

Performance Quality Improvement

Quarter Meeting, FY 22-23

May 17, 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

Melissa Wijngaarde

Absent: None

I. CEO, Finance, and Operations Updates

- ❖ Updates for quarter

CEO

- ▶ On February 8th, the agency held a psychodrama team-building training for our Leadership Team. Paul Lesnik and Lin Considine were the trainers and did this training pro bono as a thank you for allowing them to use the downstairs conference room for psychodrama training for community therapists.
- ▶ On February 9th, Peter Thate, Gabriela Eckert, and Julie Swindler met with the Legacy Committee to discuss the proposed changes to the website for legacy and discuss strategies towards achieving the \$500,000 goal over two years.
- ▶ On February 10th, Andres Torrens, Melissa Wijngaarde, Diana Cardona, Sharonda Crawford, Ashaki Sypher, Alex Guanarita, and Julie Swindler met to prepare for the upcoming Town of Palm Beach United Way site visit, to be held on February 22nd.
- ▶ On February 14th, Alexander Guanarita and Julie Swindler met with Rick Neyman, a managing partner with IOA. Since Raul will be leaving the firm, he made the introduction to Mr. Neyman who will be handling our accounts with no changes to the current level of services and team for our insurances.
- ▶ On February 28th, Peter Thate and Julie Swindler attended the Investment Briefing with the Community Foundation for Palm Beach and Martin Counties.
- ▶ On March 14th, the Behavioral Services Network (BSN), came up from Miami to do a site visit to determine eligibility of Families First to join their Medicaid network. The agency scored a 96% out of a 100%. Leadership was told that they are expediting our application for approval.
- ▶ On March 29th, our Advancing the Mission Team for equity attended the ATM Session II. Andres Torrens has been asked to be one of the facilitators with this next group. The agency is going to send out a request to staff to add two additional members to this group.
- ▶ On March 30th, Melissa Wijngaarde, Peter Thate, Andres Torrens, and Domenick Macri, attended the Impact 100 Palm Beach County event at Saks. The Infant Mental Health

Program was a semi-finalist, but we did not make it to the finalist stage. The team worked very hard on this and were commended for their initiative. The agency will try again next year.

Finance

- ▶ Mr. Guanarita reported the committee reviewed a proposal from Mr. Domenick Macri of Macri Associates Consulting. Mr. Macri is proposing to assist the Agency with the strategic goals for marketing and business cultivation and he proposed a three-month contract at \$5,000 per month. The Finance Committee agreed there is enough funds to cover this expense and along with the Development Committee is recommending approval of the Macri Associates Consulting proposal. After review and discussion by the board, Luis Cure moved to approve the consulting contract with Marci Associates Consulting for a 3-month period at a cost of \$5,000 a month. Sandra Fleming seconded the motion. The motion passes unanimously.
- ▶ March Financials for Families First of Palm Beach County – The March financials for the 6th month of fiscal year 2023 produced a net gain of \$373,862 year-to-date. Revenues totaled \$3,238,884 and expenses totaled \$2,865,022. Cash balance is \$760,794. The fund balance totals \$2,071,418 which comprises \$864,055 in restricted funds and \$1,207,364 in unrestricted funds. Accounts Receivables totaled \$412,040 and agency has average expenses of \$477,504. The agency received \$5,000 from Boca Rio Foundation for Behavioral Health, and \$10,000 from Admirals Cove Foundation for Behavioral Health. The Finance Committee is recommending the approval of the March Financials as presented to the Board of Directors.

Operations

- ▶ Current office space will remain the same in Wellington and Belle Glade with no changes to their office space. Main office is currently being offered \$22/sq ft for 13795sq ft of space on the second floor. Operations committee reviewed the current floor plan which includes assignment of staff in every office to best determine most efficient use of space. Two offices are currently being considered for conversion into modular working space for hybrid staff. Additional work will also be done to improve storage capacity and file room storage. Operations team will begin to assign draft plan for new office assignment and review with directors for feedback. Additional walkthrough of space will be conducted by Board Member Sherry Schmidt and Julie to review additional suggestions or alternatives for office space. Anders, Alex, and Elsira will meet on January 25th to sketch out a proposed office space blueprint for Families First Administrative Offices.
- ▶ Sherry Schmidt, Julie, Alex, and Elsira met to discuss current leasing options and reasonable costs for lease renewal. Sherry provided group with lease comps in the area and estimation for expenditure calculations as well as square foot calculations. On comparing proposed square footage and actual square footage currently being used a significant amount was identified. A new proposal will be drafted and presented at next lease meeting based on findings. The Palm Beach County Housing Authority is proposing 12,017 sq ft @ \$22 for a total \$264,374. In addition to a 40% CAM Expenditures of \$50,449.44 and 20% of conference use of 1427 SQFT @ \$22 = \$6,278.80. Total amount combined from Housing Authority is \$321,102.24 for a monthly rent value of \$26,758.52 a 54.85% increase. Families First current lease consists of 8311 square feet for a monthly rate of \$17,280 = \$24.95 per square feet. Our square footage



calculation comes out to be 6,128 adding 15% standard CAM of 919.20 square feet for a total of 7,047.20 square feet and below our current contract of 8311.

Families First proposal should be 8311 square feet @ \$22 = \$182,842 plus 15% CAM 1246.65 @ \$22 = \$27,426.30 and \$6,278.80 for conference use for a total \$216,547.10. New monthly rate is \$18,045.59 which represents a 4.43% increase.

Grants

- ▶ 6 Grants were written in this quarter totaling \$116,000
- ▶ 0 Grant as a new request
- ▶ 9 Grant award notification is still outstanding
- ▶ 6 have been awarded in the amount of \$100,117 with 4 grant notifications that came in from the 1st quarter amounting to \$66,617.
- ▶ 1 request was declined that carried over from first quarter

II. Development Department

- ▶ Mr. Thate reported the Agency received a small donation from the Delray Beach Tennis Open and the Agency will participate in the event again next year.
- ▶ Mr. Thate thanked everyone who attended the Agency's Annual Donor Recognition Breakfast which was held on March 1, 2023. He noted it was well attended and the Agency honored Ms. Barbara LeBrun for her service as a long-time board member. The Child First Program was highlighted at the event and the 2023 Impact Report was made available to all attendees.
- ▶ Mr. Thate reported that April is child abuse prevention month, and the Agency will once again have the Annual Blue Day on April 21, 2023, to raise awareness. Some companies have already committed to participating in the event. Mr. Thate asked the board to continue to spread the word and to let Ms. Eckert know of any companies that may want to participate.
- ▶ This year the Agency will have blue bracelets to give to everyone who donates. Ms. Eckert is sending out Blue Day posters and she will be sending a letter out to past donors asking for donations in conjunction with April Blue Day
- ▶ Mr. Thate thanked Mr. Guillaume for nominating Families First as the charity of choice for the 24th PBCJA Annual Golf Tournament. Families First will be the benefit charity for a golf tournament to take place on May 12, 2023. Mr. Thate will email the board members the tournament information.
- ▶ Mr. Thate asked the board to mark their calendars for the 17th Annual Children's Day Luncheon which is scheduled to be held on November 3, 2023.
- ▶ Mr. Thate reported the elevator pitch is close to being finalized and will be sent out to the board soon. Mr. Mercader added that the new elevator speech is short and succinct and will be a great tool to communicate the mission of Families First.
- ▶ Ms. Swindler told the board that Mr. Thate is leaving the Agency and his last day will be April 14, 2023. Mr. Thate thanked the board for their support during his time here. Ms. Swindler reported the Agency is actively looking for a replacement for Mr. Thate and Mr. Macri and Mr. Mercader are helping with the selection process.
- ▶ Ms. Swindler noted the Honda Classic was very successful and the Agency received a total of \$19,173.82.

