

Reach For Your Potential, Inc.

Performance Measurement & Management Summaries



3-Year Full Accreditation
Day Habilitation & Supported Community Living

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Incident Report Summaries

2021 Incident Report Summary | Day Programming

A systematic and comprehensive review of all incidents takes place biannually. It is a critical component to prevention, risk management, and ongoing performance improvement. Reach for Your Potential, Inc. (RFYP) provided day program services to 60 members from June 1, 2021 to August 30, 2021. Due to Covid-19 precautions and protecting the health and safety of the members and staff, Day Habilitation services were suspended for a second time on September 1, 2021.

All services provided were provided at the RFYP Day Habilitation Program at 1705 S. 1st Avenue in Iowa City, Iowa or in the community. All minor and major incidents that occurred in 2021 have been tracked and summarized in this report. The results have been analyzed to identify the following: trends, causes, extenuating factors, internal and external reporting requirements, necessary training of personnel, a comparative analysis to the previous year's incidents, prevention of reoccurrence, areas needing improvement, and actions taken to address the issues. Action plans for continuous quality improvement will be implemented starting in January 2022 and reviewed for progress in six months. This allows RFYP the opportunity to assess if the actions taken are accomplishing the intended results.

Major Incident Summary

| | 2021 | 2020 | Comparative Analysis |
|---|------|------|----------------------|
| Results in physical injury to or by the individual that requires physician's treatment or admission to hospital | 0 | 0 | No Change |
| • Intentional injury to self or others | 0 | 0 | No Change |

| | | | |
|---|----------|----------|-----------|
| ● Accident | 0 | 0 | No Change |
| ● Cause unknown/other | 0 | 0 | No Change |
| ● Occurred while under another person's care | 0 | 0 | No Change |
| Results in death | 0 | 0 | No Change |
| ● Death of a member | 0 | 0 | No Change |
| ● Death of someone else | 0 | 0 | No Change |
| Requires emergency mental health treatment | 0 | 0 | No Change |
| ● Self-Injury | 0 | 0 | No Change |
| ● Other | 0 | 0 | No Change |
| Requires the intervention of law enforcement | 0 | 0 | No Change |
| ● Member is the victim | 0 | 0 | No Change |
| ● Member is the perpetrator | 0 | 0 | No Change |
| ● Other | 0 | 0 | No Change |
| Requires the report of child abuse or dependent adult abuse | 0 | 0 | No Change |
| ● By a staff member | 0 | 0 | No Change |
| ● By someone else | 0 | 0 | No Change |
| ● Other | 0 | 0 | No Change |
| Constitutes a prescription medication error or a pattern of medication errors that leads to physical injury, death, or emergency mental health treatment | 0 | 0 | No Change |
| ● Medication not administered | 0 | 0 | No Change |
| ● Wrong person | 0 | 0 | No Change |
| ● Wrong medication | 0 | 0 | No Change |
| ● Wrong dose | 0 | 0 | No Change |
| ● Wrong time | 0 | 0 | No Change |
| ● Wrong method | 0 | 0 | No Change |
| Involves a consumer's location being unknown by provider staff who are assigned protective oversight | 0 | 0 | No Change |

| | | | |
|-----------------------------|----------|----------|-----------|
| ● Member elopement | 0 | 0 | No Change |
| ● Staff leaves member alone | 0 | 0 | No Change |
| ● Other person/provider | 0 | 0 | No Change |
| Total | 0 | 0 | No Change |

Trends: There were no major incidents at the Day Habilitation. The Day Habilitation program was suspended due to Covid-19 starting September 1, 2021.

Causes: Habilitation program was suspended indefinitely due to Covid-19 starting September 1, 2021.

Extenuating Factors: The Day Habilitation program was open three months in 2021. There were no major incidents while the program was open. The program was suspended indefinitely due to Covid-19 starting September 1, 2021.

Internal reporting requirements:

| Internal Requirements | Timeline | Concerns |
|--|--|---|
| Incident reports must be filled out by staff for every incident | Immediately notify Facilitator or Service Coordinator when incident occurs | No concerns. All reporting requirements are being followed. |
| All incident report forms must be turned into the DH Service Coordinator | Within 24 hours | No concerns. All reporting requirements are being followed. |
| DH Program Director notified | By end of next calendar day | No concerns. All reporting requirements are being followed. |
| Medical Team notified of the incident report | By end of next calendar day | No concerns. All reporting requirements are being followed. |
| Original incident | Filed in central file | No concerns. All reporting requirements are being followed. |

External reporting requirements:

| Requirements | Timeline | Submission Protocol | Concerns |
|--------------|----------|---------------------|----------|
|--------------|----------|---------------------|----------|

| | | | |
|---------------------------|---|---|---|
| Case Management | Notified by end of next calendar day | Email incident report | No concerns. All reporting requirements are being followed. |
| Managed Care Organization | Notified by end of next calendar day | Email incident report through their portal system | No concerns. All reporting requirements are being followed. |
| Legal Guardian | Notified by end of next calendar day | Phone call or email to report incident | No concerns. All reporting requirements are being followed. |
| CARF | Notified within 30 days of sentinel event | Notification through email or fax | No concerns. All reporting requirements are being followed. |

Necessary Education and Training of Personnel: Incident report training takes place at hire and annually. RFYP remains responsive and proactive to training staff to lower the risk of incidents occurring. After each suspension due to COVID-19, staff have a re-training on all protocols before members begin services again.

Prevention of Recurrence: Staff training/retraining, staff discipline, environmental modifications, policy review, and/or referral to the safety committee may take place to develop systemic interventions to prevent reoccurrence or patterns of incidents as deemed appropriate. The Program Director and immediate supervisor reviews every incident report to determine cause, communicate with the staff and members involved, and immediately implement prevention strategies.

Member-specific training takes place at hire and ongoing during staff meetings so all staff are aware of the individual needs of the member to prevent incidents. Environmental conditions are discussed, and if modifications or structural improvements are needed/identified, a work order is immediately submitted to the RFYP maintenance team or for referral to an external contractor.

The RFYP Safety Committee meets monthly. The committee consists of representatives from multiple departments and includes member representatives for a spectrum of input. Incidents may be reviewed by the safety committee to discuss current safety concerns and develop plans proactively to prevent future incidents. The committee also reviews work orders, major incidents, safety inspections, functional and structural accommodations, and the main office, SCL, and DH environments.

Areas needing improvement: There were zero major incidents in 2021. There are no identified areas of improvement.

Actions to address the improvements needed: There were zero major incidents in 2021. There are no identified areas of improvement. When the Day Habilitation reopens, the new and current staff will participate in an orientation training to review all of the policies and procedures specific to the program.

Minor Incident Summary

| | 2021 | 2020 | Comparative Analysis |
|---|----------|-----------|----------------------|
| Results in the application of basic first aid | 0 | 5 | -5 |
| Results in bruising* | 2 | 0 | +2 |
| Results in seizure activity | 3 | 6 | -3 |
| Results in injury | 0 | 1 | -1 |
| • To self | 0 | 0 | No Change |
| • To others | 0 | 1 | -1 |
| • To property | 0 | 0 | No Change |
| Constitutes a prescription med error as result of RFYP staff | 0 | 0 | No Change |
| • Medication not administered | 0 | 0 | No Change |
| • Wrong person | 0 | 0 | No Change |
| • Wrong medication | 0 | 0 | No Change |
| • Wrong dose | 0 | 0 | No Change |
| • Wrong time | 0 | 0 | No Change |
| • Wrong method | 0 | 0 | No Change |
| Constitutes a prescription med error as a result of: | 0 | 0 | No Change |
| • Declining | 0 | 0 | No Change |
| • Under another person's care | 0 | 0 | No Change |
| Total | 5 | 12 | -7 |

*RFYP tracks all observed bruises as minor incidents even if the cause is unknown.

Trends: Overall total incidents decreased by 7, however, the Day Habilitation was only open for three months in 2021.

- Bruising (2)
- Seizures (3)

There was a trend with the occurrence of seizures. Every seizure must be documented as an incident. This type of incident will take place despite all prevention. RFYP staff are trained on individual seizure protocols. The incidents resulting in bruising are from unknown causes.

Causes: Every seizure must be documented as an incident. There is a member of the Day Habilitation with a seizure disorder. This type of incident will take place despite all prevention. RFYP staff are trained on individual seizure protocols. Additionally, RFYP documents every bruise as a precautionary measure even if the reason for the bruise is unknown.

Extenuating Factors: The Day Habilitation program was suspended indefinitely due to Covid-19 starting September 1, 2021. While the program was open, there were low numbers of members participating at one time.

Internal reporting requirements:

| Internal Requirements | Timeline | Concerns |
|--|--|---|
| Incident reports must be filled out by staff for every incident | Notified immediately when incident occurs | No concerns. All reporting requirements are being followed. |
| Staff must notify the RFYP Med Team, Service Coordinator, or Administrative Staff | Notified immediately after the incident occurs | No concerns. All reporting requirements are being followed. |
| All incident report forms must be turned into the Day Habilitation Service Coordinator | Notified within 24 hours | No concerns. All reporting requirements are being followed. |
| Program Director | Notified by end of next calendar day | No concerns. All reporting requirements are being followed. |
| Medical Team notified of the incident report | Notified by end of next calendar day | No concerns. All reporting requirements are being followed. |
| Original incident | Filed in central file | No concerns. All reporting requirements are being followed. |

External reporting requirements: There are no external reporting requirements for minor incidents. Minor injuries may be reported to the parent, guardian, and/or case manager. This is dependent on the type of minor incident and the personal protocols of the member.

Necessary Education and Training of Personnel: Incident report training takes place at hire and annually. Incident report review is discussed with staff at house meetings and service coordinator meetings. A review of the current incidents contribute to the decision to insert additional training topics, add to the current incident report training, or add to more formal and informal training throughout the year. RFYP remains responsive and proactive to training staff to lower the risk of incidents occurring.

Prevention of Recurrence: Staff training/retraining, staff discipline, environmental modifications, policy review, and/or referral to the safety committee may take place to develop systemic interventions to prevent reoccurrence or patterns of incidents as deemed appropriate. The Program Director and immediate supervisor reviews every incident report to determine cause, communicate with the staff and members involved, and immediately implement prevention strategies.

Member-specific training takes place at hire and ongoing during staff meetings so all staff are aware of the individual needs of the member to prevent incidents. Environmental conditions are discussed, and if modification or structural improvements are needed/identified, a work order is immediately submitted to the RFYP maintenance team or for referral to an external contractor.

The RFYP Safety Committee meets monthly. The committee consists of representatives from multiple departments and includes member representatives for a spectrum of input. Incidents may be reviewed by the safety committee to discuss current safety concerns and develop plans proactively to prevent future incidents. The committee also reviews work orders, major incidents, safety inspections, functional and structural accommodations, and the main office, SCL, and DH environments.

Areas needing improvement:

1. Day Habilitation staff will have had a duration of time away from working at the program due to the suspension.

Actions to address the improvements needed:

1. Staff will be retrained on member-specific protocols and maintaining a safe environment prior to the Day Habilitation program reopening.

| |
|--|
| 2021 Incident Report Summary Medicaid Supported Community Living & Habilitation |
|--|

A systematic and comprehensive review of all incidents takes place biannually. It is a critical component to prevention, risk management, and ongoing performance improvement. Reach for Your Potential, Inc. (RFYP) provided Supported Community Living and Home Based Habilitation services to 135 members from January 1, 2021 to December 31, 2021. The incident report data reflects all members served by RFYP in 2021, including members both admitted and discharged.

Supported Community Living and Habilitation supports were provided in community-based, residential settings. All incidents that occurred in 2021 have been tracked and summarized in this report. The results have been analyzed to identify the following: trends, causes, extenuating factors, internal and external reporting requirements, necessary training of personnel, a comparative analysis to the previous year's incidents, prevention of reoccurrence, areas needing improvement, and actions taken to address the issues. Action plans for continuous quality improvement will be implemented starting in January 2022 and reviewed for progress in six months. This allows RFYP the opportunity to assess if the actions taken are accomplishing the intended results.

| |
|-------------------------------|
| Major Incident Summary |
|-------------------------------|

| | 2021 | 2020 | Comparative Analysis |
|---|-----------|-----------|----------------------|
| Results in physical injury to or by the individual that requires physician's treatment or admission to hospital | 9 | 18 | -9 |
| • Intentional injury to self or others | 5 | 3 | +2 |
| • Accident | 3 | 12 | -9 |
| • Cause unknown/other | 1 | 3 | -2 |
| Results in death | 4 | 2 | +2 |
| • Death of a member | 4 | 2 | +2 |
| • Death of someone else | 0 | 0 | No Change |
| Requires emergency mental health treatment | 6 | 5 | -1 |
| • Self-Injury | 0 | 0 | No Change |
| • Other | 6 | 5 | +1 |
| Requires the intervention of law enforcement | 27 | 21 | +6 |
| • Member is the victim | 2 | 2 | No Change |
| • Member is the perpetrator | 3 | 1 | +2 |
| • Other | 22 | 18 | +4 |
| Requires the report of child abuse or dependent adult abuse | 17 | 14 | +3 |
| • By a staff member | 17 | 14 | +3 |
| • By someone else | 0 | 0 | No Change |
| • Unknown | 0 | 0 | No Change |
| Constitutes a prescription medication error or a pattern of medication errors that leads to physical injury, death, or emergency mental health treatment | 1 | 1 | No Change |
| • Constitutes a prescription medication error as a result of staff | 0 | 1 | -1 |
| ○ Medication not administered | 1 | 0 | +1 |

| | | | |
|---|-----------|-----------|------------------|
| ○ Wrong person | 0 | 0 | No Change |
| ○ Wrong medication | 0 | 0 | No Change |
| ○ Wrong dose | 0 | 1 | -1 |
| ○ Wrong time | 0 | 0 | No Change |
| ○ Wrong method | 0 | 0 | No Change |
| ● Constitutes a prescription medication error as a result of declining/occurring under another person's care | 0 | 0 | No Change |
| Involves a consumer's location being unknown by provider staff who are assigned protective oversight | 3 | 4 | -1 |
| ● Member elopement | 3 | 4 | -1 |
| ● Staff leaves member alone | 0 | 0 | No Change |
| ● Another person/agency | 0 | 0 | No Change |
| ● Other | 0 | 0 | No Change |
| Total | 67 | 65 | +2 |

Extenuating Factors: RFYP experienced a staff shortage and increase in staff turnover. This resulted in direct care and office staff working shifts in homes they were not as familiar with. Covid-19 precautions, program suspensions, and increased efforts to protect the health and safety of the members and staff resulted in more members being home during the day with staff. Members experienced a disruption to their daily schedules due to safety precautions as a response to Covid-19. This has been a major adjustment for members and staff. New protocols and protective measures were immediately put into place as new guidance was received by local, state, and governmental officials.

Internal Reporting Requirements

| Internal Requirements | Timeline | Concerns |
|--|---------------------------------------|-------------|
| Incident reports must be filled out by staff for every incident | Immediately when incident occurs | No concerns |
| Staff must call and notify the RFYP Med Team, Service Coordinator, or Administrative Staff | Immediately after the incident occurs | No concerns |

| | | |
|---|--|-------------|
| All incident reports must be turned into the main office | Within 24 hours | No concerns |
| Supervisor notified | By end of next calendar day | No concerns |
| Medical Team receives copy of the incident report if the incident is related to a medical concern | Verbally notified of the incident within the calendar day Hard copy of the paper incident is given to the medical team after the supervisor has received it | No concerns |
| Original incident | Filed in central file | No concerns |

External Reporting Requirements

| Requirements | Timeline | Submission Protocol | Concerns |
|--------------------------|--|--------------------------------------|-------------|
| Case Manager | Notified by end of next calendar day | Email incident report | No concerns |
| MCO notification | Notified by end of next calendar day | Email incident report | No concerns |
| Legal Guardian | Notified by end of next calendar day | Phone call or email | No concerns |
| Bureau of Long Term Care | Notified by end of next calendar day | Notification is through MCO or IMPA | No concerns |
| CARF | Notified within 30 days of sentinel event | Notification is through email or fax | No concerns |
| DHS | Notified within 48 hours of becoming aware of the incident | Notification is through oral report | No concerns |

Necessary Education and Training of Personnel: Incident report training takes place at hire and annually. Incident report review is discussed with staff at house meetings and service coordinator meetings. A review of the current incidents

contribute to the decision to insert additional training topics, add to the current incident report training, or add to more formal and informal training throughout the year. RFYP remains responsive and proactive in training staff to lower the risk of incidents occurring.

Prevention of Recurrence: Staff training/retraining, staff discipline, environmental modifications, policy review, and/or referral to the safety committee may take place to develop systemic interventions to prevent reoccurrence or patterns of incidents as deemed appropriate. The Program Director and immediate supervisor reviews every incident report to determine cause, to communicate with the staff and members involved, and to immediately implement prevention strategies.

Member-specific training takes place at hire and is ongoing during staff meetings so all staff are aware of the individual needs of the member to prevent incidents. Environmental conditions are discussed, and if a modification or structural improvements are needed/identified, a work order is immediately submitted to the RFYP maintenance team or for referral to an external contractor.

The RFYP Safety Committee meets monthly. The committee consists of representatives from multiple departments and includes member representatives for a spectrum of input. Incidents may be reviewed by the safety committee to discuss current safety concerns and develop plans proactively to prevent future incidents. The committee also reviews work orders, major incidents, safety inspections, functional and structural accommodations, and the main office, SCL, and DH environments.

Trends: Compared to 2020:

- There was an increase in intervention of law enforcement (+6)
- There was a decline in injuries resulting in physician's treatment (-9)
- There was an increase in incidents resulting in Dependent Adult Abuse (DAA) reports (+3)

Causes: Staff and members were at the members' homes more. The safe environmental conditions resulted in fewer injuries resulting in physician's treatment. The increase in intervention from law enforcement can be partially attributed to the overuse of 911 services by members and the death of four members. Additionally, there were four members that passed away at their home, and emergency personnel were called to the home. Most of the DAA reports were caused by staff not following policies and procedures with alone time regulations.

Areas needing improvement.

1. Members using 911 services rather than the Service Coordinator on-call supports provided by RFYP.
2. Dependent Adult Abuse reports due to staff not following policies and procedures for following individual alone time restrictions.

Actions to address the improvements needed.

1. Staff will increase communication with members on the purpose of 911 services and when it is appropriate to call 911. Staff will ensure that members are aware of the differences in when to call the SC on-call or 911.
 2. More details regarding specific restrictions about alone time will be added to the member-specific training to ensure staff fully comprehend the language and differences in restrictions among members within the same household. RFYP will add a slide to the Orientation Power Point presentation regarding Dependent Adult Abuse and staff's responsibility to supervise the members within their care. RFYP will be clearer that if there is a gap in supervision based on their actions, they will be liable for a dependent adult abuse allegation.
-

Minor Incident Summary

| | 2021 | 2020 | Comparative Analysis |
|--|------------|------------|----------------------|
| Results in the application of basic first aid | 10 | 4 | +6 |
| Results in bruising* | 21 | 19 | +2 |
| Results in seizure activity | 180 | 216 | -36 |
| Results in injury to self, to others, or to property | 17 | 52 | -35 |
| • To self | 14 | 44 | -30 |
| • To others | 1 | 1 | No Change |
| • To property | 2 | 7 | -5 |
| Constitutes a prescription med error as result of RFYP staff | 15 | 15 | No Change |
| • Medication not administered | 9 | 10 | -2 |
| • Wrong person | 2 | 2 | No Change |
| • Wrong medication | 4 | 2 | +2 |
| • Wrong dose | 0 | 0 | No Change |
| • Wrong time | 0 | 1 | -1 |
| • Wrong method | 0 | 0 | No Change |
| Constitutes a prescription med error as a result of: | 14 | 10 | +4 |
| • Declining | 13 | 9 | +4 |
| • Under another person's care | 1 | 1 | No Change |
| Total | 257 | 313 | -57 |

*RFYP tracks all observed bruises as incidents even if the cause is unknown

Extenuating Factors: RFYP experienced a staff shortage and increase in staff turnover. This resulted in direct care and office staff working shifts in homes they were not as familiar with. Covid-19 precautions, program suspensions, and increased efforts to protect the health and safety of the members and staff resulted in more members being home during the day with staff. Members experienced a disruption to their daily schedules due to safety precautions as a response to Covid-19. This has been a major adjustment for members and staff. New protocols and protective measures were immediately put into place as new guidance was received by local, state, and governmental officials.

