



# Performance and Quality Improvement

Quarterly Report

Fiscal Year 2025, 3rd Quarter

The Bridge Performance Quality and Improvement Quarterly Report  
*January 1, 2025-March 31, 2025*  
**3rd Quarter FY 2025**

**Contents**

The Mission of the Bridge: ..... 3  
Family Resource Center (FRC) ..... 5  
Youth and Family Services (YFS): ..... 7  
Outpatient Counseling Center (OPCC) ..... 9  
Specialized Trauma-Informed Treatment Assessment and Reunification (STTAR)..... 11  
Quality Parenting Center (QPC)..... 13  
Moving on Project (MOP)..... 15  
Youth Independent Living (YIL) ..... 17  
Appendix A: PQI Data Points FY 2025..... 21

## Introduction:

This report highlights key strengths, areas for improvement, and actions taken to support the continuous improvement of the Bridge's services. The Bridge aims to make this report as easy to read and understandable as possible. We acknowledge that many readers may not be familiar with or interested in jargon. Therefore, we will keep it simple by reporting on our goals, achievements, and the results of our efforts. We also share opportunities for improvement, acknowledging that sometimes we fall short of our goals and strive to learn and improve.

We welcome your input and feedback. Thank you for your ongoing interest and support of the Bridge. Please contact Judy Halpern, Performance and Quality Improvement Director, [jhalpern@bridgefamilycenter.org](mailto:jhalpern@bridgefamilycenter.org), to share comments or questions.

## **The Mission of the Bridge:**

To foster the courage and strength in children and families to meet life's challenges and build fulfilling lives.

Based in West Hartford, Connecticut, the Bridge Family Center is a comprehensive, regional nonprofit agency that provides a broad range of services for children and families throughout the Greater Hartford area. Founded in 1969, the Bridge offers a safe haven for children and families in crisis as well as positive, healthy intervention and prevention programs. The Bridge has an expansive array of services that is comprised of the following:

### Family Resource Center

Our Family Resource Center is a vital source of support for young children and parents. We offer significant parent education, in-school support groups for children going through divorce or separation, reading readiness programs, developmental screenings, after-school learning and enrichment activities, before- and after-school daycare for preschoolers, social skills groups, and early childhood intervention programs.

### Youth and Family Services

For more than four decades, we have served West Hartford as its Youth Service Bureau. We offer school-based programs, emergency in-school counseling response, positive youth development programs, mentoring, parenting services, and the West Hartford Teen Center.

### Outpatient Counseling Center

We have counseling centers in West Hartford, Farmington, and Rockville to support children, families, and adults. Our therapy team includes a psychiatrist. We accept private insurance, as well as Medicare and Medicaid.

### Specialized Trauma-Informed Treatment Assessment and Reunification

We offer high-quality care for every resident by providing for every need that a child has when she/he enters our program. Basic needs include shelter, food, clothing, medical and dental care, counseling and family reconciliation support, primary education, life skills training, drug and sex education, and recreational and social activities.

### Quality Parenting Center

With trained coaching staff, parents identify issues they wish to improve in their relationships with their children. Through guidance and instruction in child development, anger management, self-control, and other topics, coaching staff help parents change their behaviors with their children and their daily lives.

Families are referred by the Connecticut Department of Children and Families (DCF) and are typically enrolled for a six-month period. However, each family situation contains complicating factors that may extend the length of out-of-home care well into subsequent six-month visitation plans.

### Moving on Project

Our Moving on Project (MOP) is a transitional living apartment program that assists males, ages 18 to 21, in developing the skills needed to live independently. For a 12- to 18-month period, the Moving on Project provides DCF-referred youth with a safe, caring, and nurturing environment, as well as practical instruction. MOP programming offers authentic engagement, education, and coaching to help young adults develop mastery of "concrete" and "soft" skills associated with adult success. MOP programming will achieve a balance of providing guidance and support while also reinforcing each young adult's independence and autonomy so they can explore, pursue, and benefit from varied opportunities and maintain healthy permanent family/relative, natural supports, and community connections.

### Youth Independent Living

This department consists of the Community Housing Assistance Program (CHAP), Community Housing Employment Enrichment Resources (CHEER), and Youth in Transition (YIT).

Begun in 1996, CHAP and CHEER program consists of supervised scattered site apartments for DCF committed youth 18 years and older to provide support and guidance in their final steps toward independence. CHAP participants are enrolled in an educational or vocational program. CHEER participants are given resources to help their professional journey.

The Bridge Family Center's Youth in Transition (YIT) Transitional Living Program is an innovative and critical program for runaway and homeless youth (RHY) ages 16-23 (16-21 upon entry), including non-system youth and pregnant and parenting teens and their children in Central Connecticut, including Greater Hartford.

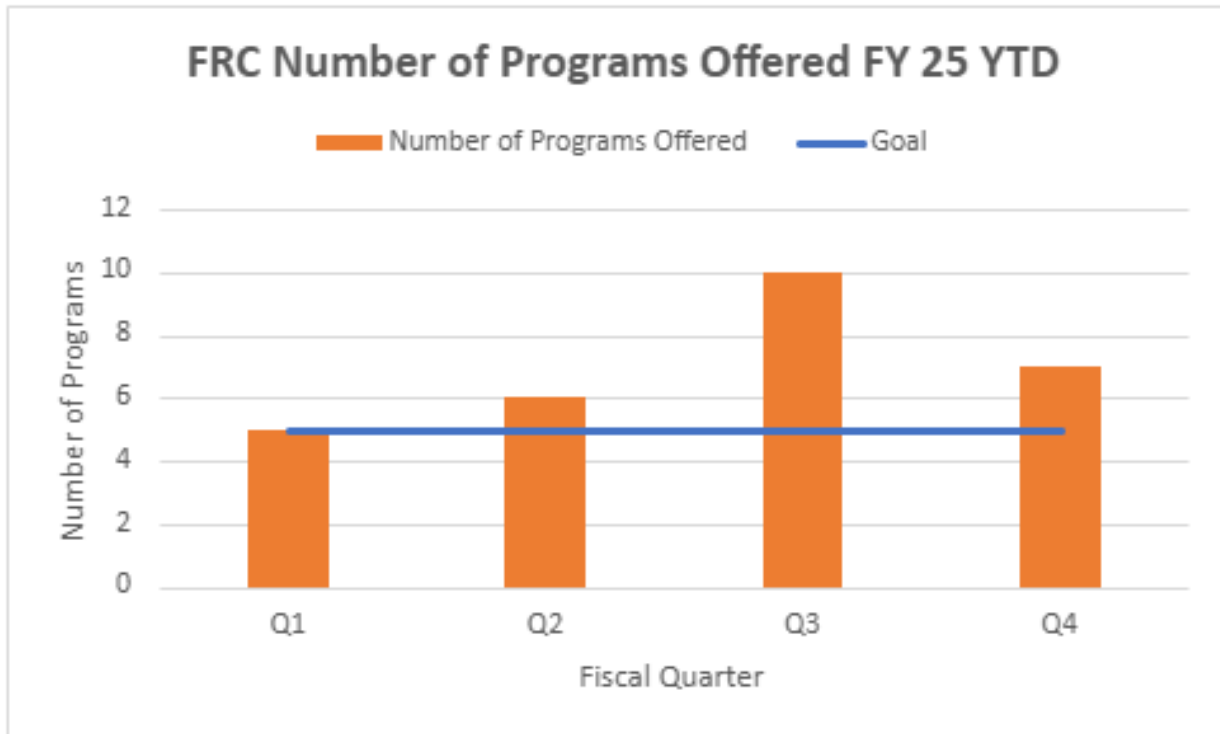
**Family Resource Center (FRC)**

**Goal:**

To increase the diversity and interest in the Family Resource Center’s (FRC) offerings, we aim host 5 or more programs a fiscal quarter.

**Outputs/Outcomes:**

As of Fiscal Year 2025, Quarter 3, 10 programs were offered. Based on funding projections, 7 programs are expected to run in Quarter 4.



**Improvement Plan:**

Goal met. No improvement plan needed.