- ▶ Mr. Domenick Macri reported he is working as a consultant for the Agency and is really enjoying his time here. He is working on new ways to get the Agency’s message out to the local community and raise awareness about legacy gift giving. He is also helping with the process of hiring a new Development Director. He is also working on ways to get the client stories out to the public and is working on creating a family fun day event so the public can really engage with the Agency and learn more about what the Agency does. He noted he will be reaching out to the board members to set up a meeting to discuss new ways to engage with the organization. He also asked board members to let him know of anyone who may want to serve on the Development Committee.
- ▶ On March 28th, Peter Thate and Andres Torrens met with representatives from the PGA National Advisory Board of Governors and their Community Outreach Committee to explore how Families First could become one of their charities. They were very impressed with the work that Families First does and with the solid foundation of the organization and agreed to assist the agency in any way they could. They were also very interested in working with the TOPWA program, specifically in donating baby items and other needs for the clients served by this program.

III. Workforce Stability

▶ Attrition

Separation for 2nd Quarter

Department	Hire	Terminated	Span of Service
IMH-Infant Mental Health	5/12/2022	01/19/2023	8 months***
BHS-BEHAVIORAL HEALTH SERVICES	12/17/2018	01/23/2023	4 years & 1 month
BHS-BEHAVIORAL HEALTH SERVICES	09/28/2020	01/20/2023	2 years & 3 months
BHS-BEHAVIORAL HEALTH SERVICES	08/11/2022	03/23/2023	7 months
BHS-BEHAVIORAL HEALTH SERVICES	02/21/2023	02/27/2023	0 months
HFM-Healthy Families	05/23/2022	03/14/2023	9 months
CHF-Child First	04/25/2016	03/17/2023	6 years & 10 months

New Hires for 2nd Quarter

Department	Hire Date	Position & Time to Fill Position
HFM-Healthy Families	01/09/2023	7 weeks
BHS-Behavioral Health Services	01/30/2023	2 weeks
BHS-Behavioral Health Service	02/21/2023	4 weeks Termed 2/27

BHS-Behavioral Health Services	03/02/2023	New part-time Position
BHS-Behavioral Health Services	03/10/2023	2 weeks
TOPWA	03/21/2023	7 weeks Nadine is still working PT her FT ended 3/3

► Staff Morale

- On January 11th the first staff meeting of the year took place. Staff were trained in Child Abuse and introduced to COA accreditation. Much more will need to be done to best support the staff moving forward regarding training courses of interest based on staff satisfaction. COA kick-off will begin in April to best prepare staff for any additional questions and concerns.
- During Social Work month in the month of March staff were recognized for their great contribution to the field in the Inner Circle newsletter. They were also given a gift each in recognition of Social Work month.

IV. Risk Management & Safety

► Regulatory Compliance

- An update to the improvement plan was made to best align with current compliance of program indicators. The improvement plan process will remain the same as indicated in the PQI plan.
- During this period the new strategic plan was created and approved by the board with a 2-year end date. Positive feedback was given from board regarding long-term sustainability of agency.
- PQI Plan is going through revisions to align with COA standards. Program directors have created logic models during this quarter to align with updated strategic goals.

► Diversity and Accessibility

- The REI team has begun phase two of its participation at the Advancing the Mission collaborative. Ms. Joyetta Burgess has joined the team and will be attending quarterly team meetings as well as collaborative meetings. The first meeting occurred March 29th and the team has moved up a level and is in the advanced learning plan. Currently the team will begin work in the next quarter to address an action plan to meet inclusion goals.

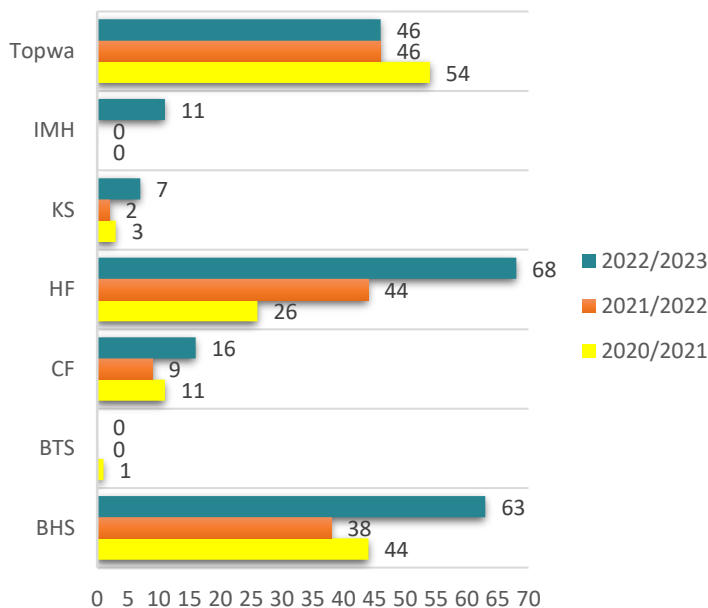
► Cyber Security

The overall engagement for this month was 81%. New employees did demonstrate activity during this quarter and have participated in cyber training. On comparing trends from month to month it is evident that reminders do have to be sent out as declines in engagement are apparent. Based on training material some topics will be re-introduced to secure comprehension of material.



Client service numbers – 2nd Quarter Comparisons

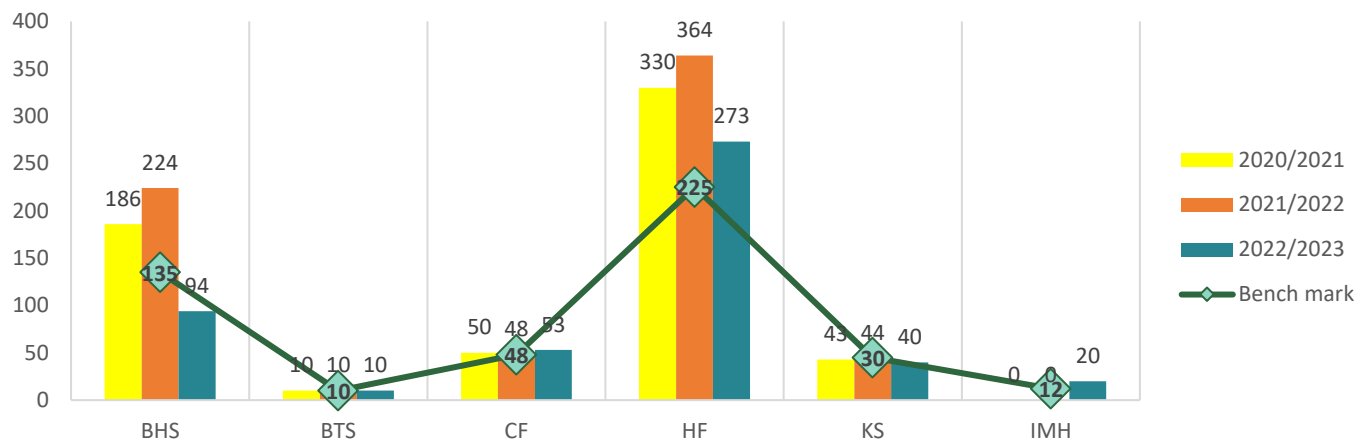
3- Year Comparison of Open Cases in the 2nd Quarter



Narrative for clients/cases opened:

- 5/7 programs have exceeded the number of enrollments compared to previous years. With the fluctuation of staff in this quarter more will be analyzed and discussed following external monitoring.
- Kin support has received more support as Belle Glade referral loops continue. Belle Glade post is targeting to meet at least half of its capacity by the end of the third quarter.
- During this quarter BHS on-boarded new personnel to assist in assigning cases. Therapist who has been involved in support groups have now also transitioned to more individual therapy.