Internal Reporting Requirements

| Internal Requirements | Timeline | Concerns |
|---|--|-------------|
| Incident reports must be filled out by staff for every incident | Immediately when incident occurs | No concerns |
| All incident reports must be turned into the main office | Within 24 hours | No concerns |
| Staff must call and notify the RFYP Med Team, Service Coordinator, or Administrative Staff | Immediately after the incident occurs | No concerns |
| Supervisor notified | Within 72 hours | No concerns |
| Medical Team receives copy of the incident report if the incident is related to a medical concern | Verbally notified of the incident within the calendar day Hard copy of the paper incident is given to the medical team after the supervisor has received it | No concerns |
| Original incident | Filed in central file | No concerns |

External Reporting Requirements: There are no external reporting requirements for minor incidents.

Necessary Education and Training of Personnel: Staff receive an initial orientation, member-specific training,

on-the-job training, and annual training. RFYP remains responsive and proactive to training staff to lower the risk of incidents occurring. Training staff on safe environmental conditions and performing safety checks regularly had a positive impact on decreasing overall minor incidents.

Prevention of Recurrence: Staff training/retraining, staff discipline, environmental modifications, policy review, and/or referral to the safety committee may take place to develop systemic interventions to prevent reoccurrence or patterns of

incidents as deemed appropriate. The Program Director and immediate supervisor reviews every incident report to determine cause, communicate with the staff and members involved, and immediately implement prevention strategies.

Member-specific training takes place at hire and ongoing during staff meetings so all staff are aware of the individual needs of the member to prevent incidents. Environmental conditions are discussed, and if a modification or structural improvements are needed/identified, a work order is immediately submitted to the RFYP maintenance team or for referral to an external contractor.

The RFYP Safety Committee meets monthly. The committee consists of representatives from multiple departments and includes member representatives for a spectrum of input. Incidents may be reviewed by the safety committee to discuss current safety concerns and develop plans proactively to prevent future incidents. The committee also reviews work orders, major incidents, safety inspections, functional and structural accommodations, and the main office, SCL, and DH environments.

Trends: In comparison to 2020:

- There was a decrease in overall incidents by 57
- There was a decrease in injuries to self by 30 (overall -35)
- Increase in members declining medications by 4

Causes: The causes of these trends can be attributed to member personality, changes within the members' daily routines, members home more due to program closures and suspensions, and behavior, such as declining scheduled medications, as a strategy for communication. The staff and members are familiar with the home environment, the home environment is not as busy as a day program, and the staff are trained on preventing injuries and mitigating risk within the residential environment.

Areas needing improvement.

1. The need for basic first aid increased by 6.
2. Members declining their medications increased by 4. Consistent medication administration of scheduled medications is imperative.

Actions to address the improvements needed.

1. A reoccurring agenda topic to be discussed will be added to the monthly staff meeting with the direct care staff. To keep the prevention skills of the staff sharp, an informal review of risk management and safety training could be added to the staff meetings to review Individual Service Plans and environmental and behavior triggers of members that may result in injury. New and existing staff will have the opportunity to discuss these topics.
2. Details will be added to the member-specific training packet regarding medication and individual needs. Staff will also be trained to check the ongoing supports section of the members' ISPs for additional details and strategies for successful medication administration.

2021 Incident Report Summary: Regional Funding Supported Community Living

A systematic and comprehensive review of all incidents takes place biannually. It is a critical component to prevention, risk management, and ongoing performance improvement. Reach for Your Potential, Inc. (RFYP) provided services to members

receiving Regional funding from January 1, 2021 to December 31, 2021. This analysis reflects the incidents documented for five members served by RFYP, including clients both added and discharged, during the year 2021.

Supported Community Living services were provided in community-based settings. All incidents that occurred in 2021 have been tracked and summarized in this report. The results have been analyzed to identify the following: trends, causes, extenuating factors, internal and external reporting requirements, necessary training of personnel, a comparative analysis to the previous year's incidents, prevention of reoccurrence, areas needing improvement, and actions taken to address the issues. Action plans for continuous quality improvement will be implemented starting in January 2022 and reviewed for progress in six months. This allows RFYP the opportunity to assess if the actions taken are accomplishing the intended results.

| Regional Incident Summary | 2021 | 2020 | Comparative Analysis |
|--|-------------|-------------|-----------------------------|
| Results in physical injury to or by the individual that requires physician's treatment or admission to hospital | 0 | 0 | No Change |
| <ul style="list-style-type: none"> Intentional injury to self or others | 0 | 0 | No Change |
| <ul style="list-style-type: none"> Accident | 0 | 0 | No Change |
| <ul style="list-style-type: none"> Cause unknown/other | 0 | 0 | No Change |
| <ul style="list-style-type: none"> Occurred while under another person's care | 0 | 0 | No Change |
| Results in death | 0 | 0 | No Change |
| <ul style="list-style-type: none"> Death of a member | 0 | 0 | No Change |
| <ul style="list-style-type: none"> Death of someone else | 0 | 0 | No Change |
| Requires emergency mental health treatment for the individual | 0 | 0 | No Change |
| <ul style="list-style-type: none"> Self-Injury | 0 | 0 | No Change |
| <ul style="list-style-type: none"> Other | 0 | 0 | No Change |

| | | | |
|---|----------|----------|------------------|
| Requires the intervention of law enforcement | 0 | 2 | -2 |
| • Member is the victim | 0 | 0 | No Change |
| • Member is the perpetrator | 0 | 0 | No Change |
| • Other | 0 | 2 | -2 |
| Results from any prescription medication error | 0 | 0 | No Change |
| • Medication not administered | 0 | 0 | No Change |
| • Wrong person | 0 | 0 | No Change |
| • Wrong medication | 0 | 0 | No Change |
| • Wrong dose | 0 | 0 | No Change |
| • Wrong time | 0 | 0 | No Change |
| • Wrong method | 0 | 0 | No Change |
| Is reportable to protective services | 0 | 0 | No Change |
| • By a staff member | 0 | 0 | No Change |
| • By someone else | 0 | 0 | No Change |
| Total | 0 | 2 | -2 |

Extenuating Factors: The members receiving Regional funding are hourly and do not have 24-hour staffing. Due to Covid-19 precautions and protecting the health and safety of the members and staff, RFYP members were home more during the day. Day program services were indefinitely suspended on September 1, 2021, and there were limited options for safe community outings. In addition, many work programs suspended work shifts or greatly reduced work shifts. Other providers also suspended services and a few reopened with limited capacity allowed.

Internal Reporting Requirements

| Internal Requirements | Timeline | Concerns |
|--|---------------------------------------|-------------|
| Incident reports must be filled out by staff for every incident | Immediately when incident occurs | No concerns |
| Staff must call and notify the RFYP Med Team, Service Coordinator, or Administrative Staff | Immediately after the incident occurs | No concerns |

| | | |
|--|---|-------------|
| All incident reports must be turned into the main office | Within 24 hours | No concerns |
| Supervisor notified | By end of next calendar day | No concerns |
| Medical Team notified of the incident (if appropriate) | Routed to Medical Team after supervisor receives it | No concerns |
| Original incident | Filed in central file | No concerns |

External Reporting Requirements

| Requirements | Timeline | Submission Protocol | Concerns |
|-------------------------|--|--------------------------------------|-------------|
| Case Manager notified | Notified by end of next calendar day | Email incident report | No concerns |
| Legal Guardian notified | Notified by end of next calendar day | Phone call or email | No concerns |
| CARF | Notified within 30 days of sentinel event | Notification is through email or fax | No concerns |
| DHS | Notified within 48 hours of becoming aware of the incident | Notification is through oral report | No concerns |

Necessary Education and Training of Personnel: RFYP remains responsive and proactive to training staff to lower the risk of incidents occurring. Staff are trained at orientation and ongoing about member-specific needs. This is a proactive way to prevent incidents and provide person-centered services.

Prevention of Recurrence: Staff training/retraining, staff discipline, environmental modifications, policy review, and/or referral to the safety committee may take place to develop systemic interventions to prevent reoccurrence or patterns of incidents as deemed appropriate. The Program Director and immediate supervisor reviews every incident report to determine cause, communicate with the staff and members involved, and immediately implement prevention strategies.

Member-specific training takes place at hire and is ongoing during staff meetings so all staff are aware of the individual needs of the member to prevent incidents. Environmental conditions are discussed, and if a modification or structural improvements are needed/identified, a work order is immediately submitted to the RFYP maintenance team or for referral to an external contractor.

The RFYP Safety Committee meets monthly. The committee consists of representatives from multiple departments and includes member representatives for a spectrum of input. Incidents may be reviewed by the safety committee to discuss current safety concerns and develop plans proactively to prevent future incidents. The committee also reviews work orders,

major incidents, safety inspections, functional and structural accommodations, and the main office, SCL, and DH environments.

Trends: In comparison to 2020, overall total incidents decreased by two incidents. There were zero incidents in 2021.

Causes: Members were less active in 2021 due to COVID-19 precautions.

Areas Needing Improvement: There are no areas in need of improvement. There were zero incidents in 2021.

Actions to Address the Improvements Needed: There are no actions to implement to improve issues resulting in incidents. There were zero incidents in 2021.

Satisfaction Survey Summaries

2021 Day Programming Member Satisfaction Survey Summary

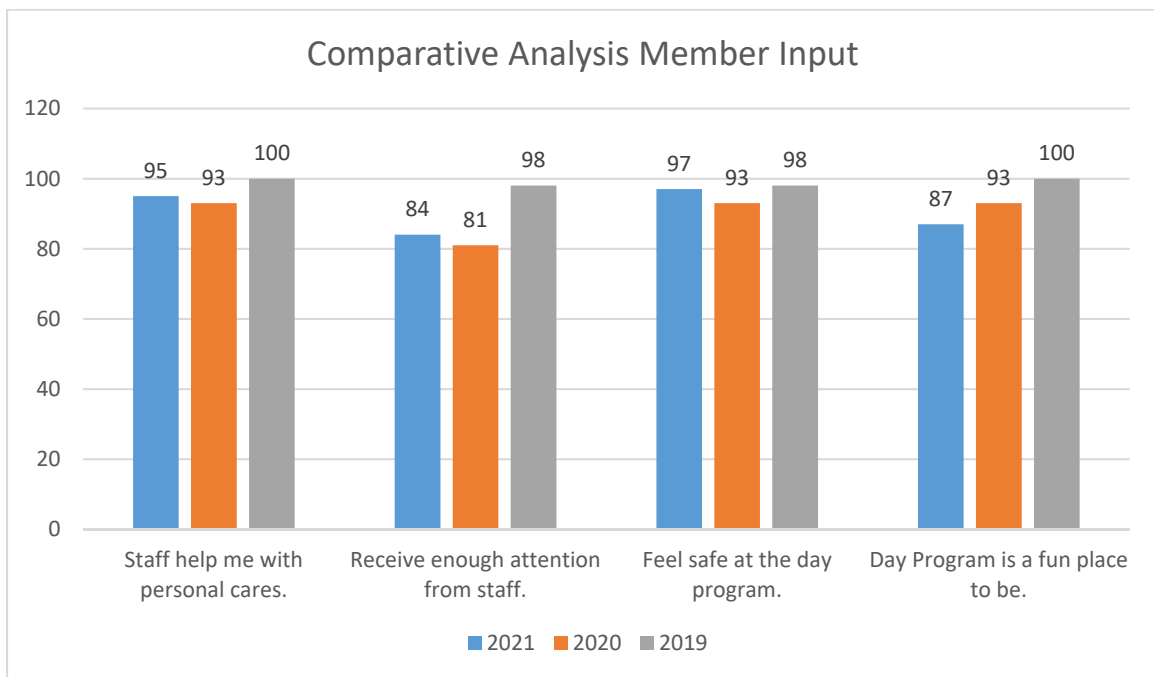
Reach For Your Potential, Inc. (RFYP) conducted an annual Satisfaction Survey to measure the level of satisfaction of the members of the Day Program. There were 38 satisfaction surveys responses received out of 43 surveys distributed (88%). Day Program members completed the survey electronically via Survey Monkey facilitated by staff. Trained staff recorded the exact responses of each member. The survey consisted of yes/no questions and open-ended questions.

The responses were analyzed to ensure data was clean, accurate, and complete. Survey results were compiled, and sample responses are included. After gathering and reflecting on the results, the data was summarized and analyzed for trends and causes. Barriers and influencing factors were identified and areas of excellence were documented. Areas of concern, proposed improvements to be implemented in the upcoming year, and a comparative analysis from previous survey results are included in the summary. Action plans for continuous quality improvement will be implemented in January 2022 and reviewed for progress in six months.

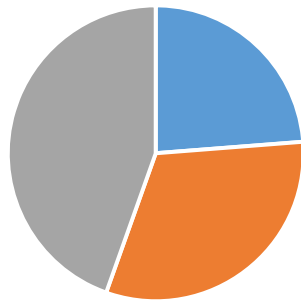
Key Findings

| | <u>2021 Yes</u> | <u>2020 Yes Response</u> | <u>Comparative Analysis:</u> <u>Yes Response</u> <u>2020-2021</u> |
|--|-----------------|--------------------------|---|
| Are you satisfied with RFYP's use of technology in the Day Habilitation program? | 82% | 81% | +1% |

| | | | |
|---|-----|-----|------|
| When you attend the Day Habilitation, do you receive information and answers to your questions quickly? | 74% | 81% | -7% |
| When you attend the Day Habilitation, are you satisfied with the medical and health care supports available? | 97% | 78% | +19 |
| Do you feel your interests and suggestions are reflected in the monthly activities calendar? | 84% | 85% | -1% |
| When you attend the Day Habilitation, are you satisfied with the level of attention you receive from the Day Program staff? | 84% | 81% | +3% |
| When you attend the Day Habilitation, do you feel your ideas and input are valued and respected? | 79% | 89% | -10% |

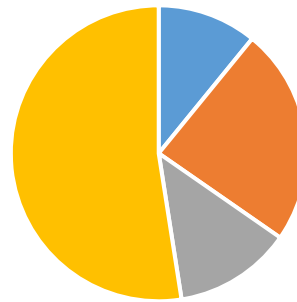


How often you'd like to receive updates from RFYP



■ 6 months ■ Annually ■ Not Applicable

Format you'd like to receive information from RFYP.

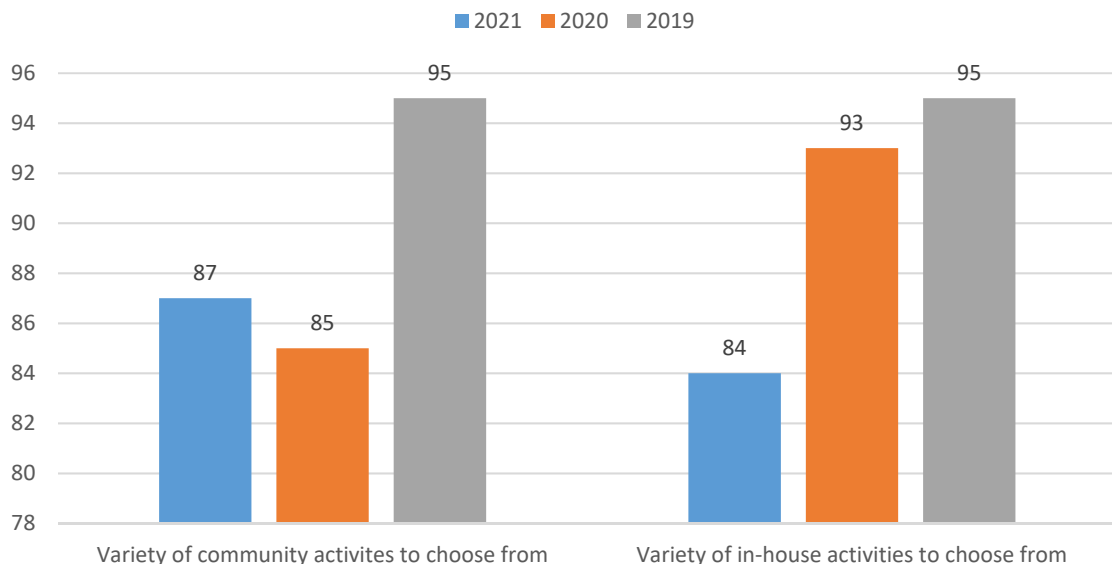


■ Email ■ Paper Report ■ In-person ■ Not Applicable

What are the most important topics that you would like RFYP to share with you about the agency's goals and accomplishments?

- Would like to receive updates about staff changes.
- Would like to know my weekly schedule in advance rather than the day of.
- All updates
- Whatever is going on with Day Habilitation
- Day Habilitation parties

Comparative Analysis Input on Activities



| What community outings have you gone on that you enjoyed? | What in-house activities do you like to do? | What else can be improved with the Day Program? |
|---|--|---|
| <ul style="list-style-type: none"> ○ Zoo ○ Kalona ○ McDonald's ○ Bowling ○ Barnes & Noble ○ Picnics ○ Car rides ○ Visiting Petland ○ Going to the movie theater ○ Going for walks ○ Petland, going for walks, going out to eat. ○ Spending time outdoors. ○ National Czech & Slovak museum ○ Get ice cream ○ Going out to lunch ○ World's biggest truck stop ○ Herbert Hoover Museum ○ Any outings with friends | <ul style="list-style-type: none"> ○ DJ parties ○ Watching wrestling ○ Painting ○ Reading the newspaper ○ Read books ○ Looking at trains ○ Watching game shows ○ Spending time with friends and staff ○ Art ○ Watching movies ○ Listening to music. ○ Music therapy ○ Puzzles. ○ PlayStation ○ Karaoke ○ Crafts ○ Playing UNO ○ Spending time with peers & friends | <ul style="list-style-type: none"> ○ Computers ○ More staff ○ More access to iPads ○ More puzzles ○ Crochet and cross stitch ○ Yarn supplies ○ Would like to tour a fire station |

Barriers and Influencing Factors

Day Habilitation services are currently suspended. Programming was suspended from March 2020-May 2021 and again in September 2021 due to COVID-19. RFYP has dedicated an extraordinary amount of time and attention in 2021 to continuing operations while protecting the health and safety of members, staff, and stakeholders throughout the pandemic. The Day Habilitation Satisfaction Survey was completed at the members' residential location and facilitated by a RFYP staff. The disruption in day program services may have impacted their responses regarding their satisfaction.

What Did We Learn?

The members and staff showed resiliency and flexibility throughout 2021. RFYP put great effort into redesigning the day program health and safety procedures, staffing policies, activities, community outings, group sizes, and COVID-19 precautions. While the day habilitation was open, it was a safe, engaging, and fun environment for the members to participate in. The members reported an increase in feeling safe while they are at the day program which tells us that they acknowledge and appreciate the efforts.

In May 2021, RFYP reopened the Day Habilitation program after a long suspension due to COVID-19. The second suspension occurred in September 2021 and that may have negatively impacted the member's level of satisfaction. The lack of consistency of the programming makes it hard to build and maintain relationships

resulting in lower satisfaction. The members completed the Day Habilitation satisfaction survey at home with assistance of their home staff and office staff.