**Goal:**

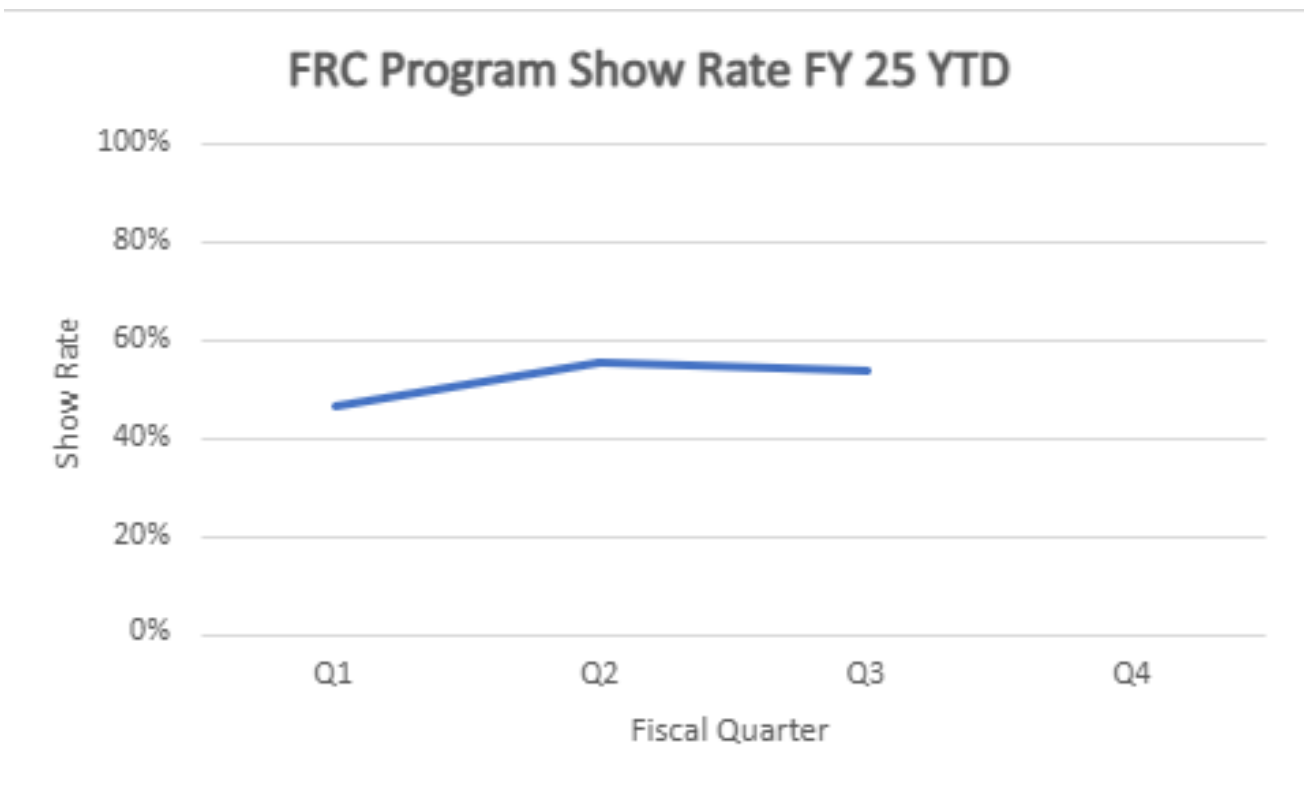
To improve overall participation and engagement in FRC programs by increasing the average attendance (show rate) across all programs. The benchmark for success is achieving a higher show rate each quarter compared to the previous one, demonstrating responsiveness to community needs and efficient use of resources.

**Outputs/Outcomes:**

Quarter 2 average show rate: 55%

Quarter 3 average show rate: 54%

This indicates a slight decline in attendance and presents an opportunity to re-engage participants more effectively.



**Improvement Plan:**

To increase attendance and engagement in FRC programs, staff will send reminders, gather participant feedback, tailor programming to community interests, build relationships through consistent outreach, and monitor attendance trends to guide improvements.

**Chart Audits:**

The family resource center does not retain participant records.

**Youth and Family Services (YFS):**

**Goal:**

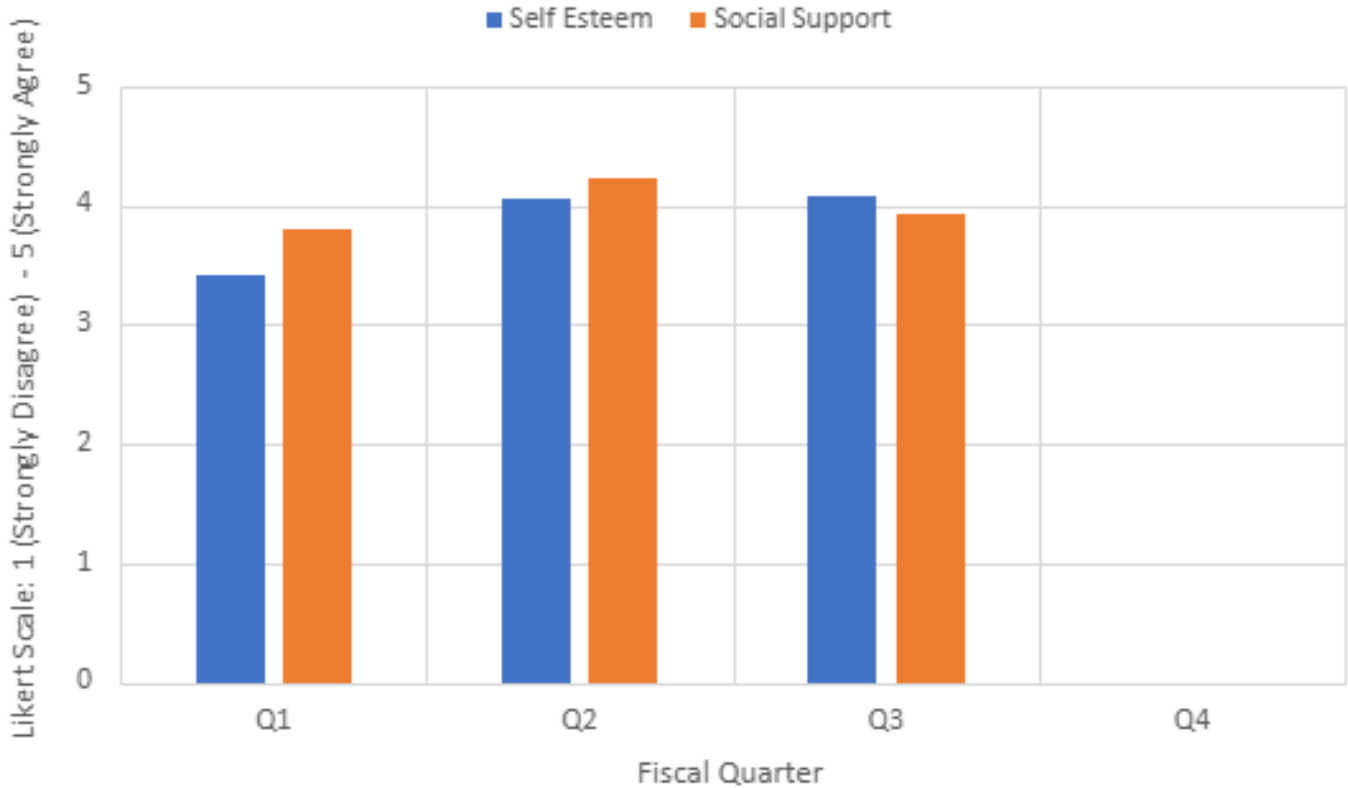
To enhance the personal development and social well-being of youth in mentoring programs by increasing self-esteem and perceived social support scores by year-end. The benchmark is for scores to meet or exceed those of the previous quarter, excluding Quarter 1 to allow time for mentor-mentee relationships to develop.

**Outputs/Outcomes:**

Self-Esteem: Improved to 4.09, an increase from the previous quarter.

Social Support: Decreased slightly to 3.94 compared to the prior quarter.

