

Performance Quality Improvement

Quarter Meeting, FY 22-23

February 15, 2022

8:30 a.m. – 12:30 p.m.

Meeting Report

In Attendance:

Julie Swindler

Elsira Bravo

Sharonda Crawford

Andres Torrens

Alexander Guanarita

Stephanie Drennan

Diana Cardona

Peter Thate

Melissa Wijngaarde

Absent:

I. CEO, Finance, and Operations Updates

- ❖ Updates for quarter

CEO

- ▶ On October 26th, the agency held its quarterly all staff meeting. I gave our six awards for length of service, three – three-year and three – five years. We also had a trainer to do our Ethics Training that we have every two years. We offered CEU's for those staff who are licensed since this is a mandatory training for licensure.
- ▶ The agency received a letter on October 21st from the Florida Association of Infant Mental Health, that Stephanie Drennan, Clinical Director of Child First, has vested her as an approved provider of Reflective Supervision/Consultation for supervisors and practitioners serving infants, toddlers, and families. She is approved to work with the following specialists seeking endorsement in the following categories: • Infant Family Specialist -Bachelors and master's prepared applicants • Infant Mental Health Specialist
- ▶ On October 31st, Jessica Canavan, National Clinical Manager of Child First, requested that Celine Julien and Dalecia Parks, present with her at the National Home Visiting Summit in March 2023, because of their work with the national office already presenting on a family served and the role of the team.
- ▶ On November 29th, Kathy Tancig, Sharonda Crawford, Melissa Wijngaarde, Elsira Bravo, and Ms. Swindler held an internal meeting for Healthy Families to begin the process of analysis for Healthy Families utilizing the SOAR process (Strengths, Opportunities, Aspirations, Results). Key stakeholders were identified to participate in this analysis to also include our Program Service Committee Advisory Board. Ms. Tancig will be preparing the results including goals to meet the January deadline. This project is important to assist Healthy Families Florida to determine where resources for the State will be directed.
- ▶ On November 30th, Ms. Swindler attended the Bank of America Community Celebration. The ARC and Boca Helping Hands were this year's winners of the Neighborhood Builders Awards. There was a formal program with Fab Brumley,

President and a fireside chat with Bernard Hampton, Consumer Banking and Investments Executive and Palm Beach County Executive Sponsor. The Nonprofits receiving community grants were recognized including Families First of Palm Beach County.

- ▶ On December 6th, Ms. Swindler attended the CEO meeting with Palm Beach County staff and housing collaborative partner agencies to discuss the Point in Time event that will be held on January 26th and 27th, 2023. This event is to count the number of homeless families and individuals we have in our community by going to parks, shelters, street locations, etc. This year they are going to set up feeding places which will help to assist with the count. Our agency will be involved in this activity as well.
- ▶ December holiday toy collection was a huge success. The children who needed the toys and clothes the most were supplied with these gifts. The following were the companies who assisted the agency:

- | | | |
|---|---|--|
| ▷ St. Jude Catholic Church (gifts for 255 families) | ▷ Strathmore Gate West (collection of toys and gifts) | ▷ Town of Palm Beach United Way (\$1,200 for toys and gifts) |
| ▷ Adopt-A-Family of the Palm Beaches (over 200 toys they had left over) | ▷ Precision Dance Studio (collection of toys and gifts) | ▷ United Way of Palm Beach County (toys and gifts) |
| ▷ Oxygen Development (collection of toys and gifts) | ▷ Diamond Leon (\$2,000 worth of development toys and teen gifts) | ▷ Several Board of Directors with donations of toys through Amazon |
| ▷ Lady Stars Softball Team (sponsored two families) | ▷ Dr. Ofelia Utset (\$355 worth of toys from Amazon) | ▷ Several Community Members with donations of toys through Amazon |
| ▷ Flagler Bank (sponsored two families) | ▷ Dena Sisk Foman (\$500 for toys and gifts) | ▷ Palm Beach County Food Bank (26 gift cards for food) |
| ▷ Rev. Jim and Mrs. Karen Cook (sponsored one family) | ▷ Wycliffe Charities (\$500 for toys and gifts) | |
| | ▷ Linda Jones (\$300 for toys and gifts) | |

Finance

- ▶ PNC Investments Update – Daniel Molinari, taking John Fico’s place, was present to give an update on the investments with PNC. Allocation is in line with the investment policy. The move to buffered note gives cushion on downturn.
- ▶ September, October, November Revised Financials – The revised financials were reviewed as they are now aligned with the fiscal year-end audit September 30, 2022. The Finance Committee is making a recommendation to approve the revised September, October, and November Financials as presented to the Board of Directors.
- ▶ Update on funding for fiscal year 2023 – Ms. Swindler gave an update on funding forecast to date for fiscal year 2023. Initially the amount to raise between Foundations and Medicaid was \$525,369. The amount as of December 31st is \$246,730, making to date 45% of the goal. There are still grants that are waiting for approval as follows:

\$37,000 for BHS, \$12,000 for TOPWA, \$17,500 for BTS, and two Impact Grants under consideration for IMH.

- ▶ ERC – Ms. Swindler informed the Committee that the agency should receive the memo to sign off on for the ERC from FORVIS by January 27th. After that, the information for the ERC will be sent to the IRS.

Operations

- ▶ Marian has begun to assign current Forest Hill employees with their designated fob key. Equally she will be working on new employees throughout the onboarding process to sign documentation that they have received it. Should an employee lose their fob key there is a \$40.00 replacement fee as mentioned in the documentation.
- ▶ Toshiba copier renewal has been approved to extend lease for an additional 60 months. Their service and relations with agency have been great with no concerns.
- ▶ All boxes have been packed for all programs except for TOPWA and IMH that have no boxes to be sent-off. Labels will be delivered in December and pickup will be scheduled for January.
- ▶ Julie met with Palm Beach County Housing Authority director and are discussing a possible 10-year lease agreement for the Forest Hill office. Belle Glade has been approved and will be extending lease for an additional 2 years. The Wellington office also has a lease renewal coming up, agency will be exercising option to extend lease for an additional 3-years in January.

Grants

- ▶ 9 Grants were written in this quarter totaling \$356,617
- ▶ 5 Grants were awarded for \$244,781.
- ▶ 11 grants are outstanding
- ▶ 4 grant notifications were received from fourth quarter with awards totaling \$172,281
- ▶ The IMH program was selected as a semi-finalist for both Impact 100 grants and are scheduled for site visits in February.
- ▶ For the 2022 calendar year the agency received 37% of grants written, with an additional of \$355,117 outstanding grants awaiting decision. This has been a great success to continue program support.

II. Development Department

- ▶ 16th Annual Luncheon Grossed \$123,507 and netted \$88,478. This is the highest gross and net number to date for the Annual Luncheon since its inception.
- ▶ End of year giving campaign brought in \$31,704 in the months of November and December. Support of agency was provided through social media platforms and email notices.
- ▶ Current Honda Classic standing is 3rd place at \$119,614.
- ▶ Invited to submit grants for Impact 100 and Impact of the Palm Beaches. Each grant would be a one-time grant of \$100k for our Infant Mental Health Program
- ▶ We were invited for the first time to apply for grant for Admirals Cove Foundation, Mirasol Foundation, and the Boca West Foundation.



