



# **Wesley House Family Services**

**Helping Our Community One Family at a Time**

## **Quality Assurance/Quality Improvement Report 2019-2020**

# **Mission, Vision, Core Values and PRIDE Competencies**

## **Wesley House Family Services Mission Statement**

*Wesley House Family Services promotes and enhances the safety, well-being, and development of children by educating, supporting, and meeting the needs of families.*

## **Wesley House Family Services Vision Statement**

*To develop and encourage a more child caring community.*

## **Wesley House Family Services Core Values**

- Service
- Social Justice
- Dignity and Worth of Person
- Importance of Human Relationships
  - Integrity
  - Competence

## **Parent Resource for Information, Development and Education (PRIDE) Competencies**

- Protecting and Nurturing Children
- Meeting Children's Developmental Needs and Addressing Developmental Delays
  - Supporting Relationships between Children and their Families
- Connecting Children to Safe, Nurturing Relationships intended to last a Lifetime
  - Working as a member of a Professional Team

## **Commitment to Quality**

Wesley House Family Services (WHFS) is committed to maintaining an ongoing Quality Assurance/Quality Improvement (QA/QI) process. The Chief Executive Officer, the Board of Directors, and all staff are committed to providing services of the highest quality to clients in all agency programs.

WHFS approaches quality management as both quality assurance and quality improvement. “Quality Assurance” is the monitoring of the portion of the work we all do to high standards, implementing best practices every day that are reflected in the various contract compliance measurements for each department or program.

“Quality Improvement” references areas where we have self-identified a need for improvement; this can be an area of contractual performance where we are falling short of our target goals, or any other area of measured performance that we wish to improve.

The QA/QI process is based on the following assumptions:

1. All clients are provided with services appropriate to their individual and family needs.
2. The delivery of services is relevant, accessible, culturally sensitive, and responsive to clients, families, and the community.
3. Service administration and delivery are subject to ongoing assessment in order to evaluate and improve quality.
4. Client, stakeholder, community, staff, and Board members’ input are critical components in the monitoring and evaluation process.
5. Defining, gathering, analyzing, and measuring data and outcomes are an integral part of the QA/QI system.

The primary purpose of the WHFS QA/QI Report is to share information regarding our performance and areas for improvement with clients, staff, and community stakeholders.

## Reaccreditation

In January 2020, Wesley House Family Services (WHFS) successfully completed re-accreditation through the Council on Accreditation (COA), an international, independent, nonprofit accreditor of human service organizations. Accreditation is an ongoing agency and program-wide process that requires all staff to work together to evaluate all of our programs and administrative functions to ensure that we are implementing best practices and meeting or exceeding performance targets in line with our agency's mission, vision, and core values.

For the most recent reaccreditation, WHFS was reviewed in three general sets of standards that are broken down into 14 individual, specific areas of review:

- Administration and Management
  - Ethical Practices (ETH)
  - Financial Management (FIN)
  - Governance (GOV)
  - Human Resources Management (HR)
  - Performance and Quality Improvement (PQI)
  - Risk Prevention and Management (RPM)
- Service Delivery Administration
  - Administration and Service Environment (ASE)
  - Behavior Support and Management (BSM)
  - Client Rights (CR)
  - Training and Supervision (TS)
- Service Standards
  - Adoption Services (AS)
  - Early Childhood Education (ECE)
  - Family Foster Care and Kinship Care (FKC)
  - Family Preservation and Stabilization Services (FPS)

As part of the reaccreditation process, feedback is provided by COA that identifies strengths and areas for opportunities.

Areas of strength identified by COA are listed below:

### Administration and Management Standards

- |     |   |
|-----|---|
| ETH | The organization possesses a strong sense of ethics which is modeled by the CEO, management team, and the staff. The Board of Directors also shows a strong sense of ethics and has an expectation that ethical behavior will be woven into the fabric of the organization's culture. |
| FIN | The organization has strong internal control policies and measures in place. It is supported by a competent Finance and Accounting Team as well as a strong   |

advocate on the Board who oversees the reports provided to the Finance Committee.