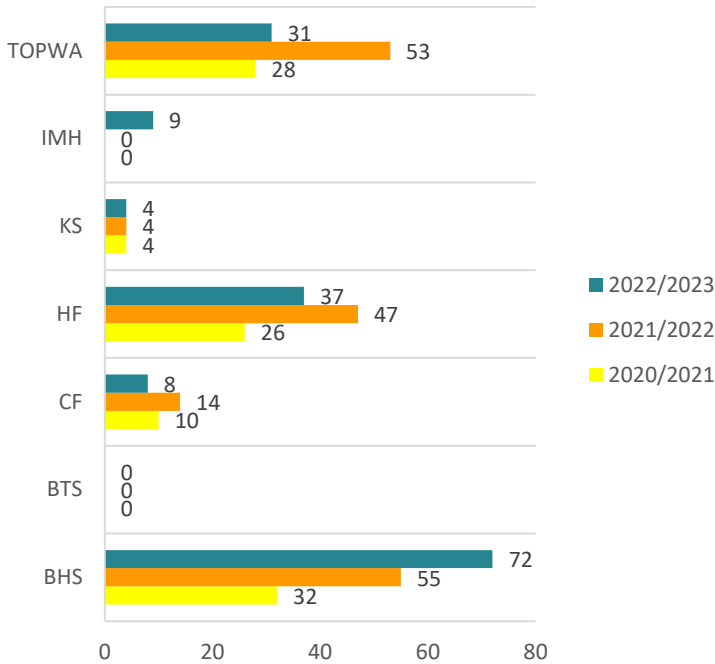
3-Year Comparison of Served Clients in the 2nd Quarter



Narrative for clients/cases served:

- During this quarter Healthy Families saw a decline in clients served but is still in compliance with serving at least 225 families. Staff attrition has impacted capacity while training can take up to a month to follow program guidelines as staff build up caseloads.
- BHS has been impacted significantly during the past two quarters with the rate of replacement of therapist. In the same quarter 4 therapist left while 4 replaced them. Currently 70% of 135 client capacity is being served. With new staff onboarding more support will be given to director and supervisors through Performance Improvement Plan.

3-Year Comparison of Clients Closed in the the 2nd Quarter



Narrative for clients/cases Closed:

- TOPWA experienced more longevity in cases. Typically, an open case can be anywhere from 1-5 home visits to assist in additional needs a client may have. More will be explored in client satisfaction findings.
- Closures were expected in the BHS program as more staff have separated during this quarter. Equally numbers align with length of average treatment time of 6 months. During PIP more will be looked into reasons for closure.

V. Compliance

► Quarterly Report Analysis

- Behavioral Health Services- During the past two quarters BHS has served 70-72% of the capacity of clients served. Attrition has been a key indicator as therapist positions have been the hardest to fill. However, since then the time of hire has progressively improved, and vacancies have been a bit quicker to fill than they were in the first quarter. Great progress has been made since the first quarter in recording and reporting outcome indicators. More than 10% improvement in two outcome indicators were made with a larger sample size. As a program more will be conclusive at the end of the fiscal year to determine programs efficiency.
- Bridges to Success- Program has continuously demonstrated great achievement in outcome indicators. An opportunity for expansion of report will be investigated during the 3rd quarter as logic model for program has been updated to highlight additional measures that may not be accounted for now in this current report.
- Child First- The number of case record reviews met its benchmark of 25% with an increase of 14% from the previous quarter. Based on notable challenges continuous monitoring will be done by the program director as more referrals are coming in away from target area with current vacancy on one team.

- Healthy Families- The current capacity for the program is serving at least 262 clients. Program is meeting benchmark but support to staff is being given to assist with caseloads as staff have left. All outcomes were met for the quarter.
- Kin support- Outcome indicators were all met. Program is currently working on building referral sources in the Glade's community. Program Officer and Compliance and Quality assurance director will be monitoring to secure progress in expansion of program. Program is doing well and has improved in areas such as audits and support group participation.
- TOPWA- Exceeded clients served for the quarter and continues to meet benchmarks. During this period client satisfaction surveys were sent out to clients while additional staff conducted telephone surveys to assist in language barrier. TOPWA is doing a commendable job on utilizing resources and improving on annual benchmarks as those previously recommended to team.
- Infant Mental Health- Program continues to demonstrate ability to grow but is struggling to fill current demand. The program has been very flexible and successful in attaining part-time therapist to fill current needs. As the program works to secure additional grant filling demand is the current priority of program.

► *Case Records*

- As an agency initiative case record reviews are completed by programs following our current case record procedure. As an additional layer of checking. The Compliance and quality assurance director will conduct random record reviews among programs beginning in the 3rd quarter. This initiative was discussed at the previous Executive leadership team meeting with support from all directors to best prepare for COA site visit.

VI. Program updates; additional agenda items

PQI discussion:

- **Behavioral Health Services-** Made two soft offers to two candidates who are scheduled to start in May. School is ending so they will start at Edna runner and the 2nd candidate will be community based. After discussing the current supervisor list, BHS is ready to move Waking over to Patricia to better facilitate supervision duties. Supervisors expressed they are doing more administrative vs clinical work; Diana will be working with them to identify ways to more evenly spread-out undertakings. BHS submitted a bid to the School District of Palm Beach County for contract renewal. Monitoring with FAA was successful with no findings; however, a couple of recommendations were made towards kin support and length of services. Medicaid billing training will be offered to staff on April 28th and will be specific to compliance; advanced play therapy training will also be offered to clinicians and be open to other clinicians in other programs. Sand tray training will possibly be offered in May or July. Once the two candidates start program will be fully staffed.

- **Kin Support-** Difficulty getting referrals to Belle Glade clients continues. Takela received orders to be deployed May 18th and shared she is not interested in resigning and has potential candidate in mind to take her place in the meantime. Bari and Brande will be working on how deployment impacts in terms of hiring a needed position. Patch meetings as a form of networking will be looked at in having members that work in Belle Glade to expand connections in the community.
- **Bridges to Success-** Euratta was out for leave for a little while. The BTS program continues to be at capacity (10 families) and all 10 are stably housed. The BTS program had a monitoring by FAA and HUD and although the official reports have not been received, both the FAA and HUD monitor reported no findings with the program. HUD monitored the BTS program and concluded that there were no findings but did make a couple of recommendations. The monitors questioned the agency's policies regarding how chronicity of homelessness was documented and recommended that the agency work on creating guidelines on how this was documented. Andres explained to them our current process and the fact that assessments are completed by the entry agency and that our agency completes an intake assessment in Client Track (the county's data system). In addition, it was advised that the agency look for an assessment for when a new client is admitted, and the agency agreed to research this further and try and identify an assessment to use. Following the FAA monitoring, a recommendation was made to update and/or change the Family Action Plan and this document was indeed updated. The HUD monitor liked the Family Action Plan that was updated after the FAA monitoring and this new plan will be implemented immediately. A new scholarship was offered to the newest BTS client and an upcoming graduation will also take place for one of our clients. More work will be done closely with Euratta to capture more writing narratives in case notes and its linkage for clients to become more self-sufficient.
- **Healthy Families-** On May 1, Sammy and Cristina will start as full-time Family Engagement Workers. We had the HFPB graduation on Saturday, April 22, at Lion Country Safari. We had over 100 people in attendance. We met all our quarterly outcomes from the last quarter, January – March 2023. We currently have one vacancy --- We will be hiring two replacements for Sammy and Cristina's Family Support Specialist positions. The HF leadership team is planning a week-long staff appreciation week for our staff.
- **TOPWA-** We have filled our TOPWA vacant position. We began with one new outreach worker, but the position was not a good fit for her. Her employment ended and another worker was hired. Our new full-time worker will begin on May 8, 2023. We have met all of our deliverables for

the month despite being short staff. We continue to employ Nadine on the weekends to assist with assessments for this program. She will assist us with training our new worker and helping her to learn important sites for Outreach specific to the Glades. Our new worker, Marie, is Creole speaking and from the Belle Glade area.

