

Family Wellness Program

Quality Improvement

Report

July 1, 2023 – June 30, 2024



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INTRODUCTION

Glade Run Lutheran Services Family Wellness Program (FWP) is a short-term supportive housing program for families referred by Butler County and Lawrence County Children Youth Services (CYS). Services provided to families by FWP vary based on family needs and abilities. We know that for many people, seeking help for life's problems and challenges is not an easy thing to do. The Family Wellness Program helps families identify and address their barriers to safe and affordable housing.

Glade Run Lutheran Services Family Wellness Program provides temporary, safe and secure shelter for families experiencing housing adversities and are at risk of being separated. Those in the program are assigned a Program Coordinator that works with their family to identify goals and needs to achieve self-sufficiency. Services provided to families include; case-management, childcare, transportation, support coordination, housing education, budgeting and finances, and life-skills coaching. The primary goal of FWP is autonomy and independence for parents and their family.

At Glade Run Lutheran Services, it is our policy and practice to welcome individuals and families without regard to their race, gender, sexual orientation, religion, national origin, ancestry, age, physical or intellectual disability. Furthermore, it is the policy and practice of Glade Run Lutheran Services to foster an environment which respects and accommodates diversity for individuals, families, and our employees. We welcome anyone in need of the services provided by this agency and will do our best to forge a working partnership with you to support and assist you in achieving your life goals.

FWP SERVICE DESCRIPTION

There may be times in a family's life that they find themselves facing significant barriers to caring for their loved ones. These barriers could be related to homelessness, living in an unsafe situation, significant financial stressors or other barriers that impede a parent's ability to successfully care for their family. Through collaboration and guidance, the Family Wellness Program will provide safe, sound housing and support to help families work through difficult situations to achieve a better life.

When an individual reaches the optimum level of wellness and functional capability, everyone benefits: the individuals being served and their families, their support systems, and the communities they live in.

Days and Hours Services are Available:

These services are available Monday-Sunday 7am-9 pm with a 24/7 on call component for housing emergencies.

Discharge Criteria:

Families will be discharged from the Family Wellness Program when they have successfully completed their Family Service and Transition plan goals and have obtained housing and appropriate support outside of the Family Wellness Program. Discharge may also occur if families are unable to adhere to participant expectations and guidelines within the program.

Service Modalities

Services offered are as follows:

- Supportive housing
- Service coordination and referral to:
 - Mental health treatment
 - Substance abuse treatment
 - Financial literacy
 - Career development
 - Transportation
 - Childcare
 - Skill building
 - Computer training

Locations where services are offered:

The Family Wellness Program suites are housed in the Community Wellness Center on Glade Run Lutheran Services main campus located at 70 West Beaver Street, Zelienople, PA 16063. In addition, there are 6 family suites in Lawrence County at 1745 Frew Mill Road, New Castle, PA 16101. Services will be delivered both at the suites and in the community as dictated by the Family Service and Transition plan.

DEMOGRAPHICS

Program	Total # of families Served			Admissions			Discharges			Average length of Stay (Days)		
	23-24	22-23	21-22	23-24	22-23	21-22	23-24	22-23	21-22	23-24	22-23	21-22
FWP - Butler	4	10	7	1	7	7	4	6	4	405	130	301
FWP Lawrence	6			6			2			197		

Referrals

Referrals for FWP come from Butler County Children and Youth Services or Lawrence County Children and Youth Services (CYS). Families referred to the program are considered homeless or at risk of homelessness. These families are at risk of having their children in substantive care or already have their children in out of home placements due to homelessness. All referrals therefore have an open case with CYC at the time of referral and remain open throughout the duration of the program in Butler County, but are able to close while in the program in Lawrence County. Also, Lawrence County currently only admits single mothers and their children, while Butler it can be a single parent or a two-parent family household.

Admissions

Families are admitted into the program based upon the recommendation and referral from CYC. Families meet with the FWP team to review the program guidelines and expectations and agree to cooperate. In Butler County, admission decisions are made between CYC and the FWP management team. In Lawrence County, admissions are determined and voted on by a committee of county key participants.

Discharge

Five out of the six discharges were categorized as “Planned/Successful”. One out of the six discharges were categorized as “Unplanned/consumer not attending or engaged in services.” Five of the six discharges obtained stable, permanent housing through their own budget and/or with help of HUD. These families worked on budgeting, parenting, life skills and appropriate decision making while in the program.

