	
Closure before completing services (clients enrolled 60+ days and had at least 4 home visits by the clinician)					2		3		5	
Referrals that were accepted & discharged (never enrolled) <i>*see comments for reasons</i>	HomeSafe	6	HomeSafe	3	HomeSafe	9	HomeSafe	8	HomeSafe	26
	HMHB	5	HMHB	1	HMHB	5	HMHB	1	HMHB	12
# of Rejected Referrals	Capacity	1	Capacity	0	Capacity	1	Capacity	2	Capacity	4
	Language	1	Language	0	Language	0	Language	0	Language	1
COMMENTS										
<p>* Q4: Referrals accepted & discharged reasons: HomeSafe: Two (2) referrals rejected for capacity. There was one referral not reflected here that was a duplicate referral.</p>										
<p>* Q3: Referrals accepted & discharged reasons: HomeSafe: One (1) referral rejected for capacity, but was re-referred one week later and accepted. HMHB: n/a</p>										
<p>* Q2: Referrals accepted & discharged reasons: HomeSafe: Declined Services - Does not consent: 2; Unable to locate - Service not initiated: 1 HMHB: client waitlisted - No services provided</p>										
<p>* Q1: Referrals accepted & discharged reasons: HomeSafe: Another target client identified: 1; Declined Services - Does not consent: 5; HMHB: Declined Services - Participant discontinued services: 1; Moved out of service area: 1; Unable to locate - service was not initiated: 1; Unable to locate - service was initiated: 2</p>										
PLAN OF SAFE CARE	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE	
# of clients with POSC at intake					2		1		3	
# of POSC offered to families by FF					0		5		5	
# of POSC created with families by FF					0		0		0	
BENCHMARKS AT DISCHARGE	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE AVG	
SNIFF (Service Needs Inventory for Families) Needs Identified & Met - Clients opened 4+ months Benchmark: 80%	100.0%		93.70%		94.90%		98.90%		96.9%	
% of discharged Clients that Met Tx Goals/Completed Svcs (# of discharged clients / %) Target = 60% (All discharged clients in the period enrolled for 60+ days & had at least 4 home visits by the clinician.)	7	100.0%	**6 of 10 discharged clients	60.0%	***10 of 12 discharged clients	83.3%	**** 3 of 6 discharged clients	50.0%	26	74.3%

Family Improvement (benchmark 75%) * See Comments	(#/%)	n/a - this information isn't reported quarterly	n/a - this information isn't reported quarterly	n/a - this information isn't reported quarterly	n/a - this information isn't reported quarterly	n/a - this information isn't reported quarterly
COMMENTS						
* For contract year 10/1/20 thru 09/30/21: # of families that presented w/problems in 1+ areas at baseline: 25 Percent improvement at discharge: 96%		Q1:	Q2: ** 4 clients initiated services, but were then unable to locate	Q3: *** 1 client in service for 5 months was unable to locate and was discharged 1 client in service for 7 months discontinued services	Q4: **** 3 clients completed services 1 declined services after 286 days 2 were unable to locate after 441 days and 223 days respectively	
CLOSURES LENGTH OF SERVICE		QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
# of Clients open for 60+ days and closed in the quarter		7	11	13	6	37
Clients open 60+ days - Average Length of Service - Months		10.3	8.5	10.1	10.3	9.8
COMMENTS						
HOUSEHOLD COMPOSITION						
Types of household/Families (unduplicated)		QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
Single Parent (widow/divorce/separated/never married)		50	8	10	7	75
Married Couple		0	4	0	1	5
Cohabiting couple		0	1	2	0	3
# of Adults		74	26	20	8	128
# of Children		89	31	25	13	158