III. Workforce Stability

► Attrition

Separation for 1st Quarter

Department	Hire	Terminated	Span of Service
Accounting	08/23/2021	11/02/2022	1 year & 2 months

Rehire for 1st Quarter

Department	Initial Hire	Rehire	Span of Service
BTS to Kin Support	08/23/2021	10/03/2022	New position- Family support worker in the Glades *16 weeks to be filled
Healthy Families	10/16/2017	10/10/2022	Re-rehired for same position 8 week lapse

New Hires for 1st Quarter

Department	Hire Date	Position & Time to Fill Position
Healthy Families	10/10/2022	Family Support Worker- 4 weeks
Healthy Families	10/31/2022	Family Support Worker- 4 weeks
Healthy Families	11/02/2022	Family Support Worker- 5 weeks
General	11/02/2022	Accounting Clerk- 0 weeks
Behavioral Health Services	11/14/2022	Co-Located Therapist- 7 weeks
Behavioral Health Services	11/28/2022	DJJ Therapist New position- 12 Weeks

► Staff Morale

- ▷ Every quarter during programmatic meeting Compliance and Quality Assurance Director meets with staff to review PQI report. Staff can bring up questions or concerns regarding any of the information presented. This initiative began during the end of the last fiscal year and is becoming more integrated in improving best practices regarding transparency with staff.
- ▷ Monthly newsletters are continuously being sent every month to highlight and congratulate staff of their accomplishments for the month as well as introduce new staff. During the November newsletter the employee assistance program was highlighted to continue to support staff that may need confidential consultation regarding stress, marital/family concerns, alcohol/ drug concerns. This program is open to all employees as well as their families.
- ▷ The annual luncheon took place this year with a collaborative effort from leadership, data coordinators, and additional administrative staff to support the development team in organizing this event. Staff had the opportunity to meet board members, benefactors, and community members that support the agencies mission. Staff was provided with breakfast and lunch and thanked for their work in this effort.

- ▷ On November 18, 2022 Families First hosted their annual Thanksgiving party and was well attended by staff. Staff had a potluck feast and played games to celebrate the season.
- ▷ The Agency's Holiday Party was held on December 12, 2022 at Muck Tavern in Pahokee. This was a monumental achievement to be able to host in the Glades. A special thanks was given to the Belle Glade staff for putting together an amazing party while supporting a local business.
- ▷ For this upcoming fiscal year more effort will be investigated into having agency wide initiatives to continue our efforts with building staff morale to go along with what is currently in place.

IV. Safety and Security

► Risk Management Concerns

- After review of annual EAP report, EAP shared an increase usage of services with 45% of new cases coming from staff as the primary person receiving treatment. Additional measures to address staff have been looked at such as retention rates, employee satisfaction, exit surveys and absenteeism. All reports reported were positive in all measures. In the first quarter, absenteeism rate

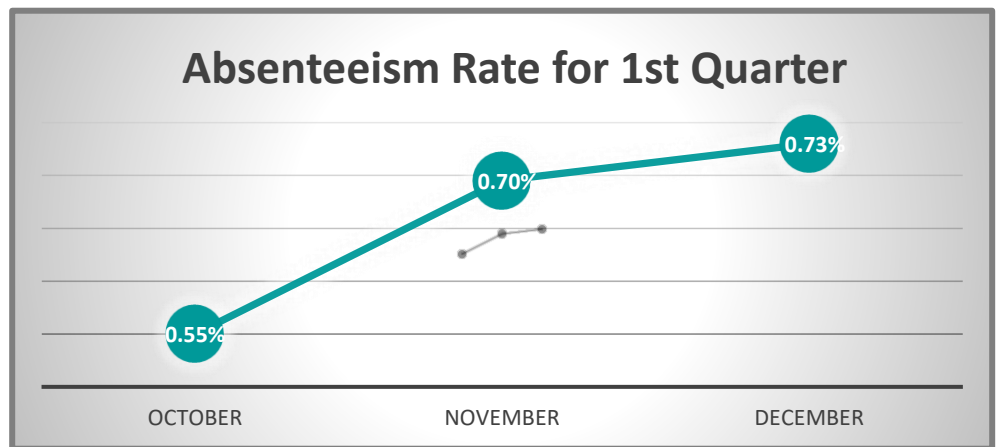


Figure 1

began to be used as an additional measure in tracking burnout and sickness among staff.

According to the U.S bureau of labor and statistics the average absence rate for community and social service occupations is 3.8%. The agency offers staff the opportunity to use sick time for preventative care for themselves/dependents, mental health days, and sickness for themselves/dependents. The following chart depicts the results of the first quarter with an increase trend towards the holiday season but overall low rate. Staff are encouraged to use time when necessary to promote self-care and mindfulness for good overall wellbeing.

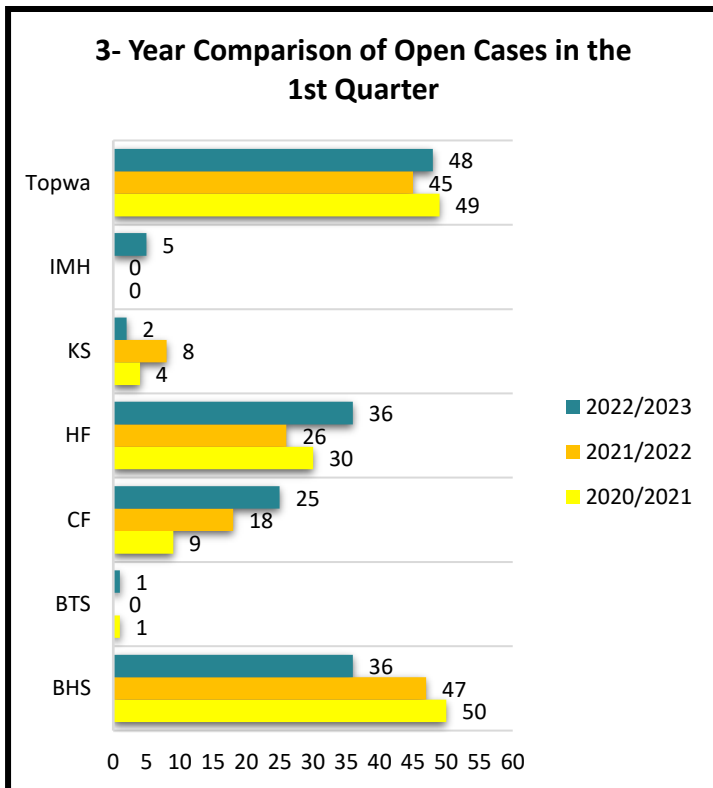
- Staff grievances are reported on a yearly basis through the annual report. Client grievances go through leadership and are submitted to Chief Program Officer. There were no client grievances for this quarter.
- Proposed cost of lease for the Forest Hill office renewal has been given for review. Utilization of space is being determined keeping in mind remote work and creating a hybrid workplace for staff flexibility while keeping up with work demand.

