



Lean Six Sigma DMAIC Improvement Story



Green Belt Project Objective:

**To Reduce the # of Days to Pay Domestic Violence
Victims Direct Relief Assistance**

Last Updated: 5-24-21

Team:



Closing the Gap on Direct Relief

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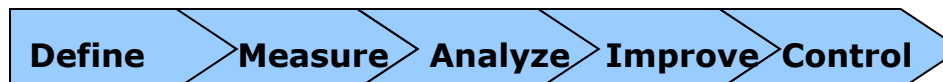
Annika Holder (Sponsor) Ivon Mesa (Process Owner)

SMEs: Idalia Sturmer, Marie Lasseur, Aleah Smith

Lean Six Sigma Problem Solving Process

The team utilized the 5-Step DMAIC problem solving process.

Process Step		Description of Key Team Activities
Number	Name	
1	DEFINE	<ul style="list-style-type: none">• Monitor Team Progress• Select Problem and Identify Project Charter and Timeline• Display Process Indicator Performance “Gap”• Construct Process Flowchart• Identify Stakeholder Needs• Identify Cost of Poor Quality
2	MEASURE	<ul style="list-style-type: none">• Develop Data Collection Plan• Stratify Problem (i.e. “Gap”)• Develop Problem Statement from remaining data set and finalize target
3	ANALYZE	<ul style="list-style-type: none">• Identify Potential Root Causes (s)• Verify Root Cause(s)
4	IMPROVE	<ul style="list-style-type: none">• Identify and Select Countermeasure(s)• Identify Barriers and Aids• Develop and Implement Action Plan• Estimate Countermeasures Cost / Benefits / ROI
5	CONTROL	<ul style="list-style-type: none">• Review Results• Standardize Countermeasures• Document Lessons Learned



Monitor Team Progress

The team and management used a Checklist to monitor team progress.

DMAIC/ QIC STORY CHECKLIST

Process Step		Process Step Objectives and Checkpoints		Check ✓	Key Tools	
DMAIC	QIC Story					
Plan	Step 1		Objective: Demonstrate the importance of improvement needs in measurable terms.			
	DEFINE	Reason for Improvement	1. The stakeholders' needs were identified and a significant related problem was selected.	✓	Selection Matrix	
			2. The selected problem is an "object" with a "defect" with unknown cause(s) that need identification.	✓	Situation Appraisal	
			3. A project charter, including a project timeline, was developed and approved by the sponsor(s).	✓	Project Charter	
			4. A trend indicator was constructed with an appropriate target that measures the performance gap.	✓	Line Graph, SIPOC, Cust Rqmts	
			5. When the process is known, a flowchart was constructed with in-process and end-of-process indicators.	✓	Matrix, "Current State" Process	
			6. The Cost of Poor Quality (COPQ) impact of the indicator performance gap was identified.	✓	Flowchart, Cost of Poor Quality Matrix	
	Step 2		Objective: Stratify indicator related data and finalize an improvement target.			
	MEASURE	Current Situation	7. The data collection plan developed included indicator related demographics and process milestones.	✓	Spreadsheet	
			8. Data were stratified from "what, where, when and who" viewpoints and a significant data set was chosen.	✓	Pareto, Histograms, Bar or Pie Chart	
			9. A problem statement that describes the stratified "remaining data" was developed.	✓	Problem Statement	
			10. The target for improvement was finalized based on the most appropriate target setting methodology.	✓	Target Setting Methodologies	
	Step 3		Objective: Analyze stratified data to identify and verify root causes(s).			
	ANALYZE	Analysis	11. Cause and effect analysis was conducted on problem statement factors asking "why?" toward related organization standards until either a "Failed Standard" or "People Failing Standards" was identified.	✓	Single Case Bore Analysis, Fishbone	
			12. Potential root cause(s) with the greatest impact on the problem statement were selected.	✓	Sources of All Root Causes	
			13. Root cause(s) effecting the problem were verified (when possible using cause and effect data analysis).	✓	Root Cause Verification Matrix	
Do	Step 4		Objective: Develop and implement countermeasures to eliminate verified root cause(s).			
	IMPROVE	Counter-Measures	14. Countermeasures were selected to address verified root cause(s).	✓	Brainstorming, Multivoting	
			15. The method for selecting countermeasures considered both effectiveness and feasibility.	✓	Countermeasures Matrix	
			16. "Barriers and Aids" were determined for countermeasures worth implementing.	✓	Barriers and Aids Analysis	
17. An action plan incorporating the identified "Aids" reflected both accountability and schedule.			✓	Gantt Chart		
Check	Results	Step 5		Objective: Confirm countermeasures impacted root causes, indicator, costs and achieved target.		
		18. Countermeasures' effects on root causes were demonstrated with "before and after" summary graphs.		Before & After Paretos, Histograms, Bar, Pie & Radar Charts, 'Before and		
		19. Countermeasure effects on the indicator were demonstrated with a "before and after" trend graph.		After Line Graph, COPQ Matrix, ROI		
		20. The countermeasures' estimated costs and annualized benefits were determined.	✓	Matrix		
Act	CONTROL	Step 6		Objective: Maintain gains and prevent root cause(s) from recurring.		
		Standard-ization	22. The process flowchart was revised to incorporate the new countermeasure standards and/or training.	✓	"Future State" Process Flowchart	
			23. A Process Control System (PCS) was developed to monitor the revised process indicators on-going.	✓	Process Control System (PCS)	
		Step 7		Objective: Evaluate the team's effectiveness and plan for future activities.		
		Future Plans	24. Lessons learned documented replication opportunities, effective techniques and team success factors.		Brainstorming	
25. Next steps were identified to monitor the process and address any remaining problems or gaps.			Process Control System (PCS)			



Select Problem

1., 2. 

The team evaluated two possible projects using a Project Selection Matrix.

Project Selection Matrix					
Project	Customer (Internal or External)	Selection Criteria			
		A Impact on Customer	B Need to Improve	C= A x B Overall	Select Y/N
1) Crisis Financial Assistance Payments are too LATE	Low Income Family/Regulatory Agencies	3	5	15	N
2) Domestic Violence (DV) Emergency Financial Relocation Assistance takes too Long	DV Victims and Families	5	4	20	Y
Rating Scores:		5= Extreme 4= High	3= Moderate 2= Low 1=None		

The team selected DV Emergency Financial Relocation Assistance as its project.



Identify Project Charter

3. ✓

The team developed a team Project Charter and secured sign off from sponsor.

Project Charter		
Business Case	Project Name:	To Reduce the number of Days to Pay Domestic Violence Victims Direct Relief Assistance
	Problem/Impact:	Problem: Domestic Violence adversely affects the victims and their family members. DV victims do not receive financial assistance and relocation benefits they are looking for timely. Impact: Crisis intervention to DV victims and their families are delayed which in return can increase (or further exacerbate) victims' life circumstances.
	Expected Benefits:	Reduce the number of days to process financial assistance package for domestic violence victims
Objectives	Outcome Indicator(s)	Q1- # of Days to Sign Check from Pkt Received by Chief of Targeted Services (Target= 1 day for Locksmith and 5 Business Days for all other)
	Proposed Target(s)	Target for Locksmith=1 Business Day; Target for all others= 5 business days
	Time Frame:	February 8, 2021 through June 2021
	Strategic Alignment:	Supports MDC Strategic Plan Objective to improve access to abuse prevention, intervention and support services (HS1-4)
Scope	In Scope:	Since August 2020
	Out-of-Scope:	Prior to August 2020
	Authorized by:	Annika Holder
Team	Sponsor:	Annika Holder
	Team Leader:	Preeti Anand, Crystal Lean-Retana
	Team Members:	Annette Alonso, Gustavo Cruz, Annika Holder, Marie "Maite" Riestra
	Process Owner(s):	Ivon Mesa
	Mgmt Review Team:	Ivon Mesa (Program Supervisor), Richard Signori (Fiscal Director), Annika Holder (Interim CAHSD Director), Salvador Najarro (CAHSD Assistant Director)
Schedule	Completion Date:	June 2021
	Review Dates:	Monthly and Final Review in June 2021
	Key Milestone Dates:	See Action Plan



Identify Project Timeline

3.

The team developed a Timeline Plan to complete their Project.