**YFS Mentor Assessments FY 2025 YTD**



**Improvement Plan:**

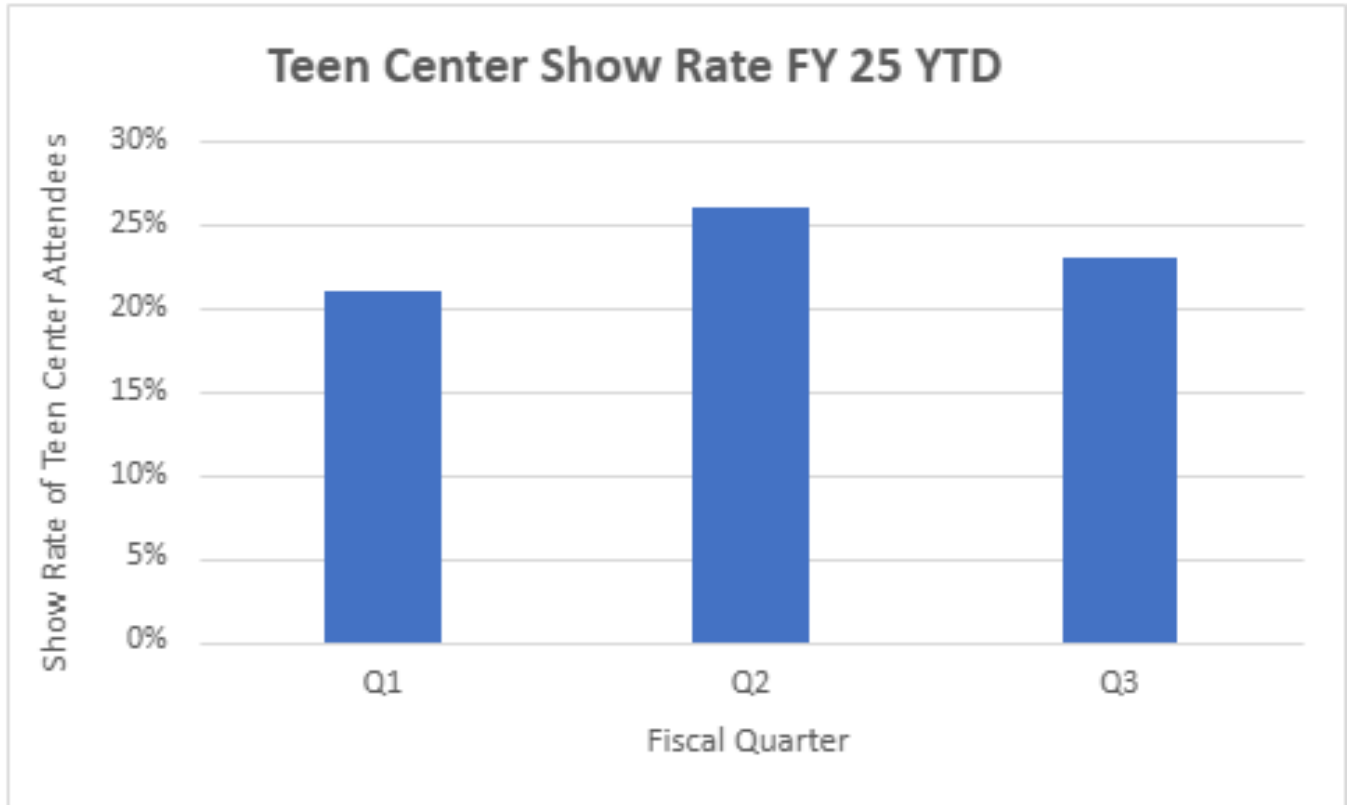
To support continued growth, mentoring staff will strengthen relationship-building activities early in the program and increase check-ins focused on social connection to boost perceived support scores.

**Goal:**

To create a more engaging and supportive environment for teens by increasing overall attendance at the Teen Center through improved program offerings, outreach, and accessibility. The benchmark is for attendance to meet or exceed that of the previous quarter.

**Outputs/Outcomes:**

Teen Center attendance declined slightly in Quarter 3, with a show rate of 23%, down from 26% in Quarter 2.



**Improvement Plan:**

To improve Teen Center attendance, we will enhance program offerings, increase targeted outreach efforts, and improve accessibility, with the goal of achieving attendance that meets or exceeds a 23% show rate.

**Chart Audits:**

Results from the chart audit tool will be added next quarter.

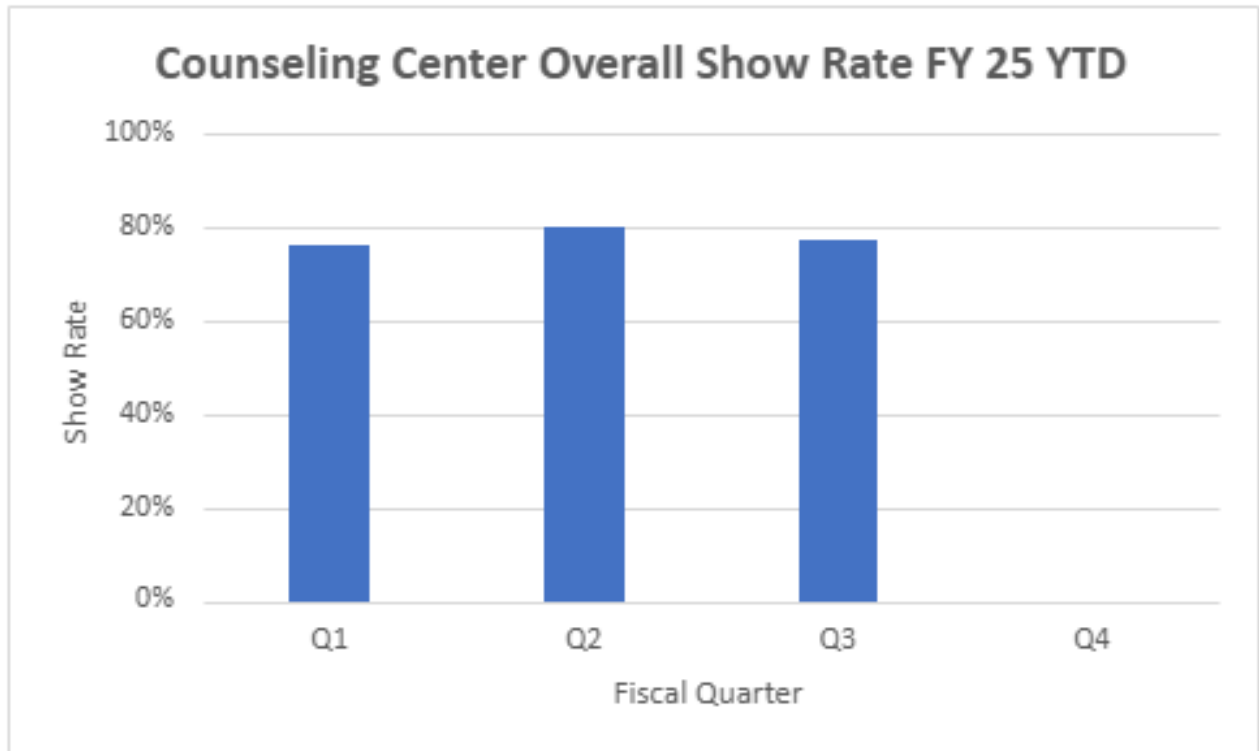
**Outpatient Counseling Center (OPCC)**

**Goal:**

The Counseling Center strives to build strong, meaningful relationships between clinicians and clients, which will be reflected in high attendance rates.

**Outputs/Outcomes:**

The Outpatient Counseling Center aims to maintain or exceed the previous quarter's attendance rates for scheduled appointments. This will be measured monthly by tracking attended versus scheduled appointments. Cancellations or no-shows will be addressed promptly through follow-up outreach and reminder systems. Regular monitoring will ensure consistent engagement and participation in counseling services.