► **Cyber Security**

- ▷ In support of continued risk management efforts. The agency with the support of a CSC grant have begun a formal cyber security training using the platform NINJIO.
- ▷ Staff are given a training at the beginning of the month which comprises of a 5–7-minute video followed by an assessment. The topics range with a primary focus on assisting staff be the most knowledgeable on cyber threats and best practices using technology.
- ▷ Overall staff engagement averaged at 88% for the quarter and will continue to be monitored throughout the year.
- ▷ Staff with the highest engagement will also be recognized for their great work in the agency’s newsletter.



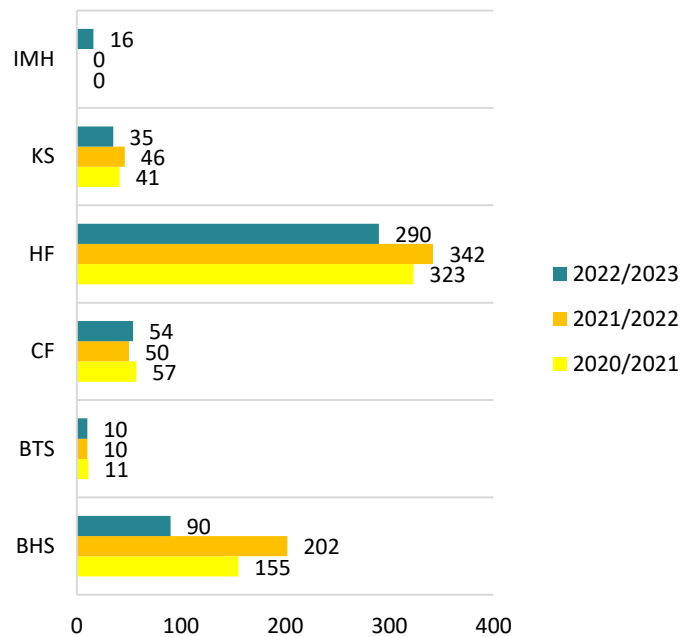
V. Client service numbers – 1st Quarter Comparisons



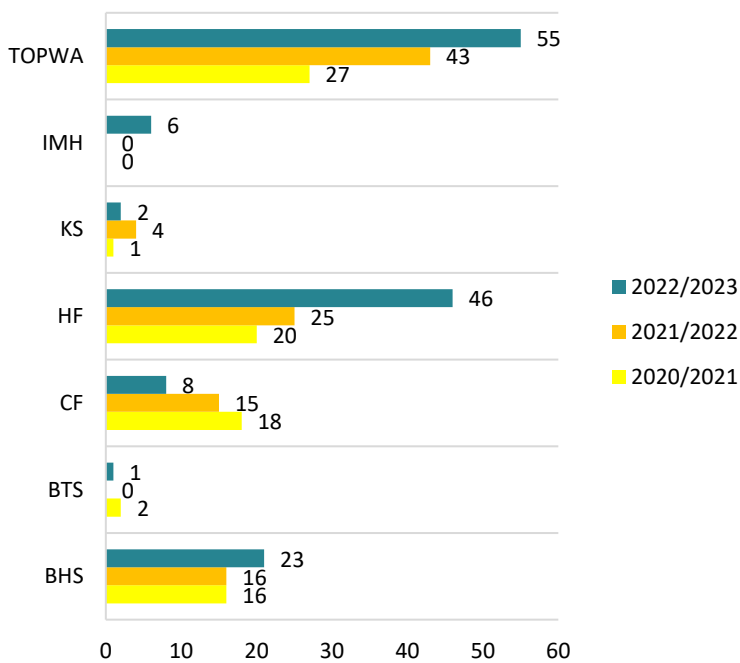
- IMH has begun to enroll clients into their new collaboration with Headstart and Early Headstart program. The referral process has been facilitated through more teacher involvement, administration advocacy, and school observations.
- The number of open cases increased during this quarter in three programs compared to previous years.
- BTS holds a limited capacity of families to serve in supportive housing due to the number of units available. This quarter, however, with the successful closure of a case was able to seamlessly open a new case to a family in need.

- During the end of the fourth quarter for the first time HF had a higher-than-average turnover in employees. In turn, remaining staff and supervisors covered cases and took on a limited amount of new cases. Since then, program is fully staffed and is projected to reach capacity. Even with the decrease in families served it remains 8% over the 75% benchmark.
- BHS has begun to gain momentum in hiring more staff to fill in-demand positions. A revamp in the program occurred during this quarter due to the many branches the program now has.
- Compliance and Quality Assurance Director has streamlined the forms of data collection to best reflect the number of clients served. Many programs work in conjunction with family members as part of the therapeutic process and will continue to be represented through other mediums.

3-Year Comparison of Served Clients in the 1st Quarter



3-Year Comparison of Clients Closed in the the 1st Quarter



- TOPWA demonstrated great success during this quarter after the impact of COVID on outreach services. During this time the program made many strides through community events and conducting rapid testing. Outreach services open and close at times during the same quarter and are tracked in this manner.
- Graduation rates among the Healthy Families program continues as a steady increase of engaged clients in the program have demonstrated longevity in program with positive outcomes.

VI. Compliance

- The first quarter marks the beginning of the new fiscal year and charts begin to be sent to offsite storage. Data coordinators along with quality assurance work closely with each other to ensure the safety and security of files.
- A decrease in chart review occurred during this period due to the preparation time it takes for offsite storage in particular those programs that have director involvement with a smaller data staff.
- Programs will receive support for chart reviews to meet at least 50% of chart review completion by the end of the second quarter to be on track for compliance.

VII. Program updates; additional agenda items

PQI discussion:

- IMH- Interns have returned from break and have been assigned clients. Tabitha is assisting team with doing assessments on Saturdays for Creole speaking referrals. Martha has a full case load. We are good competition for the impact grant, a site visit has been scheduled. If we get this grant, we can hire another full-time clinician. All Medicaid panel applications are in, and we are pending approval.
- TOPWA- have phased out oral test completely. We are waiting on a memorandum of agreement from department of health to complete our biomedical waste permit. Once we have that signed, we will be able to schedule our inspection. We no longer need to use the Unite Us system to enter our assessments according to the healthcare district.
- Healthy families- fully staffed preparing for QA visit February 15th capacity was reduced to 264, 225 minimum to always maintain. CSC has a capacity for 350 with a 75% minimum to be served. Three Program staff are fully trained, and one will be as they continue to onboard. Two part-time engagement specialists have been transitioned to full time engagement specialist after being approved by CSC. With many changes being done by Healthy Families Florida, budget will be reviewed for trainings, some trainings have been transitioned to virtual during onboarding. Change will help with funding skill building trainings for staff.
- Child First- CAPP score was 93% reflecting high fidelity to the model. For CPPA, we are now reporting AHVs (in-person visits and telehealth sessions) instead of ADCs which also included phone contacts during the pandemic. Families First Child First program was highlighted in NSO's Newsletter for our upcoming participating in the National Home Visiting Summit and also for translating the YSSF in Creole for the network.