- **Infant Mental Health-** Finalist for IMPACT the Palm Beaches and had very productive meeting with Deluca foundation regarding funding for next two years. We will employ one of our interns for the summer to work one day per week at Village Academy Head Start to work in the classrooms with the students on the waitlist who need support and continue with her clients through the end of the summer school year. We have been contacted by Lutheran Services Head Start to assist them with some observations in May/June and to serve more Head Start Centers next school year. We will set up a meeting with them to discuss a contract once we have hired a full-time licensed therapist to assist Melissa.
- **Child First-** We have a new Care Coordinator starting with us on 4/25. Susan worked for us previously in a program that lost funding and is so excited to be returning to Families First! NSO released new guidance surrounding in-person and telehealth visits stating that preference would be for telehealth visits only be conducted for care coordination needs and collateral sessions 15% of the time and in-person visits be conducted 85% of the time. Our team is on track to meet this guidance and has really shifted quite a bit over the last 6 months, currently providing in person visits about 70% of the time and virtual/telephone sessions about 30% of the time. NSO plans to reflect this new guidance in the updated accreditation guide which should be released sometime this Spring. We have a County-Wide Child First Meeting scheduled on 5/31. All Child First staff across Palm Beach County will come together with our NSO State Clinical Lead at our Forest Hill site. We have really been focusing on training and conference opportunities for the team and are preparing for three staff members to attend the Zero to Three Conference in September in Minneapolis. A clinician will also be attending the PMH-C Certification courses in August with Postpartum Support International, and a care coordinator will be attending the Conscious Discipline training in Orlando in June. We had a wonderful second quarter, which was represented in our CPPA score of 97%!

VII. Quarterly Program Report Updates

- ❖ Monitoring, Site Visit, and Report Updates:
 - February 13 Lost Tree Village Charitable foundation conducted site visit to address operation needs in the office. Staff discussed current needs with office equipment and furniture to optimize utility of space for growing

programs. Site visit went well, and agency was granted monies to meet agency need.

- February 17 Healthy Families QA visit

-March 14-17;27, FAA site visit. Informal feedback was given from monitors with no findings presented for both Behavioral Health Services and Bridges to Success programs. Some recommendations were made that will be followed up on upon receipt of formal report.

- Q2 CPPA Report Child First- Program received a 97% score in program compliance based on CSC funding requirements. The program did very well in reaching goals and maintains a high fidelity to model. One area of improvement identified was meeting required number or program and frequency sessions.

❖ Quarterly Data Reports:

1. BHS
2. BTS
3. CF
4. HF
5. KS
6. TOPWA
7. IMH

VIII. Risk Assessment Review Committee

❖ Staff incidents – 1

❖ Client Incidents – 7

- BHS – 3
- BTS - 0
- CF – 2
- HF –0
- KSP –2
- TOPWA –0
- IMH-0

• Client Incident Types:

- Child abuse/neglect: 2
- Aggressive/abusive behavior – 1
- Accident/injury – 0
- Other – 4
- Law violation -0

• Client Incidents 2nd Quarter comparison by Year

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

IMH	N/A	N/A	0
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Type	2020/2021	2021/2022	2022/2023
Risk for harm self/others	2	0	3
Aggressive/Abusive Behavior/Assault	2	6	1
Accident/Injury	0	0	0
DCF/Hotline	0	1	0
Child Abuse/Neglect	6	2	2
Death	0	1	0
Legal/Law Violation	0	0	0
Medical emergency	0	0	0
Other	2	1	0
Sexual harassment/battery/assault	0	0	1
Substance/Drug abuse	0	0	0
Communicable disease exposure	0	0	0

✚ One of the incidents reported by BHS program are not from client but rather disclosure from student. Due to mandated reporting therapist reported the incident to DCF hotline.

- ❖ Risk Assessment Committee incident review for 2nd quarter
See discussion notes attachment following quarterly reports

BEHAVIORAL HEALTH SERVICES
Second Quarter Report, January 2023 - March 2023

Date: April 2023

PROGRAMMATIC CAPACITY & DELIVERABLES										
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE	
# of clients enrolled & carried over	54		31							
# of clients opened - Adult 1st box Child 2nd box	1	42	1	62					2	104
# of clients served (target 135)	97		94		0		0			
# of clients closed - Adult 1st box Child 2nd box	1	22	3	68					94	
Successful closures	15		64							
Closure before completing services	8		7							
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	71	66						
Percentage achieved	70%		93%		#DIV/0!		#DIV/0!		81%	
80% stability of placement in home	23	21	71	61						
Percentage achieved	91%		86%		#DIV/0!		#DIV/0!		89%	
80% stability in school	23	17	71	62						
Percentage achieved	74%		87%		#DIV/0!		#DIV/0!		81%	
Challenges impacting outcomes	In this quarter, clinical director worked with data coordinator to establish a system in gathering each outcome separately. Quarterly reports are due each month by the 15th and there continues to be missing data on outcomes, which causes discrepancies and delays to provide information in a timely manner internally and to funders.									

HOUSEHOLD COMPOSITION	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
Types of household (unduplicated)					
Single Parent	36	48			84
Married Couple	23	15			38
Cohabiting couple	0	0			0
# of Children	129	158			287
# of Adults	97	119			216
PROGRAM OVERVIEW					
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS				
# of files audited	0	10			10
Most notable key accomplishment(s)	<p>During this period, there were a total of 63 admissions and 71 discharges. 93% of closures reported a reduction of mental health systems as evidence based by CFARS/FARS, 86% reported stability of placement in the home, while 87% achieved stability in the schools. Each outcome is measured at discharge.</p> <p>In this quarter, the agency and program have established new partnership with Edna Runner Tutorial Center, in where a therapist will be working primarily at the center four days a week over the summer and will then transition to working at the school in the new academic year. Additionally, a formal Memorandum of Understanding is in process of being established with Vita Nova. This collaboration will assist in providing individual and group services for youth who are at risk of offending or re-offending. The program therapist will provide seeking safety groups to youth at Vita Nova in efforts of reaching many youths who need services and support. Furthermore, two program therapists are running two separate monthly support group for parents/caregivers in West Palm Beach and in Belle Glade.</p> <p>In this period, behavioral health staff continue to attend and participate in Families First- BHS program meetings which occur bi-weekly to discuss program updates, case staffing, PQI outcomes, and funding information including updates on Medicaid. In this period, clinical director worked with quality assurance director and restructured the chart flow process. This form aids to help clinicians and data coordinator maintain charts in compliance with agency and funders.</p> <p>Through this period, clinical and case management staff received training by the Department of Children and Families focusing on child abuse and acquired new skills by attending Treating Trauma using Play Therapy training. Additionally, new staff volunteered to attend the Racial Equity Institute training.</p> <p>In this period, Family Assisted Agencies conducted a monitoring of our PARED program and reported no findings. Program recommendations were provided to the leadership and quality assurance team. These recommendations are in the process of being implemented to better assist youth and families in our community.</p> <p>Lastly, in this quarter, the clinical director and program supervisor identified four new qualified therapists (3 F/T, 1 P/T) who will work in the behavioral health services program in the schools and in the community.</p>				

Most notable challenge(s)	<p>In this period, the program lost two co-located therapists that were assigned to Village Academy and Pine Grove Elementary. However, two new co-located therapists were identified and hired to serve in each of these schools.</p> <p>In this period, it has been challenging to keep data for BHS up to date and accurate as there continues to be delays in entering admissions, discharges, following up with clinicians on missing demographics and difficulty communicating with clinical director, program supervisors, and therapists. Additionally, as the agency, continues to expand Medicaid, the clinical director is working closely with data coordinator to ensure all billing is completed in a timely manner and that we are following Medicaid billing protocols.</p> <p>Clinical director has established check in meetings to help encourage data coordinator to bring forward questions, concerns, and updates on data on a regular basis. This continues to be a work in progress and clinical director is working closely with the executive leadership team on feedback and insight on solutions.</p>
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ANECDOTAL STORY TO SHARE

Client is an 11- year- old black female seeking services for the first time. The client was referred by the guidance counselor. Client’s referral stated, “Behavioral issues in school. As reported by the client’s teachers. The client has been getting into fights, and disrespecting adults since the second grade. It was reported that the client was the one that usually initiates fights or arguments with her peers. The mother and the client were open to the therapeutic process.