- GOV Wesley House Family Services has an extremely dedicated Board who supports the organization wholeheartedly. There are strong Board recruitment and development procedures in place. The organization has an advisory Board and a full Board in place. The annual staff meeting with Board, staff, and community stakeholders is well attended and outstanding.
- HR Volunteer job descriptions have been created for all volunteers as well as procedures to ensure client safety and well-being. Staff contacts are updated on an annual basis so that communication during times of severe weather is unimpeded.
- PQI The QA Director shares data with the CEO, who shares it with the Board. The organization has made significant progress in the area of performance and quality improvement through the accreditation process.
- RPM Wesley House Family Services has a strong IT program and the organization's case records are well managed.

#### Service Delivery Administration Standards

- ASE The organization conducts monthly walk throughs of the buildings. When services are needed that cannot be done by the organization, they contract out so that work is done in a timely manner. This mitigates risk for the organization. The disaster plan is comprehensive and very strong.
- BSM The organization uses video technology to train all offices. The prevention staff are trained in motivational interviewing and CBT, which targets the needs of the clients. The behavior support and management policy is very strong.
- CR The rights and responsibilities are written in a manner that is appropriate for the consumer. Grievances are addressed at multiple levels of the organization to ensure accountability and that the concern is addressed.
- TS There is a well-organized system of tracking and monitoring training at the organization. All staff are trained in First Aid and the organization has a staff person who is qualified to teach First Aid. The organization sends staff to Train the Trainer workshops so that they can give presentations to staff. Supervision occurs as a group and individually.

### Service Standards

- AS The organization has dedicated staff in this program. Policies have been developed to support successful implementation of this service. The staff have a great deal of expertise and knowledge about the field of adoption.
- ECE This is a wonderful program that is managed by a highly qualified director and very caring teachers. The team works well together in the program. Training is a priority for the staff members. It is evident that the children are safe and happy and have excellent relationships with the staff and the director.
- FKC A mental health assessment is done immediately for all children as necessary, which is a strength. The service plans are comprehensive. There is a strong director of the program who is well versed in child welfare. The director utilizes data to implement new processes to improve outcomes. Case assignments are well thought out.
- FPS The program utilizes a sound model to work with the families. Motivational interviewing training and CBT training target the needs of the family. Case assignments are well thought out according to location and skill. Supervision occurs weekly.

Areas of opportunity identified by COA, and steps taken to address these areas include:

- PQI The organization submitted a report that includes some outcome data, but it does not appear to include a date or have been distributed yet to staff to include the elements of this standard.
- Steps Taken: WHFS Leadership has committed to production of a QA/QI report encompassing performance data for all programs to be produced at the end of each fiscal year, and provided to staff, clients, and community stakeholders. This is the first such QA/QI report.
- ETH While a conflict of interest policy exists, it is for the members of the Board of Directors. There is no conflict of interest policy for staff.
- Steps taken: A Conflict of Interest Policy for staff has been drafted by Human Resources and is undergoing review by the CEO and Quality Assurance/Quality Improvement (QA/QI) Committee. Approval is anticipated prior to January 1, 2021.
- HR Employee satisfaction surveys are implemented every 18-24 months. No evidence was presented in regard to satisfaction and retention goals and measures.

Steps taken: Both the Quality Assurance Director and the Human Resources Manager have standing task reminders to administer the Employee Satisfaction Surveys annually in September of each year. Satisfaction and retention goals are under development.

CR Many of the client files reviewed did not include signed client rights.

Steps taken: In November 2019, WHFS approved a Client File Review policy that requires Quality Assurance staff to conduct quarterly client file reviews for Full Case Management, Inez Martin Child Development Center and Strengthening Families Preventions Services client files. (Note, Healthy Families accreditation through Healthy Families America incorporates client file reviews as per that program's requirements).

TS There is no documentation of supervisory meetings between staff and supervisors.

Steps taken: Effective June 26, 2020, all supervision that is not case specific, both individual and group supervision, will utilize formal written agendas. This requirement applies to all programs and departments at WHFS.

FKC There is no evidence that foster parents receive information regarding respite options prior to placement and on a regular basis.

Steps taken: In May 2020, WHFS approved a respite policy and a receipt of respite policy acknowledgement form that is required to be provided to foster parents at initial licensing and annually for each relicensing. The receipt form must be signed and is added to the family's licensing file.