- BHS- 3rd of January meeting was conducted for staff to review Medicaid as well as chart review process. Documentation has been an issue in the past as more effort is being put into compliance of files. Potential candidates are being interviewed for PARED position. Diana Attended youth services quarterly meeting and is preparing for site visit from Youth services and FAA. Trainings are being worked on for therapist for BHS and scholarship opportunities to match those of the Healthy Beginnings program. An initiative for the agency has been to support and promote clinicians to become licensed as well as incentivizing success to keep clinicians.
- Kin support- Looking for new referrals for Belle Glade to assist with building referral loop for kin program. Outreach needed for programs to continue capacity in program. Established referral loops were impacted since locations have moved.
- BTS- Must relocate family by March 1st after having difficult with landlord not fixing unit. Working with Pahokee housing authority.

VIII. Quarterly Program Report Updates

- ❖ Monitoring, Site Visit, and Report Updates:
 - CPPA (Comprehensive Program Performance Assessment) report for Healthy Families was received during this quarter and received a status of QA approved with a demonstration of high fidelity.
- ❖ Quarterly Data Reports:
 1. BHS
 2. BTS
 3. CF
 4. HF
 5. KS
 6. TOPWA
 7. IMH

IX. Risk Assessment Review Committee

- ❖ Staff incidents – 1; Staff had property damage to vehicle in office parking lot.
- ❖ Client Incidents – 6
 - BHS – 1
 - BTS - 0
 - CF – 2
 - HF –2
 - KSP – 1
 - TOPWA – 0
 - IMH-0
- Client Incident Types:

- Child abuse/neglect: 4
 - Aggressive/abusive behavior – 1
 - Accident/injury – 0
 - Other – 1
 - Law violation -0
- Client Incidents 1st Quarter comparison by Year

Program	2020/2021	2021/2022	2022/2023
BHS	0	1	1
BTS	0	0	0
CF	4	2	2
HF	3	6	2
KSP	0	2	1
TOPWA	1	0	0
IMH	N/A	N/A	0

Type	2020/2021	2021/2022	2022/2023
Risk for harm self/others	4	2	0
Aggressive/Abusive Behavior/Assault	0	3	1
Accident/Injury	0	0	0
DCF/Hotline	0	1	0
Child Abuse/Neglect	4	4	4
Death	0	0	0
Legal/Law Violation	0	0	0
Medical emergency	0	0	0
Other	0	0	1
Sexual harassment/battery/assault	0	1	0
Substance/Drug abuse	0	0	0

- One client was on the verge of experiencing homelessness but received assistance from staff to shelter resources. Once time was expired family was placed in hotel for temporary housing.
 - Verbal abuse to parent was made by FOC and shelter information was given to parent and a safety plan was put into place.
- ❖ Risk Assessment Committee incident review for 1st quarter
See discussion notes attachment following quarterly reports

BEHAVIORAL HEALTH SERVICES
First Quarter Report, October 2022 - December 2022

Date: January 2023

PROGRAMMATIC CAPACITY & DELIVERABLES									
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of clients enrolled & carried over	54								54
# of clients opened - Adult 1st box Child 2nd box	1	42							1 42
# of clients served (target 135)	97		0		0		0		97
# of clients closed - Adult 1st box Child 2nd box	1	22							23
Successful closures	15								
Closure before completing services	8								
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	23	16							
Percentage achieved	70%		#DIV/0!		#DIV/0!		#DIV/0!		70%
80% stability of placement in home	23	21							
Percentage achieved	91%		#DIV/0!		#DIV/0!		#DIV/0!		91%
80% stability in school	23	17							
Percentage achieved	74%		#DIV/0!		#DIV/0!		#DIV/0!		74%
Challenges impacting outcomes	Of the 23 clients who were discharged this quarter, 21 of them remained stable in their homes; except for a family who is struggling with homelessness. 17 youth remained stable in schools while 6 youth have been expelled from school causing instability in schools. 16 youth reported a reduction of mental health symptoms at discharge using the CFARS tool.								

HOUSEHOLD COMPOSITION	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
Types of household (unduplicated)					
Single Parent	36				36
Married Couple	23				23
Cohabiting couple	0				0
# of Children	129				129
# of Adults	97				97
PROGRAM OVERVIEW					
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS				
# of files audited	0				0
Most notable key accomplishment(s)	<p>In this period, we had a total of 58 admissions; 6 of which were transferred to a new funding source and qualifying them as new. There were a total of 23 discharges that occurred; 16 of the discharges achieved a reduction of symptoms, while 91% maintained stability at home and 74% maintained stability in the schools. In this period, the agency hired a new program therapist who will serve under the Youth Services grant also referred to as the DJJ grant. This grant will assist in providing behavioral health services to youth who are at risk of offending or reoffending. Part of this initiative is to also offer parent support groups to educate families on mental health and provide them with tools on how to support youth who have come in contact or at risk of encountering law enforcement. The agency held its holiday event at a venue in Pahokee, FL where staff gathered for a time of celebration and were presented with awards for their work and dedication to the families, we serve throughout Palm Beach County.</p>				
Most notable challenge(s)	<p>In this period, a therapist was hired to serve youth in our new grant; however, the program was unable to bill services in the months of October and November. The clinical director is working towards increasing the number of referrals without overwhelming the program therapist. Similarly, the program continues to search for a program therapist to serve under PARED. Several interviews have taken place without success in finding the appropriate candidate. The program is considering in readvertising the job ad to include remote work, which is most desirable by potential candidates. During this quarter, no client charts were audited due to the restructuring of the process and requirements for chart reviews. Lastly, there has been a concern of how the program is obtaining CFARS/FARS outcomes by the therapist. The clinical director is working closely with the director of quality assurance to ensure that all outcomes are being completed by the therapist in a timely manner.</p>				
ANECDOTAL STORY TO SHARE					

The following story is being highlighted:

Special Note: The client's name is fictitious to protect the client's identity.

Jonathan (pseudo) is a 13-year-old Caucasian male that is seeking services for the first time due to experiencing low energy and fatigue. According to his mother, the client has attended eight schools throughout his educational career. The client's mother shared that he does not like attending school along with getting bullied. The client's mother indicated that he would call his mother at school to pick him up if he hurts himself or if his stomach hurts. She mentioned that Jonathan will experience temper tantrums at home if something does not go his way or if he does not do something perfectly. In the beginning of the school year, the client's grades were low due to lack of attendance, motivation, and low mood. The client reported that he feels pressure that he must be perfect which makes him angry about himself when he messes up.

While working with the client, he appeared to experience low mood, anxiety, and fatigue. The client appeared quiet while speaking minimally the first we spoke. The client's goals included decreasing his low mood, increasing affective communication in his school and home environment, along with increasing his coping skills. The diagnostic impression that was given to the client was persistent depressive disorder with anxious distress, moderate, early onset.

In the beginning of the client's therapeutic journey, he was getting in trouble a lot in school along with participating in physical altercations with students. The client mentioned feeling drained and that the faculty in his school are not on his side. However, the client's mother has embraced his therapeutic journey such as being involved along with being a great support system for him. The client's mother appears to express receptiveness towards feedback along with tools that she can utilize at home with Jonathan.