What Are We Doing Well?

1. Increase in satisfaction with the medical and health care supports available (+19%)
2. Increase in satisfaction the level of attention received from the Day Program staff (+3%)
3. Increase in responses to the satisfaction survey (+11 responses)

Areas of Concern

1. Decrease in satisfaction among members of the Day Habilitation with how quickly information and answers are received to their questions (-7%)
2. Decrease in satisfaction among members of the Day Habilitation with feeling their ideas and input are valued and respected (-10%)

Proposed Improvements

The Day Habilitation is currently suspended and plans to reopen in spring 2022. RFYP will use the feedback from the Satisfaction Surveys to identify strategies to immediately implement when the program reopens to improve the satisfaction of the members.

1. The Day Habilitation Program Director will lead a refresher training for staff working at the Day Habilitation program when the program reopens. Staff will receive additional training on communicating with the members, asking members if they have questions, getting answers before the member leaves for the day, and building strong working relationships with the members to build trust.
2. When the Day Habilitation program reopens in 2022, the program will start with a lower number of members attending at once. This will be helpful for the staff to be working with a smaller group of members per day and have the ability to be more intentional with conversations with each member. Having a smaller group will allow the members to rebuild trust with the staff and develop strong working relationships.

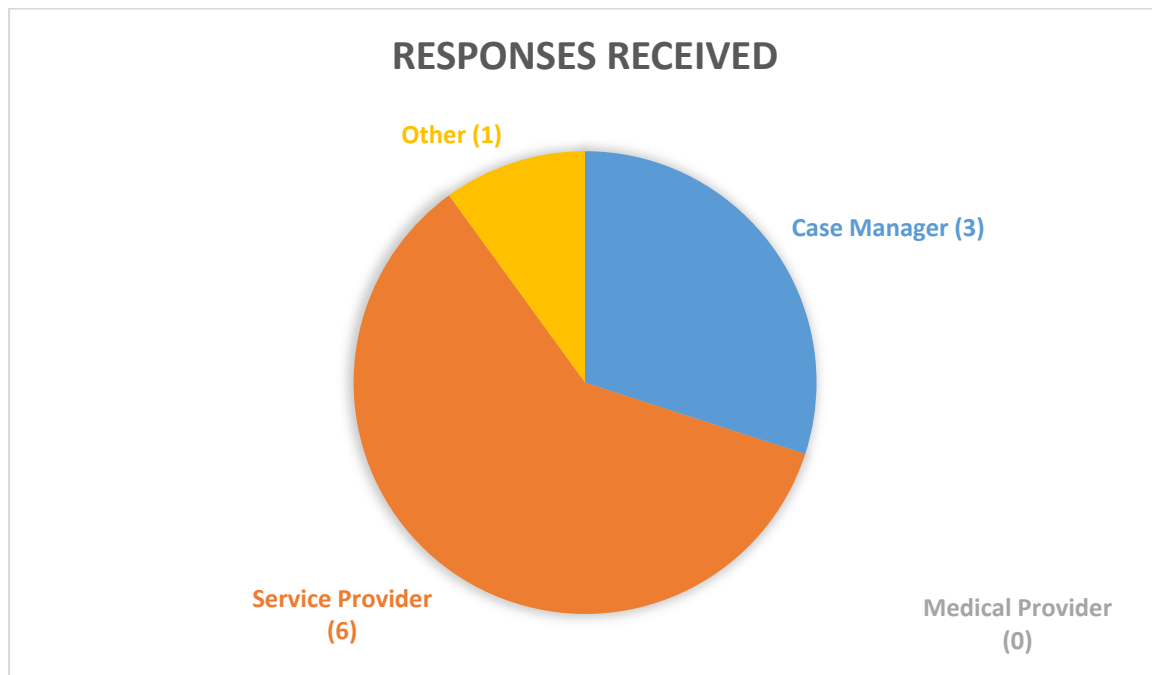
The proposed improvements will begin to be implemented when Day Habilitation program is no longer suspended in 2022. Progress on the proposed improvements will be reviewed in June 2022.

2021 Other Provider Satisfaction Survey Summary

Reach For Your Potential, Inc. (RFYP) conducted a survey to measure the satisfaction level of other community providers that collaborate with the agency to coordinate services for RFYP members. The satisfaction survey was distributed electronically via Survey Monkey. There were 134 surveys distributed and 10 survey responses were returned (7%). The survey consisted of questions related to specific topics that were open-ended or required a “yes” or “no” response.

The Satisfaction Survey questions were analyzed and revised for relevance and clarity prior to distribution. The responses were analyzed to ensure data was clean, accurate, and complete. Survey results were compiled, and sample responses are included. After gathering and reflecting on the results, the data was summarized and analyzed for trends and causes. Barriers

and influencing factors were identified and areas of excellence were documented. Areas of concern, proposed improvements to be implemented in the upcoming year, and a comparative analysis from previous survey results are included in the summary. Action plans for continuous quality improvement will be implemented in January 2022 and reviewed for progress in six months.



| | |
|------------------|------------------------|
| Case Management | 29 distributed |
| Medical Provider | 53 distributed |
| Other Provider | 52 distributed |
| Total | 134 distributed |

What are your favorite things about RFYP?



What are the things that could be improved?

Case Managers:

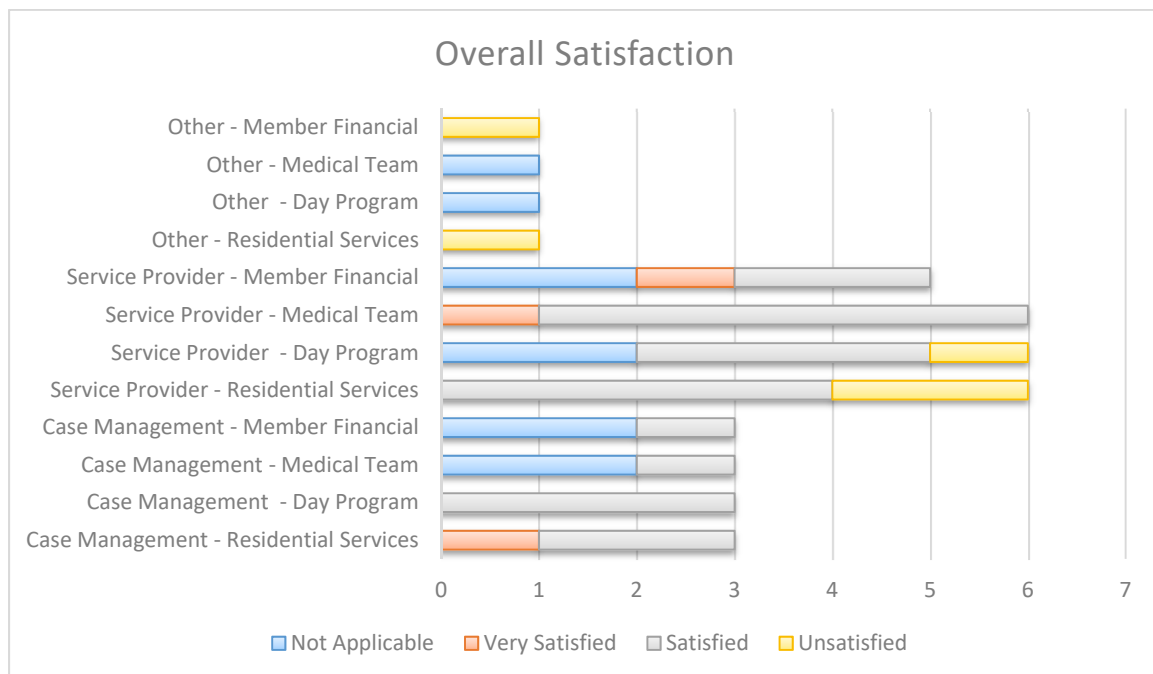
- Maintenance/longevity of direct care staff
- Staffing levels, though everyone is struggling
- Communication surrounding billing/authorizations

Other:

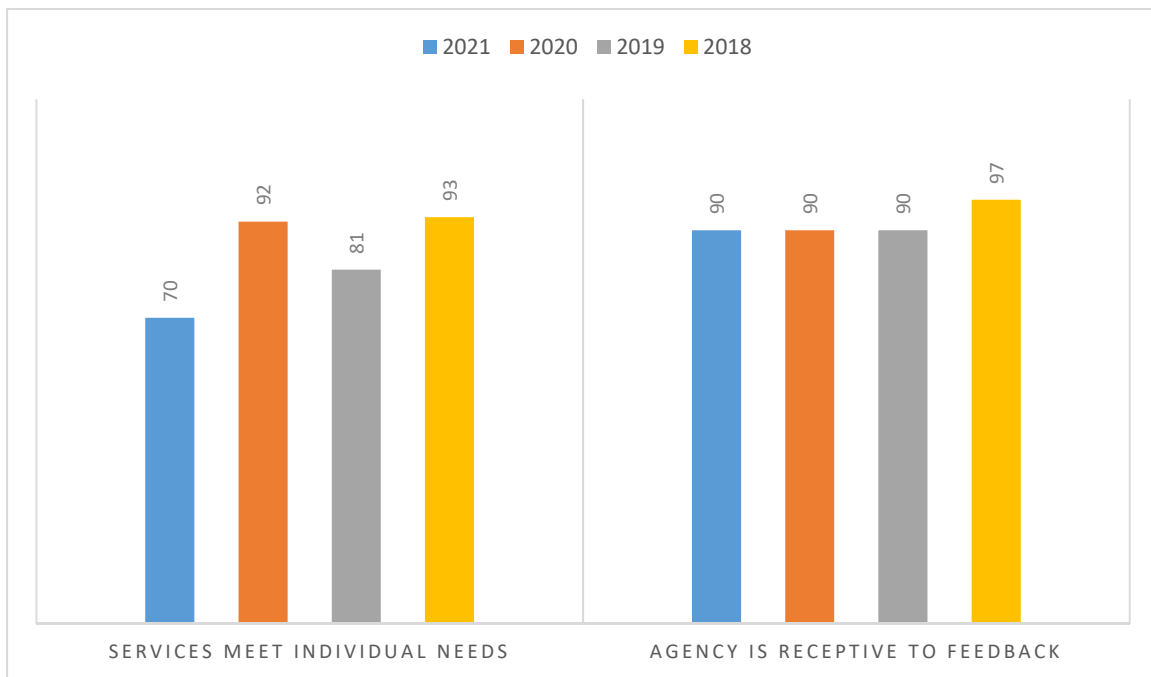
- Staffing, communication, transportation

Service Provider:

- Communication. I get progress reports for clients I haven't worked with in over 5 years and other times no communication on important updates for clients I have worked with for as long
- Hire more to be over the houses
- Staff communication, staff follow-through, staff showing up, staff that clients can understand
- I think there is always room for improvement in the area of medication safety and administration/documentation
- Follow through for members at their homes



Comparative Analysis



Is your communication experience with RFYP positive?

| | | | |
|------------|-----|-----------|-----|
| Yes | 60% | No | 40% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|------------------|----------------------|
| Case Managers | 100% Yes Response |
| Medical Provider | No responses in 2021 |
| Other | 0% Yes Response |
| Service Provider | 50% Yes Response |

Do you feel you receive information/responses in a timely manner?

| | | | |
|------------|-----|-----------|-----|
| Yes | 40% | No | 60% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|------------------|----------------------|
| Case Managers | 100% Yes Response |
| Medical Provider | No responses in 2021 |
| Other | 0% Yes Response |
| Service Provider | 33% Yes Response |

Do you feel RFYP's services meet your members' needs?

| | | | |
|------------|-----|-----------|-----|
| Yes | 70% | No | 30% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|------------------|----------------------|
| Case Managers | 100% Yes Response |
| Medical Provider | No responses in 2021 |
| Other | 0% Yes Response |
| Service Provider | 66% Yes Response |

Do you feel RFYP respects individuals and values their differences?

| | | | |
|------------|-----|-----------|-----|
| Yes | 80% | No | 20% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|------------------|----------------------|
| Case Managers | 100% Yes Response |
| Medical Provider | No responses in 2021 |
| Other | 100% Yes Response |
| Service Provider | 66% Yes Response |

Are you satisfied with RFYP's use of technology?

| | | | |
|------------|-----|-----------|-----|
| Yes | 90% | No | 10% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|------------------|----------------------|
| Case Managers | 100% Yes Response |
| Medical Provider | No responses in 2021 |
| Other | 100% Yes Response |
| Service Provider | 66% Yes Response |

I feel RFYP staff are available to discuss concerns related to COVID-19.

| | | | |
|------------|-----|-----------|-----|
| Yes | 80% | No | 20% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|------------------|----------------------|
| Case Managers | 100% Yes Response |
| Medical Provider | No responses in 2021 |
| Other | 0% Yes Response |
| Service Provider | 83% Yes Response |

I am satisfied with the communication I am getting from RFYP about its response to the COVID-19 pandemic.

| | | | |
|------------|-----|-----------|-----|
| Yes | 70% | No | 30% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|------------------|---------------------------------|
| Case Managers | 66% Yes Response |
| Medical Provider | No responses in 2021 |
| Other | 0% Yes Response |
| Service Provider | 83% Yes Response +17 since 2020 |

How would you like to receive information from RFYP?

Comparison within groups: Communication Preference

| | |
|-------------------|----------------------|
| Case Managers | Email 100% |
| Medical Providers | No responses in 2021 |
| Other | Email 100% |
| Service Provider | Email 100% |

How often would you like to receive information about RFYP's goals and accomplishments?

| | |
|-----------------|-----|
| Every 6 months | 0% |
| Every 12 months | 70% |
| Not applicable | 30% |

What are the most important topics that you would like RFYP to share with you about the agency's goals and accomplishments?

Other: Services offered

Service Providers: Who is the service coordinator for each location, staffing updates, plans for growth, patient care, and member information/changes.

Barriers and Influencing Factors

RFYP has dedicated an extraordinary amount of time and attention over the past year to continuing operations while protecting the health and safety of members, staff, and stakeholders throughout the pandemic. This required all staff, members, and other providers to remain extremely flexible, nimble, resilient, and use extreme caution to protect the health and safety of all involved. The exhaustion, limited staffing, and high volume of work that all parties are experiencing may have impacted the response rate of other providers to the satisfaction survey – especially medical providers. The low response rate of other providers is a barrier to obtaining a comprehensive view of the satisfaction of the vast groups of providers that RFYP collaborates with. There were zero responses from medical providers and one response from a group

that labeled themselves as “other”. The group “other” indicated they were unsatisfied with multiple aspects of services. Due to the low response rate overall, this groups low level of satisfaction impacted the results. In addition, the high turnover rates for Service Coordinators has impacted timely communication with other providers.

What Did We Learn?

Overall satisfaction with the agency remains high even during the pandemic demonstrating the agency’s commitment to continuity of operations while navigating operations throughout the pandemic. Based on the data, RFYP learned that 100% of respondents prefer to receive information via email and most respondents prefer agency updates annually. RFYP distributes a biannual report tailored to the needs and preferences of each stakeholder group to provide updates on but not limited to activities offered, community integration options, agency priorities, training, members, and recognition. The low number of response rates tells us that other providers are also feeling the strain and stress that the pandemic has presented. Although RFYP values and worked to increase response rates, the response rate remained low.

What Are We Doing Well?

1. Service providers have an increase in satisfaction regarding the information they are receiving regarding RFYP’s response to the pandemic. (+17%)
2. There was a slight increase in satisfaction with the agency’s use of technology. (+3) This was an area RFYP focused on improving in 2021, and it is good to see a rise in satisfaction.

Areas of Concern

1. There was a decrease in satisfaction with the other providers receiving information in a timely manner (-35%).
2. There was a decrease in satisfaction with RFYP services meeting the individual needs of the members (-22%).

Proposed Improvements

1. RFYP is actively looking to increase hiring of Service Coordinators. Service Coordinators are the staff that are responsible for most communication with other providers regarding the members they are serving. During the training process, emphasis will be made on timely communication with other providers. The high turnover rate for Service Coordinators throughout 2021 has impacted timely communication with other providers.
2. RFYP will start holding Individual Service Plan meetings quarterly and every six month (depending on the preference of the member’s team) when it is safe to do so. These meetings have been suspended due to COVID-19 precautions. This will provide the opportunity for RFYP staff to articulate and show documentation of the individualized services and efforts to meet the individual needs of the members.

The proposed improvements will be implemented in January 2022, or as deemed appropriate by the RFYP administration. Progress on the proposed improvements will be reviewed in June 2022.

2021 Legal Guardian and Parent Satisfaction Survey Summary

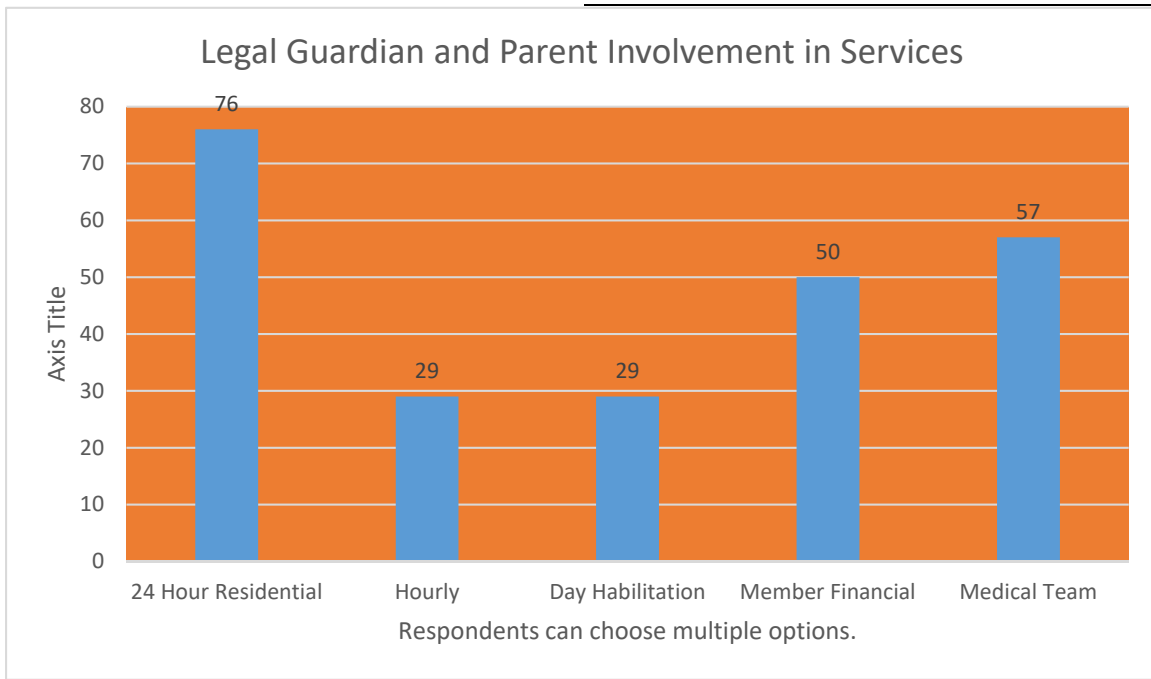
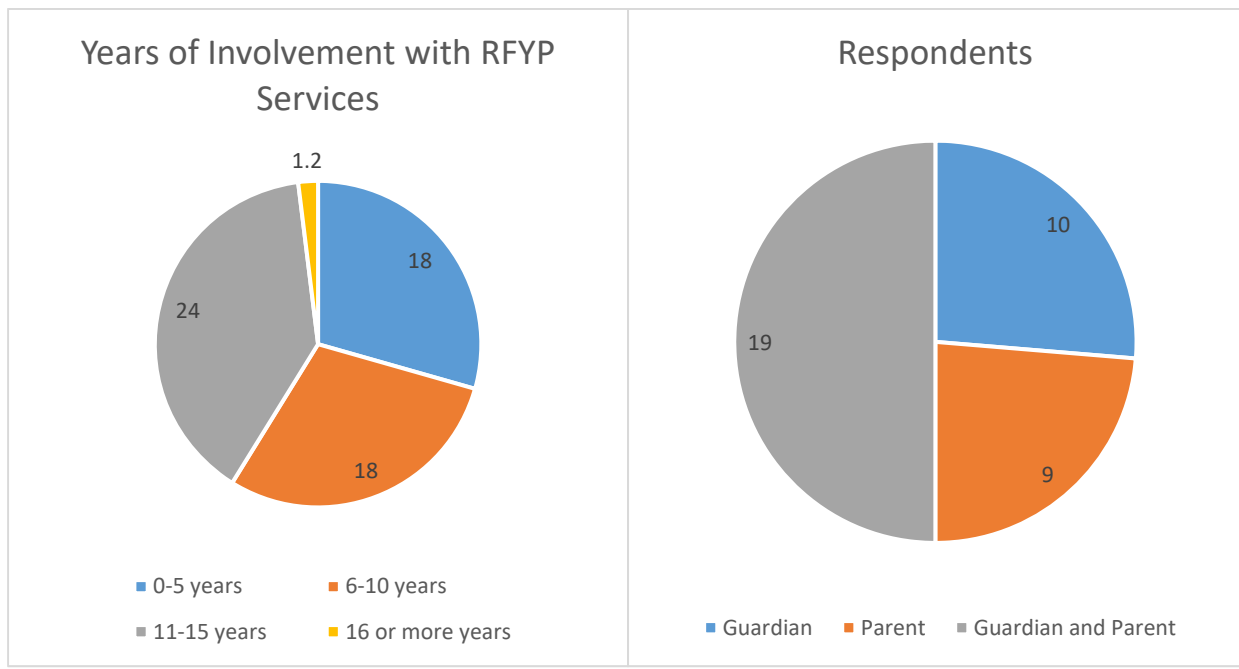
Reach For Your Potential, Inc. (RFYP) conducted an annual survey to measure the satisfaction level of legal guardians and parents with the agency’s residential and day programming services. Respondents can participate electronically via Survey Monkey or a paper survey option. There were 143 surveys distributed via email and USPS to legal guardians and parents 33 responses were received (23%). The survey consisted of open-ended questions and yes/no questions which allows the participants to elaborate with comments.