Average Length of Stay

This year we served families in Lawrence and Butler Counties. We have found that the average length of stay in Lawrence County is shorter than Butler County. We think some factors to this may be: Lawrence County is for single mothers only, and the residents want to move in with their significant other for support and relationship. Also, Lawrence County CYC does not stay open with the family during their time in the program if they do not feel there is a reason to, which takes away some of the program cooperation leverage. Overall, the data shows families are finding permanent housing when they leave our programs.

SATISFACTION SURVEYS

The program is currently implementing surveys and measures for client and stakeholder feedback for the 24-25 year. This information will be shared in the next annual report. We are also developing check-ins at the 3rd month, 6th month and one year after discharge from the program for those that wish to cooperate. The follow up check-ins have been challenging due to families changing phone numbers frequently, phones being temporarily shut off, or families not choosing to continue to update Glade Run.

CLIENT SAFETY

Client Critical Incidents July 1, 2023-June 30, 2024

Program	Total # of crisis calls to the county/911	Total # of sentinel incidents	Total # of Consumers
FWP	4	0	3

The program is currently working on a Critical Incident Policy. This Policy will define reportable critical incidents as well as identify who the program notifies and the process to do so. This policy will follow other agency program's critical incident policies.

STAFF ARE OUR GREATEST RESOURCE

Program Coordinator

The Program Coordinator (PC) will be the primary contact for the resident and their family. The PC will work to create a Family Service and Transition Plan with the family to assess areas of skill need and/or support and will connect the family with the appropriate programs and agencies to fulfill these needs. The PC will provide needed transportation and childcare to assist the family in procuring their needs and services. Qualifications for this position include the following: Bachelor's Degree or Master's Degree with major coursework in sociology, social welfare, psychology, gerontology, anthropology, criminal justice, criminology, theology, nursing, counseling, education or other related social science or human services field. They will also possess one to three years working with families in a mental health setting and one to three years case management experience.

Program Manager

The Manager of the Family Wellness Program will provide oversight of the program and provide direct supervision of the Program Coordinator. This staff is directly supervised by the Director of Mission Advancement of Glade Run Lutheran Services. Qualifications are one of the following: (1) a graduate degree in psychiatry, psychology, social work, counseling, nursing, rehabilitation, education or a graduate degree in the field of human services plus at least 3 years direct care experience with children or adolescents in the following Child

and Adolescent Service System Program (CASSP) systems: Mental Health, Education, Special Education, Children and Youth, Drug and Alcohol, Juvenile Justice, Health Care and Vocational Rehabilitation, including 2 years of supervisory experience in any program of the CASSP system OR (2) a supervisory certification from the American Association of Marriage and Family Therapists.

Staff Turnover Rate

CLINICAL/ PROGRAM STAFF	Employees at start of fiscal year date	New Hires	Resignations/ Terminations	Employees at end date	Turnover Rate
21-22	2	1	1	2	50%
22-23	3	1	1	3	33%
23-24	2	1	0	3	0%

PROGRAM EXCELLENCE/POSITIVE IMPACT

Program Spotlights

With the addition of our Lawrence County program and additional staff, we have been able to offer a more comprehensive program to the families. We have been able to offer monthly workshops to families covering topics such as budgeting, self-care, parenting, etc. Workshops have been provided by Glade Run Staff and in cooperation with other key stakeholders in the county. Collaboration with other service providers has increased and has been crucial to get everyone on the same page for goal development.

We have also been able to offer more social and family bonding activities for the residents in our program. This has included tickets to outside events such as haunted houses, musicals, and the zoo. It has also included throwing program holiday parties, movie events, pizza parties, and back to school support to get everyone involved.

For the summer, we were able to get our Lawrence County kids enrolled in the local YMCA day camp 3 days a week to give the mother's time for respite, employment, or time to focus on their program goals.

This year we were also able to implement our program fee initiative. Residents have the first 3 months free in the program, then months 3-6 owe a \$25 program fee, 6-9 owe \$50, 9-12 owe \$75, then at month 12 and beyond they owe \$100. That program fee is then collected and stored by Glade Run finance. When they leave the program, they have the option to access this money towards a deposit to their new home. This year 2 of the 6 families that graduated accessed their program fee money when they moved out.

Assessment Data

The Consumer Strengths Assessment (CSAS) assesses strengths of each family across 8 domains. 1. Living/Housing, 2. Education/Vocation, 3. Income/Benefits, 4. Mental Health Treatment, 5. Drug and Alcohol Treatment, 6. Social Support, 7. Basic Activity of Daily Life, and 8. Medical treatment. Each domain is scored 1, 3, or 5 based on the family's strength in that area. 1= can function independently, 3= Some ability or willingness to perform activities but needs assistance, and 5= Inability or unwillingness to perform activities as needed without assistance. The assessment is designed to be given at intake, midway, and discharge. For the purposes of this program the CSAS was administered monthly for most of the year. Part way through the year the program shifted to a every other month assessment in hopes of collecting more accurate data on the families progressions towards their goals.