Throughout the client's journey in therapy, he has become more self-aware regarding his thoughts, emotions, and behaviors. It has been rewarding to mention that the client's attendance in school has increased dramatically along with his grades improving. The client is starting to try to create healthy friendships with his peers. The client can utilize his coping skills while in school and at home such as taking a time out when he gets angry. The communication between the client and his mother have improved since starting therapy. When the client attends therapy, he appears euthymic more frequently even when he comes in with a stressor that is difficult to handle. It is noteworthy to mention that his mother has thanked this therapist for her devoted effort for her son's mental health and shared that if she can write a letter that will help the licensing process, then she will do so.

BRIDGES TO SUCCESS
 First Quarter Report: October 2022 - December 2023

Date: January 2023

PROGRAMMATIC CAPACITY & DELIVERABLES									
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		YEAR END
# of families carried over	10								
# of families opened	1								1
# of families served	10								
# of families closed	1								1
# families targeted to be served	10								
CLIENTS & HOUSING UNITS (new per quarter)	QTR 1		QTR 2		QTR 3		QTR 4		YEAR END
# of Families	10								10
# of Children/dependents	24								24
# of Adults	11								11
Single	9								
Married	0								
Co-habituating	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							
Outcome #1 % Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
80% of 10 families will maintain or increase their income including wages and/or benefits.	10	10							
Outcome #2 % Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
Challenges impacting outcomes									

PROGRAM OVERVIEW					
FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	YEAR END
# of files audited	2				2
ACCOMPLISHMENTS & CHALLENGES	COMMENTS (current quarter)				
Most notable key accomplishment(s)	<p>One of the program's key accomplishments has been maintaining all of our clients in secure housing situations. With the exception of one family, all of the BTS clients remained in their dwellings. One family reached out to a community based organization who assisted her and her children in relocating to a different funded program and she is now in a subsidized housing program. This was a great accomplishment for her as she went from residing in a permanent supportive housing program to a lesser restrictive setting. This location was also closer to her support system and her family on the coast of Palm Beach County. Another accomplishment was in the identification of a family who was on the wait list to be securely housed. We were able to get this family securely housed within three weeks of the other family moving out of the apartment. This new family is a single mother of five children and she was very excited to leave the homeless shelter where she was living with her children and into her own apartment.</p>				
Most notable challenge(s)	<p>One of our most notable challenges remains 2 the unavailability of affordable housing for our clients. Although clients are steadily making strides to improve their lives by furthering their education and securing employment, the availability of affordable housing in Palm Beach County continues to be scarce and minimal.</p>				
ANECDOTAL STORY TO SHARE					
<p>N.F., a mother of four young children who is enrolled in school to earn her cosmetology license, has four children under the age of seven. N.F, a single mother struggling to navigate life, enrolled in the BTS program in 2019. N.F. is currently flourishing as a mother, a college student, and a well-rounded person. Families First is honored to have contributed to N.F.'s amazing growth. This summer, N.F. will complete her cosmetology degree with the intention of pursuing her AA in Business Administration.</p>					

CHILD FIRST

First Quarter Report - October 1, 2022 through December 31, 2022

Date: January 2023

PROGRAMMATIC CAPACITY and DELIVERABLES										
REFERRALS, ENROLLMENTS and DISCHARGES	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE	
# of Clients enrolled and carried over	29								29	
# of clients carried over who were NOT enrolled, but enrolled in the Qtr.	4								4	
# of Clients referred, accepted & enrolled from HomeSafe	15								15	
# of Clients referred, accepted & enrolled from HMHB	6								6	
# of enrolled Clients served	54								54	
# of Enrolled Clients discharged in quarter	11								11	
Successful closures (clients enrolled 60+ days and had at least 4 home visits by the clinician)	5								5	
Closure before completing services (clients enrolled 60+ days and had at least 4 home visits by the clinician)	3								3	
Referrals that were accepted & discharged (never enrolled) *see comments for reasons	HomeSafe	6	HomeSafe		HomeSafe		HomeSafe		HomeSafe	6
	HMHB	1	HMHB		HMHB		HMHB		HMHB	1
# of Rejected Referrals	Capacity	4	Capacity		Capacity		Capacity		Capacity	4
	Language	0	Language		Language		Language		Language	0
COMMENTS										
PLAN OF SAFE CARE										
	QTR 1		QTR 2		QTR 3		QTR 4			
# of clients with POSC at intake	0									
# of POSC offered to families by FF	1									
# of POSC created with families by FF	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%								25.0%	
% 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.)	5	62.5%								
Family Improvement (benchmark 75%) * See Comments	96%		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 10/1/21 thru 09/30/22:
 # of families that presented w/problems in 1+ areas at baseline: 28
 Percent improvement at discharge: 96%

Families First CPPA score this quarter reflects extremely high fidelity to the model with an overall score of 93%. Our strengths this quarter include data submitted complete (100%) and on time (96.4%), and data submitted accurate (100%). Core components were implemented in accordance with our contract at very high fidelity. Our baseline and paired assessments scored at 100%, as did our early care mental health observations and our SNIFF needs identified. Also, important to note we met our benchmark this quarter for percentage of cases discharged with completed services.

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	8				8
Clients open 60+ days - Average Length of Service - Months	12				12.0

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)	27				27
Married Couple	5				5
Cohabiting couple	1				1
# of Adults	53				53
# of Children	62				62

PROGRAM OVERVIEW

FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	YEAR END
# of files audited (Benchmark: 25% of census per quarter)	6				6

ACCOMPLISHMENTS & CHALLENGES Quarter	Current	COMMENTS (current quarter)
Most notable key accomplishment(s)		Families First CPPA score this quarter reflects extremely high fidelity to the model with an overall score of 93%. Our strengths this quarter include data submitted complete (100%) and on time (96.4%), and data submitted accurate (100%). Core components were implemented in accordance with our contract at very high fidelity. Our baseline and paired assessments scored at 100%, as did our early care mental health observations and our SNIFF needs identified. Also, important to note we met our benchmark this quarter for percentage of cases discharged with completed services.
Most notable challenge(s)		<p>COVID- 19 continued to present a challenge with 1 team member contracting COVID-19 this quarter as well some of the families we serve. We continue to primarily see our families though home visiting utilizing telehealth when requested by caregivers or when families are experiencing Covid and/or flu symptoms but would still like to engage in scheduled sessions.</p> <p>Many families continue to struggle financially this quarter, especially those who are undocumented and cannot receive some of the same resources as other families served. Housing continues to be a prominent issue with inflation of the housing market impacting even rent costs for our families.</p> <p>We welcomed a new bilingual Care Coordinator to our team and have been working toward transitioning families to her and building up her caseload with her partner, all while she is engaging in required trainings for CSC and Child First, which has been a lot to balance.</p> <p>The clinical director continues to participate in the P-CPP learning collaborative and is currently seeing two clients in order to roster in P-CPP which adds additional time constraints to her busy schedule.</p> <p>We are building up a caseload for our staff member who has returned from her maternity leave, which has allowed us to accept more referrals this quarter, but clinical director is still having to be mindful to build her caseload up in a manner that does not make the workload overwhelming due to the very involved assessment and engagement phase our program adheres to.</p>