**Improvement Plan:**

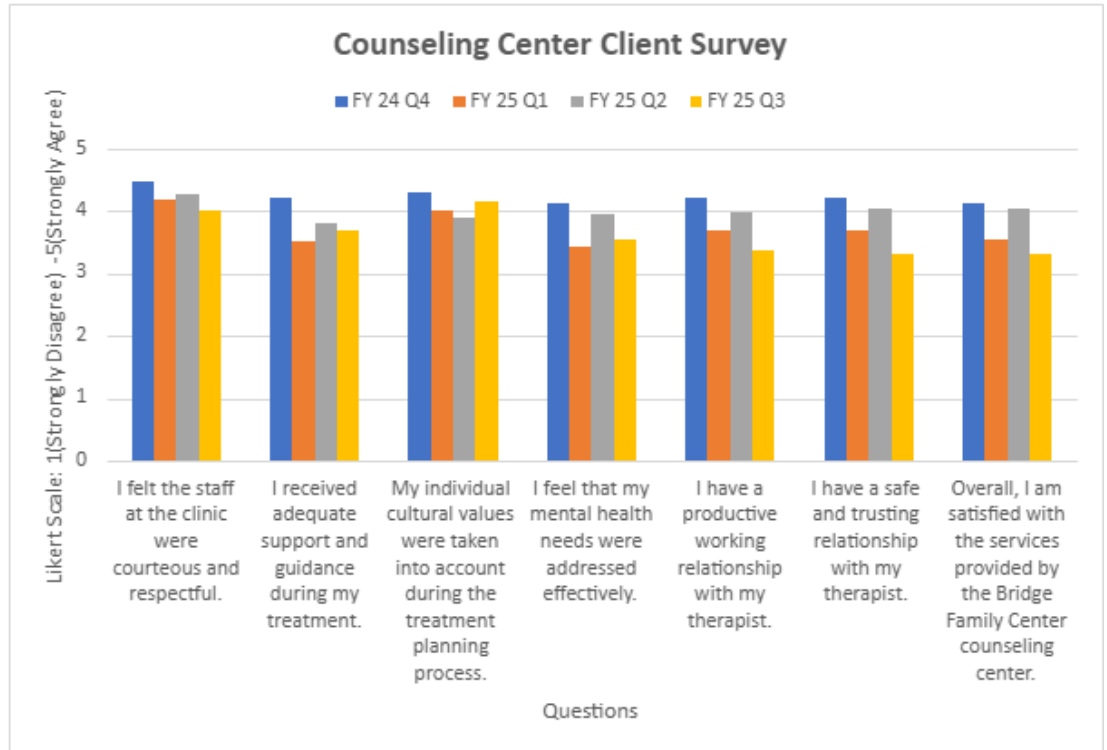
To increase client engagement and ensure high attendance rates, the Counseling Center will focus on strengthening clinician-client relationships, enhancing follow-up outreach, and consistently monitoring appointment show rates to exceed previous quarter performance.

**Goal:**

The Counseling Center will effectively meet the needs of its clients, as demonstrated by high levels of satisfaction in client feedback. The goal is to have equal or better client scores comparing with the previous quarter.

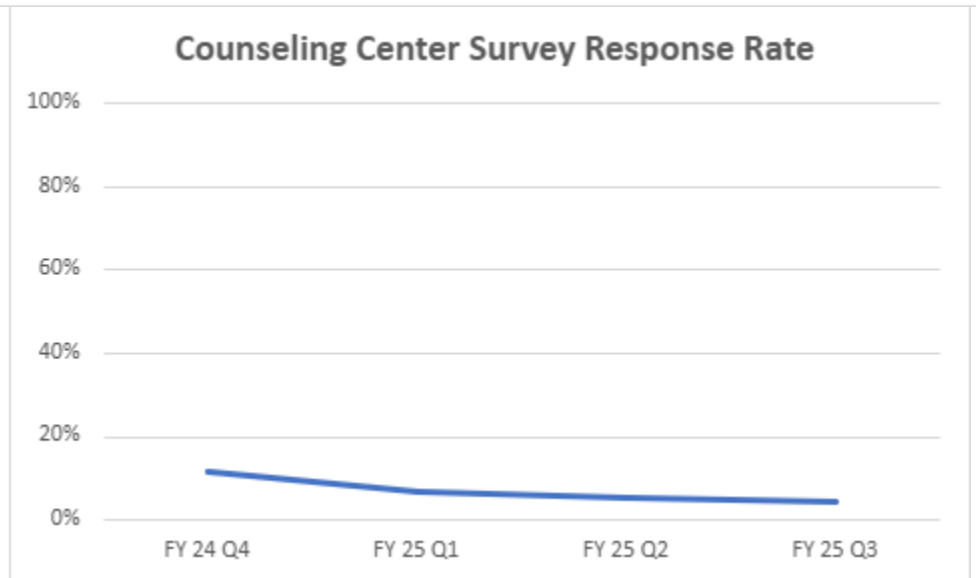
**Outputs/Outcomes:**

The cultural sensitivity score has significantly improved, rising to 4.17, surpassing the previous quarter's score of 3.9. However, all other client satisfaction scores have declined compared to the previous quarter, indicating a need for a more balanced approach to addressing client concerns across all areas of treatment.



**Improvement Plan:**

To maintain high levels of client satisfaction, the Counseling Center will build on the improvement in cultural sensitivity by addressing the decline in other satisfaction scores through targeted improvements in service quality, communication, and overall client experience, while also increasing response rates by ensuring clinicians work with clients to raise awareness of the survey and encourage them to complete it when received via email.



**Chart Audits:**

Results from the chart audit tool will be added next quarter.

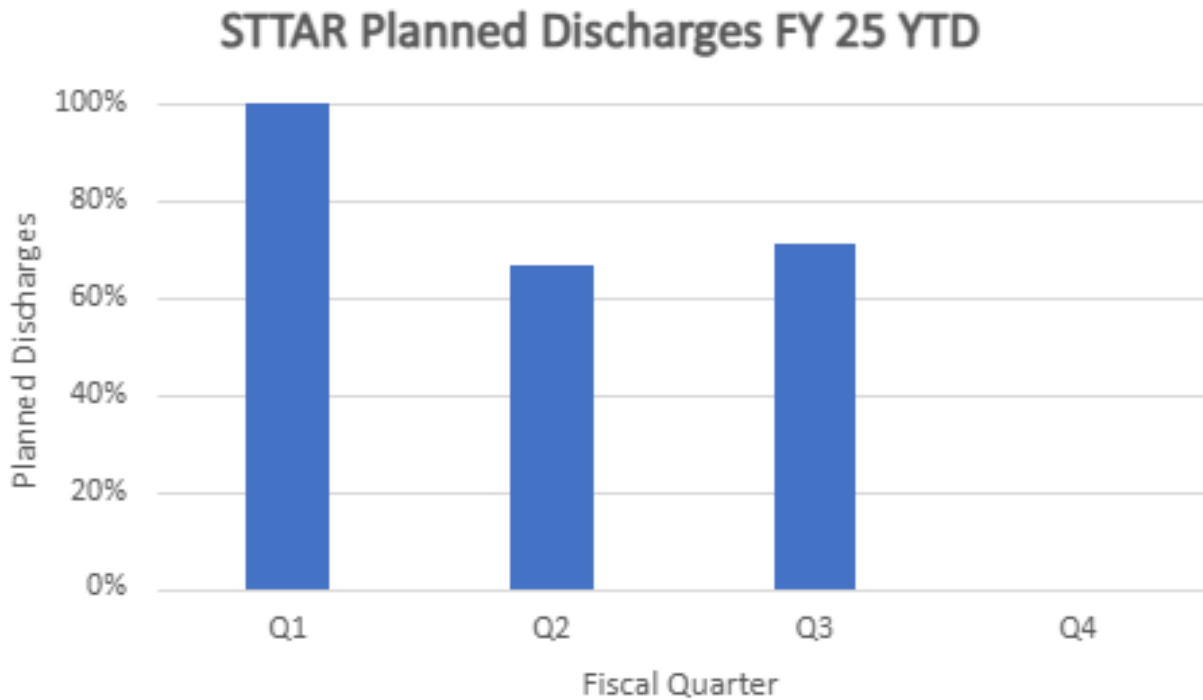
**Specialized Trauma-Informed Treatment Assessment and Reunification (STTAR)**

**Goal:**

Ensure STTAR residents are fully prepared for a successful transition to their next housing placement, with the goal of achieving a higher planned discharge percentage than the previous quarter.

**Outputs/Outcomes:**

In Quarter 2, the planned discharge rate was 67%, while in Quarter 3, the rate increased to 71%.