Data shows that on average families saw their scores increase by the time of discharge. The average score at intake was 25 which is considered an average need level. The average score at discharge was 29 indicating a moderate need level. The goal would be to see the score decrease to a low or very low need level when they discharge. This could be a result of the inability to administer the test appropriately or an indication that this is not the best assessment tool for the program.

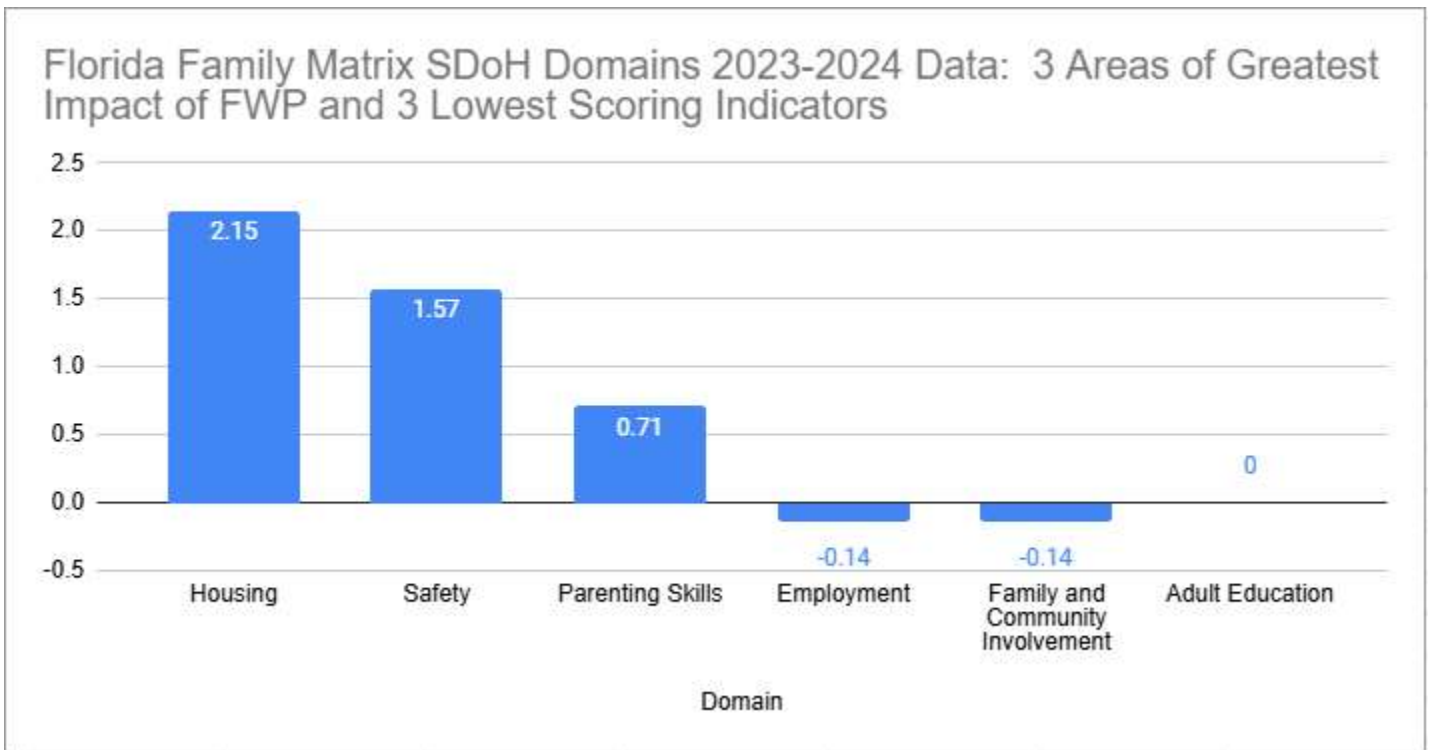
Due to the nature of the program we are not always able to complete the assessment enough times to show progress. It is also difficult at times to get a discharge assessment when discharges are sudden and unplanned. Also, the data reflects families that are still in the program, so there is no discharge assessment at this time.