Wesley House is committed to ongoing performance monitoring and performance improvement. The Annual QA/QI Plan for 2020-2021 will incorporate the feedback above as well as agency, client, and stakeholder identified areas of performance monitoring and improvement.

## **Quality Assurance/Quality Improvement Committee**

From July 1, 2019 until June 26, 2020, the agency's Quality Assurance (QA) Committee was comprised of the following program/department staff members:

Lindsey Betterman, Chair (Adoptions), Nicholas Ratcliffe, Alternate Chair (Information Technology/Facilities), Mary Falconer, Secretary (Administration), Natasha Blanco (Support Staff), Roxy Castro (Finance), Bailey Colston (Quality Assurance), Klara Hale (Healthy Families), John Mahoney (Facilities), Angelica McCoy (Quality Assurance and Licensing), Yovanna Ramos (Child Care Teacher), Jane Reichardt (Full Case Manager Supervisor), Morgan Smeraldi (Parenting Facilitator Coordinator), Joy Thompson (Healthy Families and Preventions), Amber Wookey (Full Case Management).

This QA Committee was primarily focused on internal employee satisfaction issues rather than policy and performance focused quality management issues.

Effective June 26, 2020, the committee was revamped and renamed to better meet accreditation requirements and to provide a stronger committee able to implement and effect changes. The new QA/QI Committee was created to include members who can influence policy change. With these new members, the focus of the meetings relates to internal QA issues to promote overall improvement throughout the agency. The QA/QI Committee is now comprised of the following program/department staff members:

Aleida Jacobo (CEO), Christine Patterson (Child Care Site Director), Yolanda Noguerras (Director of Prevention Services), Klara Hale, Healthy Families Supervisor, Tiffany DaSilva (Community Based Care Director), Eric Fisher (Training Coordinator), Megan Burgess (Foster Parent Coordinator), Scott Shores (IT and Facilities Manager), Nicole Moynihan (Quality Assurance Coordinator), Jane Reichardt (CBC Manager Lower Keys), Kenneth Williams (CBC Manager Upper Keys), Greg Wheeler (CFO) and Angelica McCoy (Quality Assurance and Licensing Director).

The QA/QI Committee meets on the second Tuesday of each month, using a hybrid meeting format involving in-person attendance and use of Microsoft Teams. Standing agenda items for the Committee include monthly program performance reports, review of critical incident trends, and review of Client and Employee Satisfaction Survey results. All WHFS staff members have the ability to request that the Committee add agenda items; this can be done by contacting the QA and Licensing Director or the employee's program/department representative.

## **Program and Department Performance**

Wesley House Family Services is committed to monitoring performance and quality of services throughout the organization. Updates on the performance and accomplishments of each department and program are provided below.

### **Finance Department**

- The annual Financial Audit resulted in an unqualified “clean” opinion; the highest rating possible.
- We received GuideStar Platinum status putting our financial management at the top half-percent of non-profits nationally.
- Fundraising totaled more than \$350,000 for the fiscal year. All monetary donations are used for the support of the children and families we serve; none of these funds are used for agency overhead, salaries or staff compensation.

### **Human Resources Department**

- Agency retained 100% of its Management staff through the 2019-2020 fiscal year.
- Agency retained 81% of its Non-Management staff through the 2019-2020 fiscal year.
- Overall staff retention rate for the 2019-2020 fiscal year was 84%.
- Three staff earned Master’s level degrees utilizing the Wesley House staff scholarship program.

### **Information Technology/Facilities**

- Microsoft Teams is in use agency-wide and has greatly facilitated the agency’s ability to continue to work remotely during the COVID 19 pandemic.
- Microsoft Teams was utilized to facilitate the agency’s first ever virtual PRIDE classes.
- Wesley House Family Services’ website is updated regularly and now contains the agency Privacy Policy and Terms of Service for those who access the website.
- All computers, laptops, and other communication devices continue to use encryption software to protect client information.

### **Training Department**

- Training Coordinator became a Florida Certification Board recognized trainer.
- Three Pre-service training cycles were completed during the 2019-2020 fiscal year.
  - 100% of pre-service participants passed their exam for provisional certification.
  - Five staff members earned their Child Welfare Case Manager certifications through the Florida Certification Board.
  - One staff member earned their Child Welfare Licensing Counselor Certification.

