



Quality improvement at Advocate Program: A Journey to Excellence. 2018 Annual Report.

“It’s not what we do, it’s what we make happen!”

Measuring the quality of service delivery, service environment and program efficacy is a fundamental step toward increasing social change and enhancing public safety in our community and in Miami-Dade & Monroe County. The organization’s passion and commitment in making a difference in the community is the driving force behind the operations, service approach and mission of the agency. Advocate Program (AP) works with families impacted by high conflict and exposed to violence, and to stably house Veterans and their families who are homeless or at risk of being homeless. AP is a dedicated nonprofit organization that offers treatment, co-parenting, family and veteran services and DUI and traffic programs.

As a multi-faceted community agency that understands the value and importance of implementing a quality improvement system in the organization. Performance and Quality Improvement (PQI) is a systematic, on-going organization-wide procedure that allows to assess and improve the quality and effectiveness of processes and services for all consumers, staff members and all other valuable stakeholders. The main objective of the organization’s PQI efforts and strategies is to adapt processes and policies based on data driven decisions. The environment at AP for PQI is one of openness and inclusiveness which all staff have equal access to, and input into.

The PQI process requires the organization to regularly ask and answer, “How good are we at doing what we do everyday?”. Being able to answer this question to the satisfaction of all stakeholders establishes our accountability. To address how we can become better and effective, establishing a PQI process is essential. It requires to regularly analyze how well the agency is achieving desired goals, identify trends that show how well such goals are achieved and design policies and procedures to improve the quality of all programs and of the PQI process itself.

OUR STRATEGY

AP adheres to the organization's mission and values by ensuring that practices are in place to ensure effectiveness and excellence. This begins with a strategy that connects the core values with service driven approach. The strategy defines measures and outcomes that indicate the organization is achieving the strategic goals. These measures include:

- Policies and procedures that promote service delivery and a safe environment
- Client outcomes that promote improves safety and wellness
- Leadership and management strategies that lead to improved service delivery
- Employee wellness and satisfaction
- Accessibility to timely and quality services
- Contract Compliance
- Risk reduction
- Standards of care that fall within or above the national average of care

AP's Information Technology Department (IT) has implemented valuable resources that are vital in providing the organization with a data-driven environment for agency planning and decision making at all levels. The use of software and technology allows for data tracking, outcome reports, demographic details, case load totals and other important data. In addition, AP identifies PQI through the systematic review of a variety of data sources, including but not limited to:

- Complaints, grievances and appeals
- Incident tracking
- Facility site checks and reviews
- Quarterly case record reviews
- Service utilization reports
- Supervision and observation
- Program-wide audits
- External monitoring reports



OUR IMPACT

Advocate Program has several accredited programs and services. In the year 2018, AP served nearly 1,600 clients in the community under these services, including nearly 280 families exposed to high conflict and violence and nearly 350 Veterans and their families from Miami-Dade and Monroe County¹.

Advocate Center for Training and Treatment (ACTT) Clinical Services Division

Since 2002 the Clinical Unit of AP understands the importance of being guided by the principles that are known to maximize service delivery effectiveness. Principles such as targeting the criminogenic risk and need and being responsive in programming to increase effectiveness. ACTT sets two goals annually in order to assess overall performance and client outcomes:

1. Successful discharge for 75% of those admitted to treatment.
2. Clients (80%) will feel able to make better choices as a result of the services provided.

Results:

For the service year of 2018 a total of 351 clients were admitted to outpatient services. Of those, 70% of program participants successfully completed the program upon discharge. These clients tested negative at discharge, demonstrated a change in functional status.

Of those clients who were successfully discharged, 82.76% reported that they feel they will make better choices based on what they gained during treatment.²

Bridging Families & Communities (BFC)

Wrap Around Services for Families involved in High Conflict & Domestic Violence

BFC's vision is to build the community's awareness and capacity to identify children exposed to domestic violence and high-conflict, and provide access to coordinated, comprehensive services through a family-centered system of care to improve the wellbeing of children and families. The program sets several goals to target on an annual basis. During the contract year of August 1st, 2017 to July 31st, 2018, BFC targeted the following goals:

1. Care Coordinators are to serve 150 families and Child and Family Specialists are to provide short term clinical services to 100 families.
2. Reduce risk of child maltreatment (75%) as measured by The AAPI (Adult and Adolescence Parenting Inventory)

¹ Data does not include individuals served under AP's Community Corrections and Domestic Violence Offender Units.