Assessment	# of clients with assessments at admission	Average Score	# of clients with assessments at discharge	Average Score	# of consumers that competed both	Average Difference
CSAS 23-24	6	27.83	6	7.33	6	17.25
CSAS 22-23	6	25	4	29	4	-3.25

Florida Family Matrix

Domain	Initial Average	Ongoing Average	Change
Housing	1.14	3.29	+2.15
Safety	2.14	3.71	+1.57
Health	3	3.29	+2.9
Mobility	1.71	2.29	+58

Financial Security	2.43	2.86	+ .43
Employment	1.43	1.29	-.14
Food	2.29	2.43	+ .14
Nurturing Relationships	2.64	3	+ .36
Parenting Skills	2.85	3.57	+ .71
Adult Education	3.57	3.57	0
Transitions	3.43	3.86	+ .43
Family and Community Involvement	3	2.86	-.14



The Family Matrix was a new assessment added in the last year. 7 Families completed the Family Matrix assessment at intake. 5 had completed ongoing assessments during the reporting period. Of the 5 families that had both initial and ongoing assessments their overall score increases averaged 7.5. The goal is to have a higher matrix score when you leave the program, indicating more success in the social determinants of health areas. Housing and Safety continue to be the main staples of this program.

Curriculum

Case management is the main service component of the Family Wellness Program. It serves as a means for achieving client wellness and autonomy through advocacy, communication, education, identification of service resources and service facilitation. The family case manager will help to identify appropriate providers and facilities throughout the continuum of services and will link the family for needed education and skills. The family case manager will support the parent to identify strengths and needs by completing a thorough assessment with reference to the resident's Permanency Plan through Children and Youth Services. From the assessment and permanency plan, the parent, with assistance from the family case manager, will identify and create goals in a family service and transition plan. These goals are aimed at enhancing the strengths of the parent and fostering new skills to be able to create a more stable and safer environment for their children. Throughout the program, the parent will continue to work on their identified goals with the ultimate goal of moving out of supportive housing into a permanent living space of their own.

The Family Wellness Program will work to assist the resident in obtaining the needed skills and resources to be able to function independently and safely for the entire family.

During this reporting period the tool used to develop and monitor goal progression is the CSAS. Given the nature of the program families sometimes discharge unplanned, making it difficult at times to get a discharge score. Families that have a planned discharge see an improvement in their discharge score from intake. Over the next reporting period 2023-2024, the program is adding additional assessments and tools to better identify, develop, and monitor goals and goal progression. New assessments include a Strengths Based Assessment and Social Determinants of Health Assessment. We will also explore the use of the Recovery Star Ladder of change and SMART GOAL tools.

Individualized Service Planning and Delivery

The Family Wellness Program maintains individualized service planning and interventions for each family member. The resident's Permanency plan from Children and Youth Services will also guide and inform the goals and service focus of this plan. The family case manager will orient each family to the program and provide an individualized housing search and supportive services to promote the families' self-sufficiency, integration into the community, and permanency in housing.

In order to facilitate quality services, Glade Run Lutheran Services maintains values which include:

- A. Supportive and enhanced family involvement.
- B. Competency based interventions built upon individual strengths and unique characteristics.
- C. Attention to individual needs.
- D. Opportunities for personal development of one's physical, emotional, behavioral, interpersonal, spiritual and intellectual self.
- E. Each client and his or her family having access, voice and ownership in the service planning process.
- F. Every person is sacred and the subject of human dignity.

School Attendance

Children of the families in the program that are school aged are required to attend school daily. Program Coordinators work with the family to make sure the family has all of the resources needed to excel in education- including school supplies, support to set up transportation, internet access in their homes, meetings with the school to collaborate, etc. Referrals are made to support school barriers as needed. Families have the choice to enroll their children in the local school/school district, Seneca Valley for Butler or Shenango for Lawrence, or maintain enrollment in their current school/school district. Glade Run works with the school districts to enroll and set up appropriate transportation. During this reporting period two students were enrolled in Glade Run's Partial program and then transitioned to St. Stephen's. While they struggled some with these transitions, ultimately their attendance, participation, compliance, and academic achievement showed improvement.

Individual Records review

Weekly sessions and encounters with the family, as well as assessment reviews and updates are recorded in the EMR. Documentation is reviewed regularly and signed off by the supervisor to assure fidelity. Individual family records are available to both CYS and the County to review at any time upon request. Intake items have included a strengths and needs assessment, the matrix, and we have begun implementing genograms as a part of our intake process.

Support Coordinator Productivity

The following productivity report shows how the program coordinator spends their time with the families. A lot of time is spent transporting clients to and from various appointments. There is also time spent with resource support: accessing and linking families to services to support their goals and needs. Monitor had the highest use of time because this is a broad category and captures the weekly sessions with families. The program is looking into this category and seeing if we can capture what happens in these sessions for a more accurate accounting of activities. The Lawrence County program does not use transporting clients as much due to having access to the ACTS transportation and being on the bus line. Sessions are more geared towards goal development and support. Both programs have increased their support from outside agencies as well to aid in productivity.