Legend:	
	= Actual
	= Proposed

WHAT: To Reduce Days to Pay DV Victims Financial Relocation Assistance

HOW	WHEN						
	Month						
	Feb	Mar	Apr	May	Jun	Jul	Aug
1. DEFINE	 Completed 3/8/21						
2. MEASURE	 Completed 3/8/21						
3. ANALYZE	 Completed 5/3/21						
4. IMPROVE	 6/15/21						
5. CONTROL	 8/31/21						



Background



CAHSD provides Emergency Financial Assistance through direct relief funds (grant and general funding) and the Relocation Assistance Program through the Office of Attorney General's Crimes Compensation Program to eligible individuals based on the specified criteria. An individual must:

- Be a victim of Domestic Violence, Human Trafficking or Sexual Assault, and
- A client of the VPID (Violence Prevention and Intervention Division).

The approval process is determined based on the expressed need for the services requested through the verification of need for requested funds and/or relocation assistance.

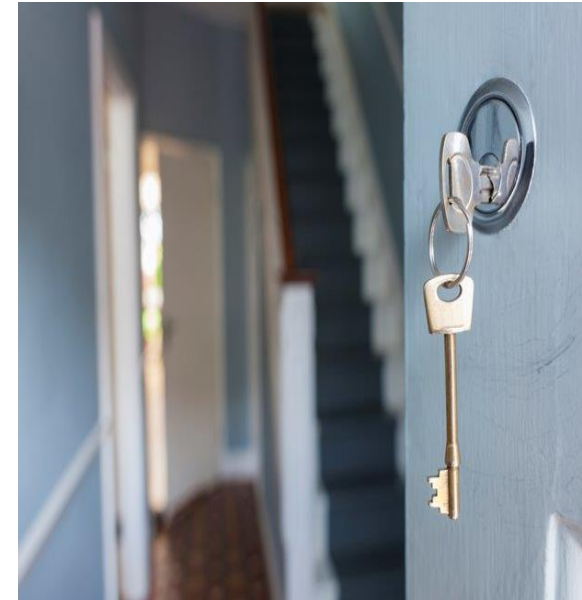
The funds may be used for:

- Taxi Fare, Plane & Bus Tickets
- Prescriptions
- Legal Documents
- After-School Care
- Emergency Clothing/Shoes
- Gasoline
- Parking Fees
- Minor Car Repairs
- Food

Relocation Assistance could be used for:

- Housing Payments
- Rental Payments (First, Last & Deposit)
- Utility Deposits
- Moving Expenses
- Storage
- etc.

Prior to the pandemic, only original signatures were accepted by the Assistant Director of Programming. Since August 2020, the Department adopted use of DocuSign to track Direct Relief requests and complete the Approval Steps.



Define

Measure

Analyze

Improve

Control

Background

Financial Assistance Application



COMMUNITY ACTION AND HUMAN SERVICES DEPARTMENT

POLICY AND PROCEDURES

ATTACHMENT #3

ASSISTANCE SUMMARY

DATE: _____ CHECK NUMBER: _____

PROGRAM LOCATIONS: (CHECK ONE)

CVAC ☐ - INN TRANSITION NORTH ☐ SOUTH ☐ SAFESPACE NORTH ☐ SOUTH ☐

ADVOCATE: _____

PROGRAM PARTICIPANT: _____

NAME: _____ SSN: XXX-XX-XXXX

MAILING ADDRESS: _____ CITY: _____

ZIP: _____

VENDOR NAME: _____ ACCT: _____

VENDOR ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____

PERIOD COVERED: _____ TO _____ REISSUE: _____

GRANT RECORD

FOOD: \$ _____ VOUCHER #: _____ AMOUNT: \$ _____

RENT: \$ _____ VOUCHER #: _____ AMOUNT: \$ _____

UTILITIES: \$ _____ VOUCHER #: _____ AMOUNT: \$ _____

PERSONAL: \$ _____ UV CODE _____

ASSET AMOUNT: _____

R/B: \$ _____

ESS: \$ _____

REASON: _____

SP. NEEDS: \$ _____

REASON: _____

TRAVEL: \$ _____

MISC.: \$ _____

TOTAL: \$ _____ PC BALANCE: _____ PC UPDATE: _____

Advocate: _____ Date: _____ Supervisor: _____ Date: _____
Signature Signature

Bureau Chief: _____ Date: _____ Assistant Director: _____ Date: _____
Signature Signature

Revised: 03/23/2017

(06/12/2016)



Available Services

CVAC ID#6

Community Action and Human Services Department
Violence Prevention and Intervention Division
Coordinated Victims Assistance Center (CVAC)
2400 South Dixie Highway
Miami, Florida 33133
305-285-5900

Services Available at the Coordinated Victims Assistance Center (CVAC)

1. Care Coordination
2. Case Management
3. Child Care Application Assistance
4. Child Support Assistance
5. Children/Victim Individual and Group Counseling
6. Citizenship Classes
7. Community Referrals and Advocacy Services
8. Completion of Family Self Help Program Packages
9. Court Accompanying
10. Court Orientation Workshop
11. Crisis Counseling
12. Disbursement of Miami-Dade Transit Passes
13. Domestic Violence Legal Representation
14. Empowerment/Educational Support Group
15. Employability Services
16. Filing Criminal Cases
17. Filing a Police Report
18. Financial Emergency Assistance
19. Financial Literacy/Credit Counseling Workshops
20. Food Provision
21. Housing Discrimination Complaint Intake
22. HIV/STI Testing
23. Immigration Legal Services
24. Individual & Group Counseling for victims of sexual abuse for children, adolescents, adults, and non-offending caregivers
25. Information about Legal Programs and Procedures
26. Injunction Assistance Services
27. Injury Picture Taking
28. Mental Health Services
29. Office of the Attorney General Victim Compensation Claims
30. Parenting Educational Groups
31. Public Benefit Assistance
32. Relocation Assistance Program
33. Research Component
34. Shelter Services
35. Spiritual Counseling
36. Transitional Housing
37. Victim Address Confidentiality Program
38. Vocational Rehabilitative Services



Define

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Project Alignment to Strategy

This project supports the following objectives identified in the County's strategic plan:

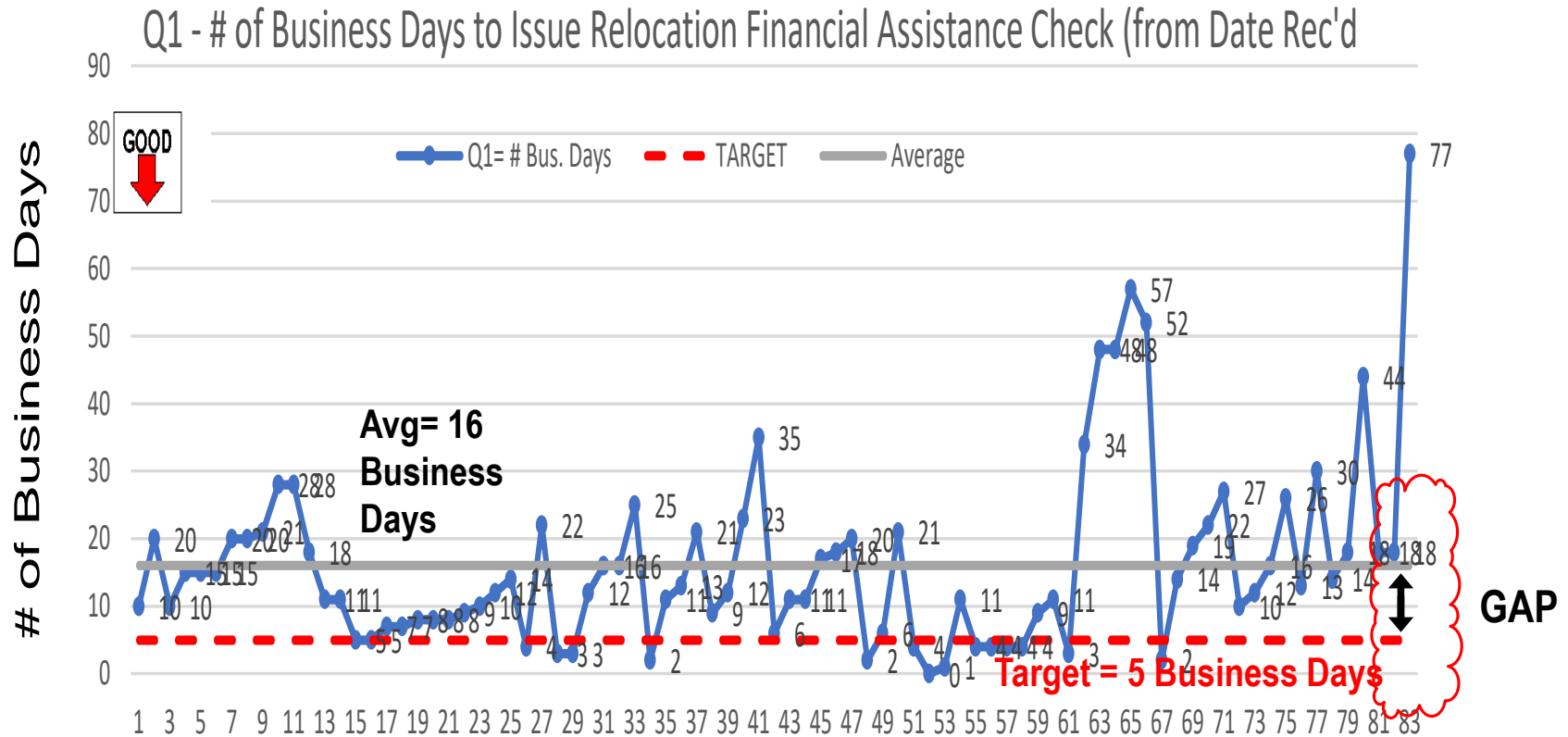
- **HS1: Basic needs of vulnerable Miami-Dade County residents are met**
 - HS1-4: Improve access to abuse prevention, intervention and support services
- **HS2: Self-sufficient and healthy populations**
 - HS2-1: Provide the necessary support services for vulnerable residents and special populations
- **GG1: Accessible, fair and responsible government**
 - GG1-1: Provide easy access to information and services