### **Inez Martin Child Development Center**

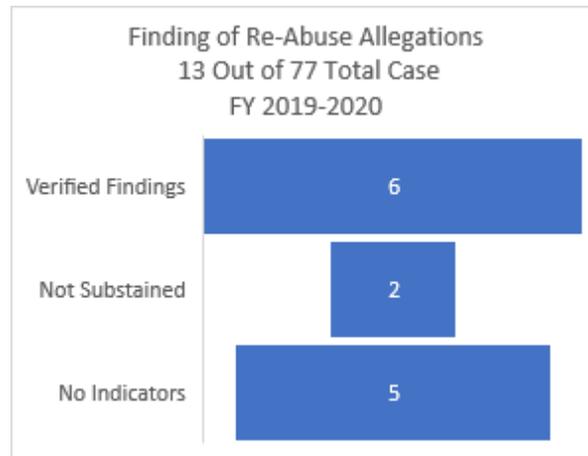
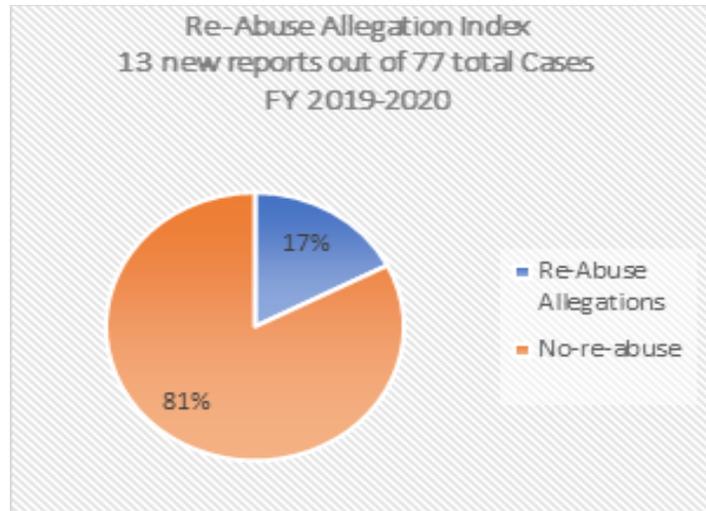
- Inez Martin has maintained its Gold Seal status through the 2019-2020 fiscal year
- An average of 76 children, ages 18 months through five years attended Inez Martin during the 2019-2020 fiscal year.
- 17 students completed Voluntary Pre-Kindergarten (VPK) and will enter Kindergarten for the 2020-2021 school year.
- Many children enrolled at Inez Martin speak languages other than English; there are 12 different languages spoken by children enrolled at the school.
- Inez Martin has remained open during the COVID 19 pandemic, providing an invaluable service to the children of essential personnel.
- The Backpack for Kids program continues, providing children and families with nutritious food during times they are not in attendance at the school.

### **Healthy Families Monroe**

- Served 90 families for a total of 155 children during the 2019-2020 fiscal year.
- There were zero incidents of domestic violence or child abuse/neglect reported for the families receiving services through Healthy Families for the 2019-2020 fiscal year.
- Six families graduated from the program in October 2019; all six families had completed five full years of the voluntary program.
- The program has expanded to provide services county-wide, from Key West to Key Largo.
- The Key West Woman's Club hosted a baby shower for 20 new and expecting mothers and families.

### **Strengthening Families Preventions Services**

- Program is fully staffed with four Master's level therapists, one Master's level Parenting Specialist, and a Bachelor's level case manager.
- Evidenced based practices, such as Motivational Interviewing and Brief Strategic Family Therapy are in the process of being implemented.
- Program provided services to 77 families and 150 children.
- WHFS Strengthening Families Prevention program is the host to a weekly meeting with the Department of Children and Families and the Domestic Abuse Shelter, in which we come together as community partners to serve the families and children in Monroe County. The collaboration as partners has significantly reduced the number of families that re-enter the child welfare system.
- 81% of families served had no re-abuse allegations after case closure, see charts below.