The 2021 Satisfaction Survey questions were analyzed and revised for relevance and clarity. The responses were analyzed to ensure data was clean, accurate, and complete. Survey results were compiled and sample responses

are included. After gathering and reflecting on the results, the data was summarized and analyzed for trends. Barriers and influencing factors were identified and areas of excellence were documented. Areas of concern, proposed improvements to be implemented in the upcoming year, and a comparative analysis from previous survey results are included in the summary. Action plans for continuous quality improvement will be implemented in January 2022 and reviewed for progress in six months.

2021 Legal Guardian and Parents' Favorite Things About RFYP

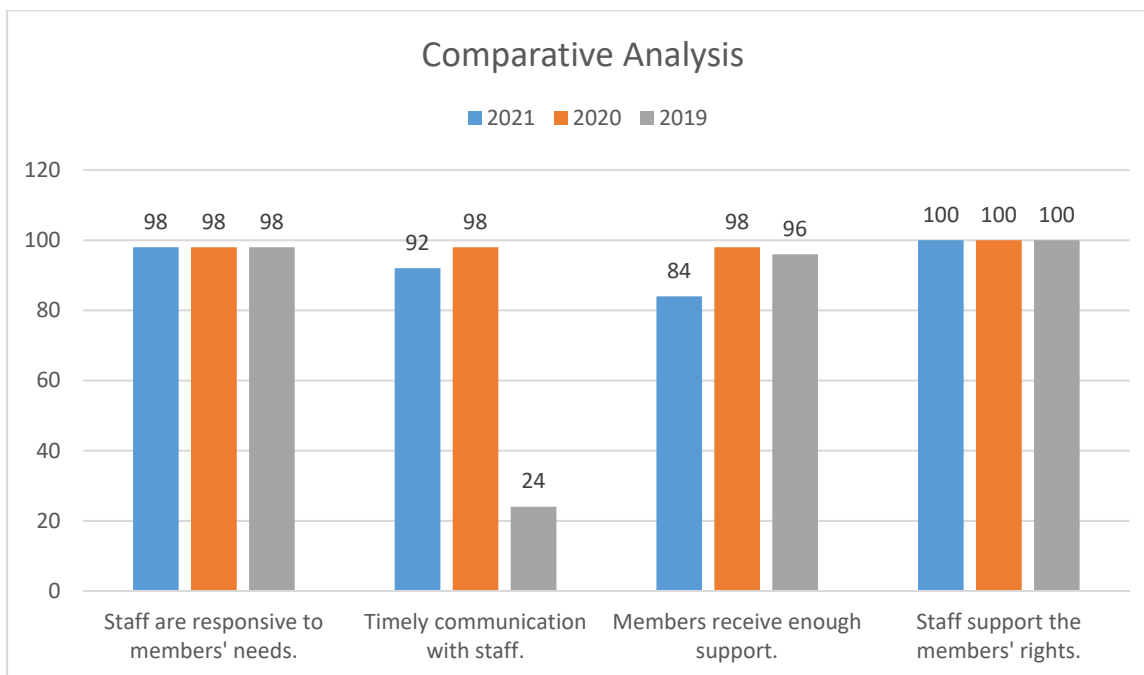




| What has made you keep RFYP services? | What could be better about RFYP? |
|---|--|
| 24 care available My sister chose them Safety Availability and philosophy It was smaller facility and thought that there would be a better chance of getting more personal attention. Money follows the person arranged move | I suggest hiring of more staff with ability to do more activities with my son Quicker response time to simple things, like setting up Netflix, etc. Communication from top all the way down to new hires Be more assertive with exercise encouragement I realize you are limited in what you can say or do |

A teacher recommended it
 Choice made by other family members
 Referral from parents with children receiving RFYP services.
 Their mission and values for consumers
 Recommendation from case manager
 A long time ago, I attended a conference for parents of kids with special needs that was organized to help parents make decisions about the transition to adulthood. During that conference I met and talked with several RFYP staff members.
 Recommendations from people we know
 Research by client's mother
 Johnson County social worker recommended
 Opportunity for wide variety of activities
 Best available option
 Services
 Quality
 No waiting list and close to our home
 Member was discharged from another agency
 Referral from a friend
 Personalized care. Smaller agency.
 Ron Schieffer and his excellent staff
 Best option for hourly support
 Positive feedback from other parents

More interaction with roommates and staff
 Having enough qualified staff to meet the needs of clients.
 Communication about finances.
 Follow-up by house staff on consumer's goals
 Retaining staff members who provide direct care services in the residences, and preventing their wish to quit.
 I would like to see my son encouraged more to have a more active social life.
 Communication between staff could be improved a bit.
 Paying more attention to our daughter.
 Individualized communication when resident will be out of the area.
 Communication all along the chain
 Cooking
 Transportation
 Community integration
 On a few visits to the house, I didn't feel much attention had been put on cleaning the bathroom.
 Recruiting more caring and educated staff.
 Communication on staff changes, transportation to events sometimes isn't available for hourly to attend.
 Keeping quality staff.



*Question about RFYP's communication revised

Do you feel services are individualized to fit each person's needs?

| | | | |
|------------|-----|-----------|----|
| Yes | 93% | No | 7% |
|------------|-----|-----------|----|

Comparison within groups: Yes Responses

| | |
|---------------------------|-------------------|
| Legal Guardian and Parent | 89% Yes Response |
| Legal Guardian Only | 100% Yes Response |
| Parent Only | 89% Yes Response |

Do you feel services are delivered appropriately and effectively?

| | | | |
|------------|-----|-----------|-----|
| Yes | 89% | No | 11% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|---------------------------|------------------|
| Legal Guardian and Parent | 94% Yes Response |
| Legal Guardian Only | 90% Yes Response |
| Parent Only | 89% Yes Response |

Do you feel involved in RFYP services and planning?

| | | | |
|------------|-----|-----------|-----|
| Yes | 87% | No | 13% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|---------------------------|-------------------|
| Legal Guardian and Parent | 94% Yes Response |
| Legal Guardian Only | 78% Yes Response |
| Parent Only | 100% Yes Response |

Are you aware of the individual's rights?

| | | | |
|------------|-----|-----------|----|
| Yes | 97% | No | 3% |
|------------|-----|-----------|----|

Comparison within groups: Yes Responses

| | |
|---------------------------|-------------------|
| Legal Guardian and Parent | 100% Yes Response |
| Legal Guardian Only | 100% Yes Response |
| Parent Only | 89% Yes Response |

Do you feel you receive information in a timely manner?

| | | | |
|------------|-----|-----------|-----|
| Yes | 89% | No | 11% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|---------------------------|------------------|
| Legal Guardian and Parent | 84% Yes Response |
|---------------------------|------------------|

| | |
|---------------------|-----------------------------|
| Legal Guardian Only | 100% Yes Response no change |
| Parent Only | 89% Yes Response |

Do you feel the residential environments are individualized to fit your member's needs?

| | | | |
|------------|-----|-----------|-----|
| Yes | 92% | No | 12% |
|------------|-----|-----------|-----|

Comparison within groups: Yes Responses

| | |
|---------------------------|-------------------|
| Legal Guardian and Parent | 100% Yes Response |
| Legal Guardian Only | 100% Yes Response |
| Parent Only | 78% Yes Response |

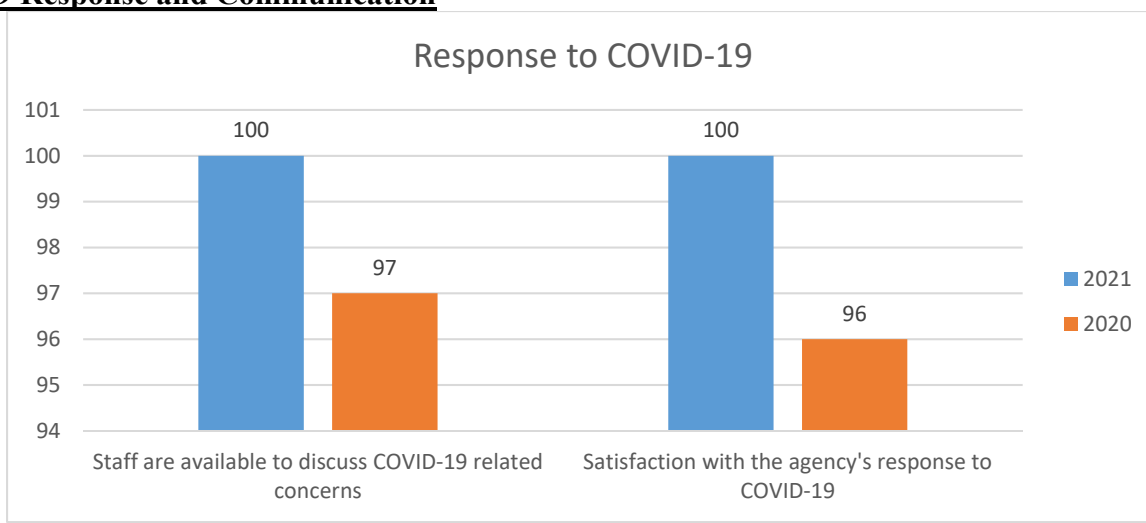
Do you feel RFYP respects individuals and values each member's differences?

| | | | |
|------------|-----|-----------|----|
| Yes | 95% | No | 5% |
|------------|-----|-----------|----|

Comparison within groups: Yes Responses

| | |
|---------------------------|-------------------|
| Legal Guardian and Parent | 95% Yes Response |
| Legal Guardian Only | 100% Yes Response |
| Parent Only | 89% Yes Response |

COVID-19 Response and Communication



Agency Use of Technology

Rate your level of satisfaction with RFYP's use of technology.

| 2021 | 2020 | Comparison |
|----------|----------|------------|
| Poor: 0% | Poor: 0% | No Change |

| | | |
|----------------|----------------|------|
| Good: 55% | Good: 45% | +10% |
| Excellent: 45% | Excellent: 55% | -10% |

Member Medical and Health Care (Med Team) Support

Do you feel medical and health care supports (Med Team) are responsive to the needs of your member?

| | | | | | |
|-----------------|-----|----------------|----|----------------------------|-----|
| 2020 Yes | 85% | 2020 No | 0% | 2020 Not Applicable | 15% |
| 2021 Yes | 90% | 2021 No | 2% | 2021 Not Applicable | 8% |

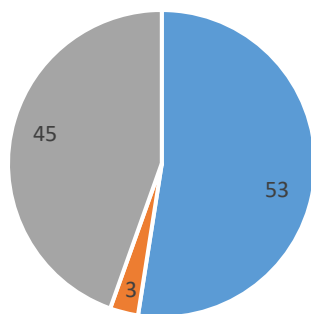
Member Financial (Payee) Support

Do you feel you receive accurate and timely financial information regarding your member's finances (payee services)?

| | | | | | |
|-----------------|-----|----------------|-----|----------------------------|-----|
| 2020 Yes | 70% | 2020 No | 13% | 2020 Not Applicable | 18% |
| 2021 Yes | 79% | 2021 No | 8% | 2021 Not Applicable | 13% |

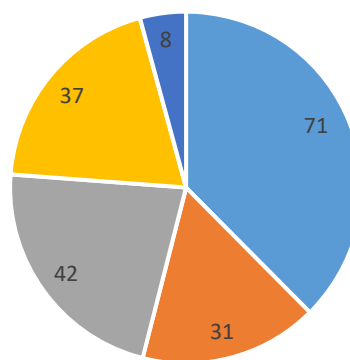
Communication Preferences

How often would you like to receive information about the agency?



■ Every 6 months ■ Every 12 months ■ Not applicable

How would you like to receive information about the agency?



■ Email ■ Phone ■ Text ■ Mail ■ Other

| What are the most important topics that you would like RFYP to share with you about the agency's goals and accomplishments? | | | |
|---|--|---|--|
| <i>Parent and Guardian Responses:</i> | <i>Guardian-only responses:</i> | <i>Parent-only responses:</i> | |
| How many clients are being served Staff changes and new staff Holiday plans Activities RFYP clients can get involved in Perhaps information about how people with special needs, especially cognitive disabilities, can change across their lifespan. | Health and social behavior problems Programming and staffing changes Staffing and medical needs Staff shortage concerns that impacts community integration Staff changes that impact member Issues with roommates | Perhaps there are some group activities that my member could take part in. Succession planning for when and if Ron S. retires Why does everyone not stay Whatever updates are applicable | |

Overall Satisfaction with RFYP Programs

| 2021 | 2021 | 2020 | 2020 |
|-------------------------|-----------------------------|-------------------------|-----------------------------|
| <i>Day Habilitation</i> | <i>Residential Services</i> | <i>Day Habilitation</i> | <i>Residential Services</i> |
| Very Satisfied 24% | Very Satisfied 50% | Very Satisfied 33% | Very Satisfied 61% |
| Satisfied 16% | Satisfied 34% | Satisfied 12% | Satisfied 30% |
| Unsatisfied 0% | Unsatisfied 3% | Unsatisfied 0% | Unsatisfied 3% |
| Not applicable 61% | Not applicable 13% | Not Applicable 55% | Not Applicable 6% |

Barriers and Influencing Factors

COVID-19 was the biggest influencing factor of 2021. RFYP has dedicated an extraordinary amount of time and attention over the past year to continuing high-quality operations while protecting the health and safety of members, staff, and stakeholders throughout the pandemic.

What Did We Learn?

Although there was a slight decrease in satisfaction with RFYP's communication regarding how the pandemic is impacting programming, parents and legal guardians' satisfaction still remains high. RFYP puts great effort into communication and transparency. RFYP learned what type of information parents and guardians would like to receive, how often, and the method they prefer to receive the information. Based on the data, RFYP will distribute a biannual report to all stakeholder groups to provide updates on but not limited to activities, community outings, celebrations, agency priorities, training, members, and recognition.

What Are We Doing Well?

1. Increase in satisfaction with the services provided by the member financial team (+9%)
2. Increase in satisfaction with the services provided by the member health care team (+5%)

3. There is a high rate of satisfaction (100%) with staff being available to discuss concerns related to COVID-19 (+3%) and satisfaction with RFYP's response to the pandemic (+4%).

Area of Concern

1. There was a decrease in satisfaction with guardians and parents feel services are delivered appropriately and effectively (-12%).
2. There was a decrease in satisfaction with guardians and parents feeling involved in service planning (-10%).

Proposed Improvements

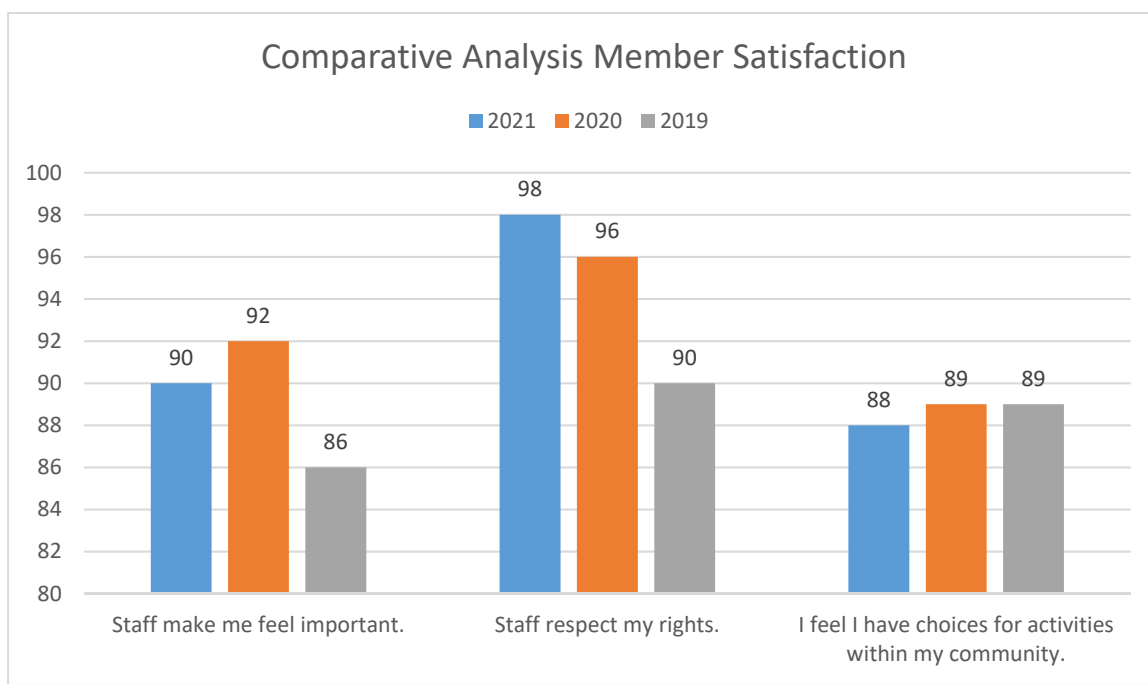
1. RFYP is actively looking to increase hiring of Service Coordinators. Service Coordinators are the staff that are responsible for most communication with parents and legal guardians regarding the services that are being provided. During the training process, emphasis will be made on timely communication with parents and guardians. The high turnover rate for Service Coordinators throughout 2021 has impacted timely communication with parents and guardians. Service coordinators are responsible for communicating with parents and guardians regarding the services and progress each member is making on their goals and ongoing supports.
2. RFYP will start holding Individual Service Plan meetings quarterly and every six months (depending on the preference of the member's team) when it is safe to do so. These meetings have been suspended due to COVID-19 precautions. This will provide the opportunity for RFYP staff to articulate and show documentation of the individualized services and efforts to meet the individual needs of the members. Holding quarterly and review meetings provides the opportunity for parents and guardians to have a more active role in service planning.