Display Indicator Performance “Gap”

4. ✓

The team collected Q1 indicator data and reviewed performance trends:



Issued checks Sequenced by from 10/1/20 thru 2/2/21

Source Box
When: 10/1/20 – 2/2/21
Where: Docusign Data Base
Who: Closing Gap Team



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Construct Process Flow Chart

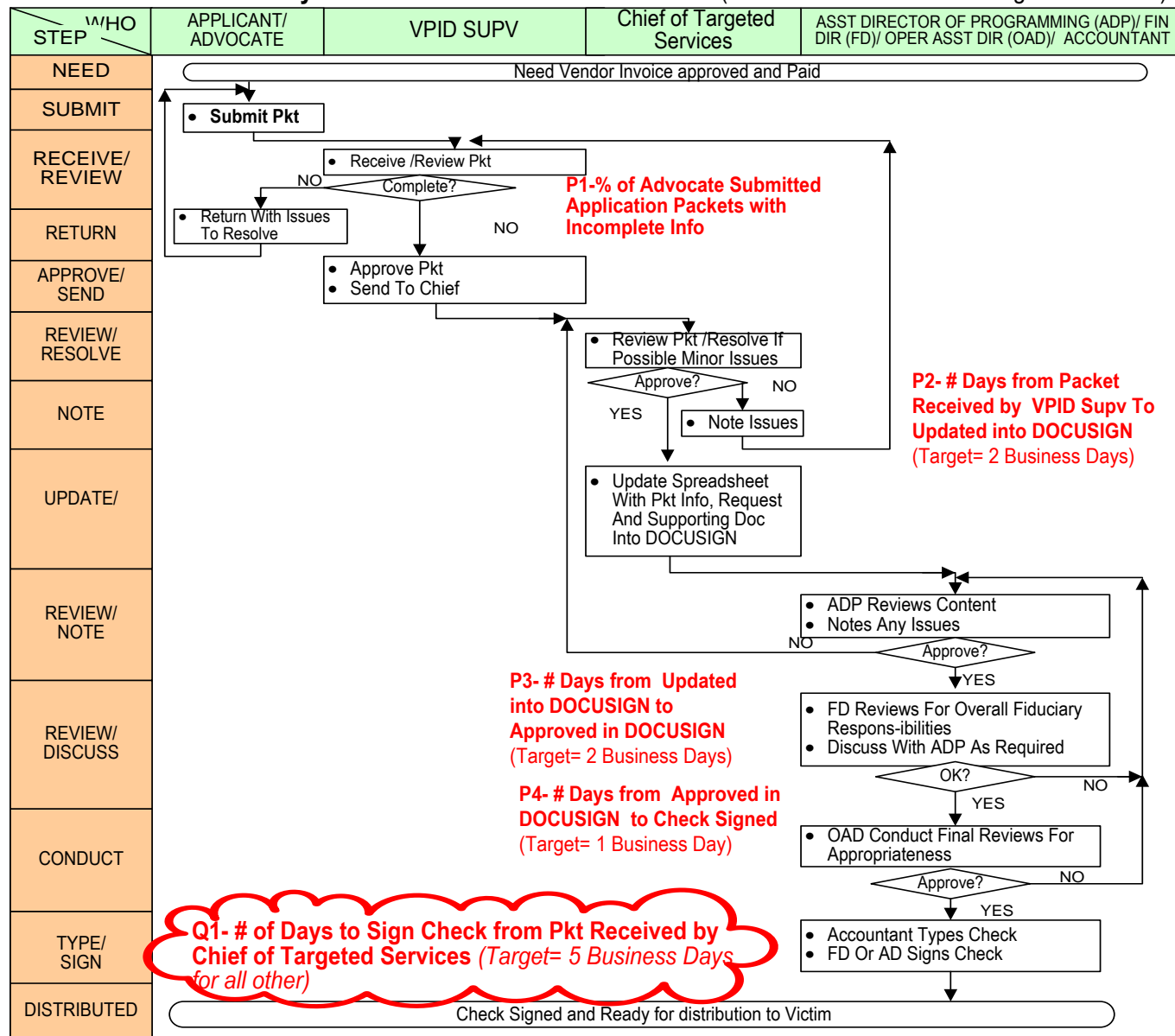
5.

The team constructed a Process flow chart describing the Process. (see appendix for SIPOC and Cust Requirement Matrix).

The team next looked Stakeholder process needs

Process Direct Relief Payments for Victims of Crime

(Process Owner: Chief of Targeted Services)



Identify Stakeholder Needs

1. 

The team identified stakeholder needs for the process outputs.

Stakeholders Needs	
Stakeholders	Process Output Needs
DV Victims and Family members	Timely and appropriate financial assistance
	Records kept confidential
	Expect MDC to provide support for wrap-around services
Vendors (landlords, etc.)	Timely and accurate payment as negotiated
Funders (State, Local, Fed)	Expect funds to be properly distributed timely
	Appropriate documentation and input into OSNIUM
MDC Mgmt.	Minimize fraud through proper vetting
	Efficient and effective process



Identify Cost of Poor Quality

6. 

The team identified the hidden costs of failing to pay assistance timely.

Stakeholder	Pain Experienced	Annualized "Costs" to MDC
DV Victims and Family members	<ol style="list-style-type: none"> 1. Rental/space not held due to late payment to landlord/vendor 2. Restarting the process of finding a new place rental/service 3. Victim remains in current situation 4. Undue stress- further victimizing the victim /remain in unsafe dwelling 	<ol style="list-style-type: none"> 1. Emergency/bed remains occupied (unable to help another victim) 2. An average of 5 cancelled checks per month may result in some rework efforts from the victim. (see last cell for this calculation cost to MDC) 3. Non-shelter victims remain in unsafe dwelling- Life or deathhard to quantify and the cost is to victims
Vendors (landlords, etc.)	<ol style="list-style-type: none"> 1. No incentive to hold the unit/space or work with the client or the County. 2. Late payments 3. Holding a slot/apartment that could have easier been filled by a non-client 4. Time wasted to follow-up with the County 	<ol style="list-style-type: none"> 1. Advocate and admin time spent to case manage landlords and vendors to preserve the unit/slot annually: \$2,849
Funders (State, Local, Fed)	<ol style="list-style-type: none"> 1. Local -The battle of the relief philosophy vs. fiduciary responsibilities (program staff vs. management) 2. Funder- is the program removing barriers without roadblocks that might victimize the victim., i.e. (proving proof of domestic abuse for assistance) 	<ol style="list-style-type: none"> 1. Audit could show problems for MDC to Correct. No significant costs to MDC, any Costs are shown in cell below
MDC Mgmt & Staff	<ol style="list-style-type: none"> 1. Constant following up for status update 2. Reworking the case from step 1 due to untimely approval 3. Additional tasks to perform when checks are not accepted by the vendor/landlord due to slow turnaround. 	<ol style="list-style-type: none"> 1. Admin staff follow-up from submission to check being signed- \$3,084 2. Admin staff follow-up for cases that are incomplete/need case note update: \$3,519 3. Accountant's time spent processing cancelled checks and balancing grant records \$961.00 4. Advocate reworking cases: \$3,680.00 5. Supervisor reviewing reworked cases: \$1,742.00 6. VPID Chief approving reworked cases: \$2,565 .00 7. VPID Chief involvement in tracking cases that are slowly reviewed: \$2,223.00

Total Cost of Poor Quality Savings = \$20,623 Annually



Develop Data Collection Needs

7.