In the beginning of the therapeutic process, the client appeared restricted and reserved. Once the trust was established, by the third or fourth session, the client began to open more and express herself. The client’s goals included to stop being disrespectful and stop being in drama. The diagnostic impression that was given to the client is oppositional defiant disorder.

Throughout the client’s progress in therapy, the client begins to gain insight and awareness about her behavior as evidenced by stating she wants to remove herself from one of her friends. Client identified showing empathy as one of her strengths. The client is excited about role playing and learning assertive skills to improve her interpersonal relationships. The client completed all her homework. Client has made improvement by not being suspended since she began receiving therapeutic services and her grades have significantly improved. Additionally, the client reaches out to her mentor when she encounters conflict with others. School administrators, school police, and the school principal have acknowledged the client’s overall improvement. The school police stated, “You are doing a miracle with her.”

BRIDGES TO SUCCESS
 Second Quarter Report, January 2023 - March 2023

Date: April 2023

PROGRAMMATIC CAPACITY & DELIVERABLES									
CAPACITY	QTR 1		QTR 2		QTR 3		QTR 4		YEAR END
# of families carried over	10		10						
# of families opened	1		0						1
# of families served	10		10						
# of families closed	1		0						1
# families targeted to be served	10		10						
CLIENTS & HOUSING UNITS (new per quarter)	QTR 1		QTR 2		QTR 3		QTR 4		YEAR END
# of Families	10		10						20
# of Children/dependents	24		23						47
# of Adults	11		10						21
Single	9		10						
Married	0		0						
Co-habituating	1		0						
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					
Outcome #1 % Achieved	100%		100%		#DIV/0!		#DIV/0!		100%
80% of 10 families will maintain or increase their income including wages and/or benefits.	10	10	10	10					
Outcome #2 % Achieved	100%		100%		#DIV/0!		#DIV/0!		100%
Challenges impacting outcomes	The clients who reside within the BTS program face several challenges and one of those challenges is maintaining a stable household income. Of the families who work outside of the home, they face severe challenges in trying to make a livable wage and many of not all of the families in the BTS program have household incomes at or below the poverty level. Regardless of this fact, they continue to persevere and push forward to maintain their income some are working at trying to increase their income by gaining different jobs or returning to school in order to get a better paying job.								

PROGRAM OVERVIEW					
FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	YEAR END
# of files audited	2	10			12
ACCOMPLISHMENTS & CHALLENGES	COMMENTS (current quarter)				
Most notable key accomplishment(s)	<ul style="list-style-type: none"> * 10 families continue to reside in the BTS program by remaining stable in their homes/units; * Three families initiated or continued their vocational training in a trade that will assist them in becoming more self-sufficient; * Three families accepted a grant to receive computer training: this training was offered to the adult client or to their children and involved receiving a computer, hot-spot for Wi-Fi access, and access to the educational website to begin and complete a training of their choice; * Successfully attended all required meetings with the HHA (100% attendance); * On January 26-27, the BTS Coordinator participated in the Palm Beach County Point-In-Time Count (PIT Count) where she joined the County staff in surveying certain neighborhoods and counting homeless individuals. * Completed a monitoring in March from one of the program's main funders, Financially Assisted Agencies (FAA). We received a positive report and had no findings. FAA made a couple of recommendations for the program and the agency has started to initiate these recommendations with respect to the program Family Action Plan and documentation. The agency was also prepared to meet with and have a second monitoring from the other BTS funder, Housing and Urban Development (HUD), but this monitoring was rescheduled by HUD for April. The results of this monitoring will be reported in the next quarterly report. 				
Most notable challenge(s)	<ul style="list-style-type: none"> * Meeting the multiple needs of some of the clients in the BTS program with respect to mental health needs; * Locating affordable housing for clients who wish to exit the BTS program but who cannot afford to move out because of skyrocketing rents; * Locating landlords who are willing to rent their units to Families First with the understanding that we will be subleasing the units to clients in the BTS program. At the present time, we have landlords that are willing and able to rent some of their units to Families First but locating additional landlords to work with us may be a challenge if the current landlords discontinue leasing their units to Families First-BTS. 				
ANECDOTAL STORY TO SHARE					
<p>Client EN experienced a difficult time last year after losing her job. EN suffered from despair and yearned to work a lot. The case worker put a lot of effort into helping EN and in assisting her in being able to maintain her positive attitude. The client accepted assistance and with the case worker's encouragement, she was also able to update her resume and apply for jobs that EN believed she was unqualified for. EN made a splash when the new year began. EN currently works for two agencies and volunteers. She is currently working for a nonprofit that helps children with cancer and EN adores her new job and is eager to begin what might be a new career path.</p>					

CHILD FIRST

Second Quarter Report - January 2023 through March 2023

Date: April 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		37						66	
# of clients carried over who were NOT enrolled, but enrolled in the Qtr.	4		7						11	
# of Clients referred, accepted & enrolled from HomeSafe	15		9						24	
# of Clients referred, accepted & enrolled from HMHB	6		0						6	
# of enrolled Clients served	54		53						107	
# of Enrolled Clients discharged in quarter	11		13						24	
Successful closures (clients enrolled 60+ days and had at least 4 home visits by the clinician)	5		5						10	
Closure before completing services (clients enrolled 60+ days and had at least 4 home visits by the clinician)	3		3						6	
Referrals that were accepted & discharged (never enrolled)	HomeSafe	6	HomeSafe	8	HomeSafe		HomeSafe		HomeSafe	14
	HMHB	1	HMHB	0	HMHB		HMHB		HMHB	1
# of Rejected Referrals	Capacity	4	Capacity	2	Capacity		Capacity		Capacity	6
	Language	0	Language	0	Language		Language		Language	0
COMMENTS										
PLAN OF SAFE CARE	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE	
# of clients with POSC at intake	0		2							
# of POSC offered to families by FF	1		1							
# of POSC created with families by FF	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%		100.0%							
% 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%	5	62.5%						
Family Improvement (benchmark 75%) (#/%) <i>* See Comments</i>	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%					
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			16
Clients open 60+ days - Average Length of Service - Months	12	9			10.5
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	14			41
Married Couple	5	2			7
Cohabiting couple	1	1			2
# of Adults	53	37			90
# of Children	62	37			99
PROGRAM OVERVIEW					
FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	YEAR END
# of files audited (Benchmark: 25% of census per quarter)	6	13			19
ACCOMPLISHMENTS & CHALLENGES Quarter	Current	COMMENTS (current quarter)			
Most notable key accomplishment(s)		Families First CPPA score this quarter reflects high fidelity to the model with an overall score of 97%. Our strengths this quarter include data submitted complete (100%) and on time (97.3%), and data submitted accurate (100%). Core components were implemented in accordance with our contract at moderate fidelity. Our baseline assessments scored at 100%, as did our plan of care, written case formulation, early care mental health observations and our SNIFF needs identified.			
Most notable challenge(s)		COVID- 19 continued to present a mild challenge with some families contracting COVID-19 this quarter. 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.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. The rise in food costs have also presented issues for our families who are struggling financially.We lost a bilingual Care Coordinator on our team and have been engaging in several interviews in an attempt to fill the position.Our newest CC was working towards building up her caseload with her partner but is now overseeing two caseloads due to staff turnover. She is doing all of this while still engaging in required trainings for Child First, which has been a lot to balance. The most recent staff turnover will directly impact our ability to accept new referrals while operating with only 3 care coordinators. An additional challenge this quarter is the high immigration rate to Palm Beach County. The families experience dangerous journeys that often result in high trauma exposure for the families. These families also arrive with little to no resources and have a high level of need adding to the responsibilities of our bilingual care coordinators. Another challenge that continues this quarter is related to our teams stretching to additional zip codes that are outside of our contracted areas. During Q2 Families First CF accepted 23 referrals, 10 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 CF sites have continued to experience challenges related to staffing and capacity. As we have returned to mostly home visiting this quarter, staff are covering large geographic territories in the county due to the overflow from other CF programs. Clinical director is being mindful of caseload sizes in relation to travel and accepting referrals outside of the agency's catchment area.			