PROGRAM OVERVIEW					
FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	YEAR END
# of files audited (Benchmark: 25% of census per quarter)	0- in person peer review postponed until 1/18/22 due to COVID variant	16	10	13	39
ACCOMPLISHMENTS & CHALLENGES Quarter	Current	COMMENTS (current quarter)			
Most notable key accomplishment(s)	<p>Families First CPPA score for the year reflects high fidelity to the model with an overall score of 96%. The only area where we lost points was maintaining capacity as stipulated in the CSC contract with only 88 (80% of 110) children served to date. This is directly related to staff turnover experienced throughout the year in our program as well as having a staff member out on maternity leave directly impacting our ability to take on additional client families at different times throughout this contract year. During Q1 our program was onboarding two new therapists, Q2 saw the resignation of our Creole speaking care coordinator and the onboarding of her replacement, during Q4 we had a clinician out on maternity leave and also experienced the resignation of our Spanish speaking care coordinator. All of these staff changes had an overall impact on our adjusted direct contacts/adjusted home visits bringing down our overall average and even our ability to take on new client families at times.</p> <p>Despite staff turn over no clients had to be transferred to another program and we were able to be flexible as a team to ensure each family had access to a care coordinator. Our staff have gone above and beyond taking on extra responsibilities to ensure our families have continuous access to the care that they need. This means that we have ensured continuity of care and adhered to best practice standards. While we did not meet the benchmark for to date children served, we can note that we adhered to best practice standards during several periods of transition. At the start of Q1 for the next contract year we will be fully staffed indicating that the numbers should rise as the newer staff members complete training and begin steadily accepting referrals to build up their caseloads.</p> <p>Strengths included submitting data that is complete, accurate, and on time. We met our benchmark for ADCs (measured since Covid). NSO has been reviewing benchmarks this quarter for information purposes and it is important to note that for the year our AHVs were 78.95% nearly meeting our CSC contract requirement even with the staff changes and clinician out for maternity leave. With full staff, our hope is to meet and exceed this number in our next contract year.</p>				
Most notable challenge(s)	<p>This year, COVID- 19 remained a significant challenge. With several team members and client families contracting COVID-19, there was a definite impact on our ability to see families in person at various times. Q1 saw a return to field and a return to telehealth and toward the end of Q2 we started our gradual return to home visiting. Now, during Q4 home visiting was our preferred way to see families, unless sick, and teams have been able to use telehealth to remain in contact with families as needed. Many families are struggling financially this year, especially those who are undocumented and cannot receive some of the same resources as other families served. Housing has been a prominent issue over the year with inflation of the housing market impacting even rent costs for our families. This year we also saw a huge increase in gas prices that severely impacted our families and our staff during Q2 and Q3. Families First continues to help families with linking to resources for food, gas, and other basic needs as well as assist with rent and utilities through donations from the community.</p> <p>Additionally, staff turnover as described in Question 1 was another challenge experienced by our team.</p> <p>This year we also saw a transition in Clinical Directors which was challenging due to the large amount of CSC required trainings needed and adjusting to a new agency, Families First.</p> <p>This year our agency continued to help with taking overflow from other CF programs resulting in another challenge that continues even this quarter as our teams are stretching to many different zip codes that are outside of our contracted areas. Over the last year, Families First CF accepted 98 referrals, 27 of which were families residing outside of our zip codes that were overflows from other CF programs. We did this to ensure that families received services while the other CF sites experienced staffing issues and/or programs at capacity. Our staff are engaging in much more home visiting, especially during this quarter (Q4) and are covering large geographic territories in the county due to the overflow from the other CF programs. Clinical director was mindful of caseload sizes in relation to travel and accepting referrals outside of the agency's catchment area throughout the past year.</p>				

ANECDOTAL STORY TO SHARE

Child is a 4-year-old, Hispanic male that was referred by childcare, who was joined in this intervention with his maternal grandmother as she was granted temporary custody of child in June 2021. She described behavioral concerns with child reporting that child exhibits the following such as defiance, extreme temper tantrums, developmental regression, and poor boundaries. She also reported that child was exposed to reoccurring domestic violence, abuse, emotional and physical neglect. Child's trauma history was triggering and adversely impacted his grandmother, where it took an emotional toll on how she coped with stressors. The maternal grandmother reported that being a parental figure was challenging for her because she desired child to have a strong attachment with his biological parents but had concerns due to their past which was affecting child in multiple areas of his development. The level of stress was also parallel within the dyadic relationship, as assessments indicated moderate stress which affected their interactions and maternal grandmother's level of confidence to carry out the responsibilities of a parent. Child's development also presented with indicators as he scored with concern on the ASQ-3 in the domains of communication and fine motor skills. This was also observed through clinical observations frequently. The family has a history of child welfare involvement and became re-involved due child being placed at risk for exposure to intimate partner violence. Safety was a significant concern and point of focus in treatment due to child's history and his well-being and development being constantly affected. Clinical goals focused on psychoeducation of childhood trauma, addressing and repairing the multiple ruptures he experienced in his relationships, creating safety within the dyadic relationship, promoting healthy boundaries and helping child to build upon stranger anxiety, and teaching co-regulation techniques. Care coordination included referrals to necessary providers, enriched caregiving, resources for housing, and abecedarian activities to scaffold child's development. As treatment progressed, child's maternal grandmother's confidence increased, and she was better able to understand and reflect on the meaning of child's behaviors. This helped to strengthen the dyadic relationship and was noted by assessments indicating no further concerns in their relationship. Child also later scored in the typical range on the ASQ-3 assessment, the CF team worked closely to scaffold child's development through use of pleasurable activities that the dyad could engage in. Clinical goals continued to include trauma processing, and this helped to improve child's communication and personal-social skills. Maternal grandmother was able to reflect on treatment and reported that the relationship was strengthened by interventions and helped to increase her insight about child's strengths and vulnerabilities. This also led to a decrease in depressive symptoms that she initially reported and a decrease in stress, which contributed to her going back into the work force. This family was active with the Child First Program for nearly ten months and the team was able to see positive changes with dyad and how effective treatment interventions were in strengthening their attachment. Child was observed being more affectionate towards his grandmother, developmentally made progress, had improved boundaries, and also exhibited a decrease in temper tantrums.