The team developed a spreadsheet to help analyze the process.

DV Emergency Financial Relocation Assistance Summary *(every row is a Signed Check)*

Line #	D E M O G R A P H I C S												
	WHO			WHAT		WHAT			WHAT			WHAT	
	B	C	D	E	F	G	H	I	J	K	L	M	N
	Advocate Name	Client ID#	Vendor Type	Check #		Amount of Relief	Intake Type		Notes/Issues / Reasons for Return	Type of Funding		DV/ Human Trafficking	
			% Landlord			Avg				%Grant		%DV	
3	<= # Hires		33%			\$1,151				33%		67%	
1	Jim Shorts	1234	landlord	221		\$1,000.00	Emergency Shelter		Did not demonstrate	Grant		DV	
2	Jim Nasium	2221	Locksmit	232		\$2,000.00	LT Trans Housing		Delays in Div approval	General Fund		HT	
3	Snow White	2231	Bus	231		\$452.65	Emergency Shelter			Teacher		DV	

MILESTONE DATES												DURATION						OUTCOMES		BB
												Target Days						AP= AA-P-5	AR= Y' if AP<=0	
P	Q	R	S	U	V	W	X	Y	Z	AA	AB	1	1	1	1	1	5			
												AC= R-P	AD= U-R	AE= W-U	AF= Y-W	AG= AA-Y	AH= AA-P			
1- Assistance Request Initiated	2- Packet Prepared by VPID Admin	3- VPID Chief Approved Request	4- Ast Dir of Progrmg Approved	5- Ast Dept Director Approval	6- Check Prepared & Signed							Reqst Initiated TO Packet Prepared	Packet Prepared TO VPID Chf Apprvd	VPID Chf Apprvd TO Ast Dir Prgrmg Apprvd	Ast Dir Prgrmg Apprvd TO Ast Dept DiR Check Signed	Ast Dept DiR Apprvd TO Check Signed	Reqst Initiated TO Checked Signed	# Business Days Check Signed Late	Check Signed Timely ?	
Date	Day	Date	Day	Date	Day	Date	Day	Date	Day	Date	Day									
	%Mo		%Mo		%Mo		%Mo		%Mo		%Mo									
	0.0		0.0		0.7		0.7		0.7		1.4	0.7	3.7	1.7	1.3	0.7	8.0	3.0	33.3	
												Avg # of Days								
12/31/20	Th	1/1/21	Fr	1/4/21	Mo	1/4/21	Mo	1/4/21	Mo	1/4/21	Mo	P1	P2	P3	P4	P5	Q1	Q2	Q1	
1/1/21	Fr	1/1/21	Fr	1/8/21	Fr	1/8/21	Fr	1/8/21	Fr	1/11/21	Mo	1	1	0	0	1	2	-3	Y	
12/31/20	Th	1/1/21	Fr	1/8/21	Fr	1/15/21	Fr	1/21/21	Th	1/22/21	Fr	1	5	5	4	1	16	11	N	



Define

Measure

Analyze

Improve

Control

14

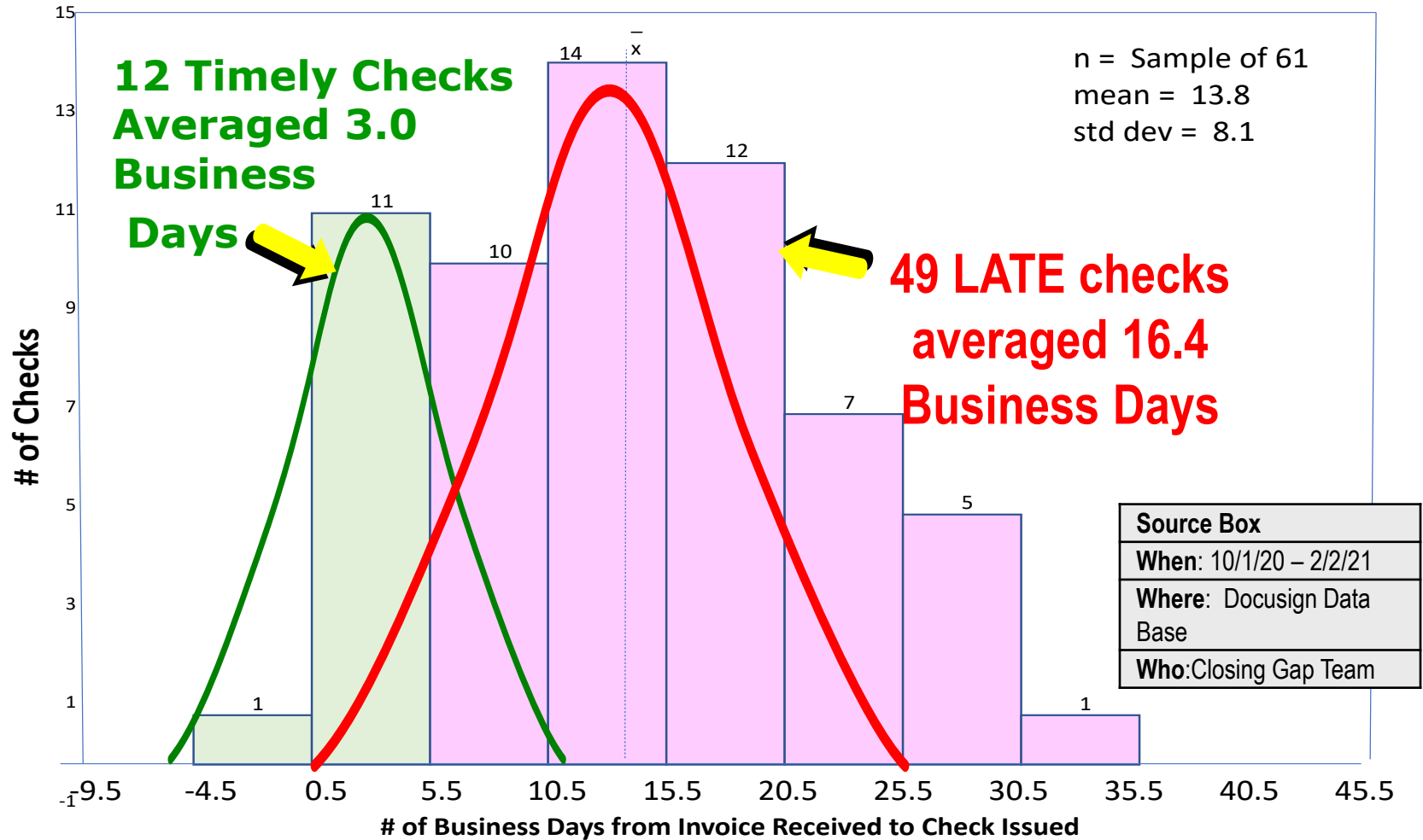


Stratify Problem

8. ✓

The team stratified the 61 sampled Relief Checks using a histogram and found...

DV Relief Payments Issued from 10/1/20 thru 2/2/21



The team decided to compare the **TIMELY** to the **LATE** checks.

Define

Measure

Analyze

Improve

Control


15

Stratify Problem

8. 

The team compared the average days of the **Late** Checks to the **Timely** Checks and Found ...