Activity	Totals 22-23	Totals 23-24
Accessing Services (and linking)	37	100
Assessment (CSAS, sx, safety, rules, pre/post, client satisfaction surveys)	3	25
Community Resources (remove)	2	28
Crisis Contact	9 (4 families included- 1 family had 3 services, 1 family had 4 services, 2 families each had 1 service)	5 (3 families included - 2 families had 2 services, 1 family had 1 service)

Linking	5	13
Monitoring	105	131
Network Building (Marketing/PR/Community Events)	1	10
Post Discharge Follow up (30 days, 6 m, 1 Year)	8	0
Pre-admission (tour, handbook)	3	1
Problem Resolution	20	38
Service Plan	0	20
Transportation	81	71
Unknown	2	0
TOTALS	276	442

Financial savings Program Data

All program residents began participating in the program fee structure starting in January of 2024. Two families graduated from the program and were able to access the money saved to contribute towards their deposit for their new home.

Family Event Data

Both programs were able to increase the amount of family events that we offered. Holiday parties, pizza parties, tickets for special events such as musicals, haunted houses and a local zoo were distributed. We are looking to continue to increase what we are able to offer the families in our programs for family bonding as we make more connections.

SUMMARY

The Family Wellness Program continues to be a “safe haven” for families in need of housing and support. Families have the opportunity to have safe housing while working on goals of employment, education, budgeting, decision making, parenting, and overall family wellness. The program continues to grow and learn best practices in how to support families on their goals during their stay. Increased collaboration with CYS and other stakeholders has been vital to making sure everyone is on the same page and working towards the same goals with the family. Although not all of the discharges were planned during this reporting period, all of those families were given the opportunity to have a safe place to provide for their family with support during their time in the program. Even when the discharge was unplanned, the Family Wellness Program was able to keep

families together for as long as possible and keep children out of out-of-home placement, saving roughly \$65/day (average foster care rate) per child for a total approximate savings of \$212,225.

Over the past year we successfully opened a new program site in Lawrence County which has remained full. The program has had 2 successful discharges to date. We have worked hard at formalizing the program handbook and developing program policies and procedures. This work will continue into the next year. We also had the opportunity to present to statewide county human service leaders about the Family Wellness Program.

In 2024-2025, the Family Wellness Program plans to continue to see program growth with a second site in Lawrence County and a new site in Armstrong County. This continued growth will lead to increased staff and program development. We have begun the process of developing the Family Wellness Program as Evidence Based. We continue to look at tools and assessments that best support the desired program outcomes. Over the next year we will work to formalize programming as we provide more support, tools, and resources to families.

Next Steps and Strategic Plan:

Quality Initiative	Task	Responsible Party	Progress/Status
Expansion into Lawrence county	Continue to create documents and policies for the program, begin the referral screening process	Pastor Chris, Bethany	MET
Formalizing program handbook, policies and procedures, etc. to model for more counties	Take current and new documents and create a manual for operating the FWP	Pastor Chris, Bethany	Progress Made
Increase collaboration with stakeholders	Set up meetings with local schools, first responders, food banks, and other social service agencies our families may utilize	Pastor Chris, Bethany	Progress Made
Create measuring tools to track progress and	Work to adapt the outcomes matrix, implement	Pastor Chris, Bethany	Met

improvement	monthly reports and strengths and needs assessment		
Assess for SDOH	Identify and implement assessment tool	Tammy, Bethany	Met
Develop monitoring system for school age children grades and attendance	Utilize releases and consents to establish communication with home districts and receive updates on grades and attendance	Tammy, Bethany	Progress Made
Add a second Site in Lawrence County	Open a site for an additional 2-4 families Location will be open to both men and women	Pastor Chris, Bethany, Steve, Maggie	In Progress
Add Program to Armstrong County	Set up Implement Program	Pastor Chris, Bethany, Steve, Maggie	In Progress
Research FWP for submission into Evidenced Based Program Clearinghouse	Determine consistent scales to use to measure program impact with families as well as individuals in the program.	Maggie, Pastor Chris, Bethany	In Progress
Address SDoH areas for improvement	Gather and analyze data on SDoH areas that did not see a change or had a negative change during participation in FWP (Adult Education,	Maggie, Pastor Chris, Bethany	In Progress

	Employment, and Family/Community Supports)		
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