HEALTHY FAMILIES PROGRAM
Fourth Quarter Report, July 2022 - September 2022

Date: October 2022

PROGRAMMATIC CAPACITY and DELIVERABLES										
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE	
# of clients carried over Adult 1st Child 2nd	319	616	320	31	317	27	322	36	Adult	Child
# of clients opened Adult 1st Child 2nd	26	51	44	65	41	69	25	42	136	227
# of clients served Adult 1st Child 2nd	345	667	364	96	358	96	347	78	1414	937
# of clients closed Adult 1st Target Child 2nd	25	20	47	38	36	33	49	45	157	136
Capacity - Contracted for 350										
PROGRAMMATIC OUTCOMES										
	QTR 1		QTR 2		QTR 3		QTR 4			
OUTCOME INDICATORS (open cases)	#measured	#achieved	#measured	#achieved	#measured	#achieved	#measured	#achieved	YEAR AVG	
1. 80% of target children will be up-to-date with immunizations at 24 months of age	13	12	18	17	16	15	22	22		
Outcome 1 Percent Achieved	92%		94%		94%		100%		95%	
2. 85% of target children will be up-to-date with well-child checks at 24 months of age.	13	12	18	17	16	15	22	22		
Outcome 3 Percent Achieved	92%		94%		94%		100%		95%	
3. 90% of target children enrolled six months or longer will be linked to a medical provider	72	72	98	98	95	95	92	92		
Outcome 2 Percent Achieved	100%		100%		100%		100%		100%	
Challenges impacting outcomes	None at this time, all outcomes were met.									
PLAN OF SAFE CARE	QTR 1		QTR 2		QTR 3		QTR 4			
# of clients with a POSC at intake					0		0			
# of POSCs offered to families by FF					2		1			
# of POSCs created with families by FF					1		0			

HOUSEHOLD COMPOSITION					
Types of household/Families (unduplicated)	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
Single Parent (widow/divorce/separated/never married)	197	20	23	13	253
Married Couple	68	15	5	9	97
Cohabiting couple	80	9	13	0	102
# of Adults (undup)	345	44	41	25	455
# of Children (undup)	667	65	69	42	843
FAMILY RETENTION Closure Reasons	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
# Completed HFF	6	23	15	13	57
# Not Interested/declined services	3	7	3	3	16
# MOOSA	0	1	0	1	2
# Lost Contact/to follow-up	4	8	11	8	31
#Target Child Miscarried	2	0	0	1	3
#Other	0	0	0	0	0
Program Acceptance Rate	89.70%	81.40%	93%	87.90%	87.90%
PROGRAM OVERVIEW					
FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
# of FSW files audited (Individual Family Records IFRs/charts)	116	106	84	90	396
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS (current quarter)				
Most notable key accomplishment(s)	<p>Many of our families continue to engage in virtual home visits, evident by our 90% home visit completion rate this quarter. We are receiving positive feedback from families about the quality of care we provide them during this time. We continue to maintain 80 % capacity.</p> <ul style="list-style-type: none"> •HFPB had successful quarterly outcomes for July - September 2022. •We are maintaining capacity at 80% or higher. •Graduation took place on 7/27/2022 & 7/27/2022 as a drive-by celebration 59 families successfully completing the Healthy Families program. Each family received a \$100.00 gift certificate and a gift basket, and a bag of food was given to each family. •Healthy Families Palm Beach picked up and delivered 334 backpacks for our families that have school-age children. •HFPB provided 12 food baskets to our families that needed food assistance 				