Process Direct Relief Payments for Victims of Crime

	49 Late Checks	12 Timely Checks	Difference	Process Steps	P4 step took 3.9 Business Days longer in P4 step than the timely checks 
P1	2.2	0.2	2	Reqst Initiated TO Packet Prepared	
P2	3.0	2.9	0.1	Packet Prepared TO VPID Chf Apprvd	
P3	2.1	0.4	1.7	VPID Chf Apprvd TO Ast Dir Prgmng Apprvd	
P4	6.0	2.1	3.9	Ast Dir Prgmng Apprvd TO FIN/OPS/Ast Dept DiR Apprvd	
P5	0.8	-2	2.8	Ast Dept DiR Apprvd TO Check Signed	
Q1	16.4	3.0	13.4	Reqst Initiated TO Checked Signed	

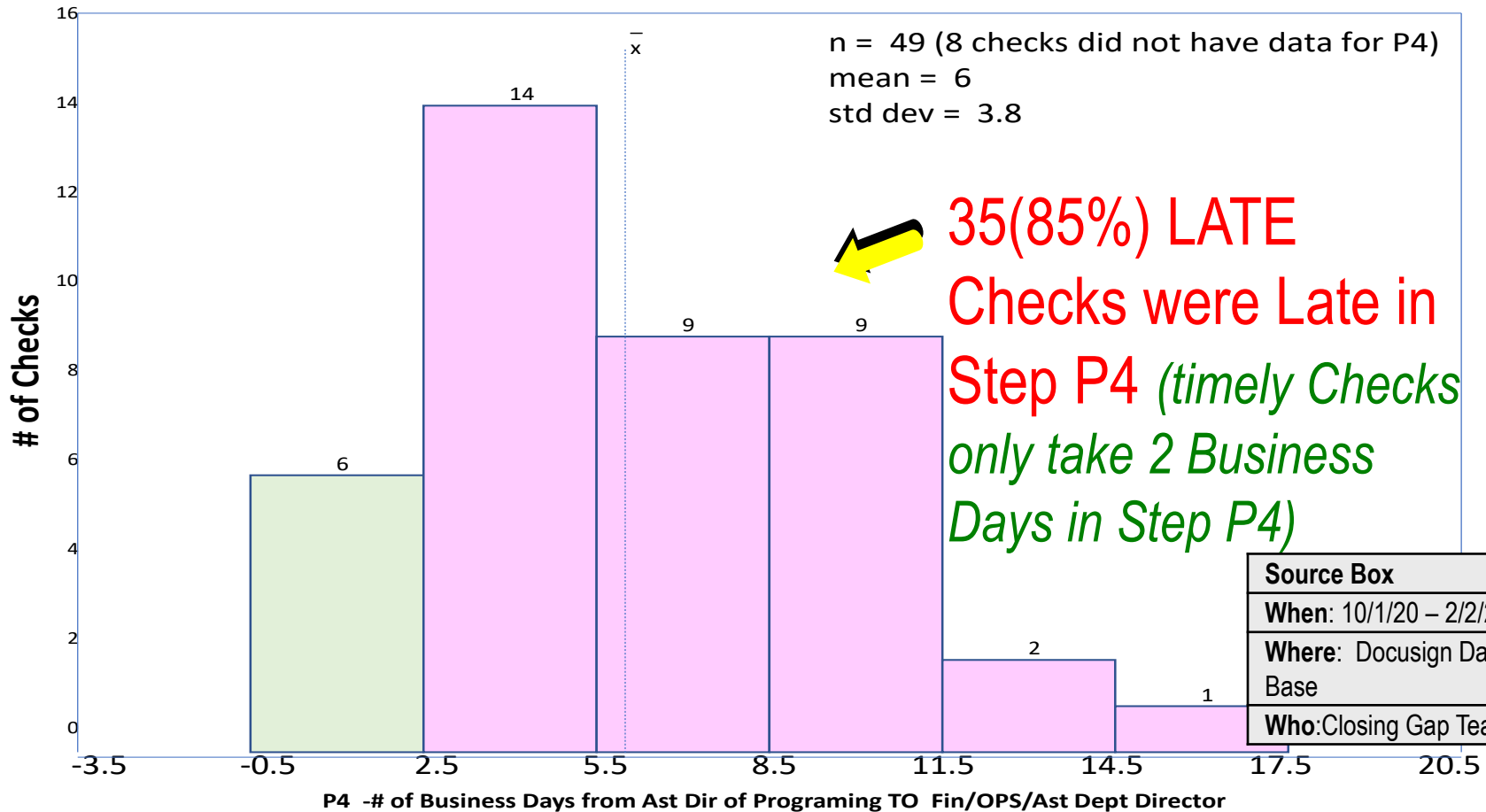
The team looked closer at the 49 averaging Late Checks that took 3.9 Business Days longer than Timely steps in the P4 Step.

Source Box
When: 10/1/20 – 2/2/21
Where: Docusign Data Base
Who: Closing Gap Team



The team stratified the 49 LATE checks for Step P4 and found...

DV Relief Checks Paid LATE (>5 Business Days) from 10/1/20 thru 2/2/21



The team looked more closely at the 35 Checks.

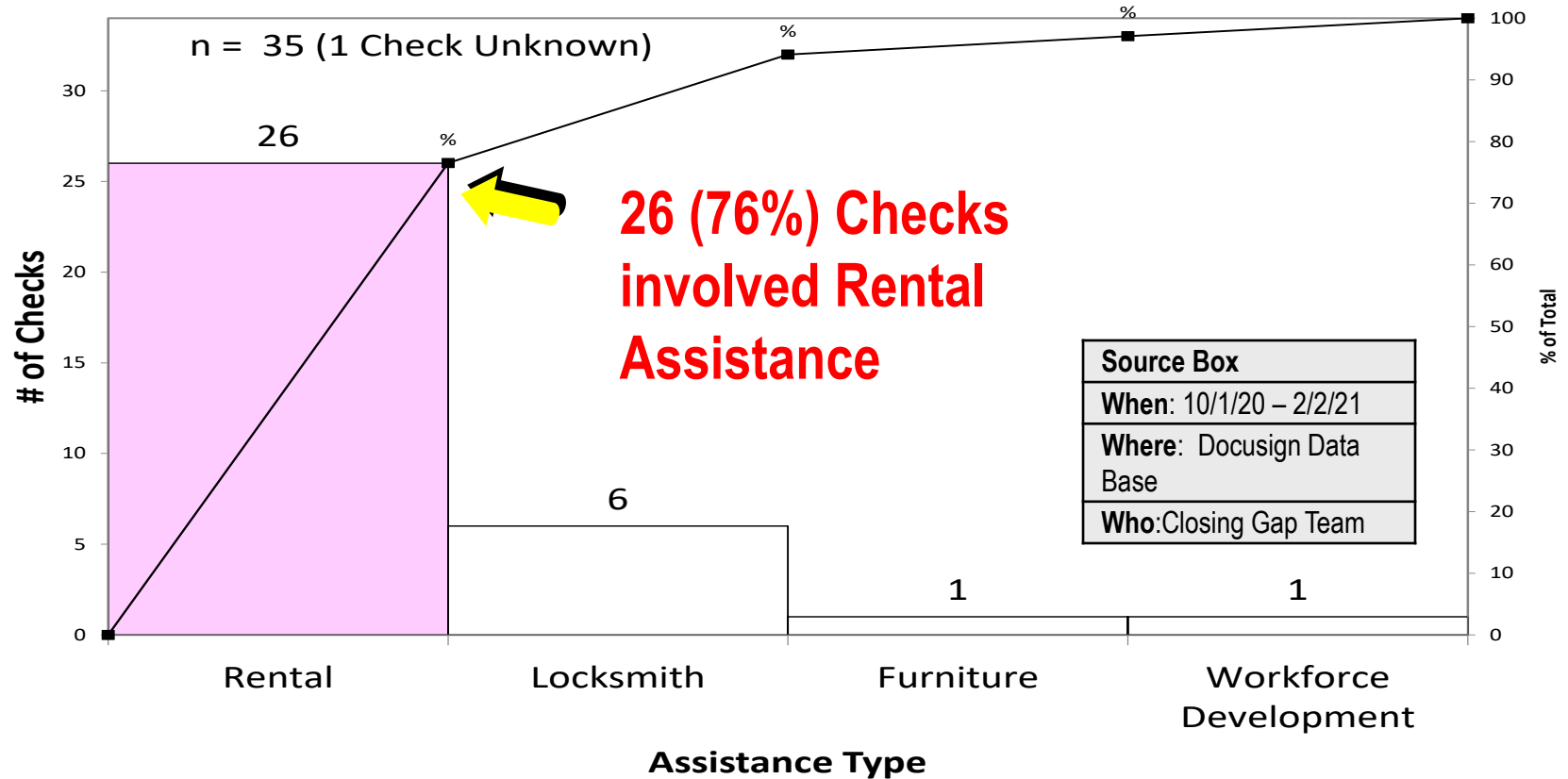


Stratify Problem

8., 9., 10. 

The team stratified the 35 Late checks many ways and found...

**LATE DV Relief Checks (>5 Bus. Days) taking >2 Business Days in Step P4
from 10/1/20 thru 2/2/21**



Problem Statement: *“26 DV LATE Relief Checks (>5 Business Days) issued between 10/1/20 through 2/2/21 took over 3 or more business Days to complete P4 Step (Final Fin/OPS/Asst Dir Approval and were for Rental Assistance)”*



Identify Potential Root Causes

12.,13., 15.