**Improvement Plan:**

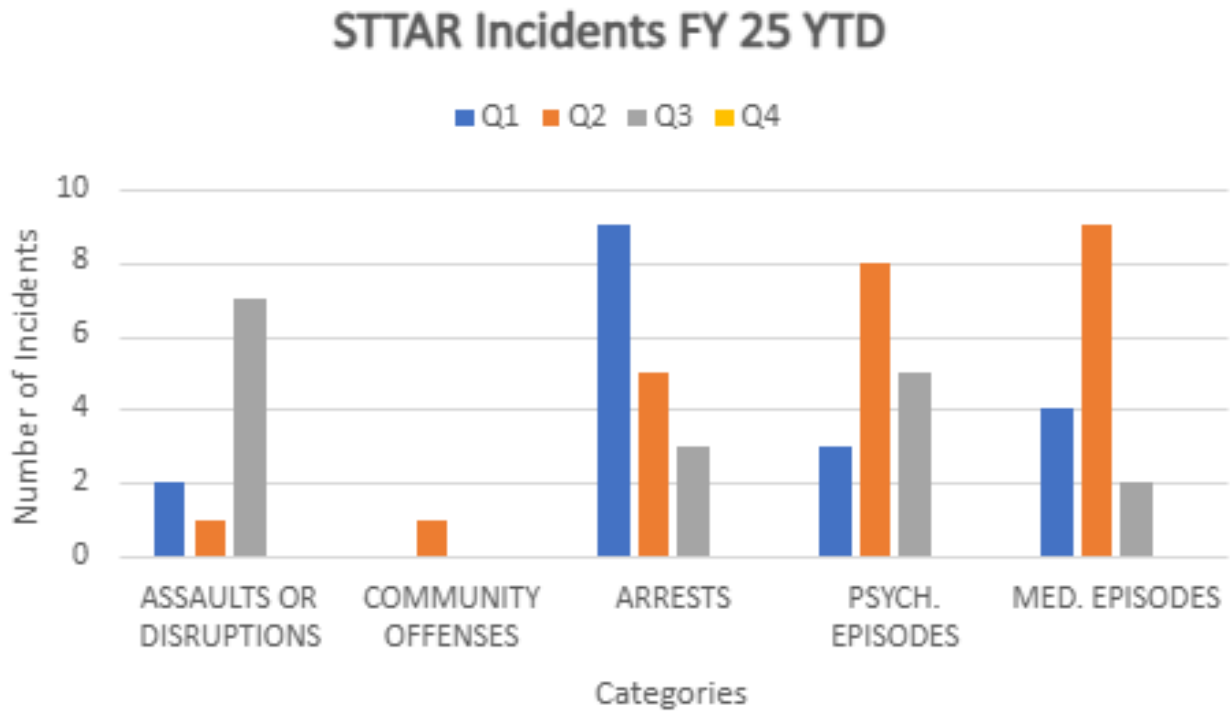
Goal met. No improvement plan needed.

**Goal:**

Ensure that STTAR consistently provides a stable and safe living environment for all residents by aiming to reduce the number of incidents each quarter, including safety violations, behavioral issues, conflicts, and assaults.

**Outputs/Outcomes:**

In Quarter 3, the number of assaults increased compared to Quarter 2, while all other categories—such as safety violations, behavioral issues, and conflicts—showed a decrease.



**Improvement Plan:**

To strengthen the overall safety of the program, STTAR will continue efforts that successfully reduced most incident categories while implementing targeted interventions to address and reduce assaults in the upcoming quarter.

**Chart Audits:**

Results from the chart audit tool will be added next quarter.

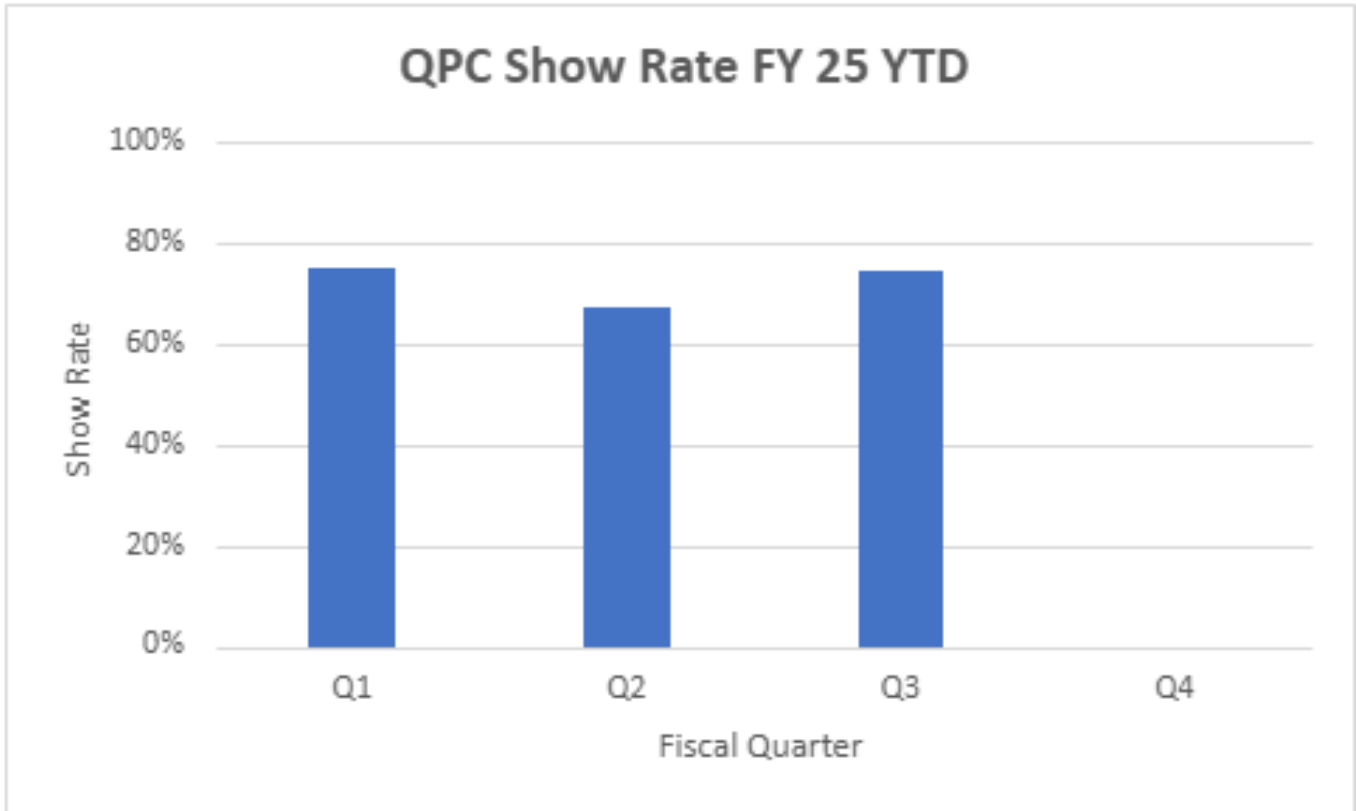
**Quality Parenting Center (QPC)**

**Goal:**

The QPC will improve the attendance rate for scheduled meetings with the Family Visiting Coach to strengthen family engagement and support outcomes, with the goal of achieving a higher show rate than the previous quarter.

**Outputs/Outcomes:**

In Quarter 2, the show rate was 68%, and it improved to 75% in Quarter 3.



**Improvement Plan:**

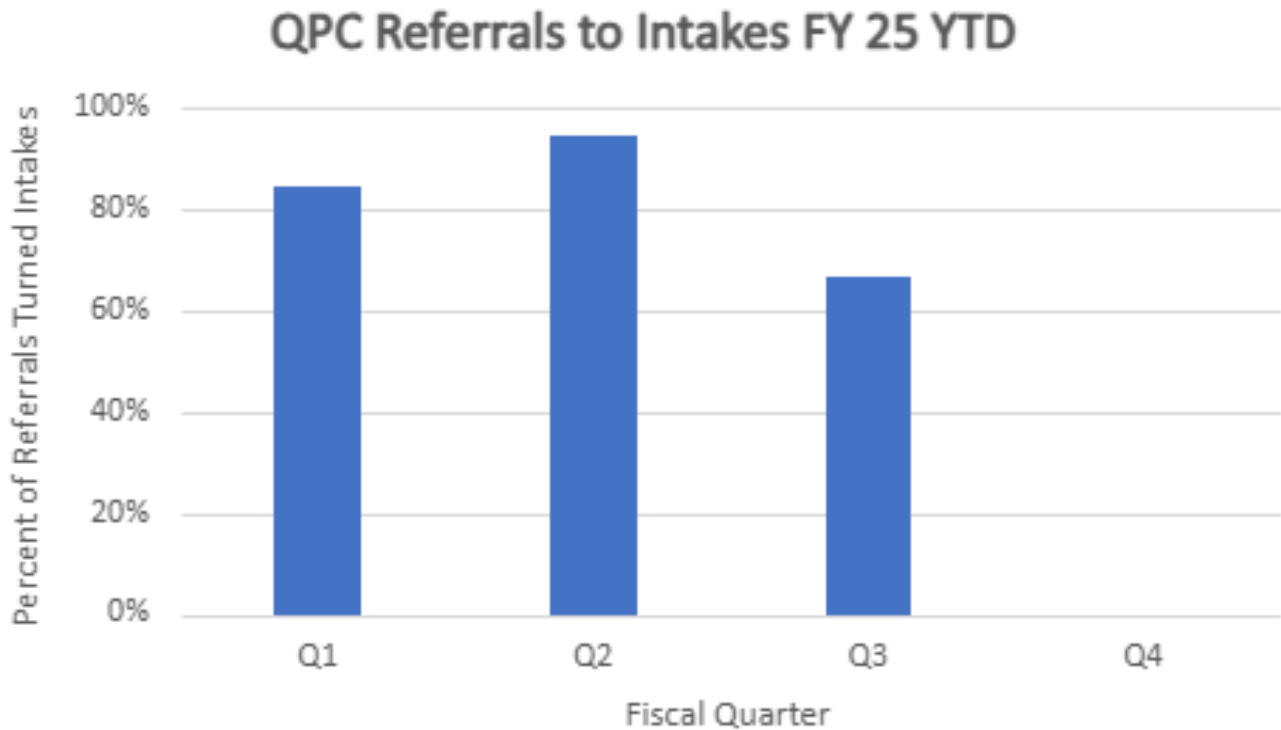
Goal met. No improvement plan needed.