ANECDOTAL STORY TO SHARE

TC's mother engaged in services in December of 2021 and was transferred to the Child First team from the Healthy Mothers Healthy Babies program during her pregnancy due to recent migration entering the United States with her husband. Mom reported feelings of anxiety and stress surrounding her family's immigration status and unemployment. She also voiced experiencing feelings surrounding her first pregnancy and being away from family during this time. Feeling isolated with a slim support system, TC's mom and dad welcomed in the Child First team and sought out our guidance and support making meaning of their daughter's behavior, understanding her cues, and making sure client is meeting her developmental milestones.

During their engagement with the Child First program, both mom and dad showed interest and took the initiative, seeking out resources in their community. Their driving force being their love for one another and sustaining a better life for their daughter. Due to having a slim support system, TC's mom was unable to maintain a consistent work schedule and decided to let go of work for the mean time to best care for her daughter. Caregiver self-registered, enrolling in English classes at a nearby community school which she also had to stop attending. CFT often reflected with caregiver, praising her self-initiated efforts. The family's resilience was a strength that CFT continued to build upon.

Though client's father worked full time, dad made the time to engage with the program and activities whenever he was able. CFT inquired if it would be possible to incorporate dad and mom in play activities and both parents happily obliged voicing appreciation for the program. Father of client reported not being as active in sessions due to work schedule, provided a detailed summary of his workday, noting leaving the house at 4-5 am and returning around 8-9 pm, riding his bicycle to and from the train station come rain or cold weather noting traveling with spare clothes to change into. Dad reported working in a different county and feeling as though he's doing what he must to best care for his family. Noted his family brings him joy and when he returns home, he strives to create a routine to play with his daughter. When engaging the family in activities with their child, both parents often looked on proud. Both caregivers were open and engaged during the sessions, father often inquiring about what influences a child's development and appeared sincere in his interest to learning more and understanding as evidenced by his engagement, verbalizations, and body language when engaging with the team.

Through the challenges, both mom and dad were resilient and continued to build on their executive functioning with the support of the team. Mom would often seek out resources on her own. When in doubt and the team provided some guidance, mom was often prompt and took the initiative to follow-through with action steps needed. Mom took the initiative to enroll and attend her English classes in the morning, though she was only able to attend for 30 minutes prior to having to return home in order to relieve her family member who cared for TC during this time.

The Child First Team often reflected and praised mom regarding her self-initiative and work ethic, praising mom on creating and working towards a better life for her family through her everyday efforts. Mom would then coyly reply with gratitude, voicing self-initiative and working hard being necessary when wanting to move forward. Over the course of family's involvement with the Child First Team, Mom benefited mentally and emotionally by having CFT to share her concerns and troubles with being a mother at this time as she tried to adjust to a new way of living, nurturing, and caring for her daughter with the support of her parenting partner. Family began establishing a life on their own and acclimating to their new living space, their basic needs were met while also maintaining a more safe and sustainable home. Dyad engaged in CPP, circle of security, and Abecedarian/CC sessions throughout their involvement in CF which appeared to improve the parent-child relationship and strengthened the family's self-efficacy. Assessments reflect significant progress and growth in caregiver-child relationship, parent's depression/PTSD, family stress, etc.

As of today, dyad's relationship is increasingly better due to the services provided by the Child First Team during their engagement with this family. Child First intervention included: psychoeducation about baby's needs, mom's needs, acculturation, safety, building emotional attachment and empathy between dyad, circle of security curriculum, and service coordination. Mom learned more about her community resources and how to access them with the support of her care coordinator. Her Care Coordinator worked intensively by shopping for grocery items for the family due to lack of financial assistance/transportation, assistance completing the family's SNAP application, mom received gift cards from Families First to care for her and baby's hygiene and food needs. Mom's Child First team facilitated dyad's access to medical appointments for child, supported mom through identifying and securing the family's needs. Child now has medical insurance, and a primary care provider and mom has access to medical care for herself. Through consistent engagement clinically, Mom holds her daughter close to her, makes meaning of her behavior, follows her cues and the dyad continues to display a secure attachment style.

The family's growth since the initiation of services with the team has been exemplary as mom was able to reflect on what she's learned and what she is able to do to continue fostering a close connection and bond with her daughter. The family is able to meet basic needs without any concerns now that mom and dad have secured stable employment. Family is now aware of the many supportive services available in the community to meet their needs should the need arise.

HEALTHY FAMILIES PROGRAM

Second Quarter Report, January 2023 - March 2023

Date: April 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	278	241					Adult	Child
# of clients opened Adult 1st Child 2nd	12	18	29	39					41	57
# of clients served Adult 1st Child 2nd	290	270	307	280					597	550
# of clients closed Adult 1st Target Child 2nd	46	40	37	30					83	70
Number of families Served	290		273							
Number of families Closed	46		37							
Number of Families Completed Program	22		14							
Benchmark 75% of 350 Capacity by end of quarter	83%		78%							
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	16	16						
Outcome 1 Percent Achieved	94%		100%		#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	16	15						
Outcome 3 Percent Achieved	94%		94%		#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	53	53						
Outcome 2 Percent Achieved	100%		100%		#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		147						299	
Married Couple	65		62						127	

Cohabiting couple	73	65			138
# of Adults	294	278			572
# of Children	609	561			1170
FAMILY RETENTION Closure Reasons	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
# Completed HFF	22	14			36
# Not Interested/declined services	7	4			11
# MOOSA	0	5			5
# Lost Contact/to follow-up	2	10			12
#Target Child Miscarried	1	2			3
#Other	0	2			2
PROGRAM OVERVIEW					
FILE AUDITS	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
# of FSW files audited (Individual Family Records IFRs/charts)	87	72			159
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS (current quarter)				
Most notable key accomplishment(s)	<ul style="list-style-type: none"> •HFPB had successful quarterly outcomes for January - March 2023. •We are maintaining capacity at 70% or higher. •HFPB provided an English parent support group in January. February was our Spanish-speaking group, and March was our Cerole speaking parent support group. • HFPB Sharonda Crawford continues to participate in Palm Beach County Advancing the Mission Cohort along with Six other Families First employees. • PM Sharonda Crawford presented HFB program information and program strengths to Palm Beach United Way on February 21, 2023. • On February 25, HFPB provided our participant's information about a local Farmshare food giveaway in Pahokee. • PM Sharonda Crawford attended a Mental Health Awareness planning meeting for upcoming events in May. These activities with be held in May in the Glades Western Palm Beach County communities. • HFPB held a SafeKids car seat installation event for our participants at our Forest Hill Office. • On March 28, HFPB provided our participants with information about a local Farmshare food giveaway in Belle Glade. 				