The team completed a Single Case Bore Analysis and found ...

Single Case Bore Analysis

Problem Statement: *"26 DV LATE Relief Checks (>5 Business Days) issued between 10/1/20 through 2/2/21 took over 3 or more business Days to complete P4 Step (Final Fin/OPS/Asst Dir Approval) and were for Rental Assistance"*

Reasons or Factors (that contributed to the above problem Statement)		Sampled 14 of 26 Late Checks															
		1_Ck#2258: \$20	2_Ck#2259: \$20	6_Ck#2265: \$110	7_Ck#2266: \$24	8_Ck#2268: \$3	9_Ck#2277: \$3	10_Ck#2278: \$3	11_Ck#2282: \$3	13_Ck#2288: \$3	14_Ck#2289: \$2	15_Ck#2290: \$3	18_Ck#2332: \$2	19_Ck#2340: \$3	20_Ck#2367: \$3	Total	Percentage
A	1) Approver has no help in Docusign	X	X	X	X	X	X	X	X	X	X	X	X	X	14	100%	
B	2) Approver had competing priorities	X	X	X	X	X	X	X	X	X	X	X	X	X	14	100%	
C	3) Approver does not have process to check Docusign daily	X	X	X	X	X	X	X	X	X	X	X	X	X	14	100%	
D	4) Approver Docusign alert process different from best practices	X	X	X	X	X	X	X	X	X	X	X	X	X	14	100%	



Identify Potential Root Causes

12., 13. 

The team completed the Fishbone Analysis...

C- Approver does not have process to check Docusign Daily 100%

Fiscal and Admin approvers used different processes other than daily checks

C There is NO standardized Process for timely checking and approving Assistance Check

Fiscal and Admin approvers used different processes other than daily checks

C There is NO standardized Process for timely checking and approving Assistance Check

D- Approver Docusign Alert Process different than Best Practice 100%

A- Approver has no help in office (100 %)

Approver did not receive reminders when assistant not there

Approver not aware of reminder alternatives to keep them informed

A Approver not fully trained on Docu-Sign Reminder Features

County Budget Deadlines took priority over other approver work

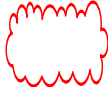
B There is no "Best Practice" Alert process utilized by all Approvers

B- Approver has competing priorities(100%)

Diagram

Problem Statement

"26 DV LATE Relief Checks (>5 Business Days) issued between 10/1/20 through 2/2/21 took over 3 or more business Days to complete P4 Step (Final Fin/OPS/Asst Dir Approval and were for Rental Assistance"

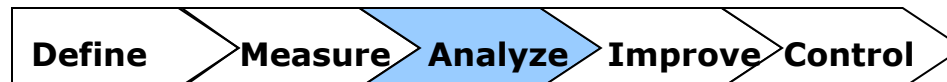
 =Potential Root Cause



The team collected data to verify the root causes and found....

Root Cause Verification Matrix			
Potential Root Cause	How Verified? (Describe in terms of numbers when possible)	Estimated Impact On Gap (H,M,L)	Root Cause or Symptom
A Approver not fully trained on Docu-Sign Reminder Features	Training was a 1 time Zoom training in Aug 2020 and was minimal at best. Assistants and most Approvers attended	High 100%	Root Cause
B There is no "Best Practice" Alert process utilized by all Approvers	Fiscal and Admin use a different Process and features than other approvers...no standardized process for Rental Assistance	High 100%	Root Cause
C There is NO standardized Process for timely checking and approving Assistance Check	Fiscal and Admin use a different Process and features than other approvers...no standardized process for Rental Assistance	High 100%	Root Cause

All three (3) were validated as root causes.







Identify and Select Countermeasures

14., 15. 

The team brainstormed many countermeasures and narrowed them down to these for evaluation:

5=Extreme; 4=High; 3=Moderate; 2=Somewhat; 1=Little

5=Extreme; 4=High; 3=Moderate; 2=Somewhat; 1=Little

Countermeasures Matrix						
Problem Statement	Verified Root Causes	Countermeasures	Legend:			
			5=Extremely		3=Moderately	
			4=Very		2=Somewhat	
Ratings						
			Effective-ness	Feasi-bility	Overall	Take Action? Y/N
“26 DV LATE Relief Checks (>5 Business Days) issued between 10/1/20 through 2/2/21 took over 3 or more business Days to complete P4 Step (Final Fin/OPS/Asst Dir Approval and were for Rental Assistance”	A- Approver not fully trained on Docu-Sign Reminder Features	A1- Provide Refresher training to Appropriate Approvers and staff	4	4.0	16.0	
	B- There is no “Best Practice” Alert process utilized by all Approvers	B1- Establish "Best Practice" ...VPID Admin person to create electronic alerts throughout entire process for every DV Relief request	3.5	4.0	14	
	C- There is NO standardized Process for timely checking and approving Assistance Check	C1- Create DV Relief Check Policy to require approvers to review requests within 24 hrs of an alert received	4.0	5.0	20	
		C2- Reduce # of Approvers (and train them in all types of reviews) for selected DV Relief Checks and perform Quarterly QA audit to ensure internal requirements met	5.0	3.0	15	

The team selected 4 Countermeasures for implementation.

Define Measure Analyze Improve Control

Identify Barriers and Aids

16.



The team performed Barriers and Aids analysis on the selected Countermeasures.

Countermeasure: **Implement 4 Countermeasures to Improve DV Relief Payment Timeliness**

Barriers		Aids
Impact (H, M, L)	Forces Against Implementation	Forces For Implementation
H	1. Forgetfulness of Approvers to commit to completing Docu-Sign timely; (Supported by A, C)	A. Management Support and Most staff are excited about Countermeasures
L	2. Limited financial resources (Supported by A, B, C)	B. Docu-sign User SMEs and trainers
L	3. Staff very busy and limited time to commit to countermeasure (Supported by A, B, C)	C. Benefits and Savings of countermeasures

The team next sought to incorporate this analysis into the team's Action Plan.



Define

Measure

Analyze

Improve

Control

23

Implement Action Plan

17.



The team incorporated the Barriers and Aids analysis into the Action Plan.

Legend:	
	= Actual
	= Proposed

WHAT: **Implement 4 Countermeasures to Improve Relief Payment Timeliness**

HOW	WHO	WHEN				
		2021				
		Apr	May	Jul	Aug	Sep
1. Develop Countermeasures/ Practical Methods:						
A1- Provide Refresher training to Appropriate Approvers and staff (Trainers and SMEs involved developing Training)	Crystal					
B1- Establish "Best Practice" ...VPID Admin person to create electronic alerts throughout entire process for Relief request	Crystal					
C1- Create DV Relief Check Policy to require approvers to review requests within 24 hrs of an alert received	Crystal					
C2- Reduce # of Approvers (and train them in all types of reviews) for selected DV Relief Checks and perform Quarterly QA audits	Annika					
2. Secure Management Approval of Countermeasures (share benefits and savings)	Team					
3. Communicate/Train Staff in Countermeasures and related policies/procedures (share benefits and Mgmt Support, SMEs)	Team					
4. Implement /Pilot Countermeasures (Review results and adjust countermeasures for ongoing operations)	Team					
5. Establish On-going responsibilities and standardize countermeasures into operations	Team					