**Goal:**

To increase the conversion rate of referrals into program intakes by ensuring that referred individuals are successfully engaged in the intake process within 30 days, with the goal of achieving a higher conversion rate than the previous quarter.

**Outputs/Outcomes:**

The conversion rate from referral to intake was 94% in Quarter 2 but declined to 67% in Quarter 3.



**Improvement Plan:**

To improve referral engagement, the program will analyze barriers to intake completion and strengthen follow-up procedures to increase the conversion rate and surpass the previous quarter's 67% performance.

**Chart Audits:**

Results from the chart audit tool will be added next quarter.

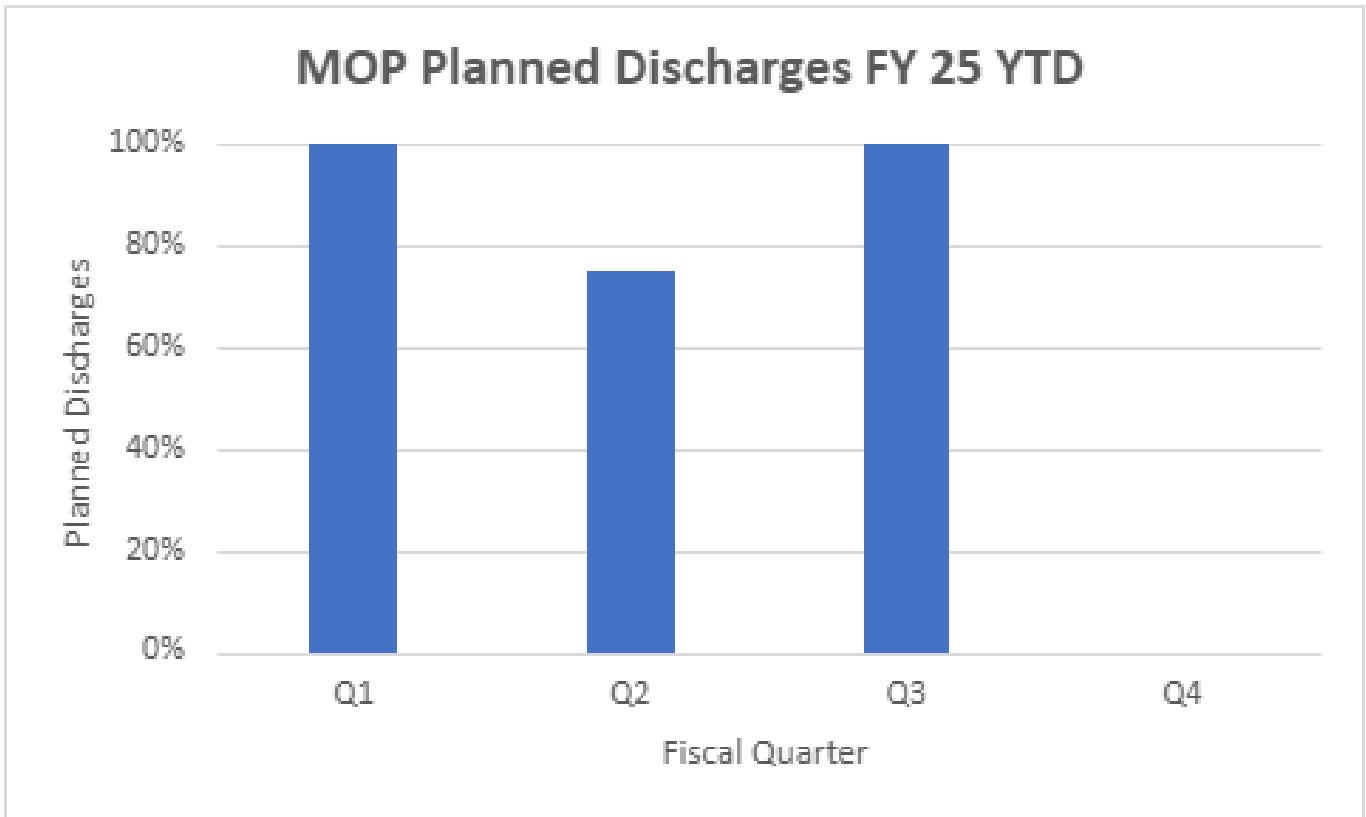
**Moving on Project (MOP)**

**Goal:**

The MOP supports residents in transitioning to independent housing through structured and intentional discharge planning, with the goal of achieving a higher percentage of planned discharges than the previous quarter.

**Outputs/ Outcomes:**

The planned discharge rate increased from 75% in Quarter 2 to 100% in Quarter 3.



**Improvement Plan:**

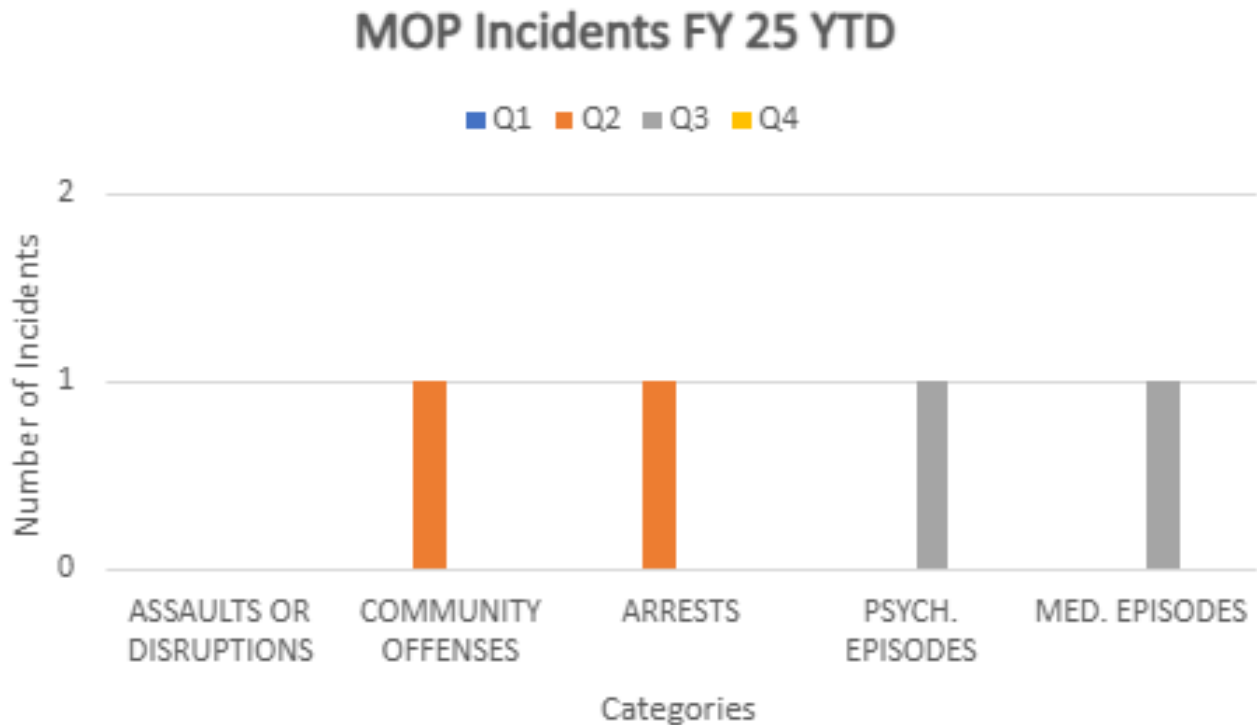
Goal met. No improvement plan needed.