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. 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.
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ANECDOTAL STORY TO SHARE

Our featured Participant this quarter enrolled in our Healthy Families Palm Beach program on 5/15/2020. Our participant is originally from Guatemala and has been married for 16 years. The participant is the mother of four children. The participant enrolled in the program with the support of the initial Family Support Specialist in 2020. The family lives in a three-bedroom house with her husband and her children. Participant and her husband each have their own car and cellphones.

When the participant enrolled in the program, she was employed but decided to stay home after the birth of the baby boy. During labor the mom was diagnosed with Covid-19. Following her child’s birth, our participant struggled to interact and provide proper care for her baby, fearing she would expose him to covid. Mom shared feeling frustrated, however the situation did not stop her from breastfeeding her child and making the best out of such a hard situation. She always wore a mask and was very vigilant in her protection of him and his health.

When the baby was only 6 months old, he suffered a very high fever, causing seizures. The Mother shared, that from that moment on her child’s health deteriorated and she was so worried. Our Participant brought her child to the hospital multiple times, but they only treated the high fever. Mom was also referred to a neurologist for follow up baby’s health condition. The Family Support Specialist assisted mom to make an appointment due to language barriers, however an evaluation could not be completed at the time due to COVID protocols and not having a Spanish Speaker staff available at the neurologist office. The Family Support Specialist offered to go to the appointment to translate, however they only accepted the caregiver and patient to be present. The Family Support Specialist also explored the option of connecting virtually to translate the information, staff mentioned that needed to follow up with supervisor at the time, no clear response. In 2021 the participant continued participation in the program following transition to a new Family Support Specialist. With the Participants permission and with the Family Support Specialist being present on the phone call the appointment with a neurologist was made in February 2021. The child was diagnosed with epilepsy, and he has been taking the appropriate medication to treat his condition. That also has been a struggle for this family as dosage for a growing child change, so frequent communication and visits to the treating neurologist was vital.

This Participant has shown amazing resilience, inner strength, flexibility, and motivation to support all her children’s development and needs. She came to this country 16 years ago from Guatemala to have a better life for herself. Before her last birth she was working to supplement the household, but then the baby became ill, and she didn’t want to be apart from caring for him. The family figured it out financially. Coming to terms with supporting a special needs child, the mother had to learn new skills, but never wavered, as she shared her spirituality “recognizing her journey as a life lesson.”

Referrals have been offered and provided to this Participant. The family has benefited from many community resources. This Mother has also become a great advocate for herself and her family in this process as she becomes more comfortable researching community supports.

The mother recognizes her children’s needs, the importance of education and recreation, and with her husband’s support, basic needs are always met. During the home visits she is consistently curious, engaged, and available to meet. She is enthusiastic about learning new skills and shares her culture and values with the Family Support Specialist. Our participant’s children do well in school, and they are involved in the church music group. The focus child has special needs, however he has a lot of positive family interactions with cousins, aunts, and uncles, as well as with the church community. This Mother has been through a lot in the short time we have been with her, but she has been open, consistent, strong, and resilient. Always thinking to support her children the best she can. The participant is also open to learning new parenting ideas, to improve her family’s quality of life and support her baby with special needs. We are so amazed by this mother’s resiliency and her unconditional love for her family. We are grateful to be here to support her and her family during this time.

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		33						
# of families opened	2		7						9
# of families served	35		40						
# of families closed	2		4						6
Total remaining at the end of QTR	33		36						
# targeted to be served	45		45						
NUMBERS SERVED (unduplicated)	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of Children	83		65						148
# of Adults	39		43						82
PROGRAM REFERRALS	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
# of referrals screened eligible for an assessment	2		7						9
# of referrals screened ineligible for assessment	0		0						0
# of referrals screened and placed on waiting list	0		0						0
# of referrals provided with education and information regarding community resources and services	42		40						82
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	40	40					
Outcome 1 Percent Achieved	97%		100%		#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	40	40					
Outcome 2 Percent Achieved	100%		100%		#DIV/0!		#DIV/0!		#DIV/0!
80% of 20 relative caregivers will receive support group services	16	13	13	13					
Outcome 3 Percent Achieved	81%		100%		#DIV/0!		#DIV/0!		#DIV/0!
90% of 50 families will be successfully linked to supportive services.	35	35	40	40					
Outcome 4 Percent Achieved	100%		100%		#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	10			10
Comments					
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS (current quarter)				
Most notable key accomplishment(s)	<p>During this period, there were seven admissions and four discharges. All discharges were linked to services in the community and family remained intact.</p> <p>In this period, Kin Support staff participated and attended Families First behavioral health and case management meetings to discuss program updates, case staffing, and funding information. In this period, Kin Support staff received training from the Department of Children and Families (DCF) and Family Service Coordinators (FSC) connected with DCF staff to share our efforts in providing services in the Western Community for Kinship families. Kin Support staff attended motivational interviewing and Kinship webinar training as part of our grant requirements and interests.</p> <p>Additionally, in this period, Family Assisted Agencies conducted a monitoring of our KSP program and reported no findings. Program recommendations were provided to the leadership and quality assurance team. These recommendations are in the process of being implemented to better assist families in our community.</p>				
Most notable challenge(s)	<p>During this period, it has been challenging to increase the numbers of admissions in the Western Community. The FSC continues to approach this challenge by participating in community events and completing outreach in schools and communication with agencies. The clinical director is working closely with FSC to help promote program and in the community and has been encouraged to return to local places and maintain constant communication with community partners and leaders.</p>				

ANECDOTAL STORY TO SHARE

Mr. Dexter is an eighty-year-old paternal grandfather, who along with his wife is taking care of their two teenage grandsons of twelve and fourteen years old. He is the main caretaker of the family, as his wife has multiple health issues. They have had legal custody of grandsons for about four years.

When the relative children came under the care of grandparents, they were behind in the academics, besides other social skills, due to situations of negligence from the parents, who have dealt with substance abuse issues. Thanks to the love, care and dedication from client and his wife for the past few years, grandsons have made tremendous progress and achievements in their schools and with any daily living social skills.

The oldest grandson has special needs and the client applied for disability benefits with the help and encouragement from the Family service coordinator (FSC). He attends a school for autism, and he receives the necessary support from the school personnel. The client got youngest grandson tested for the gifted and talented program, and the child is now attending a school that can challenge his academic capacities to the maximum.

Both children continue to receive weekly therapeutic services and are thriving in school. Grandfather has expressed that he feels proud of grandsons and their accomplishments.

From the time the case was opened, FSC linked client with Kin support group services, as he wanted to connect with other relative caregivers who were going through similar situations.

The support group was being conducted via zoom only at the time client started with the program, due to Covid restrictions, however, six months ago, the KSP began opening the doors for in-person meetings, as well as via zoom, for those who felt more comfortable participating online. The client has been attending support group meetings consistently and has expressed the benefit of gathering with like-minded individuals, as well as receiving support and information on resources from staff.

FSC has also provided client with supportive counseling services during home-visits, which have allowed Mr. Dexter a space for venting, brainstorming strategies for the care of grandsons, processing information and better understanding of family dynamics, and education on changes in adolescence, etc.

At this time, the children's parents have requested to get the children back under their care through the courts, and client has been attending the court meetings, which have resulted in the judge's decision for family reunification, as the biological parents appear to have complied with any treatments or court requirements to be able to care for their sons. Mr. Dexter has indicated that Childnet and the Guardian ad litem program will be monitoring the reunification process for the next several months.