Define

Measure

Analyze

Improve

Control

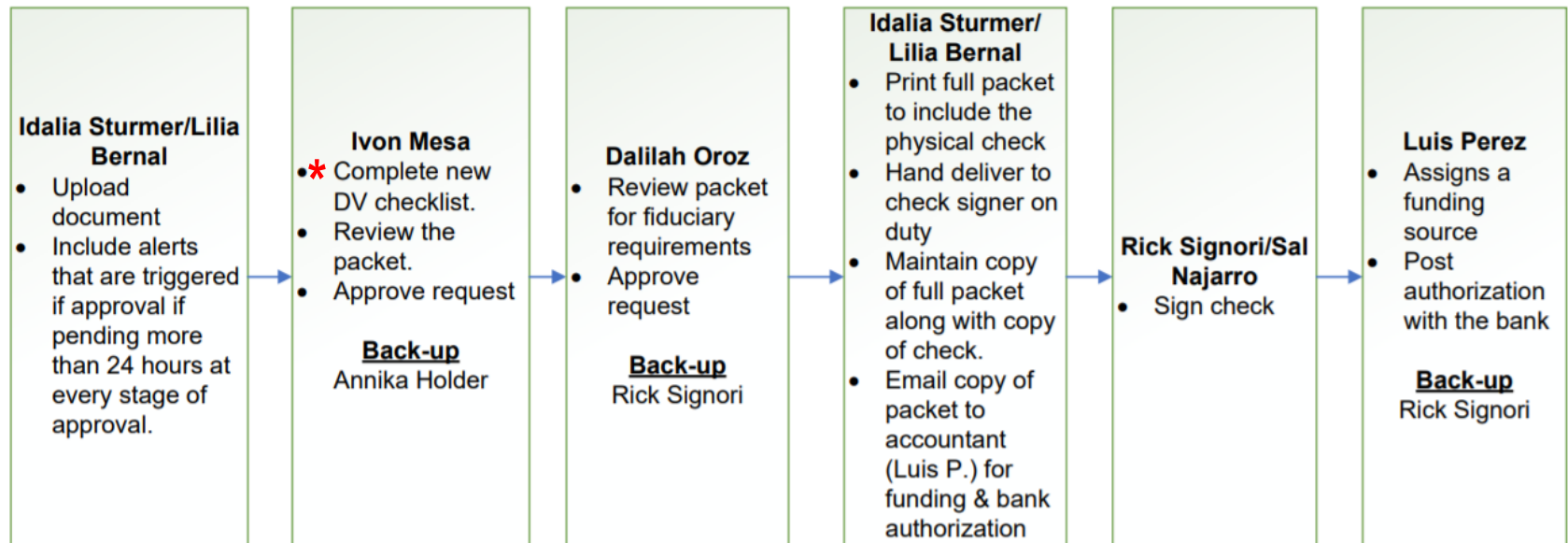
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B1- Establish "Best Practice" Approval Policy



DRAFT
Domestic Violence Direct Relief Approval Process
T - 5 Days
Implemented May 5, 2021




Quality Assurance Review – Review of ten randomly selected cases per quarter.

*** Checklist to Replace other approvers**



Estimate Countermeasures Costs/Benefits/ROI

The team estimated the Costs and Benefits of the countermeasures.

20. 

ROI WORKSHEET for: 4 Countermeasures to improve Check Timeliness

ITEMIZED COUNTERMEASURE COSTS (DESCRIPTION)	\$ VALUE (ANNUALIZED)	ITEMIZED BENEFITS (DESCRIPTION)	\$ VALUE (ANNUALIZED)
A1- Provide Refresher training to Appropriate Approvers and staff	\$300	Team felt they should achieve 100% of COPQ	\$20,623
B1- Establish "Best Practice" ...VPID Admin person to create electronic alerts throughout entire process for Relief request	NA		
C1- Create DV Relief Check Policy to require approvers to review requests within 24 hrs of an alert received	NA		
C2- Reduce # of Approvers (and train them in all types of reviews) for selected DV Relief Checks and perform Quarterly QA audits	NA		
Total Investment Cost	\$300	Total Expected Annualized Benefits	\$20,623

Net Benefits=(Annl Benefits – Investment Cost)==> \$20,323

ROI=(Net Benefits/Investment Cost) ==> 67 : to 1 ratio

Define

Measure

Analyze

Improve

Control

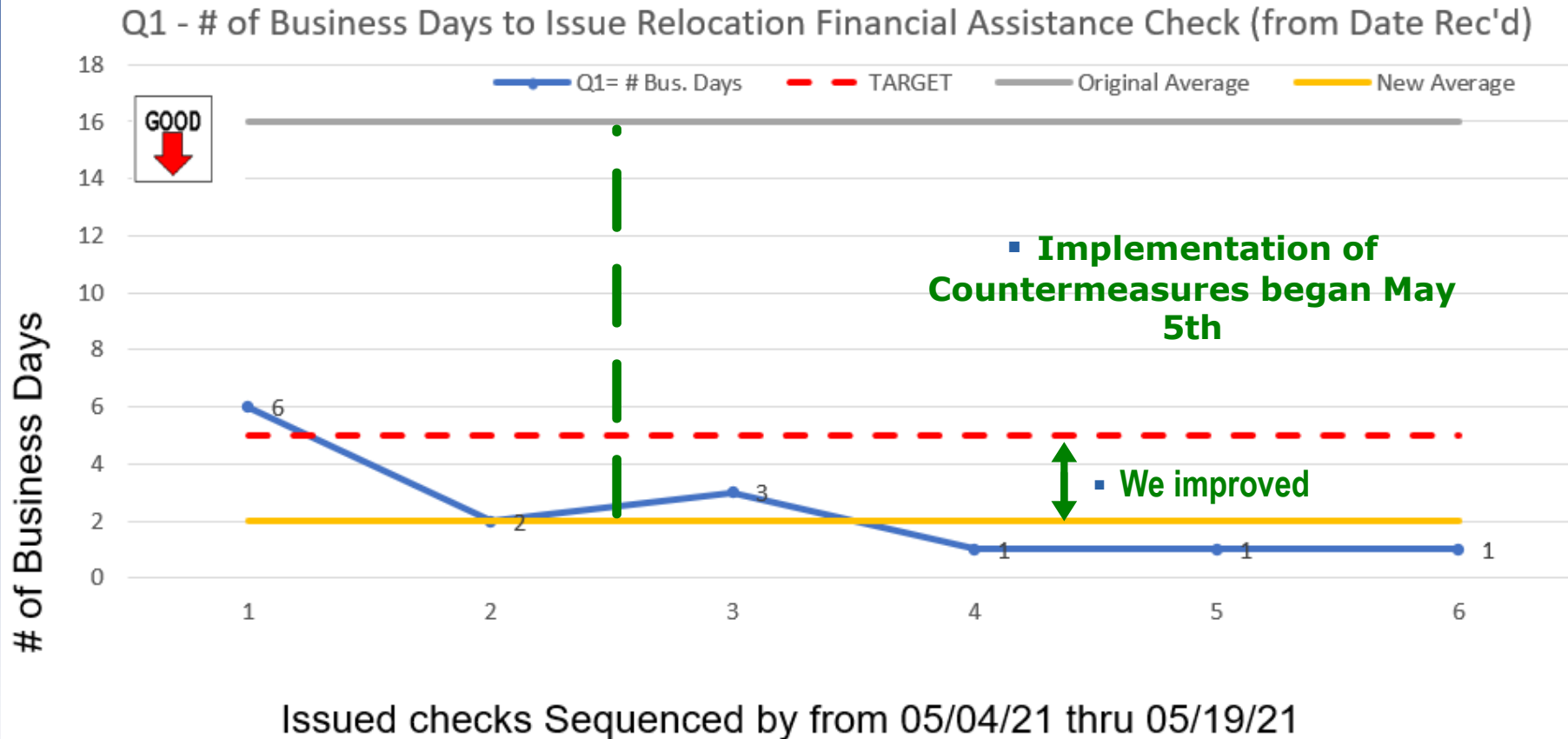


Review Results

19., 21.



The team collected indicator data and reviewed performance trends:



- The team will continue to monitor the countermeasures.

Source Box
When: 05/01-05/19/2021
Where: DocuSign Data Base
Who: Closing Gap Team