### Full Case Management

- Successfully closed 55 cases with a total of 80 children during the fiscal year.
- Met State requirements for face-to-face contacts with Biological Parents with a goal of reunification every month of the 2019-2020 fiscal year.
  - Targets are face to face contact with 75% of mothers and 50% of fathers each month.
- All children under Protective Supervision and all children receiving In-Home Non-Judicial Services were seen face to face in or at their homes each month during the 2019-2020 fiscal year.
- 75% or more of sibling groups in out-of-home care were placed together throughout the 2019-2020 fiscal year.
- WHFS was the Southern Region's top performer on State Identified Metrics of Concern measurements for the 2019-2020 fiscal year. See charts below showing WHFS' performance compared to other Southern Region agencies for the month of June 2020 and WHFS's performance on those measurements throughout the fiscal year.

June_2020						
Measure	CITRUS	CFCE	CHS	FRC	WH	Goal
Rate of Abuse or Neglect per 100,000 Days while in Foster Care	7.85	9.64	6.46	7.9	3.91	8.04
% of Children not Abused While Receiving In-Home Services	97.4%	96.3%	96.7%	98.6%	99.09%	95%
% of Children w/no Maltreatment within 6 mos. TOS	98.5%	98.3%	98.1%	98.8%	100%	95%
% of Children under supervision seen every 30 days	99.8%	99.7%	100%	99.8%	100%	99.5%
% of Children exiting to Permanent home within 12mths	34.8%	37.4%	35.3%	34.4%	36.9%	40.4%
% of Children over 12 mos. In FC that exit FC before 24mos	54.2%	61.6%	52.3%	57.5%	75.0%	43.7%
% of Children Not Re-Entering within 12 mths Permanency	86.9%	77.6%	87.9%	91.2%	94.7%	91.7%
Average Number of Placement Moves per 1,000 days in FC*	4.03	3.65	4.72	4.15	2.9	4.12
% of Children in FC who received Medical Svcs last 12mth	95.5%	92.4%	96.4%	97.1%	98.1%	95%
% of Children in FC who received Dental Svcs in last 7 mths	75.3%	57.8%	85.8%	79.3%	97.3%	95%
% of Aged Out Young Adults enrolled in Secondary Ed	88.3%	80.5%	88.4%	100%	85.7%	80%
% of Sibling Groups where All Siblings are placed together *	56.2%	53.7%	51.6%	59.7%	75.0%	65%

Metric (Measure)	Measures for	Rate of Abuse or Neglect per 100,000 Days in Out-of-Home Care SM01	% of Children not Abused While Receiving In-Home Services SM02	Maltreatment within	% of Children under supervision seen every 30 days SM04	% of Children exiting to Permanent home within 12mths SM05	% of Children over 12 mos. In FC that exit FC before 24mos SM06	% of Children Not Re-Entering within 12 mths Permanency SM07	Average Number of Placement Moves per 1,000 days in FC SM08 *	received Medical	received Dental	% of Aged Out Young Adults enrolled in Secondary Ed SM11	% of Sibling Groups where All Siblings are placed together SM12 *
Month	Goal	8.04	95%	95%	99.5%	40.4%	43.6%	91.7%	4.12	95%	95%	80%	65%
July_19	FY 19-20 Q1	3.38	97.8%	94.3%	100%	46.3%	54.8%	56.2%	3.72	100%	100%	100%	82.3%
Aug_19		3.12	97%	94.9%	100%	42.6%	53.5%	57.14%	3.19	100%	97.9%	100%	78.6%
Sept_19		3.15	96.9%	94.6%	100%	46.5%	51.8%	64.2%	3.58	98.6%	100%	85.7%	81.2%
Average	Q1	3.22	97.2%	94.6%	100%	45.1%	53.4%	59.2%	3.5	99.5%	99%	95.2%	80.7%
Oct_19	FY 19-20 Q2	3.21	96.9%	94.2%	100%	48.1%	48.1%	69.2%	3.84	100%	100%	83.3%	86.1%
Nov_19		3.27	97.8%	94.1%	100%	45%	53.5%	60%	3.9	100%	100%	80%	93.3%
Dec_19		3.38	97.7%	93.3%	100%	43.3%	70%	63.6%	3.73	100%	100%	75%	92.3%
Average	Q2	3.29	97.5%	93.9%	100%	45.5%	57.2%	64.3%	3.82	100%	100%	79.4%	90.6%
Jan_20	FY 19-20 Q3	3.48	97.8%	98.2%	100%	49.1%	76.1%	70%	4.37	100%	97.8%	75%	92.3%
Feb_20		3.59	97.9%	98.4%	100%	46.3%	72.7%	75%	3.85	100%	97.8%	80%	91.6%
Mar_20		3.64	98.06%	98.5%	100%	42.0%	75.0%	94%	3.4	100%	97.7%	83.3%	90.9%
Average	Q3	3.57	97.9%	98.4%	100%	45.8%	74.6%	80%	3.87	100%	97.8%	79%	91.6%
April_20	FY 19-20 Q4	3.72	98.1%	98.5%	100%	34.04%	72.2%	95.0%	3.36	100%	93.1%	85.7%	81.8%
May_20		3.83	99.1%	98.4%	100%	32.6%	83.3%	94.7%	2.99	98.4%	82.9%	85.7%	90.9%
June_20		3.91	99.09%	100%	100%	36.9%	75.0%	94.7%	2.9	98.1%	97.3%	85.7%	75.0%
Average	Q4	3.82	98.8%	99.0%	100%	34.51%	76.8%	94.8%	3.08	99%	91.1%	85.7%	82.6%