**Goal:**

The Moving On Project (MOP) aims to foster a safe, stable, and supportive environment for all residents by continuously reducing the number of incidents each quarter—such as safety violations, behavioral issues, and medical or psychiatric crises—ultimately promoting resident well-being and a culture of accountability and care.

**Outputs/Outcomes:**

In Quarter 2, the primary incidents involved community offenses and arrests. By Quarter 3, the pattern shifted, with the majority of incidents related to psychiatric and medical episodes. These trends highlight the need for adaptive strategies that address evolving resident needs and ensure continued progress toward a safer, more supportive environment.



**Improvement Plan:**

Implement data-informed interventions, enhance staff training, and increase resident support services each quarter to proactively address emerging issues and achieve a consistent reduction in incidents over time.

**Chart Audits:**

Results from the chart audit tool will be added next quarter.

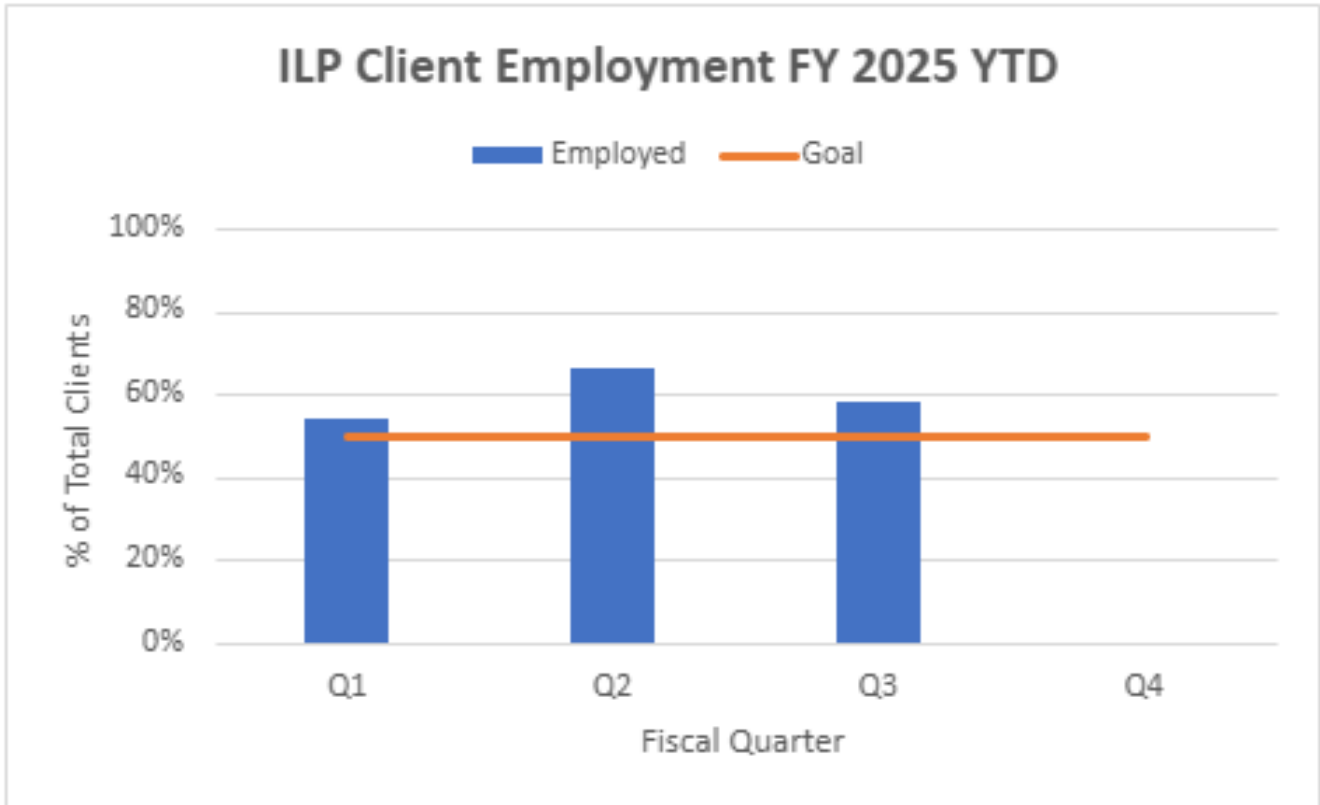
**Youth Independent Living (YIL)**

**Goal:**

The Independent Living program prepares participants to develop job readiness skills with the objective of achieving at least 50% participant employment.

**Outputs/Outcomes:**

In Quarter 3, the program surpassed its employment target, with 58% of participants successfully securing employment—demonstrating strong progress in workforce development and participant self-sufficiency.



**Improvement Plan:**

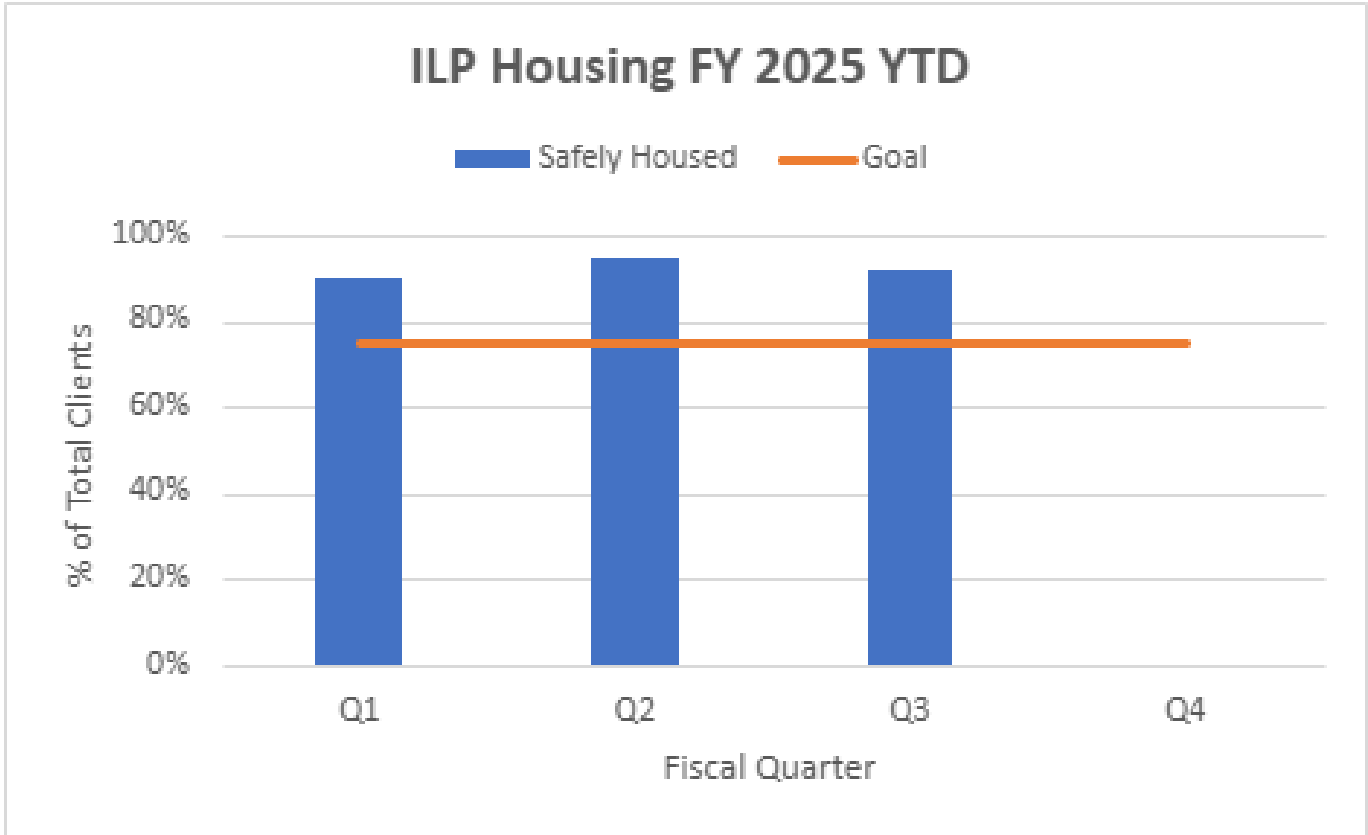
Goal met. No improvement plan needed.