² Results were taken from satisfaction surveys voluntarily completed by clients that completed the Program.

Results:

For the contract year of 2017-2018 all goals were met or surpassed by the program. Care Coordinators served 161 families while Child and Family Specialists served 118 families. Overall a total of 279 families were served. Only 11 families withdrew from services and were unable to complete the program successfully. The tracking of the AAPI pre and post testing resulted in 81% of families served reporting a low risk of abusive parenting behaviors upon completion.

Advocate Program DUI School
Florida Licensed DUI School

Licensed by DHSMV since 1995 the purpose of the program is to provide alcohol education to those who are first-time and repeat offenders in Miami-Dade and Monroe Counties. The program enhances public safety and promotes social change through substance abuse driver risk assessments, education and counseling referral. The program sets two goals annually in order to assess overall performance and effectiveness.

1. Successful completion rate of 80% of those enrolled,
2. Clients (80%) will feel able to make better choices as a result of the services provided.

Results:

For the calendar year 2018 a total of 1,425 clients enrolled in the DUI program. Of these, 250 did not complete their program requirements, and 410 remain active. Based on this analysis, 75.4% completed the DUI School components of their program within the required timeframe³. Of those client who completed the program, 84.48% reported that they will make better choices thanks to the DUI educational program and service delivery.

VET-Haven

Housing Chronically Homeless Veterans through Local Vouchers

The VET-Haven program strives to obtain housing and maintain permanent housing stability on a long-term basis for Veterans who are chronically homeless. The program aims at helping service recipients overcome barriers and links them to resources and services that will allow them to remain stably housed long-term. The program goal is to have stably housed a total of 80% of service recipients at exit.

Results:

During the contract year of October 1st, 2017 through September 30th, 2018 a total of 45 chronically homeless Veterans were served and **88%** of program participants were stably housed at program exit.

³ This number includes those clients who are still active because they are pending completion of treatment with an external provider of service.

Veteran Supportive Services Unit (VSSU)
Housing & Supportive Services for Veteran Families

The Program's goal aimed at ending veteran homelessness in Miami-Dade and Monroe Counties. Through the Department of Veterans Affairs Supportive Services for Veteran Families Program, AP has been able to assist thousands of Veterans and their families' transition out of homelessness and move into permanent housing since 2011.

VSSU's goals are

1. Stably house 80% of service recipients.
2. Meet or exceed the national average of time to stably house veterans and their families.

Results:

During the contract year of October 1st, 2017 through September 30th, 2018 a total of 334 Veterans and their families were served. The program cases are classified by two categories. Category 1- are classified as Veteran families who are housed but are at risk of being homeless and Category 2- are classified as Veteran and their families who are chronically homeless. The program was able to stably house 89% of category 1 clients and 68% of category 2 clients. Overall the program had a success rate of 72%. The current national average for housing Veteran families is 84 days. VSSU's average was 66 days.

AP Overall

AP set the following agency wide program goals for service year 2018 as follows:

1. Maintain a safe service environment.
2. Maintain a stable and satisfied workforce.
3. Maintain compliance across all contracts, laws and regulations.
4. Ensure a high standard of service delivery through timeliness in service delivery and proper case decision making.

Results:

Quarterly reviews of incidents and accidents revealed that AP had no at fault accidents at any location. Staff surveys demonstrated significant satisfaction with AP's work environment and general culture (92.5%). All staff felt that their work was making a positive impact in the community. Additionally, 100% of staff members reported an understanding how their job position aligns with the Organization's mission. The Program had a staff retention rate of 73% for the year 2018, which was 12% lower than the previous year. Case records reviews revealed appropriate case decision making and service delivery. Case records reviews and external monitoring reports/audits demonstrated compliance across all contracts and grant requirements.