## Adoptions

- Exceeded the target of 25 finalized adoptions during the 2019-2020 fiscal year by one; 26 adoptions were finalized during the fiscal year.
- Finalized adoptions included four sibling groups.
- One finalized adoption was for a young adult after reaching the age of 18.

## **Foster Home Licensing**

- WHFS began licensing relative and non-relative caregivers as Level I (“Child Specific”) foster homes in September 2019.
- 11 families were licensed as Level I caregivers between September 2019 and June 2020, these families provided care for a total of 15 children.
- WHFS exceeded the June 30, 2020 target for proportion of children in Level I licensed care versus non-licensed relative/non-relative care. Target was 30% of the children in this cohort would be placed in Licensed Level I homes; as of June 30, 2020, we had reached 41%.
- Facilitated three cycles of PRIDE classes for prospective foster and adoptive families during the 2019-2020 fiscal year, one cycle of which was conducted “virtually” using Microsoft Teams due to social distancing requirements resulting from the COVID-19 pandemic.
- Five families were licensed as Level II (“traditional”) foster homes during the 2019-2020 fiscal year, providing a capacity of ten additional available foster home beds.

## **Other Quality Assurance/Quality Improvement Initiatives and Actions**

As WHFS strives to provide quality services to the community, we continue to evaluate our programs and services to inform and implement best practices and improve client outcomes. Those efforts include the development and implementation of tools and practices to support staff in the delivery of services to children and families. Below is a listing of some of the tools and practices we have implemented or continued through the 2019-2020 fiscal year. Please note that this list is not all-inclusive and that we continue to refine our practices and tools.

- Design and implementation of “Safety Methodology Timelines” for full case management cases. Upon receipt of each new intake, QA staff completes timelines for the case managers that inform as to due dates for specific documentation requirements, such as completion of Family Functioning Assessments, completion of Case Plans and completion of Progress Updates.
- Design and implementation of “Preventions Case Timelines” for Strengthening Families Preventions cases. These timelines are similar to those provided to case management but are specific to the type of preventions case and the requirements specific to those case types, Formal Safety Services, Family Services or Family Support Services.
- Monthly Strengthening Families Preventions case reviews conducted by QA Staff. These reviews look at the various documentation and timeliness requirements for the three categories of preventions cases and provide scores for each case reviewed.
- Monthly QA reviews of case management case notes, specifically home visits and biological parent for required content.

- Implementation of quarterly Client File Reviews for required content for Inez Martin, Strengthening Families Prevention Services and Full Case Management.
- Monthly reports from the Healthy Families Monroe program that provide information on progress towards program goals, such as completed home visits and child immunizations.

WHFS continues to adapt to changes in service requirements and changes within the community to improve outcomes for the children and families whom we serve. The QA/QI Plan for 2020-2021 addresses the actions that will be taken to continue to improve the quality of service provision through the next fiscal year.