The proposed improvements will be implemented in January 2022, or as deemed appropriate by the RFYP administration. Progress on the proposed improvements will be reviewed in June 2022.

2021 Residential Member Satisfaction Survey Summary

| Residential Member Services Survey Questions | 2020 Yes Responses | 2021 Yes Responses | Comparative Analysis: Yes Responses 2020-2021 |
|---|-------------------------------|-------------------------------|--|
| Are you satisfied with the amount of attention you receive from your staff? | 95% | 89% | -6% |
| Do you feel your home and furnishings reflect your style preferences? | 89% | 96% | +7% |
| Do you like your job? | 55% | 48% (49% N/A) | -7% |
| Do you have enough privacy in your home? | 92% | 96% | +4% |

| | | | |
|--|-----|------------------|-----|
| Do you help decide who knows about your personal information? | 91% | 93% | +2% |
| Do you receive information and answers to your questions quickly? | 84% | 86% | +2% |
| Do you help decide where you live and who you live with? | 83% | 84% | +1% |
| Do you get to choose parts of your daily routine? | 95% | 94% | -1% |
| Would you like to have social interaction with other RFYP members online using a tablet, computer, laptop, or phone? | 71% | 75% | +4% |
| Does staff help you to live a healthy lifestyle? | 94% | 95% | +1% |
| Do you feel safe in your home and community? | 93% | 99% | +6% |
| Do you feel staff respect and value you as an individual? | 97% | 94% | -3% |
| Are you satisfied with RFYP's use of technology? | 91% | 92% | +1% |
| Are you satisfied with the health care/medical supports you receive from the Medical Team? | 81% | 87% (11% N/A) | +6% |
| Do you feel you are able to get answers to your questions about your finances (money)? | 80% | 76% (15% N/A) | -4% |
| Do you feel RFYP staff are available to discuss your concerns about COVID-19? | 91% | 88% | -3% |

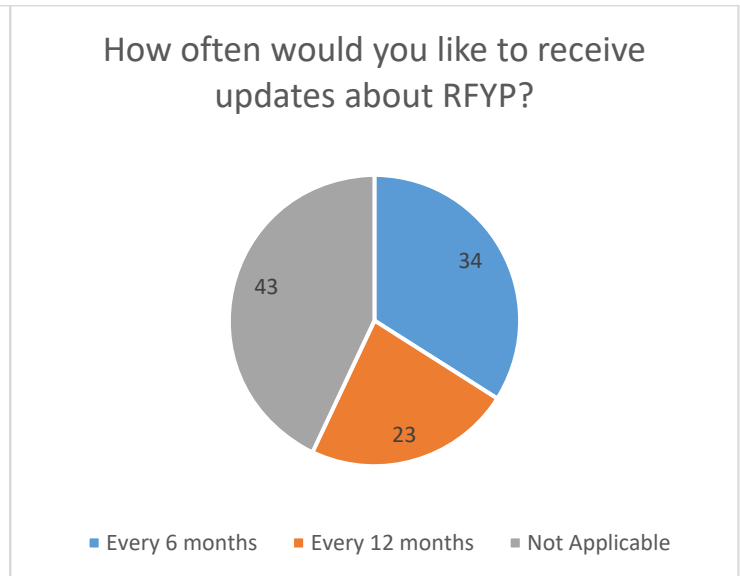
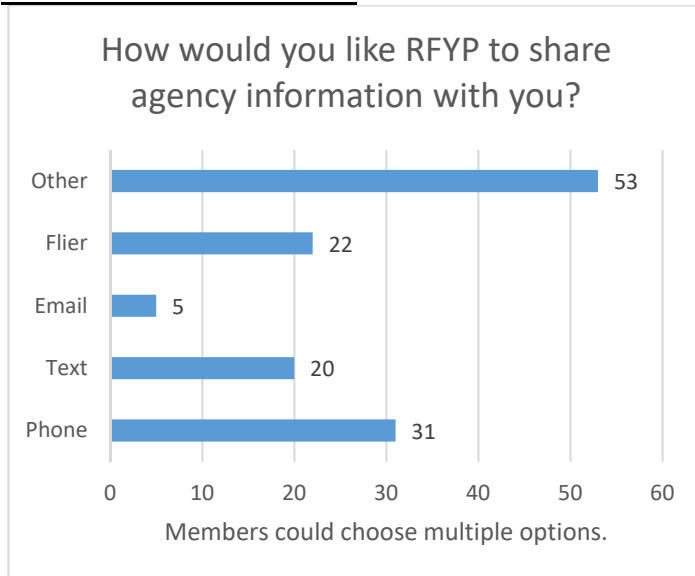


Activities

| Please list your favorite games, crafts, and activities you like to do at home. | Please list your favorite places to visit in the community. |
|--|---|
| <p>Netflix</p> <p>Listen to music</p> <p>Video games, watch videos</p> <p>Watch TV, eat pizza</p> <p>Decorate room, tracing</p> <p>Cards, Uno</p> <p>Watch sports, outside</p> <p>Take care of my plants, clean, cook, talk on the phone.</p> <p>Play solitaire, watch television, spend time with roommates.</p> <p>Play card games, watch tv.</p> <p>Study history, watch television.</p> <p>Watch TV, cheer on Hawkeyes, make jokes with staff.</p> <p>Watch sports, watch movies, spend time with friends.</p> <p>Rock in my recliner.</p> <p>Sit outside, Star Wars, relax in my bedroom.</p> <p>Bible study, watch television, read</p> <p>Watch sports/NASCAR, listen to music</p> <p>Study trains, relax in my bedroom.</p> <p>Talk/video chat with friends and family, watch TV, relax.</p> <p>Crafts (painting), Sesame Street, watching TV and movies.</p> <p>Video games, watch movies (Harry Potter)</p> <p>Watch movies, listen to music, hang out.</p> <p>Cars, trains.</p> | <p>Pizza ranch</p> <p>Best Buy</p> <p>Buffalo Wild Wings, Mexico Lindo</p> <p>Van rides, basketball, softball</p> <p>Friend's house</p> <p>2 dogs pub</p> <p>Go shopping at Von Maur, go for walks.</p> <p>Dance parties, work my paper route, take pictures.</p> <p>Traveling, spend time with family.</p> <p>Ride bike</p> <p>Spend time with family, go to church.</p> <p>Going to sporting events, simulated driving games/go karts, spend time with Mom, spend time outdoors.</p> <p>Shopping, movies, visit Mom, rec center activities going for walks, going on picnics.</p> <p>Coral Ridge Mall</p> <p>Hawkeye games, sports in general</p> <p>Fishing, BINGO, shopping, dancing, traveling.</p> <p>Pathways, visit family, go out to eat.</p> <p>RFYP events, going out to eat.</p> <p>Public library</p> <p>Hanging out with Best Buddies, Pancheros</p> <p>Iowa City public library</p> <p>Gabe's, Teddy's Burgers, Shopping</p> |

| | |
|---|--|
| <p>Cleaning, crafts, sunbathing, talk on the phone. Watch the Price is Right, watch movies, color. Card games, music therapy, crafts, watch sports Sorting objects, making crafts, watching tv/movies, music. Card games, watch sports, watch movies Listen to music, play guitar, talk on the phone Make crafts/color. Board games, watching sports on TV, music therapy. Painting nails Play Wii U Sing station, spending time with staff Puzzles, feed birds, watch tv. Card games, making holiday crafts. Spend time with girlfriend Making blankets, visit with friends. Zoom meetings with friends Reading, playing with dolls, Xbox games, sewing.</p> | <p>Goodwill, Crowded Closet Camp trips Library and go for a walk Goodwill shopping Bowling Winter games/skiing, traveling to Des Moines. Best Buddies Church Day Dreams Comics, the library. Record Collector, the mall, the gym. Dirt track races</p> |
|---|--|

Communication Preferences



What are the most important topics that you would like RFYP to share with you about the agency's goals and accomplishments?

- Lift van
- No suggestions
- Parties
- RFYP events
- Roommate issues
- Scheduling

| Additional Comments from Members |
|--|
| <ul style="list-style-type: none">• Feel that my roommates receive more attention from staff than I do.• Want more one-on-one time with staff.• I am comfortable. Ways to resolve conflict with roommates. Roommate selection• I like it here.• Improve assistive technology within my home, would like microwave that talks due to blindness.• Maintenance requests could be handled more quickly, roommates could clean up after themselves.• More age/skill appropriate activities would be appreciated.• More trips, Iowa game trip |

Barriers and Influencing Factors

COVID-19 was the biggest influencing factor of 2021. RFYP has dedicated an extraordinary amount of time and attention over the past year to continuing high-quality operations while protecting the health and safety of members, staff, and stakeholders throughout the pandemic. As the safety recommendations change quickly, RFYP has to adapt and change procedures quickly as well. This type of dynamic environment can be challenging for members to adapt to. High staff turnover and consistent staffing has been a barrier and challenge over the past year as well.

What Did We Learn?

RFYP learned what type of information members would like to receive, how often, and the method they prefer to receive the information. Based on the data, RFYP will distribute a biannual report to all member to provide updates on but not limited to activities, community outings, celebrations, and staffing.

What Are We Doing Well?

1. Increase in the satisfaction survey response rates (+6 responses)
2. Increase in satisfaction with members' feeling safe in their homes and community (+6%)
3. Increase in desire to communicate virtually/remotely with friends and family (+4%)

Areas of Concern

1. Decrease in satisfaction with the amount of attention member are receiving from their staff (-6%)
2. Decrease in satisfaction with staff being available to discuss concerns about COVID-19 (-3%)

Proposed Improvements

1. Service Coordinators will prioritize reviewing strategies for relationship building between staff and members at house meetings and cluster meetings to ultimately improving the members' satisfaction with the attention they are receiving. Additionally, RFYP is prioritizing recruitment and retention of staff to lead to consistency in staffing in the SCL program which will also lead to members feeling like they are developing long-term relationships with their staff.

2. Service Coordinators will prioritize reviewing strategies for communication regarding COVID-19 precautions, vaccines, control, etc. at house meetings and cluster meetings. As the guidelines for precautions, interventions, and controls for COVID-19 change, RFYP will develop strategies to communicate that information to the members in an understandable format and be available to answer any questions.

The proposed improvements will be implemented in January 2022, or as deemed appropriate by the RFYP administration. Progress on the proposed improvements will be reviewed in June 2022.

2021 Employee Engagement Survey Summary

Reach For Your Potential, Inc. (RFYP) conducted an Employee Engagement Survey to allow the organization to learn more about the strengths of the organization from the perspective of the staff and what the employees truly want out of their work experience. Surveys were distributed to Reach for Your Potential employees electronically via Survey Monkey. There were 63 survey responses returned out of 154 surveys distributed (41%). Employees were asked to rate items in different areas of RFYP's workplace practices on a scale of "poor", "good" and "excellent". Results of this survey will be helpful to RFYP in improving workplace practices, values, and culture.

The 2021 Satisfaction Survey questions were analyzed and revised for relevance and clarity. The responses were analyzed to ensure data was clean, accurate, and complete. Survey results were compiled, and sample responses are included. After gathering and reflecting on the results, the data was summarized and analyzed for trends and causes. Barriers and influencing factors were identified and areas of excellence were documented. Areas of concern, proposed improvements to be

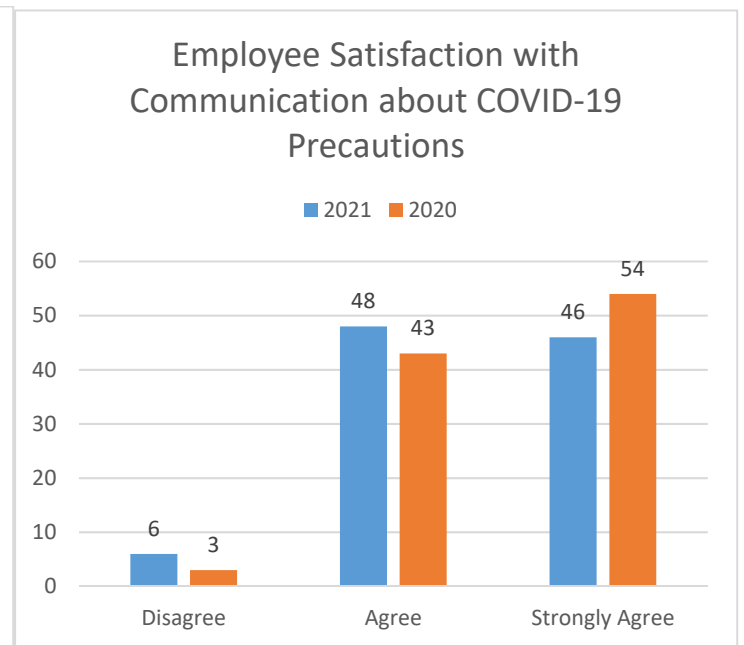
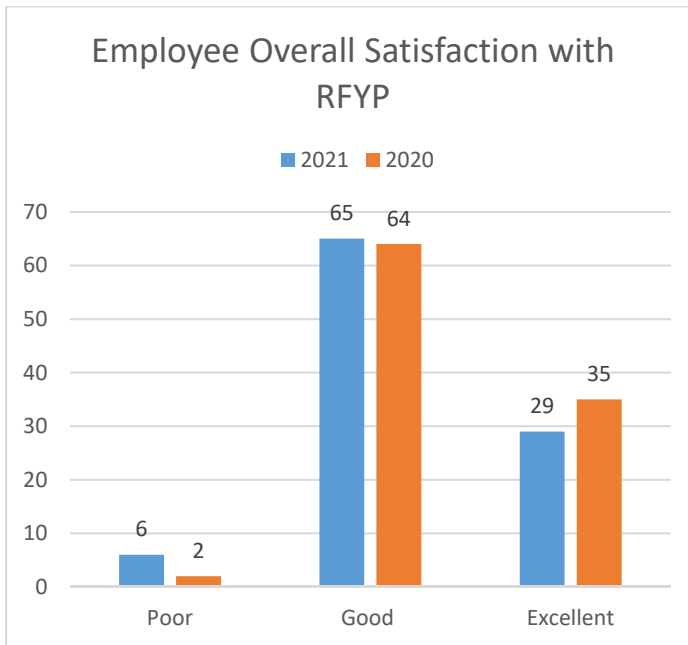
implemented in the upcoming year, and a comparative analysis from previous survey results are included in the summary. Action plans for continuous quality improvement will be implemented in January 2022 and reviewed for progress in six months.

What is the #1 reason you choose to continue your employment at RFYP?



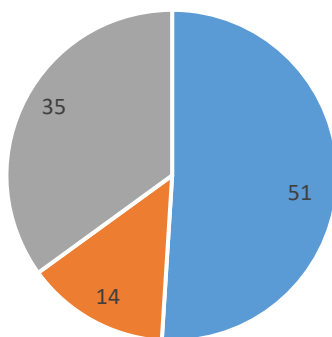
| | 2020 Disagree | 2020 Agree | 2020 Strongly Agree | 2021 Disagree | 2021 Agree | 2021 Strongly Agree |
|---|------------------|---------------|---------------------------|------------------|---------------|---------------------------|
| I have a clear understanding of what is expected of me. | 5% | 41% | 54% | 3% | 38% | 59% |
| I am given adequate feedback to improve my performance. | 8% | 46% | 46% | 10% | 49% | 41% |

| | | | | | | |
|---|-----|-----|-----|-----|-----|-----|
| My supervisor values my talents and contributions. | 10% | 49% | 41% | 10% | 55% | 35% |
| I feel I have the flexibility I need to maintain a work/life balance. | 11% | 54% | 35% | 14% | 52% | 33% |



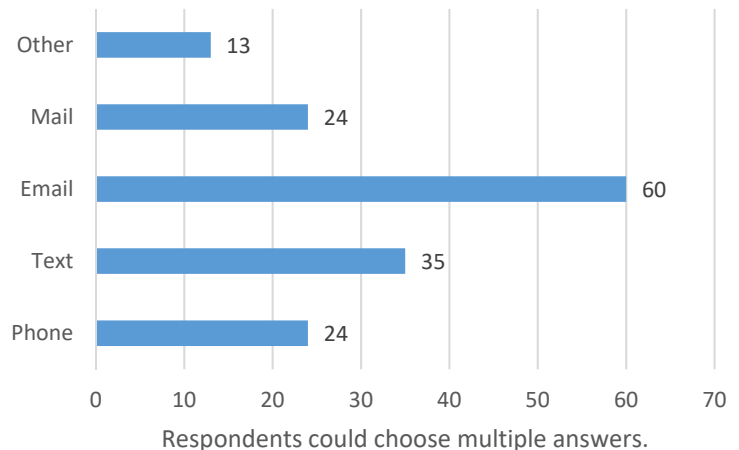
| | 2020 Disagree | 2020 Agree | 2020 Strongly Agree | 2021 Disagree | 2021 Agree | 2021 Strongly Agree |
|---|------------------|---------------|---------------------------|------------------|---------------|---------------------------|
| My team inspires me to do my best work. | 19% | 49% | 32% | 5 | 68 | 27 |
| My supervisor encourages and supports my personal and professional development. | 11% | 49% | 35% | 19 | 49 | 32 |
| I feel my ideas about improving services are valued. | 14% | 59% | 27% | 16 | 59 | 25 |
| Enough training and support are provided to me regarding the use of technology for my position. | 11% | 57% | 32% | 11 | 59 | 30 |
| How would you rate the organization overall? | 8% | 59% | 32% | 6 | 65 | 29 |
| I am satisfied with RFYP's use of technology. | 24% | 46% | 30% | 21 | 52 | 27 |
| I feel RFYP promotes a teamwork environment and a positive work culture. | 8% | 41% | 51% | 11 | 65 | 24 |
| I feel RFYP respects individuals and values their differences. | 10% | 49% | 41% | 10 | 50 | 40 |

How often would you like to receive agency updates?



■ Every 6 months ■ Every 12 months ■ Not Applicable

What format would you like to receive agency updates?

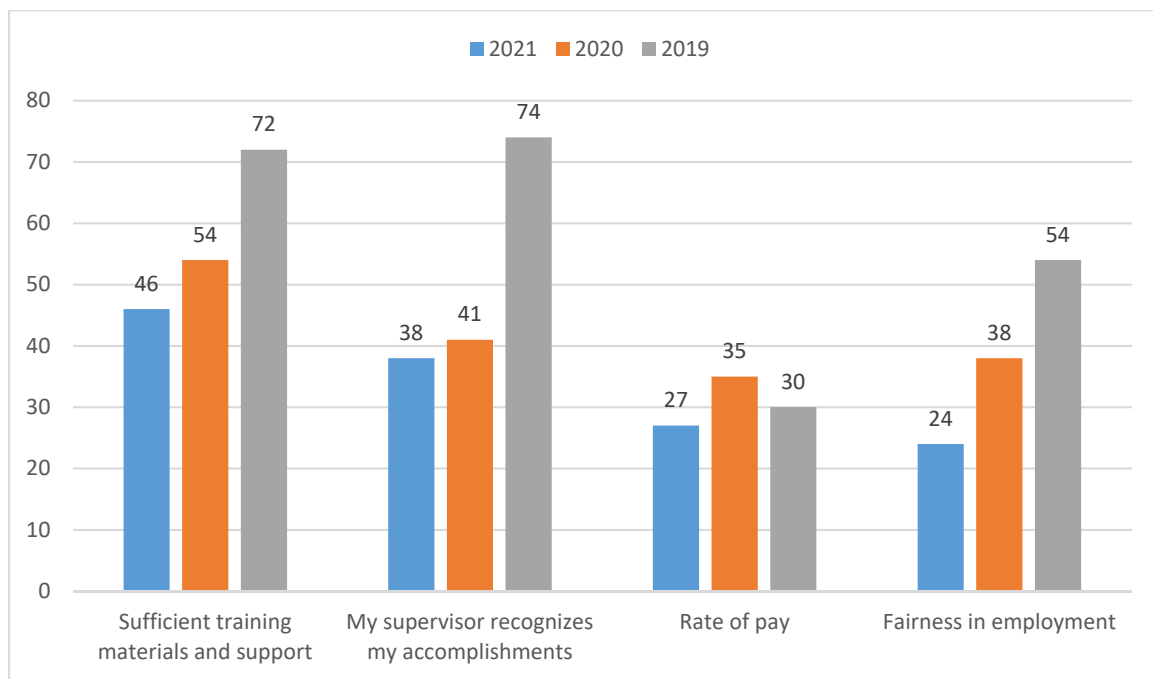


Respondents could choose multiple answers.