Most notable challenge(s)	With the transition to one-step eligibility in Palm Beach County and changes to the structure of our local program, our two part-time Family Engagement Specialists have been feeling the increased number of HFFATS for the program. The changes in this process have been over time, but the part-time FES is now at capacity, carrying a caseload of 12 families each and covering the largest geographic county in Florida. Our Healthy Beginnings Prenatal Entry agency will no longer be conducting HFFAT assessments in Palm Beach County as of 7/1/2022. Our two part-time Family Engagement Specialist is completing all Healthy Families assessments.
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ANECDOTAL STORY TO SHARE

Our featured Participant this quarter enrolled in our Healthy Families program in November of 2019. This Participant was referred to Healthy Families following the delivery of her premature (32 weeks) baby girl that weighed only 3 pounds. She also had just undergone surgery for her gall bladder a week after her c-section to deliver her daughter and had no initial local support. At the time of enrollment, she was living in Belle Glade with her three children. Her limited support system at the time came from her sister and father of baby, who both lived in Hialeah. MOB's relationship with FOB was off and on for the first year of babies life. MOB shared that the father of the baby cheated on her resulting in mistrust of relationships during a vulnerable time. This mother had transportation and a few baby items including a used car seat from her sister at time of birth. In the growing relationship between her Family Support Specialist and the mother, FSS learned that this mom's dreams were to study and practice English, pick back up her career, be a good mother, and raise responsible and professional kids. In the three years, she has been enrolled, this mother has been engaged, consistent, and open with her family support specialist. The Participant has since built a support system of neighbors, a sister, the father of the baby, and the Family Support Specialist. MOB went from renting her trailer to owning it. Mother and father are no longer together but the father still maintains contact with the child. MOB has since attained a bachelor's degree and is currently employed full-time with the school district. The Participant has consistently demonstrated an amazing amount of inner strength, flexibility, and (now) healthy coping skills as she has matured throughout the program and gained knowledge of community resources. She was offered the services of Early Steps for development support for her daughter and those services were received. Throughout her time with Healthy Families, many referrals were provided to this Participant so she could benefit from community resources. She has ongoing health care for all children. Is linked to and receiving services for WIC, food stamps, and other public assistance. Gift cards from Families First for food and personal items as well as baby needs were given when needed. The mother received a scholarship for daycare for her child that is renewable and safety items for her home to improve safety. While the Participant was knowledgeable about meeting the basic needs of her children, her daughter was premature and developmentally lagging concerning her adjusted age. With the support of her Family Support Specialist, she connected to Early Steps (early intervention) and was devoted to making sure her daughter received her needed therapies and was diligent in working with her at home. With the GGK developmental curriculum presented by her Family Support Specialist, her therapist in Early Steps, and the mother's persistence, her daughter is age appropriate in all developmental areas except fine motor. Her fine motor skills are mildly delayed and very close to being age appropriate. The FSS reinforced the perspective of this mother being her child's first teacher and she embraced that role. This Mom has a positive outlook on life now. The Mother shared with the Family Support Specialist that her proudest moments were when her daughter learned to walk and began communicating. This Mom is very nurturing, and her daughter has been able to form positive relationships with her siblings, aunt, father, and her childcare family. This Participant just graduated from the Healthy Families Palm Beach program following three years of intensive support. Her risk factors have been mitigated with her hard work and the support of many, including her Family Support Specialist who provided the coaching and support needed for this mother to flourish. We are so grateful to have been able to support this family.