ANECDOTAL STORY TO SHARE

Child started the Child First program at three months old with her mother who would be a part of the intervention. Mom presented with great challenges and experienced a traumatic birth with child, which exasperated her mental health challenges. This dyad initially experienced great joy and pleasure, as mom was observed as nurturing, supportive and comforting to child's needs as young infant. However, as child matured and her developmental needs expanded, it started to serve as a barrier with the attachment between child and caregiver. Mom reports an extensive trauma history that she feared would interfere with the growing relationship with child. Mom was completing individual therapy services, during the initial start of treatment services with Child First. However, she later stopped services and continued the intervention with the Child First Team. Mom presented with depressive and post-traumatic symptoms, which she felt was surfacing from her past. The Child First Team worked closely with this dyad, as mom started to disengage, and treatment goals had to be reviewed and updated. Mom decided to meet with the clinician from Child First for individual sessions, which supported where she was mentally and provided her with insight and psychoeducation regarding how her adverse experiences were impacting not only her as an individual but the relationship with her growing child. At this time, the child had reached the age of one years old, and mom found play to be less joyful and interactions had reduced. Child displayed behaviors based on the limited interactions, such as tantrums, avoidance, and extended periods of crying. The Child First Team was able to observe that mom's depression was also impacting the child's development and connection with her, alongside with COVID-19 also serving as a barrier and impeding the team's ability to meet consistently in person with dyad. Treatment goals included increasing pleasure during play, expectations of a one-year old's typical behavior, supported exploration for child's developmental stage, and exploring how to integrate play during and outside of session. Mom was able to acknowledge the challenges she faced while trying to initiate and understand what play would look like between her and child. As she continued to meet, visits increased, and she became more verbal and depressive symptoms were also lowered. Mom started to initiate play more often with our target client and reported the interactions as enjoyable. The assessments completed by the Child First Team also indicated the relationship repairs and increase in delight and mutual pleasure during play and engagement. Mom also started learning techniques with the team on how to self-regulate, which she then integrated with the child and practiced co-regulation. Child's affect brightened during her interactions with mom and her development improved. Mom implemented developmental activities with the child as suggested by the Child First Team and agreed to meet with a separate provider to address communication delays, as noted by the assessments. This dyad met treatment goals and the traumatic birth no longer served as a barrier to treatment. Mom was able to reflect and report that she did not want to repeat cycles with her child, and she continued to develop coping skills to manage her mental health symptoms. Although, mom still has concerns with her mental health the symptoms have reduced significantly, and she has decided to seek individual therapy on her own when she is ready to start those services. Mom also feels more confident in her role as a parent and can independently problem-solve and address needs on her own, which she previously had challenges completing.

HEALTHY FAMILIES PROGRAM

First Quarter Report, October 2022 - December 2022

Date: January 2023

PROGRAMMATIC CAPACITY & DELIVERABLES										
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE	
# of clients carried over Adult 1st Child 2nd	278	252			0	0	0	0	Adult	Child
# of clients opened Adult 1st Child 2nd	12	18							12	18
# of clients served Adult 1st Child 2nd	290	270	0	0	0	0	0	0	290	270
# of clients closed Adult 1st Target Child 2nd	46	40							46	40
Number of families Served	290									
Number of families Closed	46									
Number of Families Completed Program	22									
Benchmark 75% of 350 Capacity by end of quarter	83%									
PROGRAMMATIC OUTCOMES										
	QTR 1		QTR 2		QTR 3		QTR 4		YEAR AVG	
OUTCOME INDICATORS (open cases)	#measured	#achieved	#measured	#achieved	#measured	#achieved	#measured	#achieved		
1. 80% of target children will be up-to-date with immunizations at 24 months of age	16	15								
Outcome 1 Percent Achieved	94%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
2. 85% of target children will be up-to-date with well-child checks at 24 months of age.	16	15								
Outcome 3 Percent Achieved	94%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
3. 90% of target children enrolled six months or longer will be linked to a medical provider	69	69								
Outcome 2 Percent Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
Challenges impacting outcomes	None at this time, all outcomes were met.									
HOUSEHOLD COMPOSITION										
Types of household/Families (unduplicated)	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE	
Single Parent (widow/divorce/separated/never married)	152								152	
Married Couple	65								65	

Cohabiting couple	73				73
# of Adults	294	0	0	0	294
# of Children	609	0	0	0	609
FAMILY RETENTION Closure Reasons	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
# Completed HFF	22				22
# Not Interested/declined services	7				7
# MOOSA	0				0
# Lost Contact/to follow-up	2				2
#Target Child Miscarried	1				1
#Other	0				0
PROGRAM OVERVIEW					
FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
# of FSW files audited (Individual Family Records IFRs/charts)	87				87
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS (current quarter)				
Most notable key accomplishment(s)	<ul style="list-style-type: none"> •HFPB had successful quarterly outcomes for October - December 2022. •We are maintaining capacity at 70% or higher. •On October 11, 2022, HF PM presented the HF program to the Belle Glade Rotary Club. •HFPB provided families with Holidays donations/gifts from St. Judes and other local community resources. 				
Most notable challenge(s)	<p>During this quarter, we had four vacancies which was a lot for the program at one time. Some staff members relocated, and others left for higher-paying jobs.</p> <p>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. Still, 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.</p>				

ANECDOTAL STORY TO SHARE

Our featured Participant this quarter enrolled in our Healthy Families Palm Beach program in January 2020. The client was referred to Healthy Families at fifteen weeks pregnant. The client was unemployed and unaware of the resources in the community. The client struggled at times in obtaining basic needs.

Her risk factors at assessment included:

Mother had a previous domestic violence incident with her ex-husband back in Nicaragua.

Mother was raised by an unstable caregiver.

Mother started prenatal care during the second trimester.

Mother has limited awareness of discipline options

Mother has no high school diploma

Her family's strengths include:

The child was wanted.

Father is in the home and has a job.

Mother is receiving WIC.

The client enrolled with Healthy Families in January 2020. Her Family Support Specialist was Iliana Machado.

This Participant shared with the family support specialist that she would like to be a better parent to her children and not repeat her parents' ways of disciplining. The client shared that during her childhood her parents would pinch or hit her with a belt. She said did not want to repeat that same cycle and wanted to learn other ways of disciplining her children.

At the time of enrollment, she was unemployed and didn't understand the resources available to her. She learned to utilize the resources in the community to obtain the help she needed for herself and her family. She learned how to speak to her children and various ways of implementing positive discipline. We will use the five protective factors to share her journey within the program. The Participant has built a support system of friends, coworkers, and the Family Support Specialist. MOB and FOB are married, and have a long-term stable, supportive relationship. MOB has full-time employment and medical insurance for FC/OC as well as herself. The Participant feels comfortable seeking help from the community and knows what she needs to obtain it. She is also able to advocate for herself and others that may need help.

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. WIC, food stamps and other public assistance were of benefit to her in times of need. Gift cards from Families First for food and personal items were given when needed.