What are the most important topics that you would like RFYP to share with you about the agency's goals and accomplishments?

- Events & special celebrations
- New staff
- Staff promotions
- Anything important
- Successes, opportunities
- How much money is allowed for each budget.
- The salary increment procedure
- Everything important about the company that help the staffs to make them updated.
- Changes and new developments.
- Activities
- Job Openings, upcoming changes

Comparative Analysis 2019-2021



If you were the leader of this organization, what changes would you put into action to accomplish the goals of the organization?

- Better staff retention, and more effective staff training.
- Would like to see Day Habilitation be able to accommodate for increased community outings for individuals with limited mobility, those requiring the use of a lift van.
- Would like to see Day Habilitation members more actively encouraged to participate in in-house activities, especially for those who lack interest in attending the community outings
- Don't change anything. Ron's doing a great job!
- Making changes a few days ahead of time rather than less than 24 hours
- Parties for every occasion
- Have members more involved with helping out with Aktion club
- Mainstreaming training, more technology usage. Less paperwork.
- Organization, communication, staff get more pay
- More paid time off for holidays, Xmas Eve, NY Eve, etc.
- Upgrade the working teams and give them prizes for motivation
- Promote staff that have shown devotion to the company.
- More use of technology
- A way to improve/streamline documentation requirements.
- Combine Edoc and Accuflo systems

Barriers and Influencing Factors

RFYP has dedicated an extraordinary amount of time and attention over the past year to continuing operations while protecting the health and safety of members, staff, and stakeholders throughout the pandemic. Turnover and staff retention has been a major challenge throughout 2021.

What Did We Learn?

The staff showed incredible resiliency and flexibility throughout 2021. RFYP put great effort into redesigning the agency's health and safety procedures, staffing policies, activities, community outings, group sizes, and COVID-19 precautions. RFYP crafted multiple staffing plans to deal with the unpredictability of the pandemic, staffing shortages, and high turnover.

What Are We Doing Well?

1. There was a high increase in the satisfaction survey response rates from staff (+26 responses)
2. There was an increase in satisfaction with staff reporting their team inspires them to do their best work (+14%)
3. The agency has continued to be proactive with Covid testing, precautions, and quarantine procedures
4. Staff appreciation efforts have increased over the past year

Area of Concern

1. There was a decrease in satisfaction with staff reporting a sense of fairness in employment (-14%)
2. There was a decrease in satisfaction with staff reporting they have sufficient training and materials (-8%)

Proposed Improvements

1. To improve satisfaction with fairness in employment, RFYP Human Resources will promote the grievance process to staff to use for more than just a response to terminations. HR will educate employees on the Formal Complaint Form, the Grievance policy and procedure, communication timelines, how to access the form, who to contact, and encourage employees to use the grievance process when appropriate. Consistent monthly distributions of the agency and member newsletter will allow RFYP to give staff recognition more equally, share contact information, and promote transparency in communication.
2. To improve satisfaction with the training process and availability of training materials, RFYP HR will ensure new staff receive consistent follow-up from their service coordinator's regarding on boarding to their cluster, update training materials, and ensure more 1:1 training shifts are scheduled at the house the new staff will be working at.

The proposed improvements will be implemented in January 2022, or as deemed appropriate by the RFYP administration. Progress on the proposed improvements will be reviewed in June 2022.

Performance Outcomes Summaries

2021 Annual Performance Outcomes Summary: Supported Community Living

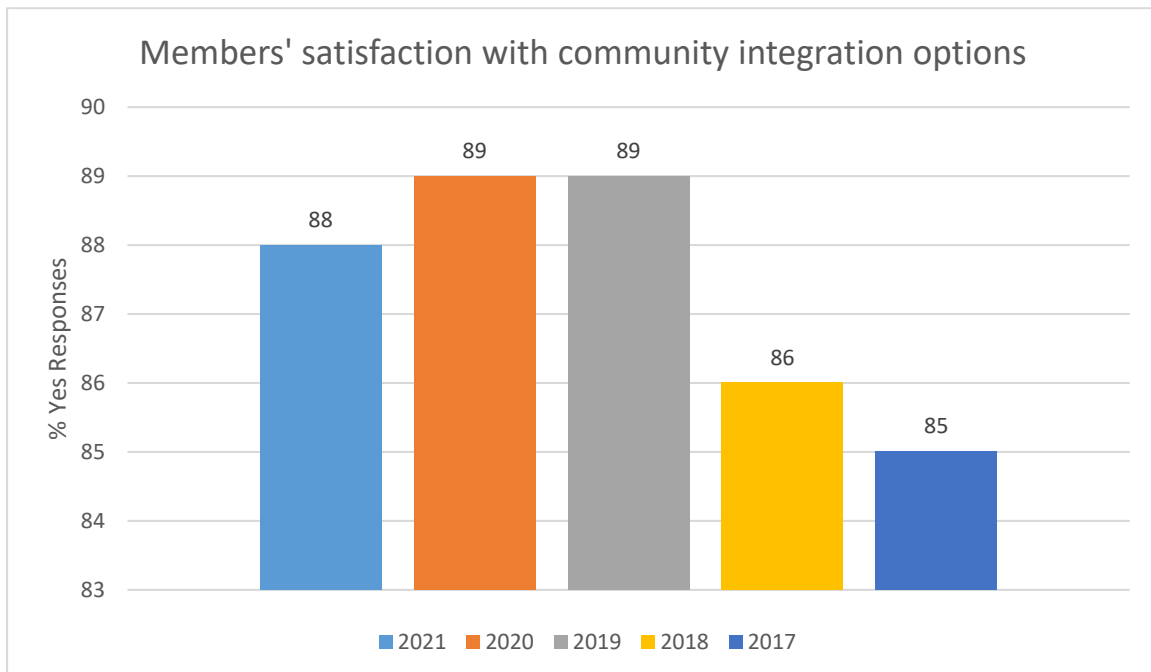
RFYP is committed to performance improvement through proactive and ongoing review, analysis, reflection, and transparency on goals and objectives for both service delivery and business functions. The results of performance analysis for Supported Community Living are used to identify and implement data-driven actions to improve the quality of programs and services and to inform decision making. Performance information that is accurate and understandable to the target audience is shared with persons served, personnel, and other stakeholders in accordance with their interests and needs. The objectives and action plans for improvement are reviewed biannually to ensure progress is being made, relevance, and to make changes as necessary.

Domain 1: Results Achieved for Persons Served

Objective #1: RFYP provides members choices for community integration

- *Annual Performance Target* | 85% of RFYP members report they feel RFYP provides choices for community integration
- 2021 Performance Outcome | 88% of RFYP members report they feel RFYP provides choices for community integration

Comparative Analysis 2017-2021



RFYP met the performance target for this objective. This data was collected via the Residential Member Satisfaction Survey which is distributed annually. RFYP makes it a priority to offer choices for community integration. Community integration and social contexts enable individuals to strive to learn, work, play, and socialize successfully in their local environment all while enjoying the benefits of an active, engaged lifestyle. Each individual in the community integration possesses a unique potential: a potential to create, grow, learn and adapt. The relationships, support networks, interconnections within communities, and the involvement of the members in decisions that affect their lives all contribute to an individual's quality of life

Trends: This year the members enjoyed bowling weekly. RFYP had dedicated lanes only for RFYP members so they could bowl in a safe indoor setting and follow distancing precautions. Members also enjoyed the drive-through parties at Halloween and Christmas and to pick up goodie bags. The weekly engagement calendar provided options for remote socialization and activities, crafts, mindfulness activities, birthdays, monthly awareness campaigns, daily holidays, cultural holidays, and safe community outings to parks and low-risk locations were all included.

Causes: RFYP dedicated countless hours to creating safe and fun activities for the RFYP Members. As the pandemic changed and evolved, so did the activities and outings programming. The choices of safe community outings allowed for the members to feel included and valued with decreased isolation which maintained healthy mental wellbeing.

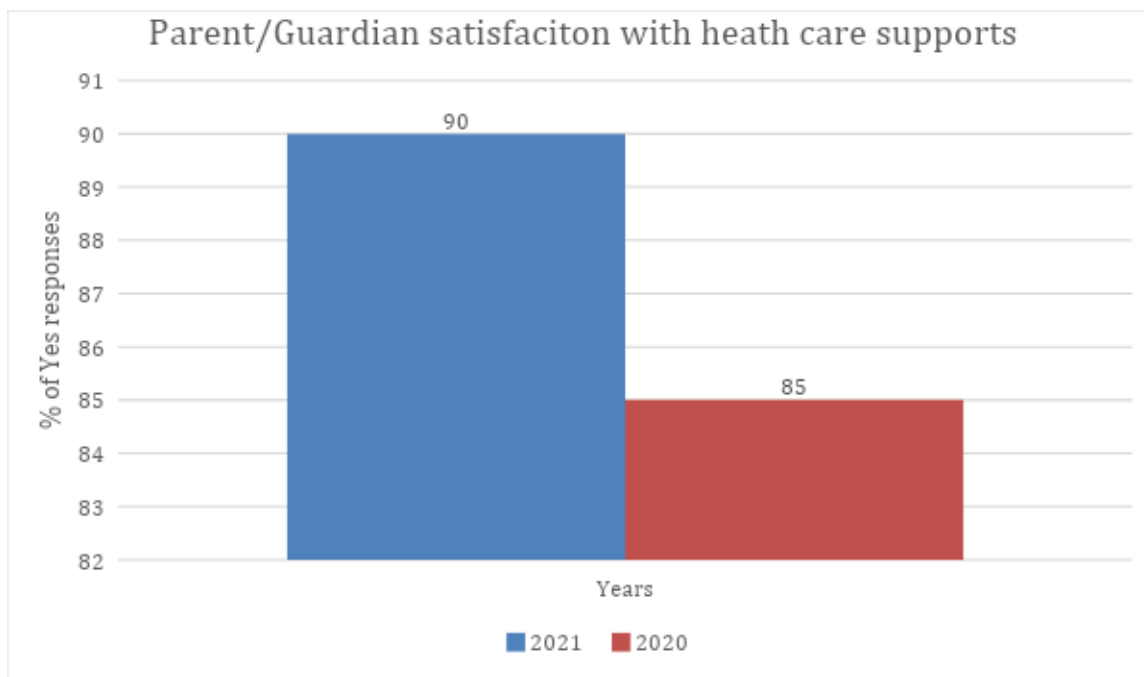
Impact of Extenuating Factors: Staff turnover, staffing shortages, and staff working at new locations all contributed to this outcome. The winter months combined with COVID-19 precautions limited the amount of safe community integration options.

Objective #2: RFYP provides individualized medical and health care supports to meet members' needs

- *Annual Performance Target | 85% of RFYP members report they feel RFYP provides individualized medical and health care supports to meet members' needs*
- *2021 Performance Outcome | 90% of RFYP members report they feel RFYP provides individualized medical and health care supports to meet members' needs*

RFYP met the performance target for this objective. This data was collected via the Residential Member Satisfaction Survey which is distributed annually. The RFYP medical team puts great effort towards developing positive and individualized relationships with every member to ensure their health care needs and expectations are met and exceeded. Staff participate in training specific to the individualized needs of members. Health care coordination services are available for all RFYP members. Some members prefer to have a guardian or family member support their health care needs. In those cases, the RFYP medical team is available as a resource for consultation, advocacy, or education on any concerns. The RFYP medical team and care coordination services remove barriers to health inequities by providing transportation and service access, removing geographic constraints, and empowering members to make informed choices.

Comparative Analysis:



Trends: The members' schedules were very flexible due to a decline in work and day program hours because of Covid-19. This provided the opportunity for the medical team to check on the members more frequently because they were at home more. Telehealth appointments also continued throughout 2021. Telehealth removes barriers of needing to see a physician in person, removes the need for transportation, and allows the member to receive the necessary care from the comfort of their home. RFYP ensured that every house has access to the technology necessary for these appointments. Staff were trained on how to use the technology.

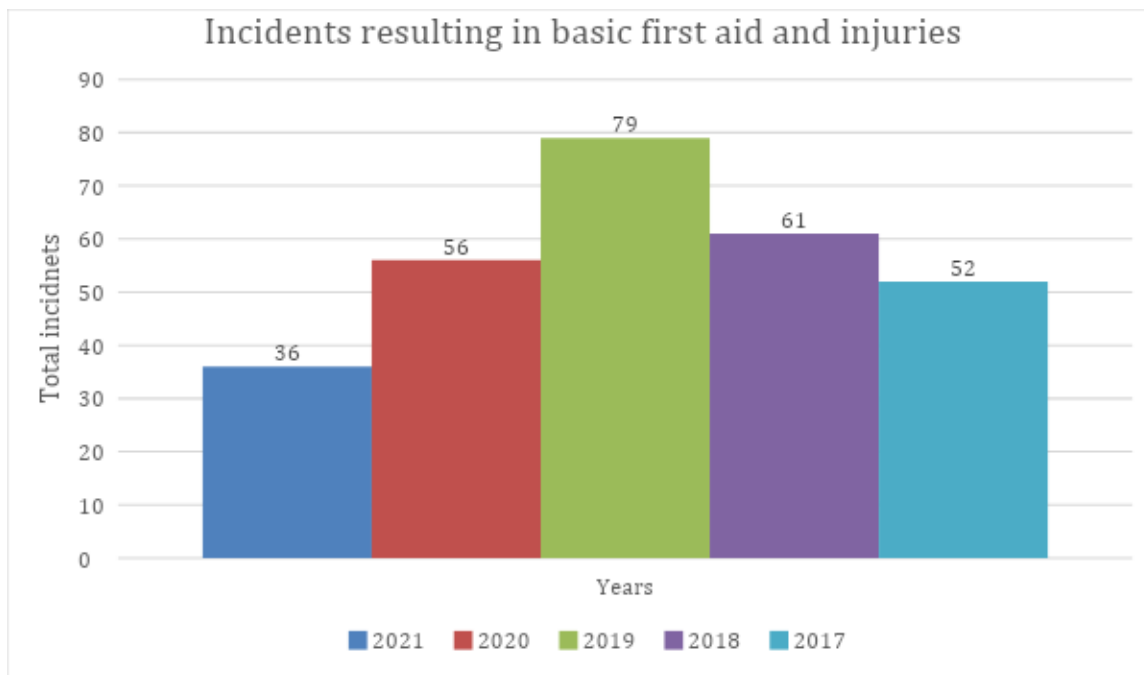
Causes: RFYP is dedicated to holistic individualized care. The pandemic provided many challenges and RFYP continued to find creative solutions to meet the needs of the members. The high satisfaction from members regarding the individualized medical and health care supports received from the medical team can be attributed to the long-term staff in the department and positive rapport with the members. These factors are the foundation of why a quick pivot to telehealth was successful.

Impact of Extenuating Factors: There are currently long wait times for an appointment with medical providers. For example, the College of Dentistry has a nine-month wait for a routine appointment. When it is safe to do so, RFYP ensured appointments still took place and door-to-door transportation was still available for the members. RFYP now sends two med team members to every appointment needing a lift van for transportation so one person can drive and park and the other can assist the member to the office and be at the appointment with them for support and advocacy.

Objective #3: RFYP maintains physically safe residential built environments

- *Annual Performance Target* | Maximum of 64 incidents total requiring basic first aid and incidents resulting in injury
- *2021 Performance Outcome* | 36 incident reports documenting incidents resulting in basic first aid and injury

Comparative Analysis 2017-2021:



RFYP met this performance target for this objective. Incident report data is tracked using the incident report tracking spreadsheet which is maintained by the Program Director Assistant. Incident reports are summarized biannually. Incident reports are reviewed by Service Coordinators, Program Directors, and Medical Team (if necessary). Disciplinary action and retraining may be required depending on the incident. RFYP takes a proactive approach by offering a comprehensive training schedule so staff are informed and educated on how to protect the health and safety of the members.

Trends: There are two trends identified with incidents involving injury and requiring basic first aid compared to 2020

- Incidents resulting in injuries to self increased by 36
- Incidents resulting in basic first aid decreased by 6
- Incidents resulting in physicians' treatment decreased by 9.

Causes: The cause of the injuries to self and injuries requiring basic first aid have patterns of self-injurious behavior and attention-seeking behavior which may be attributed to change within the members' daytime environments and changes at home with staff and roommates due to COVID-19. This can be attributed to member personality, changes within the environment, stress from illness due to COVID, and behavior as a strategy for communication. There are also members who may have a difficult time focusing on a task. In addition, members and staff were in the home more than in previous years due to day programs being suspended and many traditional community outings being restricted. There was less physical activity and a sense of urgency to remain on schedule for work, day programs, and community outings.

Impact of Extenuating Factors: Due to COVID-19 precautions and protecting the health and safety of the members and staff, there was extra attention dedicated to ensuring the health and safety of the members. Members were impacted by the inconsistent openings and closings of day and work programs.

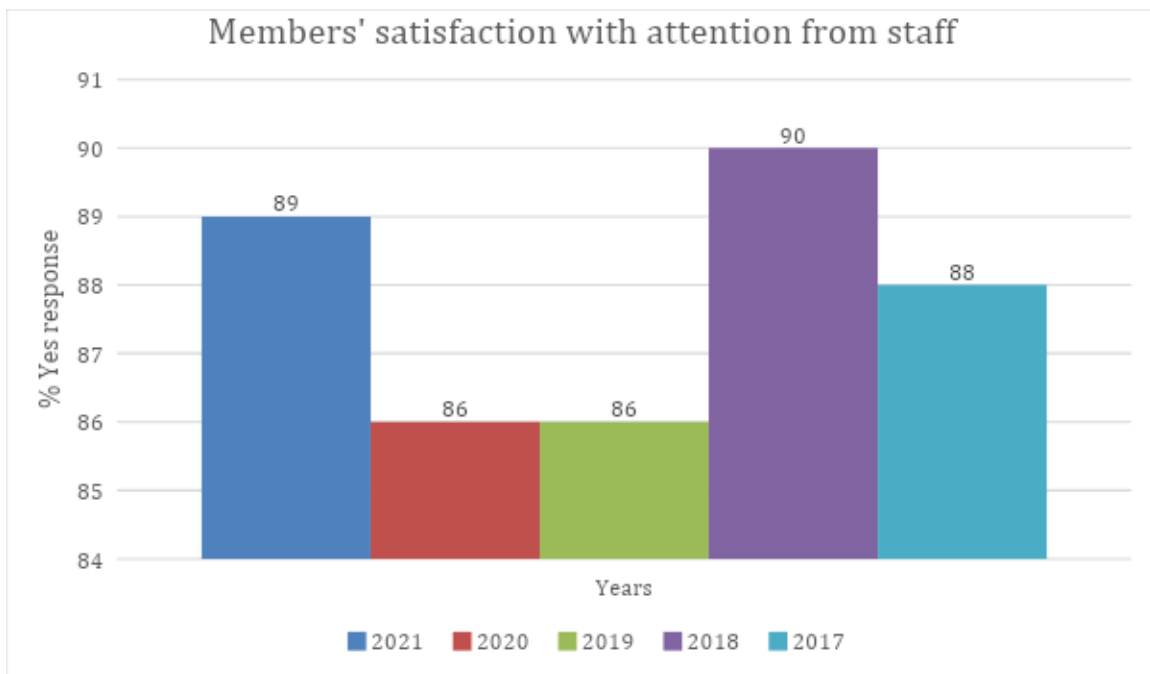
Domain 2: Experience of Services Received and Other Feedback from Persons Served

Objective #1: Members are satisfied with the level of attention they receive from staff

- *Annual Performance Target* | 85% of members are satisfied with the level of attention they receive from staff
- *2021 Performance Outcome* | 89% of members are satisfied with the level of attention they receive from staff

RFYP met the performance target for this objective. This data was collected via the Residential Member Satisfaction Survey which is distributed annually. Staff receive ongoing training and support on how to implement the best practices on how to provide person-centered and individualized services. Member satisfaction with the individualized supports that RFYP provides drives decision making. It is important that the members are highly satisfied so they feel empowered to thrive, grow, live, work, and age within their home environment.