OUR AREAS OF IMPROVEMENT

The PQI process identified the following areas of improvement:

- Programs need better methods to identify high risk cases and barriers to care to improve overall success rates.
- Collaborative relationships with housing developers and landlords are needed to improve access to affordable housing.
- Improved software and technology are needed to improve data tracking and client outcomes.
- Strategies to improve staff retention and mitigate staff turnover are needed.
- Increased training and supervision to support staff to ensure all required documentation is included in the case record.
- Improved structures for communication flow between leadership and staff are needed.

WHERE DO WE GO FROM HERE?

Internal quality monitoring of processes at AP continues to be vital in enhancing internal process and system to reach program annual goals. Outcome measurement will continue to be of the highest priority. The data gathered is used to develop the 2019 Strategic Plan and individual program goals.

2019 Strategic Initiatives:

- *Develop a comprehensive staff recruitment and wellness plan to improve hiring of qualified staff and recruitment of volunteers, staff morale, and employee retention.*
- *Develop marketing & outreach materials for stakeholder expansion.*
- *Improve use of technology for the delivery of services.*
- *Expand and improve services to increase sustainability.*

2019 Improvement Projects:

- *Improve data tracking, analysis & reporting.*
- *Improve general security and identification of clients.*



Performance and Quality Improvement Team

The PQI team is designed to ensure the quality of service delivery and service environment meets standards of excellence within the organization. The team will assess and monitor that all services and processes are performed appropriately and effectively. The team will ensure vital information is communicated when achievements, concerns and issues are identified.

PQI Team

Milton Fonseca	Director of Performance and Quality Improvement
Isabel Perez-Morina	Chief Executive Officer
Marcia Hasbani	Director of Human Resources
Jessica Bormey	Director of Finance
Althea Birch	Director of Housing and Veteran Services
Gary Chapell	Director of DUI Program
Maria Mena	BFC Program Manager
Allan Elliot	Finance Manager
Esperanza Gooden	Operations Manager
Alexander Hernandez	Clinical Supervisor
Katherine E. Tavarez	ACTT Program Coordinator
Barbara Martin	Records Custodian

Acknowledgement

As a service driven organization, AP has committed itself to being an agency that promotes innovative and transformative work, leading the community in providing essential information, guidance and skills through the services, supervision, education and leadership. Organizational commitment to quality is a direct extension to the core values of integrity, compassion, excellence, dedication, empowerment and collaboration.

- **Integrity:** AP operates in accordance with its stated values and expects all team members to act accordingly.
- **Compassion:** AP believes that compassion is the foundation for all service approach and delivery.
- **Excellence:** AP takes its mission very serious in promoting social change and enhancing public safety. The organization strives for nothing less than the highest quality services.
- **Empowerment:** AP understands the importance of accountability and trust. When AP empowers and engages team members to pave their own path to success, a better workplace culture is promoted and fostered.
- **Collaboration:** AP understands that collaboration is a sign of an effective team and services. Collaboration breaks down barriers and broadens the skillset and resources of the organization overall.

AP understands that extensive data, collection of information, reviews, analysis and proposed procedures are meaningless if such information and all desired outcomes are not communicated to all stakeholders. It is AP's desire to provide clear, timely, and accurate information to Personnel, Leadership, the Governing Body, the Community Providers, Advisory Boards and other stakeholders that may assist in the performance and quality improvement approach, strategy and plan of Advocate Program.

AP recognizes that any achievement resulting from all agency wide PQI efforts is due to the collaboration and dedication of all staff members. The hard work performed by personnel is greatly valued and deeply appreciated. AP understands that recognizing the efforts and achievements of staff members results in stronger engagement, increased employee morale, excellent service delivery and lower turnover.

Advocate Program has achieved milestones and made an impact in the community, throughout its history, not because of a few but due to the collective efforts of all staff members.

Thank you and remember, its not what we do, its what we make happen!