Diapers and wipes when needed to keep afloat and safety items for her home. The mother received a scholarship for daycare for her child that is renewable and is now working full time, so the family is comfortable meeting their basic needs. This client engaged during the visits she always made it a priority to be available for all home visits. The mother would ask questions about the material and also give feedback to Iliana about the GGF, GGK, and The Gold Within curriculum. Iliana reinforced the perspective of this mother being her child's first teacher and she embraced that role. Iliana notes that this mother's interaction with her child is supportive, calm, consistent, and positive communication. This participant shared that she has found new ways of disciplining her children. She has learned to utilize E-Parenting to understand her children's feelings. The client is very nurturing, and her children have been able to form positive relationships with her, her sibling, and others. This Participant will be graduating from the Healthy Families Palm Beach program in April 2023. 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

First Quarter Report, October 2022 - December 2022

Date: January 2023

PROGRAMMATIC CAPACITY & DELIVERABLES									
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of enrolled families carried over	33								
# of families opened	2								2
# of families served	35								
# of families closed	2								2
Total remaining at the end of QTR	33								
# targeted to be served	45								
NUMBERS SERVED (unduplicated)	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of Children	83								83
# of Adults	39								39
PROGRAM REFERRALS	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of referrals screened eligible for an assessment	2								2
# of referrals screened ineligible for assessment	0								0
# of referrals screened and placed on waiting list	0								0
# of referrals provided with education and information regarding community resources and services	42								42
PROGRAMMATIC OUTCOMES									
Outcome Indicators	QTR 1		QTR 2		QTR 3		QTR 4		YEAR AVG.
	#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.	35	34							
Outcome 1 Percent Achieved	97%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
80% of 50 kinship families will receive social work/supportive counseling to address mental health and social service needs.	35	35							
Outcome 2 Percent Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
80% of 20 relative caregivers will receive support group services	16	13							
Outcome 3 Percent Achieved	81%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
90% of 50 families will be successfully linked to supportive services.	35	35							
Outcome 4 Percent Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
Challenges impacting outcomes									

PROGRAM OVERVIEW					
FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
# of files audited	0				0
Comments	There were no files audited in this quarter				
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS (current quarter)				
Most notable key accomplishment(s)	<p>During this period, there were two new admissions and two discharges. Both discharges were linked to services in the community and family remained intact.</p> <p>In this period, Kin Support staff participated in the Glades STAR system of Care Meeting and presented on the services offered by Families First and the Kinship Support program. The Kin Support staff held its monthly support group where clients joined in-person and/or virtually. Those who were present for the support group in -person enjoyed a meal together as a token of gratitude from the Families First administration team. Additionally, the agency hosted its holiday gathering in Pahokee, FL where all employees attended the joyful event.</p> <p>Lastly, in this period, the program has exceeded the monthly projected budget, which sustains the funds utilized for clients receiving services thus far. A total of 35 clients have been served in this quarter.</p>				
Most notable challenge(s)	<p>A notable challenge in this period involves the recruitment of clients in Belle Glade. Multiple efforts have been made to assist in bringing awareness to the community on services that are available to them through the Kinship Support program. The clinical director and FSC are working closely together and tracking all outreach efforts made.</p>				

ANECDOTAL STORY TO SHARE

The following story is being highlighted in this quarter:

The story that you're about to hear is a story about love, loss and overcoming the odds. Isn't every other story like that? Not the story I'm about to share. This story is a special story, about a grandfather, who was forced to retire due to health concerns. According to the grandfather, his doctor told him, if he wanted to continue to live, he needed to retire. So, the grandfather continued to work and ignored the medical advice he was given. Each time the grandfather went back to work, his stay at the hospital would become longer.

One day, when the grandfather took a nap, his mother who had passed away 14 years earlier, came to him in a dream and she told him to get up and go to the hospital because he had a little girl to raise. That little girl is his granddaughter. The Grandfather said that he was told by his doctor, if he would've waited, another 48 hours, their conversation would've been in the morgue.

Here he stands, 4 heart attacks, 1 stroke and MRSA in his lungs on 4 different occasions, raising his 9-year-old granddaughter. The FSC has observed that this family has some help from informal support and lots of help from their formal support. This Grandfather is a "hands on" grandfather, unlike a lot of the grandfathers we know. This Grandfather shares his story of finding absolute joy in holding his 10-day old Granddaughter, at the time, in his arms as she slept.

In 2013, the grandfather says his Granddaughter came into his life full-time because her biological parents got into trouble with the law, due to their drug habits. The Grandfather says when he held his granddaughter in his arms for the first time, being just 10 days old, he knew he was done and couldn't turn her away.

When the Granddaughter was 4 years of age, the grandfather, his wife, and Granddaughter became homeless. According to the grandfather, the family fell on hard times and had no money at all. The family would live in the parks and the Granddaughter was afraid when they had to go to sleep there a few nights. According to the grandfather, there was a lady that befriended the family, and she told the family that she would seek help for them, through their church. The Grandfather stated that DCF came into their lives after that and his Granddaughter was taken away from, he and his wife. During the time the Granddaughter was out of the grandfather's care, she was placed in a foster home where the foster family wouldn't allow him to communicate or visit his Granddaughter. After finding out that the foster parent was forcing the children in the home, to use the bathroom outside and his Granddaughter being injured several times, she was switched to another foster family that was more nurturing and caring.

After finding comfort in knowing his Granddaughter was safe, the grandfather worked with Community Partners to obtain a place for the family to stay. After being accused of not caring for his granddaughter and having his character come into question, the grandfather says he was given justice by the judges that were presiding over their case. The family was linked to the Kin Support Program, through Families First Palm Beach County and he stated he really worked closely with the program to help his family transition his Granddaughter back into their care. Families First helped with obtaining a therapist to address his Granddaughter's mental health and helped with her school placement.

The family was reunified with their Granddaughter in 2018. Families First Palm Beach County still serves as a tremendous support in the family's life as they experience life's changes. The family recently suffered a tremendous loss of their son and Families First linked them to the Indigent Program of Palm Beach County, to help cover the cost of cremation for the son. The Grandmother was linked to grief therapy, after suffering the loss of her son. The family reports that the grief therapist is helping to address challenges within the marriage. The family currently experiences some of the growing pains of raising a new generation child. The FSC involved offers supportive counseling to the grandfather and works collaboratively with the therapist to ensure continued safety in the home.

This Grandfather says he can't give up because he comes from a long line of family members that came from Italy to the United States, who had nothing, but one another. The family has had a history of substance abuse, but some of those family members were able to overcome their use of substances and rebuild their lives, that they once knew, but lost. Although this family's story is far from over, it is remarkable some of the things the grandfather can accomplish being a former US veteran who is disabled, but determined to raise his Granddaughter, with the help of the Kin Support Program.