Comparative Analysis 2017-2021



Trends: Members and staff spent a majority of their time at home due to COVID-19 health and safety precautions. Members seek attention from staff for activities related to working on individual goals in their service plans, relationship building, and pursuing activities based on the members' passions and strengths. During this period of time at home, members and staff were able to give more attention to working on preferred activities, crafts, and socialization.

Causes: Staff care for the wellbeing and happiness of the members. The members' satisfaction is a result of the person-centered care they receive.

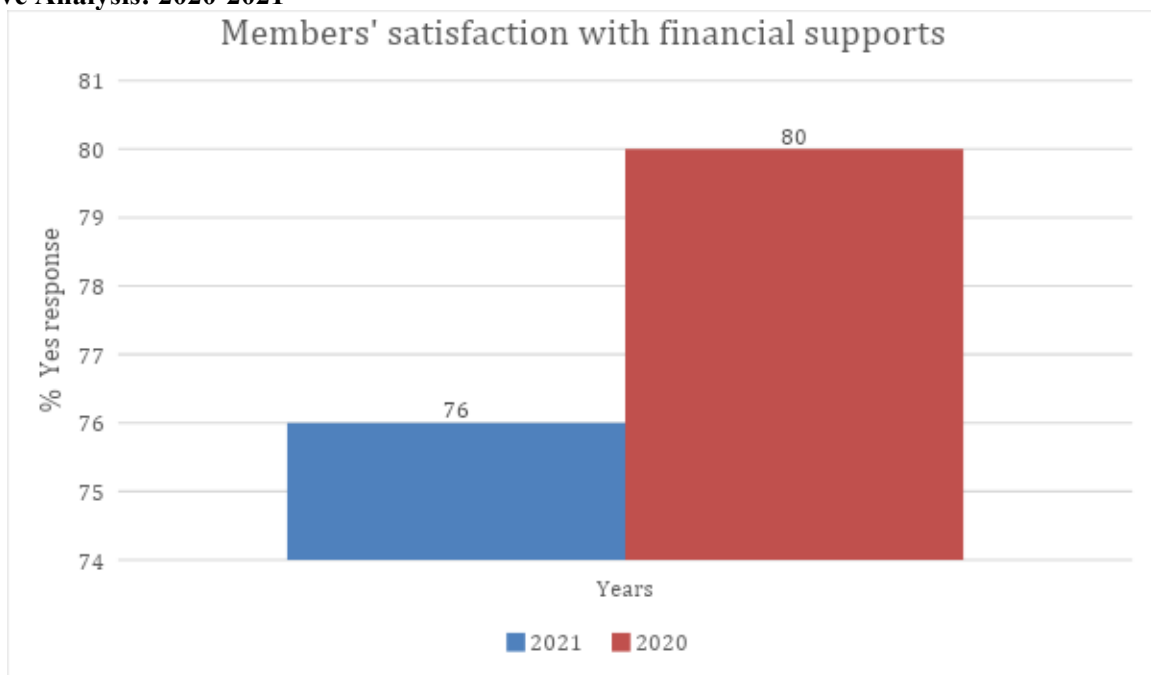
Impact of Extenuating Factors: Staff turnover, staffing shortages, and office staff working shifts temporarily at the SCL locations are all extenuating factors. Additional in-home and remote socialization activities were offered to provide the members with an engaging daily routine.

Objective #2: Members are satisfied with the financial support available to them

- *Annual Performance Target* | 85% of members are satisfied with the financial support available to them
- 2021 Performance Outcome | 76% of members are satisfied with the financial support available to them

RFYP did not meet the performance target for this objective. This data was collected via the Residential Member Satisfaction Survey which is distributed annually. Supports for finances can be key to addressing economic inequities as a social determinant of health. RFYP's member financial team is available to provide financial support (payee services), education, consultation, and advocacy services to all RFYP members and their guardians. RFYP believes that providing financial support services empowers members and guardians to make informed choices and to live a fulfilling life.

Comparative Analysis: 2020-2021



Trends: Members received the federal stimulus funds, which results in more purchase options and the freedom to purchase high-dollar items that they may not have been able to before. There has been an increase in calls by the members to the financial team to discuss their options. During the COVID-19 pandemic, some members were able to purchase items that have been on their "wish list" for an extended time due to the stimulus funds. Member Financial discusses the members' financial decisions and the importance of making sound decisions.

Causes: RFYP supports and promotes the members' right to transparency regarding their finances. They are learning to seek information and self-advocate.

Impact of Extenuating Factors: Additional income from the stimulus plan from the federal government required close monitoring by the financial team to ensure the members remain in good standing with social security.

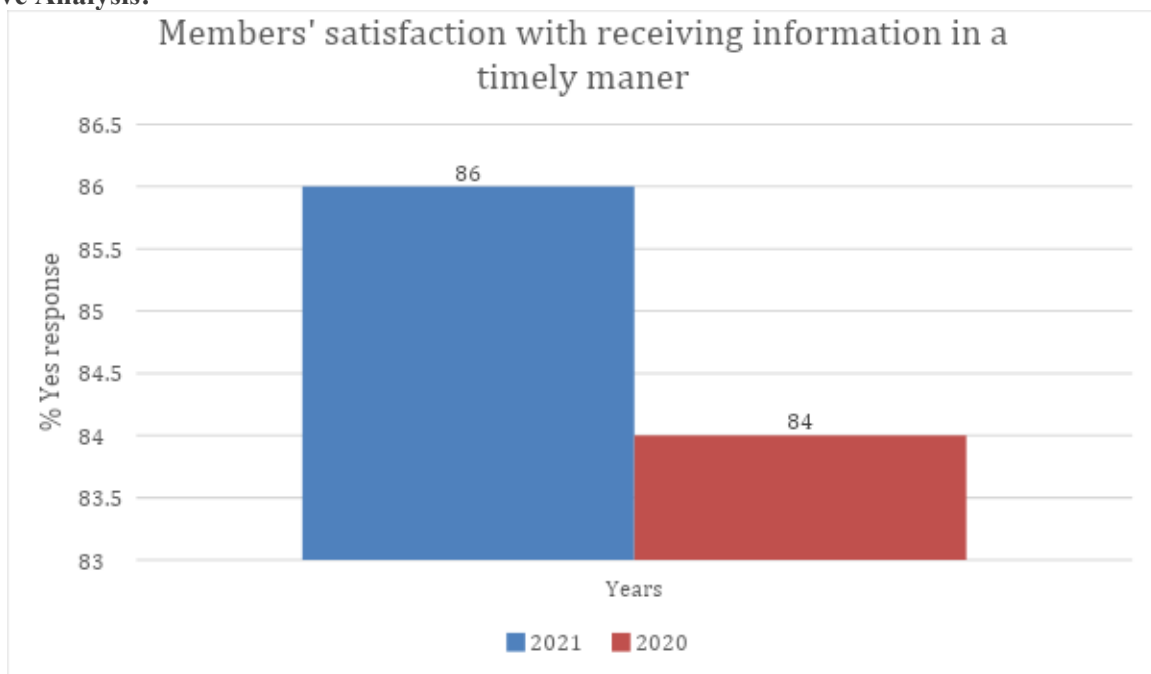
Action Plan for Improvement: Member Financial and the Financial Director will provide additional training to the Service Coordinators (SC). This training will include how to read the financial packets given to the SCs for the members' annual and six-month ISP meetings. This will ensure that all parties know how to read the reports and can answer any questions that the members may have.

Objective #3: Members receive answers to their questions in a timely manner to make informed personal choices

- *Annual Performance Target | 85% of members feel they receive answers to their questions in a timely manner to make informed personal choices*
- **2021 Performance Outcome | 86% of members feel they receive answers to their questions in a timely manner to make informed personal choices**

RFYP met the performance target for this objective. This data was collected via the Residential Member Satisfaction Survey which is distributed annually. Members' feedback regarding the timely communication of information can lead to better service coordination, personalized care, and members feeling empowered to make informed decisions about circumstances that directly affect their lives.

Comparative Analysis:



Trends: There is a trend that members seek timely communication regarding upcoming activities, personal schedules, plans for upcoming holidays and celebrations, and solutions to roommate issues and conflicts.

Causes: As the pandemic evolved, so did the members' schedules. This can be frustrating to the members. The engagement calendars communicated to the members what their options were for activities. The members got more used to using technology for activities and communication. RFYP implements policies to ensure timely and transparent communication. Members are encouraged to self-advocate and problem solve. They feel empowered when they have the information needed to make an informed decision.

Impact of Extenuating Factors: Due to COVID-19 precautions and protecting the health and safety of the members and staff, there was extra time and attention dedicated to ensuring the health and safety of the members. Members may have experienced delays in communication due to additional responsibilities of all agency staff to ensure their health and physical safety. Daily health screenings and protocols were put into place to ensure their health was being prioritized and protected. Delays in responses may be attributed to dedicating time to health and safety issues. Also, the influence of the pandemic on the respondents' emotional wellbeing may have impacted their responses on the satisfaction survey.

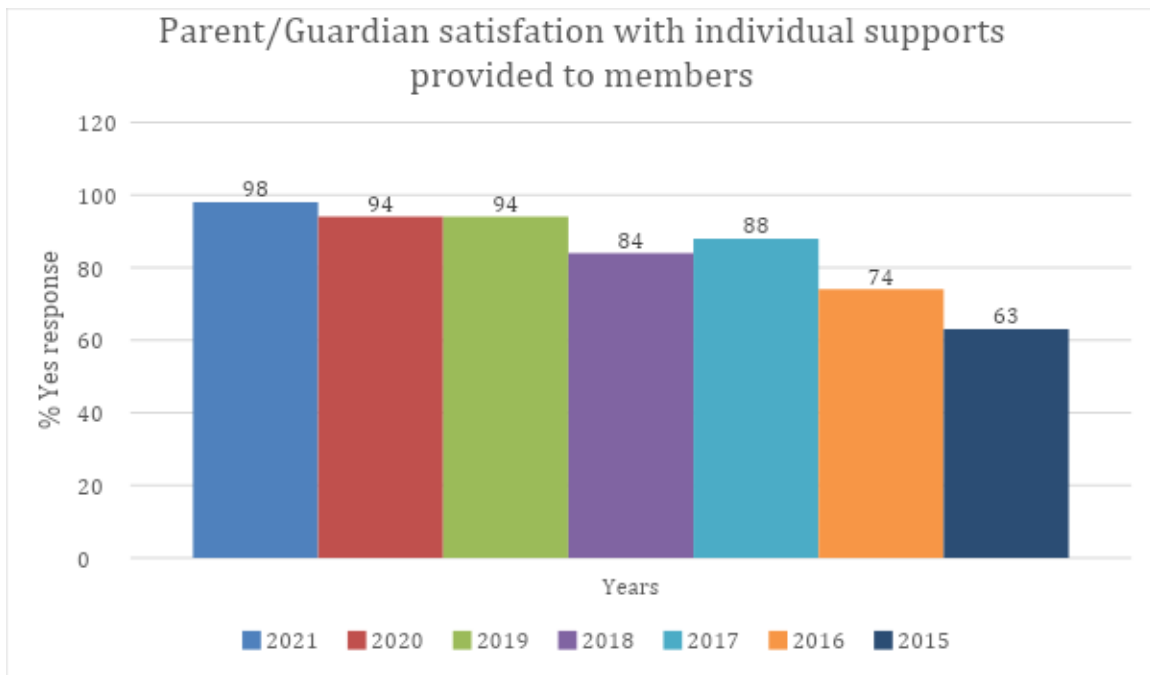
Domain 3: Experience of Services Received and Other Feedback from Other Stakeholders

Objective #1 - Guardians are satisfied with the staffs' responsiveness to the needs of the members

- *Annual Performance Target | 85% of guardians feel satisfied with the staffs' responsiveness to the needs of the members*
- *2021 Performance Outcome | 98% of guardians feel satisfied with the staffs' responsiveness to the needs of the members*

RFYP met the performance target for this objective. This data was collected via the Parent/Guardian Satisfaction Survey which is distributed annually. Being responsive and flexible to the needs of the members, guardians, and parents are high priorities of RFYP. The high level of satisfaction from parents and guardians shows that RFYP staff are communicating and demonstrating this commitment and following through with the mission of the agency.

Comparative Analysis 2015-2021



Trends: Legal guardians and parents want assurance that the members will consistently receive genuine concern, staff will understand their individual personalities and needs, and that the members' health and safety will be considered and protected. Guardians and parents are highly satisfied with the measures RFYP has put into place to keep the members protected from COVID-19. They also are happy that RFYP is responding creatively to the members' feeling of isolation during the pandemic with remote activities and weekly bowling reservations for only RFYP members.

Causes: It is the goal of RFYP to provide a family-like environment. Legal guardians and parents desire for their member to be treated like a family member by the agency and staff. RFYP implements policies that will provide a high quality of life for the members. RFYP seeks input from legal guardians and parents to understand the unique qualities and strengths of each member and provide member-specific training to staff so the member can receive responsive and individualized attention.

Impact of Extenuating Factors: Inconsistent programming, cancelation of events, and staff turnover due to the pandemic.

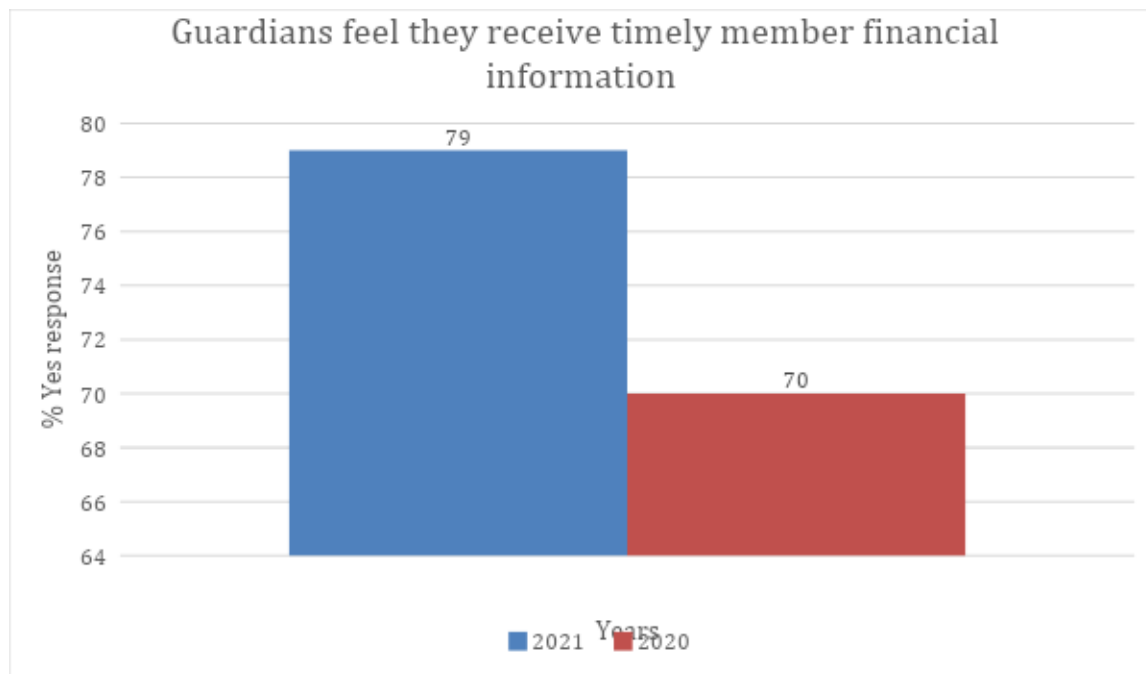
Due to COVID-19 precautions and protecting the health and safety of the members and staff, there was extra time and attention dedicated to ensuring the health and safety of the members.

Objective #2: Guardians feel they receive timely member financial information

- *Annual Performance Target* | 85% of guardians report they feel they receive member financial information in a timely manner
- *2021 Performance Outcome* | 79% of guardians report they feel they receive member financial information in a timely manner

RFYP did not meet the performance target for this objective. This data was collected via the Parent/Guardian Satisfaction Survey which is distributed annually. Parents/Guardians' feedback regarding the timely communication of financial information can lead to better service coordination and stakeholders feeling empowered to make informed decisions about circumstances that directly affect the lives of the members.

Comparative Analysis:



Trends: This performance outcome has increased when compared to the previous year, although it is not up to the target percentage. Guardians expect transparency with the members' financial standing to ensure the members remain in good standing with Social Security Administration.

Causes: RFYP uses USPS to mail financial information to the guardians/parents monthly. Over the past year, it has been observed that the USPS mail has taken longer than before the pandemic, therefore, documents are getting to the guardians later than expected.

Impact of Extenuating Factors: The impacts of the pandemic have placed a high demand on the US Postal System, and the county has been impacted by slower delivery times.

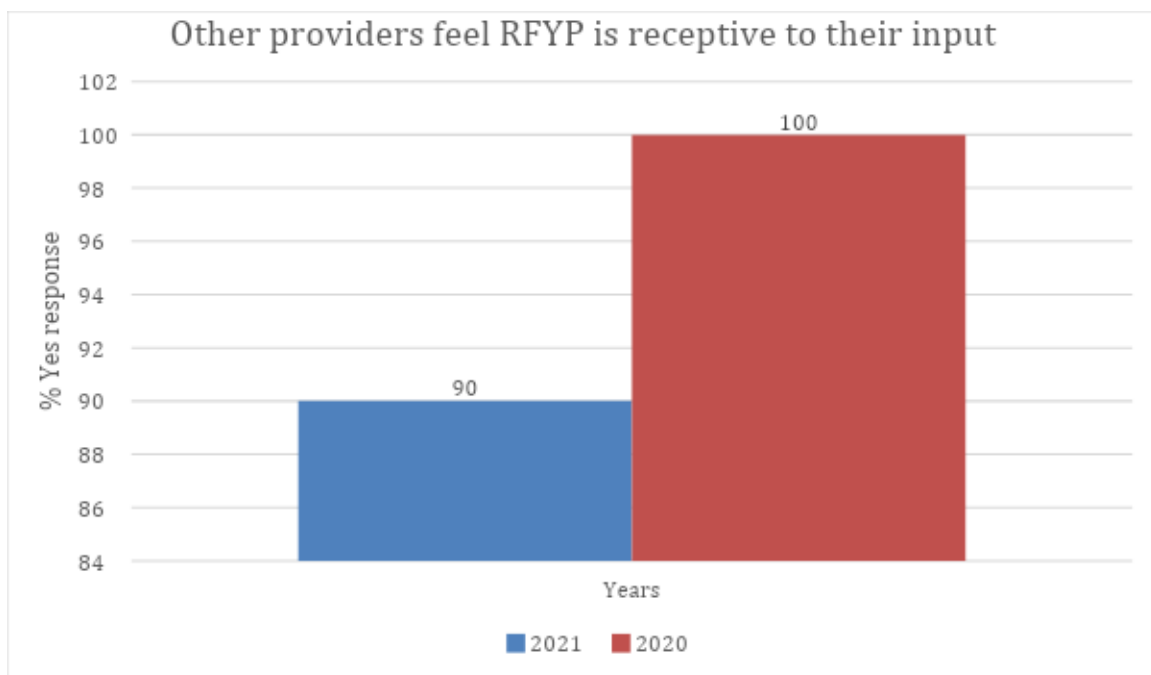
Action Plan for Improvement: The previous mailing deadline for the guardians' monthly financial report was the end of the subsequent month and was changed to the 25th of the subsequent month last year. This solution was to ensure the documents would be received by the guardians by the end of the month. Although RFYP cannot change the speed of mail delivery, the Member Financial department will strive to mail the reports by the 22nd of the subsequent month.