**Goal:**

Ensure that participants in the Youth Independent Living program have access to safe and stable housing. The Youth Independent Living team is committed to supporting clients through housing assistance and case management, with a benchmark that at least 75% of all participants receive housing support to aid their transition to independent living.

**Outputs/Outcomes:**

In Quarter 3, the program exceeded its housing benchmark, with 92% of clients safely housed. Case managers continue to work closely with all participants to ensure each youth transitions into a secure and supportive living environment.



**Improvement Plan:**

Goal met. No improvement plan needed.

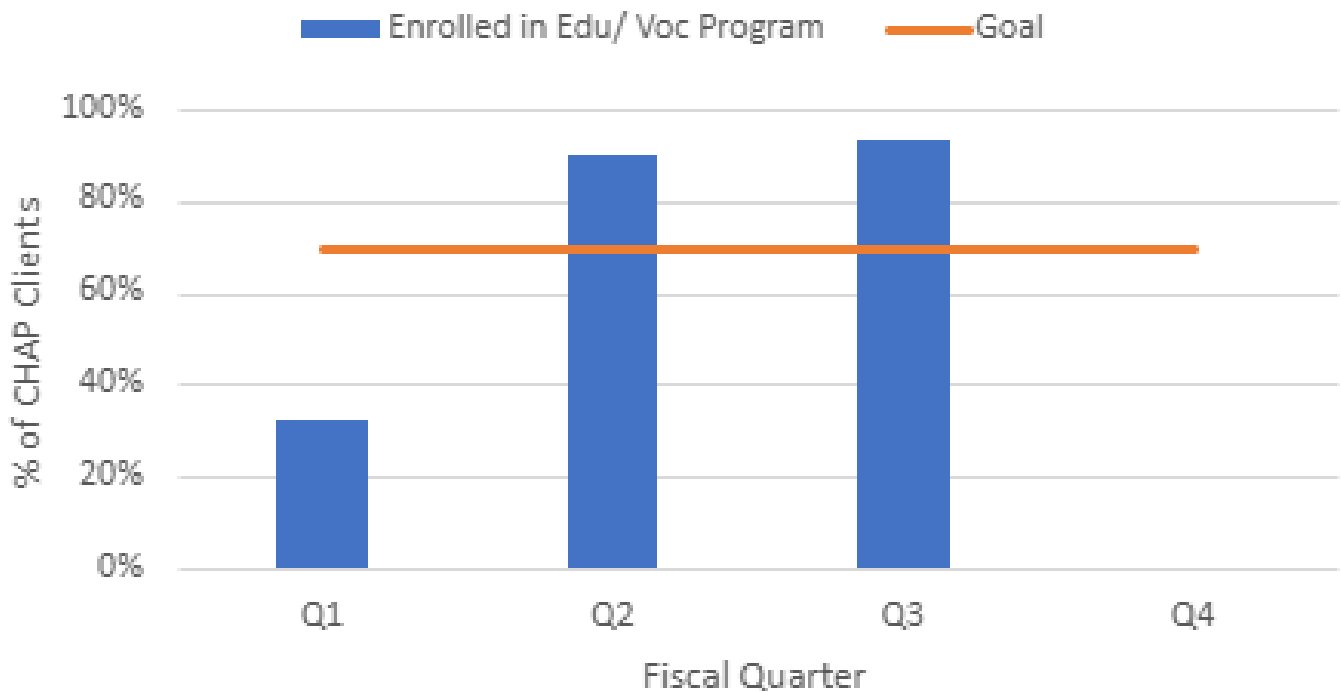
**Goal:**

Ensure that the Youth Independent Living program supports participants in pursuing their educational and vocational goals. The team works closely with CHAP clients to facilitate enrollment in academic or job training programs, with a benchmark of at least 70% participation to promote long-term self-sufficiency and personal growth.

**Outputs/Outcomes:**

In Quarter 3, the program significantly exceeded its goal, with 93% of CHAP clients enrolled in educational or vocational programs—demonstrating strong engagement and effective support from the Youth Independent Living team.

## ILP Edu/ Voc Program Enrollment FY 2025 YTD



**Improvement Plan:**

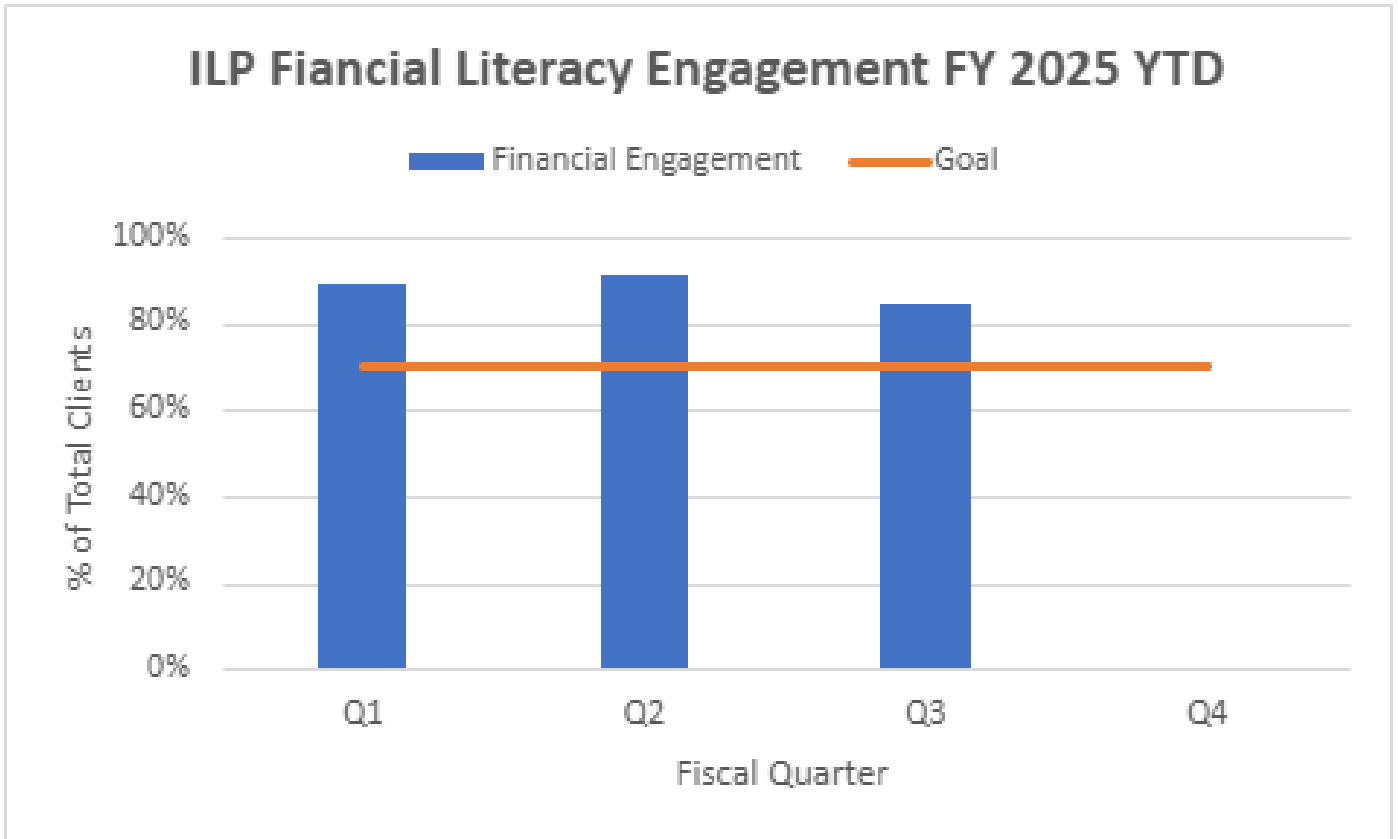
Goal met. No Improvement plan needed.

**Goal:**

Ensure that the Youth Independent Living program teaches participants essential financial literacy skills. The team works to empower clients by providing the tools and knowledge needed to understand and manage finances for a secure future, with a benchmark of at least 70% engagement in financial literacy activities.

**Outputs/Outcomes:**

In Quarter 3, the program exceeded expectations, with 85% of clients actively engaged in financial literacy, demonstrating a strong commitment to building foundational financial skills for future independence.



**Improvement Plan:**

Goal met. No improvement plan needed.

**Chart Audits:**

Results from the chart audit tool will be added next quarter.

Appendix A: PQI Data Points FY 2025