Client has expressed that he and his spouse have accepted the court decision of grandsons going back to their parents, even-though they were not expecting to give up on the raising of their grandsons at this time, however, he has indicated that they will continue to provide support from outside and visit the children, whenever it is possible.

This case will be closed in the near future, due to the reunification status, and the client has expressed much gratitude for all the help and support that his family has received through FSC and the program. He will be able to continue participating in monthly Kin support meetings.

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		46						94
# of clients closed	55		31						86
Percent of target to be served- 45 capacity	107%		102%						
REQUIRED TARGETS	QTR 1		QTR 2		QTR 3		QTR 4		TO DATE
45 Assessments (pregnant women) per quarter	48		46						94
60 HIV Tests (all childbearing age) per quarter	71		75						146
60 Pregnancy Tests (all) per quarter	86		82						168
60 Outreach Sessions (all) per quarter	337		314						651
Number of referrals for services (Minimum 90)	103		108						211
Number of verified/completed linkages	84		91						175
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	46	46					
Outcome 1 Percent Achieved	100%		100%		#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	35	35					
Outcome 2 Percent Achieved	100%		100%		#DIV/0!		#DIV/0!		#DIV/0!
100% of babies born to HIV+ mothers will test negative for HIV.	0	0	0	0					
Outcome 3 Percent Achieved	#DIV/0!		0%		#DIV/0!		#DIV/0!		#DIV/0!
Challenges impacting outcomes	During this Quarter TOPWA exceeded its goals. There were no challenges that impacted our outcomes.								
PROGRAM OVERVIEW									
FILE AUDITS	QTR 1		QTR 2		QTR 3		QTR 4		YEAR END
# of files audited including peer reviews	48		46						94
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS (current quarter)								

Most notable key accomplishment(s)	TOPWA Outreach Staff; Nadine D along with 2 of the Families First Interns completed a health and HIV educational presentation at the Farmworkers Council for their monthly support group on 1/19/2023. TOPWA staff conducted their outreach and educational presentation with Wayside House Outpatient and Residential Program (substance treatment provider for women) on February 9th and 16th Staff offered & provided HIV testing to program participants. TOPWA Outreach Worker Nadine Dessaint last Day with TOPWA full time is 3/3/23. Nadine will continue to work with the new Hire and train on a part-time basis as we transition the new hire into her position TOPWA Hired new Outreach Worker Nicole Saunders. And her start Date was 3/21/23. TOPWA Outreach Staff Nadine D, Maura A, and Jocelyne D. conducted community outreach at Children and Head start Services, St. Peter CC Hispanic Ministry, Millennia Companies, El Sol Resource Center, MY clinic, and Childrens Home Society 3/28/2023.
Most notable challenge(s)	During this Quarter one of our Outreach Workers resined from her position. Program Manager was able to hire another Outreach Worker (Nicole Saunders) in this quarter.

ANECDOTAL STORY TO SHARE

TOPWA Outreach Worker met a pregnant woman who is 23-year-old and in her second trimester. The worker found the woman at the Rivera Beach mobile homes while doing outreach. The woman was from Guatemala and came to the United States in 2013 with her 2-year-old son. The woman was traveling here to meet with her boyfriend and her daughter. The woman struggles on understanding because she only speaks Akateco dialect and does not know how to read or write. The worker introduced the TOPWA program to the woman and offered the services to her. The woman accepted and was enrolled. While completing the assessment the woman stated that for her to move around, she needs to pay taxi and a translator. This was causing her a lot of stress and a financial strain as her boyfriend is the only one working. While the TOPWA worker was completing the assessment; the woman disclosed that she had been in a previous domestic violence relationship with her ex-boyfriend, who is the father of her 6 children from a prior relationship. The woman shared that she tends to move around a lot due to her fear of feeling unsafe. The outreach worker discussed Domestic violence information and resources, and the woman said she would review it. The outreach worker assisted the client in connecting with Healthy Mothers Healthy Babies for transportation and other Parenting services that would assist with this pregnancy. The worker assisted this mom by linking her with the health department nutritionist and WIC Program. The worker then referred and linked the woman to Child First to help with providing translation and setting up appointments. The Outreach worker made sure that she wrapped and connected services during the assessment session.

Infant Mental Health

Second Quarter Report, January 1- March 31

Date: April 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		9						20	
# of clients opened - Adult 1st box Child 2nd box	0	4	0	11					0	15
client enrolled during previous quarter and still active in current quarter. Plus, new enrollments.	15		20						35	
# of clients closed - Adult 1st box Child 2nd box	1	5	2	7					3	12
Total Referrals	39		13						52	
# of CSC clients served	9		7						16	
# of Headstart clients served	7		12						19	
# clients on waitlist at the end of the quarter	24		16						40	
# of clients served in School only	3		9						12	
# of clients served in home/office/telehealth only	8		7						15	
# of clients served in both settings	5		4						9	
# of formal classroom observations	30		29						59	
PROGRAMMATIC OUTCOMES										
	QTR 1		QTR 2		QTR 3		QTR 4			
Successful closures	1		3						4	
Closure before completing services	1		0						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	3	3						
Percentage Achieved	100%		100%		#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	3	3						
Percentage Achieved	100%		100%		#DIV/0!		#DIV/0!		#DIV/0!	
80% of children identified as having developmental delays will receive appropriate referrals	1	1	0	0						
Percentage Achieved	100%		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	

Challenges impacting outcomes	none				
HOUSEHOLD COMPOSITION	QTR 1	QTR 2	QTR 3	QTR 4	TO DATE
Types of household (unduplicated)					
Single Parent	7	2			9
Married Couple	5	2			7
Cohabiting couple	3	0			3
# of Children	34	22			56
# of Adults	29	16			45
PROGRAM OVERVIEW					
ACCOMPLISHMENTS & CHALLENGES Current Quarter	COMMENTS				
# of files audited	4	12			16
Most notable key accomplishment(s)	This quarter 29 classroom observations were completed in 12 Head Start Centers throughout Palm Beach County. IMH program has been approached by Luthern services due to our outstanding work so far this year and we have been asked to work with additional Head Start Programs next Quarter and next school year.				
Most notable challenge(s)	High number of referrals with out enough staff to accomodate. We also only have one part time person who speaks Creole and we have many Creole speaking referrals. Having only the Director and one part time licensed clinican is challanging as the classroom observations must be completed by a licensed clinican.				
ANECDOTAL STORY TO SHARE					
<p>A 4-year-old student was identified during our first round of classroom observations in the Head Start Center in November as having symptoms of autism spectrum disorder. The student had global developmental delays, no communication skills, and was unable to participate in the day's classroom activities. The school social emotional counselor reported that the parents do not endorse that the child has any developmental issues and feel that he will "outgrow" the concerns. The family are recent immigrants from Haiti and the therapist assigned to the case is not Haitian. Though there initially were some language barriers and there seemed to be a cultural resistance to the IMH assessment and treatment the family participated at the urging of the school. Despite cultural differences and language barriers at times, the clinician was able to work with the school counselor who is Haitian and the father to help him understand the results of developmental screeners and the assessments. The IMH intern worked in the classroom with the student paired with the IMH therapist and the two gave the child the support he needed to start engaging in the school activities, communicating with his teacher and peers, and learning some basic communications skills. With the support of the therapist the school was able to initiate the IEP process for the child with the parents' consent and participation. The child is finishing the school year with an IEP in place for next year. He will be attending a specialized school for kindergarten next year with in the Palm Beach County School system with a program that addresses his Autism and his global delays. This is our first student to discharge from our Head Start IMH services successfully this year.</p>					