Define

Measure

Analyze

Improve

Control

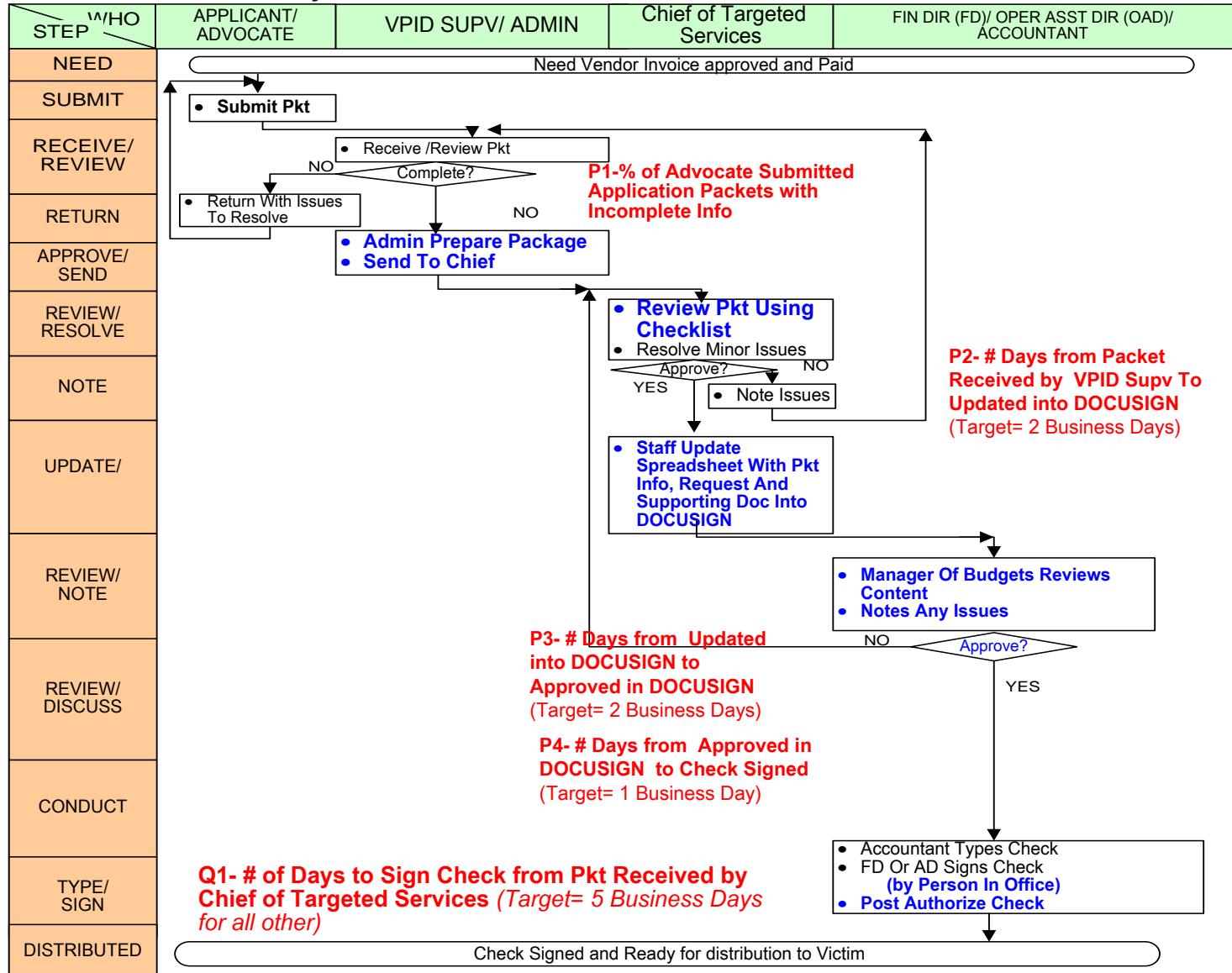
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The team incorporated their countermeasures into their Process Flowchart.

Process Direct Relief Payments for Victims of Crime

(Process Owner: Chief of Targeted Services)



FBC_DMAIC Story_Reduce Days to Pay DV Emerg Fin Reloc Assistance_MDC_FLOWCHART_Proposed_3-8-21.vsd 5/3/21



Define

Measure

Analyze

Improve

Control

Standardize Countermeasures

23.



The team completed the Process Control System form for the Process.

Process Control System Form					
Process Name: Process Direct Relief Payments for Victims of Crime			Process Owner: Chief of Targeted Services		
Process Customer: Victims of Crime			Critical Customer Requirements: Provide timely payments for Requests		
Process Purpose: Process assistance request for payment			Current Sigma Level: TBD		
			Outcome Indicators: Q1		
Process and Quality Indicators		Checking / Indicator Monitoring			Contingency Plans / Misc. Actions Required for Exceptions Procedure References
Process Indicators And Quality Indicators	Control Limits Specs/ Targets	Data to Collect What is Checking Item or Indicator Calculation	Timeframe (Frequency) When to Collect Data?	Responsibility Who will Check? Actions Required for Exceptions	
P1-% of Advocate Submitted Application Packets with Incomplete Info	TBD	100*(# of Advocate Submitted Appln Packets with Incomplete Info)/ (# Appl Pkts)	Monthly	Quality Assurance Team	
P2- # Days from Packet Received by VPID Supv. To Updated into DOCUSIGN (Target= 1 Business Days)	TBD	(date Updated in DOCUSIGN)-(Date Recd. by Chief)	Monthly	Quality Assurance Team	Escalate to Mgmt; Spreadsheet
P3- # Days from Updated into DOCUSIGN to Approved in DOCUSIGN (Target= 3 Business Days)	TBD	(date Approved in DOCUSIGN)-(Date Updated to DOCUSIGN)	Monthly	Quality Assurance Team	Escalate to Mgmt; Spreadsheet
P4- # Days from Approved in DOCUSIGN to Check Signed (Target= 1 Business Day)	TBD	(date Check Signed)-(Date Approved in DOCUSIGN)	Monthly	Quality Assurance Team	Escalate to Mgmt; Spreadsheet
Q1- # of Days to Sign Check from Pkt Received by Chief of Targeted Services (Target= 1 day for Locksmith)	5 Bus Days	(date Check Signed)-(Date Recd by Chief)	Monthly	Quality Assurance Team	Escalate to Mgmt; Spreadsheet

Approved:
Date:
Rev #:
Rev Date:

The team will monitor using this form.



Define

Measure

Analyze

Improve

Control

29



Lessons Learned

- 1) **COPQ is important to quantify Cost to MDC.** It also pointed out cost to victims (including time and mental anguish)
- 2) **Single Case Bore was effective** to identify specific items causing delays in process.
- 3) **Data Collection was very important** ...both how to Collect and stratifying data that led the team to find the root causes (peeling back the onion to see the real causes).
- 4) **Question your process**, why do you do what you do and does it still apply. Keep evolving!

Next Steps

- 1) **Continue to Implement Countermeasures and monitor performance results**



Appendix A

S.I.P.O.C. Analysis

Process: *Process Direct Relief Payments for Victims of Crime*

Process Owner: *Chief of Targeted Services*

Date Approved:

Suppliers	Inputs	Process	Outputs*	Customers
Victim/ Advocate	Application Form Supporting Docs	1. VPID Supv <i>Processes and Approves Application Packet</i>	Complete Pkt approved by VPID Supv	Chief
Adobe	DOCUSIGN	2. Chief Reviews and Approves Packet and route for approval in DOCUSIGN	DOCUSIGN Electronic PKT	ADP/OAD/FD
VPID Supv	Complete Pkt approved by VPID Supv			
Grantor/ Account	Current Budget/ Grants	3. ADP/OAD/ FD review and approve in DOCUSIGN	Approved PKT in DOCUSIGN	CHIEF
Chief	DOCUSIGN Electronic Packet			FD/ Accountant
OAD	Tracking System for \$ spent to date			
Accountant	Check Mgmt System	4. FD accountant types Check FD or AD signs check	Signed Check	Victim/ Advocate
	Approved PKT in DOCUSIGN			

* Outputs used to
Identify Outcomes



Appendix B

Customer Requirements Matrix

Process: <i>Process Direct Relief Payments for Victims of Crime</i>					
Survey Voice of Customer			Process Output(s)	Customer Valid Requirement	Outcome Indicator (<i>P</i> = <i>In-Process</i> ; <i>Q</i> = <i>End-of-Process</i>)
Quality Element	Example Question				
1	Timeliness	What timeframe does the customers need for Process outputs?	Complete Pkt approved by VPID Supv and submitted to Chief	1. Approve initial Packets timely (and locksmith Requests in same day)	Q1- # of Days to Sign Check from Pkt Received by Chief of Targeted Services (Target= 5 days or less)
2	Accuracy	How accurate do the outputs need to be?		2. Chief wants the request to be vetted, fiunding source identified and client assessed 3. Chief also wants All required docs to be included in the packet and/or accessible via database	P1-% of Advocates that Submit Application Packets with incomplete/missing information resulting in a delay in the approval process
3	Accuracy/ Timeliness	How accurate and timely do the outputs need to be?	DOCUSIGN Electronic PKT	4. ADP/OAD/FD that all Appropriate docs are included and need well documented	P2- # of Days from Packet Received by Chief To Updated into DOCUSIGN (Target = 1 Business Day)
4	Timeliness	What timeframe does the customers need for Process outputs?	Approved PKT in DOCUSIGN	5. Pkt Approved Timely	P3- # of Days from Updated into DOCUSIGN to Approved in DOCUSIGN by ADP (Target= 1 Business Days) P4- # of Days from Approved in DOCUSIGN by Fiscal group to Check Signed (Target= 1 Business Day)
5	Timeliness	What timeframe does the customers need for Process outputs?	Signed Check	6. Check ready ASAP (5 business Days)	Q1- # of Days to Sign Check from Pkt Received by Chief of Targeted Services (Target= up to, but no more than, 5 Business Days)