TOPWA PROGRAM

First Quarter Report, October 2022 - December 2022

Date: January

PROGRAMMATIC CAPACITY & DELIVERABLES									
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of clients opened/ served for the quarter	48								48
# of clients closed	55								55
Percent of target to be served- 45 capacity	107%								
REQUIRED TARGETS	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
45 Assessments (pregnant women) per quarter	48								48
60 HIV Tests (all childbearing age) per quarter	71								71
60 Pregnancy Tests (all) per quarter	86								86
60 Outreach Sessions (all) per quarter	337								337
Number of referrals for services (Minimum 90)	103								103
Number of verified/completed linkages	84								84
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, 2022 to September 30, 2023.	48	48							
Outcome 1 Percent Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
133 of 140, or 95%, of pregnant women will be linked with a medical payer source to receive prenatal care from October 1, 2022 to September 30, 2023.	32	32							
Outcome 2 Percent Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!
100% of babies born to HIV+ mothers will test negative for HIV.	0	0							
Outcome 3 Percent Achieved	#DIV/0!		0%		#DIV/0!		#DIV/0!		#DIV/0!
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	48								48

ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS (current quarter)
Most notable key accomplishment(s)	<p>TOPWA staff conducted their outreach and educational presentation with Wayside House Residential (substance treatment provider for women) on October 13th, November 17th& December 8th. and Outpatient on October 20th, and December 15th 2022. Staff offered & provided HIV testing to program participants. TOPWA Outreach Staff; Nadine D, Maura A, and Jocelyne D, completed a Community Providers Outreach meet and greet. Staff met with Catholic Charites, Lutheran Family Services, Bridges of Riviera Beach, Bridges Of WPB, and Farmworker Council of WPB. TOPWA Supervisor Ashaki Sypher and Melissa Wijngaarde Program Director of Maternal and Infant Mental Health Met with the Broward TOPWA program on 11/28/2022 to discuss program logistics and take a tour of the facility. TOPWA Outreach Staff; Nadine D, Maura A, and Families First Interns Samantha hosted and participated in “Worlds AIDS Day event on 12/1/2022 at Palm Beach Farmworkers Council in Lake Worth Fl. Staff provided Rapid HIV testing, raffles, and distributed educational materials. TOPWA Supervisor Ashaki Sypher and TOPWA Outreach Staff Nadine D, Maura A, and Jocelyne D. attended the “Securing Our Future Economic Mobility Summit” on 12/5/2022 at the Palm Beach County convention center.</p>
Most notable challenge(s)	<p>Staff continue to face challenges in conducting outreach with barriers they have identified as clients accessing housing resources & affordable housing.</p>
<p style="text-align: center;">ANECDOTAL STORY TO SHARE</p>	
<p>TOPWA Outreach worker was able to offer services to a 39-year-old pregnant woman in Belle Glade, Fl. At the initial visit client, Marie Chantalle Julien-Pierre was a new refugee from Haiti, then Chile, Client, and Husband left their home country for employment and security. Client was new to the country and living with family members as an undocumented immigrant. During Outreach Worker learned that client needed assistance her immigration paperwork, a crib and bed for herself and husband. This Outreach worker was able to reach out to Catholic Charities in Belle Glade to assist the couple with getting their Work Permits. Outreach worker was able to complete a referral to Sweet Dreamers for a crib and bed. The client gave birth in the month of December to a baby boy. Client recently received her work authorization and is now enrolled in ESOL literacy at Glades Central High School. The client’s husband is now employed fulltime, and they have moved into a one-bedroom apartment in Belle Glade. Client her husband and baby are both thriving and doing well.</p>	

Infant Mental Health

First Quarter Report, October 2022 - December 2022

Date: January 2023

Attachment XIII.VII

PROGRAMMATIC CAPACITY and DELIVERABLES										
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE	
# of clients enrolled during previous quarter and still active in current quarter	11		10						21	
# of clients opened - Adult 1st box Child 2nd box	0	5							0	5
client enrolled during previous quarter and still active in current quarter. Plus, new enrollments.	16								16	
# of clients closed - Adult 1st box Child 2nd box	1	5							1	5
Total Referrals	39								39	
# of CSC clients served	9								9	
# of Headstart clients served	7								7	
# clients on waitlist at the end of the quarter	23								23	
# of clients served in School only	3								3	
# of clients served in home/office/telehealth only	8								8	
# of clients served in both settings	5								5	
# of formal classroom observations	30								30	
PROGRAMMATIC OUTCOMES										
	QTR 1		QTR 2		QTR 3		QTR 4			
Successful closures	1								1	
Closure before completing services	1								1	
OUTCOME INDICATORS	#measure d	#achieved	#measure d	#achieved	#measure d	#achieved	#measure d	#achieved	YEAR AVG	
70% of closed clients in the quarter met 60 days or longer	2	2								
Percentage Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
80% of clients who completed services met their treatment plan reducing the risk of abuse and neglect	2	2								
Percentage Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
80% of children identified as having developmental delays will receive appropriate referrals	1	1								
Percentage Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	

Challenges impacting outcomes	Parents were referred from Head Start, but IMH found it a challenge to connect quickly with parents to get them enrolled. In addition, some parents were not aware of why the schools were referring their children to our program. IMH worked with the FACES staff to explain the referral. We also experienced enrollment, but then no response to our communications.				
HOUSEHOLD COMPOSITION	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
Types of household (unduplicated)					
Single Parent	8				8
Married Couple	5				5
Cohabiting couple	3				3
# of Children	39				39
# of Adults	31				31
PROGRAM OVERVIEW					
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS				
# of files audited	4				4
Most notable key accomplishment(s)	We began the Head Start program with 39 referrals. We did have a long waitlist in November, but were able to get many assigned by December. The Interns were in training and assisted with enrollments in November. IMH completed 30 school observations with the help of Nadjie in Oct/Nov.				
Most notable challenge(s)	Referrals were received but families were not interested or hard to connect with. There was a high volume of Creole speakers resulting in resource constraint and delayed enrollments. Tabitha helped us with enrollments for the Creole speakers.				
ANECDOTAL STORY TO SHARE					
<p>A client came to therapy due to her mother's concern for her 4-year old's behavior. The client entered counseling as a shy, unconfident, and expressing what mom stated as "big feelings". The client would have long drawn-out tantrums lasting 15 minutes or more. She was short tempered with her toddler sister. She would push her, pull things out of her hands, and scream and throw a tantrum. The toddler was born during COVID and mom thinks that was part of the issue. She also thinks that being the first born and now sharing time is causing frustration. The client was showing some inattentiveness in school and mom was noticing it at home as well. The school states that she is having some inattentive behaviors and does not complete tasks. She gets frustrated at school but does not have tantrums like they are at home. The client also had tics and would wave her hands in front of her face. This did not happen often enough for it to be diagnosed as per pediatrician. At three years old, the client has a head injury. While playing on the patio with grandma she slipped and hit her head on the cement. The child was brought to the hospital and had numerous tests performed. She did not have any damage to her skull. The mother was worried that the behaviors her daughter was exhibiting were due to the injury.</p> <p>During the assessment phase, strong rapport was built. The mother was amazing and engaging. The mother absorbed the information given by the therapist and practiced the techniques with her daughter. The client made improvements in her goals such as calming her body with use of Conscious Discipline (loved balloon breathing) and reduced the length and amount of tantrums. What once was stressful for the entire family was now becoming a family time again with the fun activities that helped the client move past what she was not able to understand. She made use of playdough, dolls, and animals in the playroom to depict scenes. She loved discussing what they were doing. The once shy client became outgoing and could not wait till she could go to her "play doctor" again. The client utilized feeling words now and can problem solve such as "I need help", "I want to play with my art supplies at the table so my sister does not ruin my work". These phrases as well as several others were practiced in session and with her sister present and mom. Practicing together was beneficial to the family. The toddler even can do the breathing technique! The client graduated from therapy after meeting with mom and discussing how well she was doing at home and at school. She was playing with her sister and tantrum are down to occasional moments. The tics are now only when she has a fever and what mom calls a growth spurt.</p>					