KIN SUPPORT PROGRAM
Fourth Quarter Report, July 2022 - September 2022

Date: October 2022

PROGRAMMATIC CAPACITY and DELIVERABLES									
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of enrolled families carried over	38		42		40		37		
# of families opened	8		2		3		3		16
# of families served	46		44		43		40		
# of families closed	4		4		6		7		21
Successful closures	4		4		6		7		21
Closure before completing services	0		0		0		1		1
# targeted to be served	45		45		45		45		
NUMBERS SERVED (unduplicated)	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of Children	108		6		6		4		124
# of Adults	52		2		4		2		60
PROGRAM REFERRALS	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of referrals screened eligible for an assessment	8		2		3		3		16
# of referrals screened ineligible for assessment	0		0		0		0		0
# of referrals screened and placed on waiting list	0		0		0		0		0
# of referrals provided with education and information regarding community resources and services	46		44		43		40		173
PROGRAMMATIC OUTCOMES									
	QTR 1		QTR 2		QTR 3		QTR 4		YEAR AVG.
Outcome Indicators	#measured	#achieved	#measured	#achieved	#measured	#achieved	#measured	#achieved	
1) 84% of 50 kinship families will remain stable (not removed /placed in foster care) during the contract year.	46	45	44	44	43	43	40	40	
Outcome 1 Percent Achieved	98%		100%		100%		100%		99%
80% of 50 kinship families will receive social work/supportive counseling to address mental health and	46	46	44	44	43	43	40	40	
Outcome 2 Percent Achieved	100%		100%		100%		100%		100%
80% of 20 relative caregivers will receive support group services	17	17	17	17	14	14	16	16	
Outcome 3 Percent Achieved	100%		100%		100%		100%		100%

90% of 50 families will be successfully linked to supportive services.	46	46	44	44	43	43	40	39		
Outcome 4 Percent Achieved	100%		100%		100%		98%		99%	
Challenges impacting outcomes	Throughout the remainder of the contract period, the agency continued to cover the costs for the active clients being served under									

PROGRAM OVERVIEW

FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
# of files audited	0	10	6	8	24

Comments: Chart reviews were held in this quarter.

ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS (current quarter)
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Most notable key accomplishment(s)
 During this period, there were three admissions and seven discharges. One of the discharges was a client who requested to close during her second visit from the FSC. This family was unable to establish a Family Action Plan; however, the family remained intact and stable in the home. All additional discharges were successful. During this period, KSP began searching for a candidate to serve the Belle Glade Community. The caregiving support group are meeting in person and virtually. The hybrid approach continues to be explored by staff and caregivers. Both options are offered to members of the program and who have graduated from the KSP.

Most notable challenge(s)
 Throughout the remainder of the contract period, the agency continued to cover the costs for active clients being served under this contract. The clinical director continued to advocate for additional funds for the remainder of the fiscal year. It was noted through this quarterly report that numbers reported in quarter 1 might have reported inaccurately based on the number of families carried over from previous contract year and number of discharges.

ANECDOTAL STORY TO SHARE

Client is 50-year-old maternal grandmother raising her 4 year old grandson, whose parents could not take care of him, due to issues with drugs and instability. When the family opened services with the program, caregiver was in a desperate and overwhelmed state of mind about different situations happening at that moment.

The program referred caregiver to Legal aid for assistance with exploring legal options for grandson, and with their help, she was able to obtain legal custody of her relative child. Legal aid was also able to provide client with a voucher for childcare needs.

Client also began participating in monthly virtual Kin support group, and that helped her to connect with other relative caregivers in similar situation, receive mutual support, information on resources, etc. Client also received supportive counseling services from the Family services coordinator (FSC), to help her strengthen and improve her coping strategies, and learn to set boundaries with other family members.

Last year when the family began having housing issues and needed to move out of their place, FSC provided information on agencies that could assist with deposit money towards a new rental, plus contact information for Florida rural legal services to obtain legal advice in relation to the housing issues. Caregiver was able to obtain different sources of help and successfully moved to a new place.

Client was also assisted and guided with applying for child only cash assistance for grandson. Kin support project also helped family with holiday gift assistance for grandchild.

TOPWA PROGRAM

Fourth Quarter Report, July 2022 - September 2022

Date: October 2022

PROGRAMMATIC CAPACITY & DELIVERABLES									
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of clients opened	45		46		46		45		182
# of clients closed	43		53		51		47		194
# targeted to be served									
REQUIRED TARGETS	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
45 Assessments (pregnant women) per quarter	45		46		46		45		182
60 HIV Tests (all childbearing age) per quarter	67		70		65		64		266
60 Pregnancy Tests (all) per quarter	126		111		119		103		459
60 Outreach Sessions (all) per quarter	254		304		299		349		1206
Number of referrals for services (Minimum 90)	90		92		95		102		379
Number of verified/completed linkages	90		88		84		83		345
PROGRAMMATIC OUTCOMES									
Outcome Indicators	QTR 1		QTR 2		QTR 3		QTR 4		YEAR AVG.
	#measured	#achieved	#measured	#achieved	#measured	#achieved	#measured	#achieved	
180 of 180, or 100%, of at risk pregnant women will be linked with needed medical care and/or essential community resources from October 1, 2021 to September 30, 2022.	45	45	46	46	46	46	45	45	
Outcome 1 Percent Achieved	100%		100%		100%		100%		100%
133 of 140, or 95%, of pregnant women will be linked with a medical payer source to receive prenatal care from October 1, 2021 to September 30, 2022.	32	32	39	39	46	46	43	43	
Outcome 2 Percent Achieved	100%		100%		100%		100%		100%
100% of babies born to HIV+ mothers will test negative for HIV.	2	2	0	0	1	1	0	0	
Outcome 3 Percent Achieved	100%		0%		100%		0%		100%
Challenges impacting outcomes	The team continued to work together to identifying strategies that ensure the program will continue to meet deliverables while navigating the COVID-19 pandemic. Staff is doing more outreach and working to identify women of child-bearing age in zip codes with more vulnerable populations. We continue to reach out to community providers and provide TOPWA literature for their potential clients who may need our services.								

PROGRAM OVERVIEW					
FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	YEAR END
# of files audited including peer reviews	45	137	46	135	363
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS (current quarter)				
Most notable key accomplishment(s)	TOPWA staff conducted their outreach and educational presentation with Wayside House Residential and Outpatient clients (substance treatment provider for women) on July 14th and 21st. Staff offered and provided HIV testing to program participants. TOPWA staff attended the Rapid Testing Training on July 25th. TOPWA staff and supervisor attended and completed the annual HIV/AIDS 501 Update Training on August 3rd 2022. TOPWA program supervisor also attended the National Ryan White Virtual Conference August 24th through 26th 2022. TOPWA Outreach Staff; Nadine D, Maura A, and Jocelyne D, virtually attended and completed the Racial Disparities in Birth Outcome & Healthy Beginnings Orientation on September 28th. Staff also started Monthly group outreach to community providers and partners.				
Most notable challenge(s)	<p>A continued barrier identified by staff is accessing affordable housing resources for clients. The program supervisor attends a monthly outreach committee meeting that involves housing and outreach-related providers. The program hopes to gather information regarding resources and develop working relationships with other providers to serve our clients better. The program supervisor is also a member of the PBC HIV Care Council, where they discussed upcoming availability of housing resources through the HOPWA program for PBC residents who are HIV+.</p> <p>TOPWA continues to work with staff regarding safety during the COVID-19 pandemic. Staff conducts face-to-face outreach and provides other services while practicing safety protocols and using PPE. The staff is encouraged to be mindful of safety in the field. Staff asks clients before visits if anyone in the household has recently tested positive for COVID or has any symptoms when conducting home visits. If there is a risk to the worker, visits are conducted virtually. When possible, home visits or face-to-face contact is attempted.</p>				
ANECDOTAL STORY TO SHARE					
<p>Client is a 30-year-old Hispanic woman who was enrolled into the TOPWA program in April of this year. Client lives with her boyfriend; this is their first child together. The client had applied online for insurance for pregnant women and was denied. The client explained that she had gone to the Jupiter Clinic and was not able to get an appointment within the month of April to talk to someone. The Client stated at this point she was very frustrated and did not know where to turn to. The client had mentioned her frustration to a family member who was a TOPWA client and that is how she was introduced to me as her Outreach Worker. During my visit to complete the initial assessment; the client mention all the above issues that she was experiencing. I proceeded to work with the client to obtain her Sobra-Medicaid appointment. I advised client to call me after her Sobra-Medicaid appt and let me know if things were resolved. When the client contacted me a couple days later; she informed me that the worker informed her that she has an open insurance from over 10 years ago. The client was never told at the clinic how to get it resolved therefore, she asked for my help. I advise client to visit early in the morning the Dept of Children & Families to inquirer about her situation. After two attempts of reaching out to the worker with the client; finally the client was able to get a printout of the insurance company that kept an insurance policy open. The client was able to have it closed so that she could obtain her Sobra-Medicaid for this pregnancy. Now that everything is resolved, the client is now happy and she is doing well in her</p>					