Objective #3: Other stakeholders feel RFYP is receptive to their requests/suggestions/inquiries

- *Annual Performance Target* | 85% of other providers report they feel RFYP is receptive to their requests, suggestions, and/or inquiries
- *2021 Performance Outcome* | 90% of other providers report they feel RFYP is receptive to their requests, suggestions, and/or inquiries

RFYP met the performance target for this objective. This data was collected via the Other Stakeholder Satisfaction Survey which is distributed annually. Being responsive and flexible to the input and requests of other stakeholders are high-priorities of RFYP. The high level of satisfaction from other providers shows that RFYP staff are communicating and demonstrating this commitment.

Comparative Analysis:



Trends: Stakeholders want information about the plans for the future of the agency and transparency in communication. They have been consistently happy with the communication regarding safety protocols during the pandemic. In addition to the annual satisfaction surveys, RFYP intentionally provides the opportunity for other stakeholders to give feedback and input via phone calls, email, and video conferencing. Other stakeholders provide input and feedback on but not limited to programming, health and safety precautions, and individualized needs. RFYP is available 24 hours per day, 7 days per week for input, communication, and/or crisis intervention.

Causes: RFYP maintains and promotes an Open Door Policy and provides comprehensive service coordination services. These two policies and procedures promote transparency and a team-oriented approach to the person-centered services RFYP provides. RFYP seeks the input of other stakeholders in order to provide comprehensive services and a high quality of life for the members with their best interests in mind.

Impact of Extenuating Factors: The ongoing pandemic, staff turnover, and staff shortages have impacted timely communication. Throughout the pandemic, RFYP has remained available by phone, email, and video conference for ongoing feedback and communication.

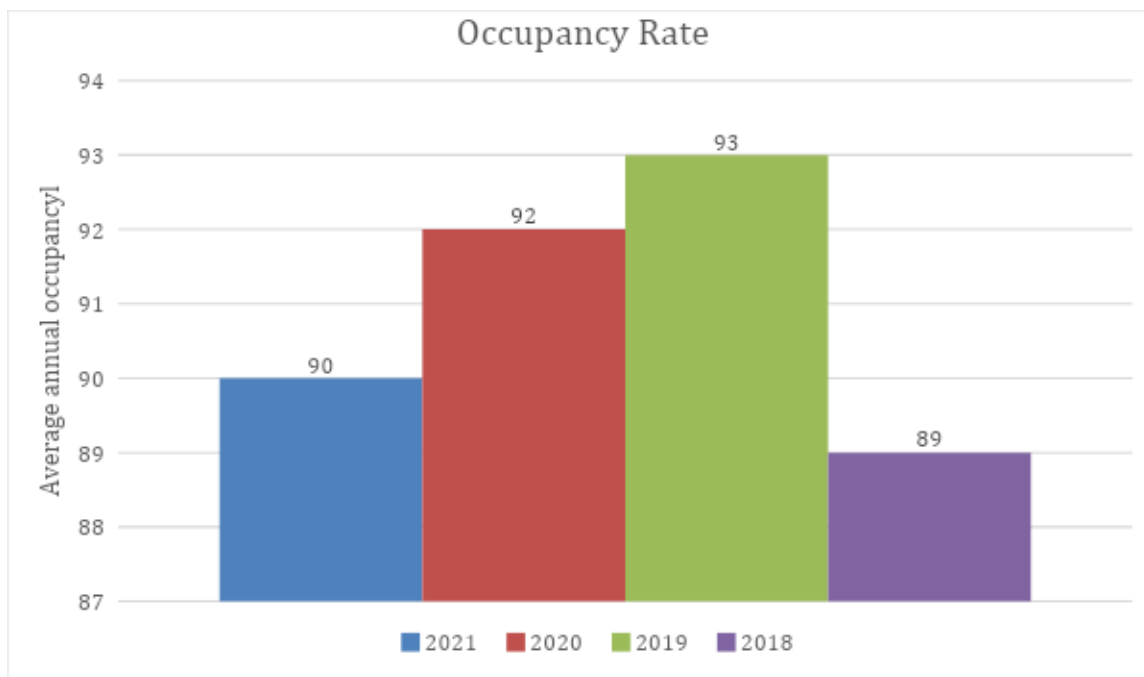
Domain 4: Resources Used To Achieve Results for the Persons Served

Objective #1: SCL program monitors how many members are enrolled to provide quality services and avoid interruptions to the members

- *Annual Performance Target* | 87% average monthly occupancy rate
- 2021 Performance Outcome | 90% average monthly occupancy rate

RFYP met the performance target for this objective. This data was collected via financial billing worksheets maintained by the Financial Department. The enrollment of SCL members is monitored closely by the Financial Director and Executive Director to ensure fiscal health and financial security. This data was collected from the billing census worksheets which are maintained by the Billing and Payroll Specialist. The member enrollment and billing census worksheets are analyzed by the Financial Director and reported to the Executive Director on a monthly basis. If there are key changes to the member enrollment, the results are reported to the Board of Directors to notify of any major budget modifications. While the monthly occupancy rate can drop below the target, the annual average cannot drop below 87% to maintain fiscal health and future financial security.

Comparative Analysis 2018-2021



Trends: There was more turnover of members than predicted. RFYP accepted two new members in 2021, had three members pass away during the year, and two others voluntarily discharge.

Causes: Members and guardians have the right to choose the best service provider to meet their needs. Additionally, some of the members have high-risk health conditions resulting in negative outcomes. RFYP is responsive to the evolving needs and circumstances of the members and guardians.

Impact of Extenuating Factors: While one member's passing was somewhat known to the agency, the two others were completely unexpected.

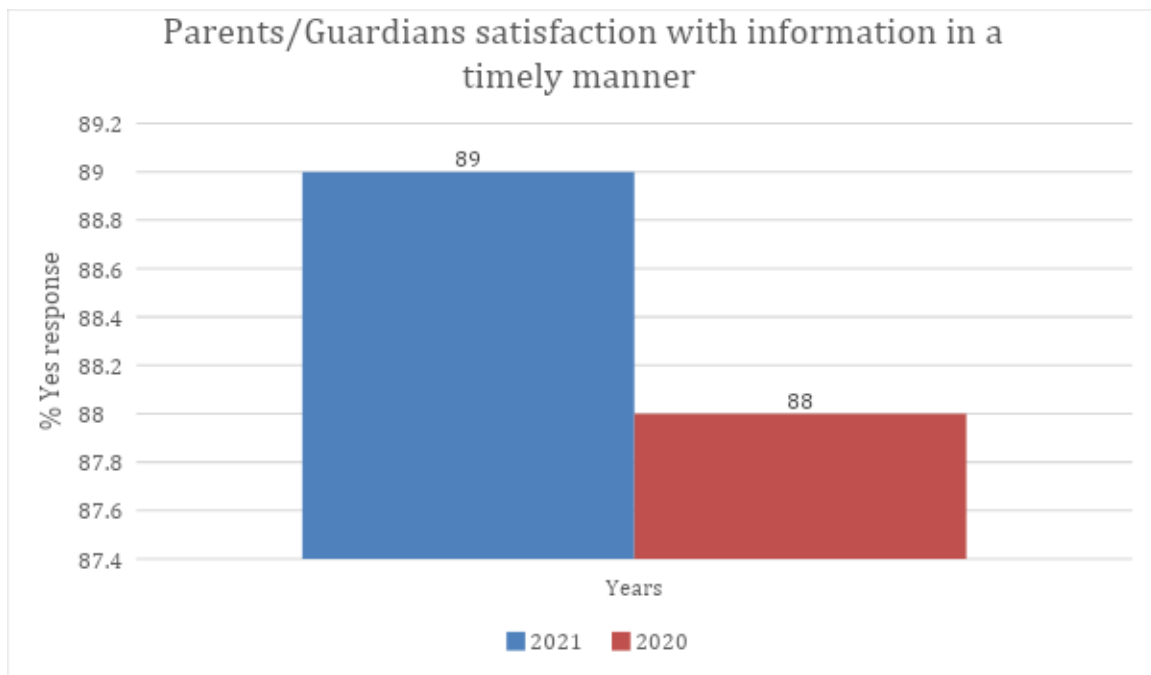
Domain 5: Service Access Measures

Objective #1: Parents/Guardians receive information regarding the member or services provided in a timely manner

- *Annual Performance Target* | 85% of parents/guardians feel they receive information regarding the member or services provided in a timely manner
- *2021 Performance Outcome* | 89% of parents/guardians feel they receive information regarding the member or services provided in a timely manner

RFYP met the performance target for this objective. This data was collected via the Legal Guardian/Parent Satisfaction Survey which is distributed annually. RFYP understands that good communication amongst guardians and parents is vital in providing quality care to members. Most communication between RFYP and guardians is streamlined through the main office. In addition to phone, email, and electronic communication (text and email), RFYP updated the “Contact Us” tab on the agency website to provide additional access to RFYP administrative staff.

Comparative Analysis:



Trends: Guardians and parents want information about the plans for the future of the agency and transparency in communication. They have been consistently happy with the communication regarding safety protocols during the pandemic. In addition to the annual satisfaction surveys, RFYP intentionally provides the opportunity for other stakeholders to give feedback and input via phone calls, email, and video conferencing. Guardians and parents provide input and feedback on but not limited to programming, health and safety precautions, and individualized needs. RFYP is available 24 hours per day, 7 days per week for input, communication, and/or crisis intervention.

Causes: RFYP maintains and promotes an Open Door Policy and provides comprehensive service coordination services. These two policies and procedures promote transparency and a team-oriented approach to the person-centered services RFYP provides. RFYP seeks the input of guardians and parents in order to provide comprehensive services and a high quality of life for the members with their best interests in mind.

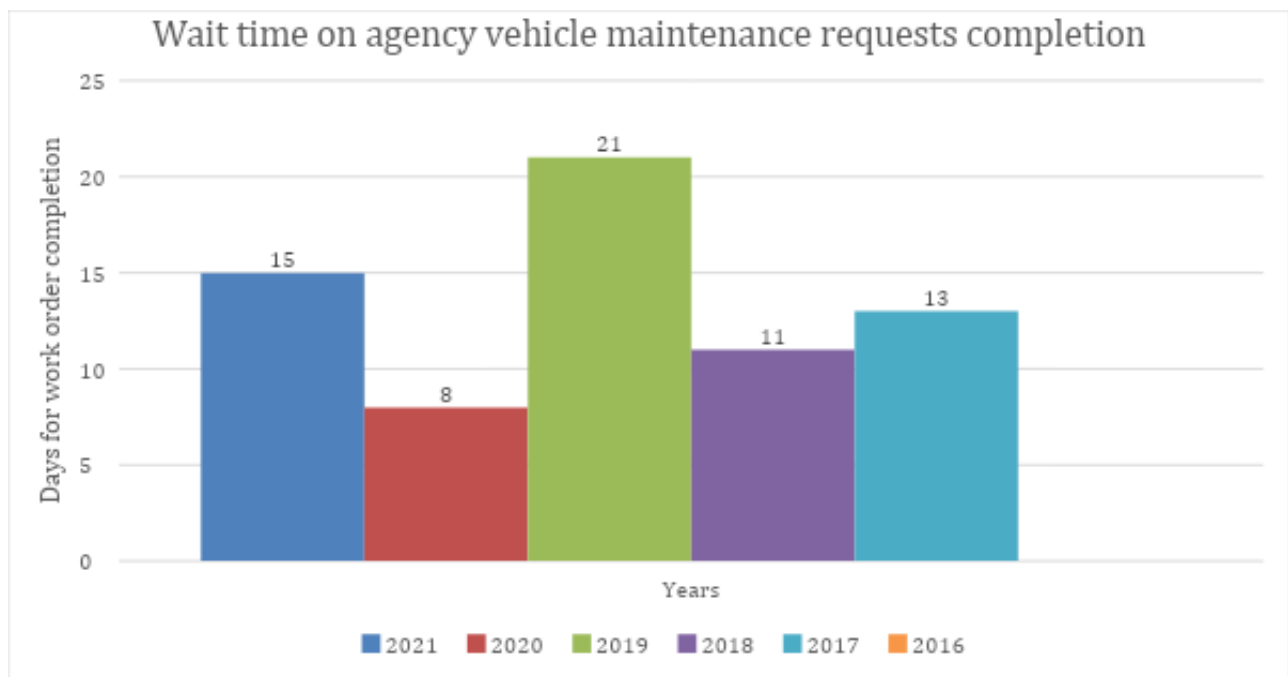
Impact of Extenuating Factors: The ongoing pandemic, staff turnover, and staff shortages have impacted timely communication. Throughout the pandemic, RFYP has remained available by phone, email, and video conference for ongoing feedback and communication.

Objective #2: Wait time on agency vehicle maintenance requests completion

- *Annual Performance Target | 10 days or less wait time from received date to completion date for Day Habilitation vehicle maintenance requests*
- 2021 Performance Outcome | 15 days average wait time from received date to completion date for Day Habilitation vehicle maintenance requests

RFYP did not meet the performance target for this objective. This data was collected from the work order log spreadsheet that is maintained and monitored by the Program Director that supervises the maintenance staff. On a daily basis, work order (maintenance) requests are collected from the SCL locations and delivered to the RFYP Main Office. Work orders are completed by staff to alert the maintenance department regarding vehicle repairs, home maintenance issues, or anything on the property that is in need of attention. The work orders are entered into the work order log/spreadsheet. The work order log becomes an ongoing list of tasks for the maintenance department. The work order received date, completion date, costs, and any special notes about the repairs are also tracked on this spreadsheet. RFYP maintains a fleet of approximately 36 vehicles. There is approximately one vehicle for every 24 hour and hourly site including three vehicles dedicated for sharing with day program between 8am-5pm Monday through Friday. RFYP believes access to safe and accessible transportation is necessary to support the members with accessing community integration opportunities. When a vehicle is in need of repairs or is not able to be used due to repair or damage issues, it negatively impacts the members' ability to access their scheduled activities, appointments, or be involved within their community.

Comparative Analysis 2016-2021



Trends: There was less wear and tear on the vehicles due to members and staff staying home more as well as day and work programs being suspended due to COVID-19. The cars were not driven as much as usual. There has been a trend in work orders being submitted for dead batteries due to the cars sitting throughout the winter and not being driven as much.

Causes: RFYP contracts with Enterprise Fleet Management (EFM) to track and alert when routine vehicle maintenance is needed. Since the cars have not been driven as much as in the past, they are not at the mileage to warrant an oil change. The cars are not averaging as many miles as they did prior to the pandemic. This is causing the alerts to be inaccurate and the dates appear as if the oil changes are months late when they actually are taking place when the car is ready. There is also a backup of supplies and mechanics are slower than usual in getting the cars repaired and returned. EFM contracts with local mechanics which in turn allows for efficient vehicle repairs.

Impact of Extenuating Factors: There was a shortage of staff at vehicle maintenance shops due to COVID-19 protocols and a shortage of supplies resulting in slow turnaround time for completing the maintenance or repairs.

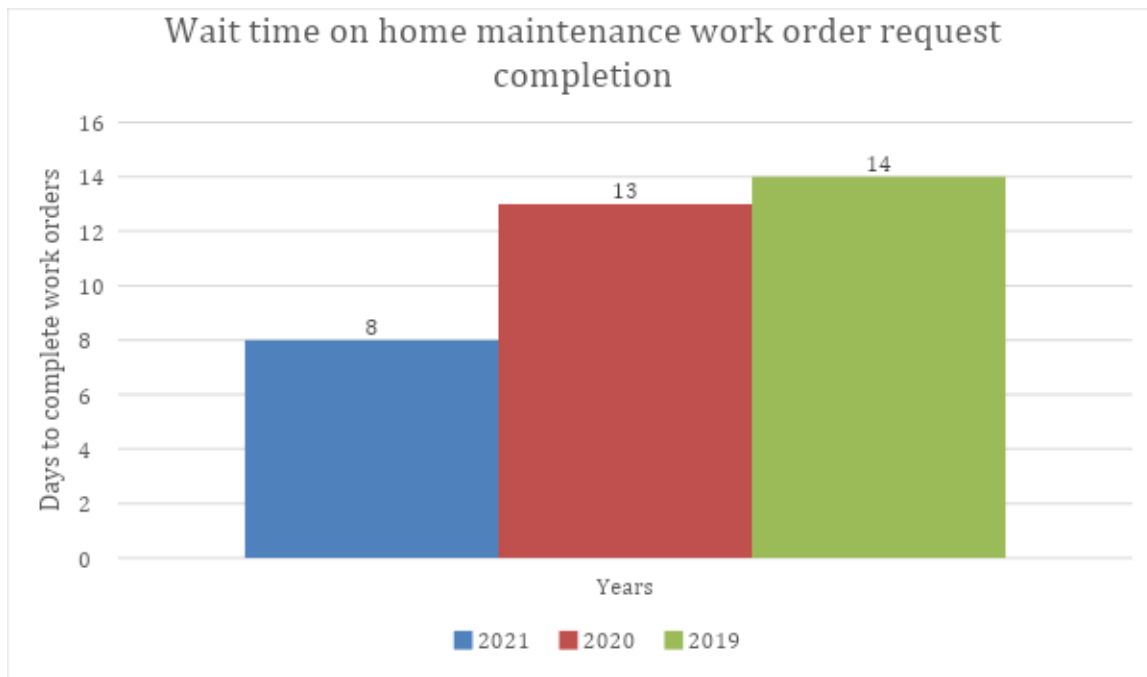
Action Plan for Improvement: RFYP is prioritizing purchasing or leasing new cars to lower the risk and need of needing car repairs.

Objective #3: Wait time on home maintenance work order request completion

- *Annual Performance Target | 14 days average wait time from received date to completion date for home/property maintenance requests*
- 2021 Performance Outcome | 8 days average wait time from received date to completion date for home/property maintenance requests

RFYP met the performance target for this objective. This data was collected from the work order log spreadsheet that is maintained by the Program Director that supervises the maintenance staff. On a daily basis, work order (maintenance) requests are collected from the SCL locations and delivered to the RFYP Main Office. Work orders are completed by staff to alert the maintenance department regarding vehicle repairs, home maintenance issues, or anything on the property that is in need of attention. The work orders are entered into the work order log/spreadsheet. The work order log becomes an ongoing list of tasks for the maintenance department. The work order received date, completion date, costs, and any special notes about the repairs are also tracked on this spreadsheet. RFYP maintains a fleet of approximately 36 vehicles at the 24 hour residential and hourly locations. RFYP believes access to safe and accessible built environments, accessible housing, and inclusive neighborhoods are necessary to support the members with accessing community integration opportunities and living a fulfilled life.

Comparative Analysis 2019-2021



Trends: In 2021, there were trends in work orders for assembly, delivery, and removal of furniture purchases for the home.

Causes: The members received additional funds due to stimulus incentives from the federal government. The members cannot maintain these funds in their accounts in order to be in compliance with Social Security.

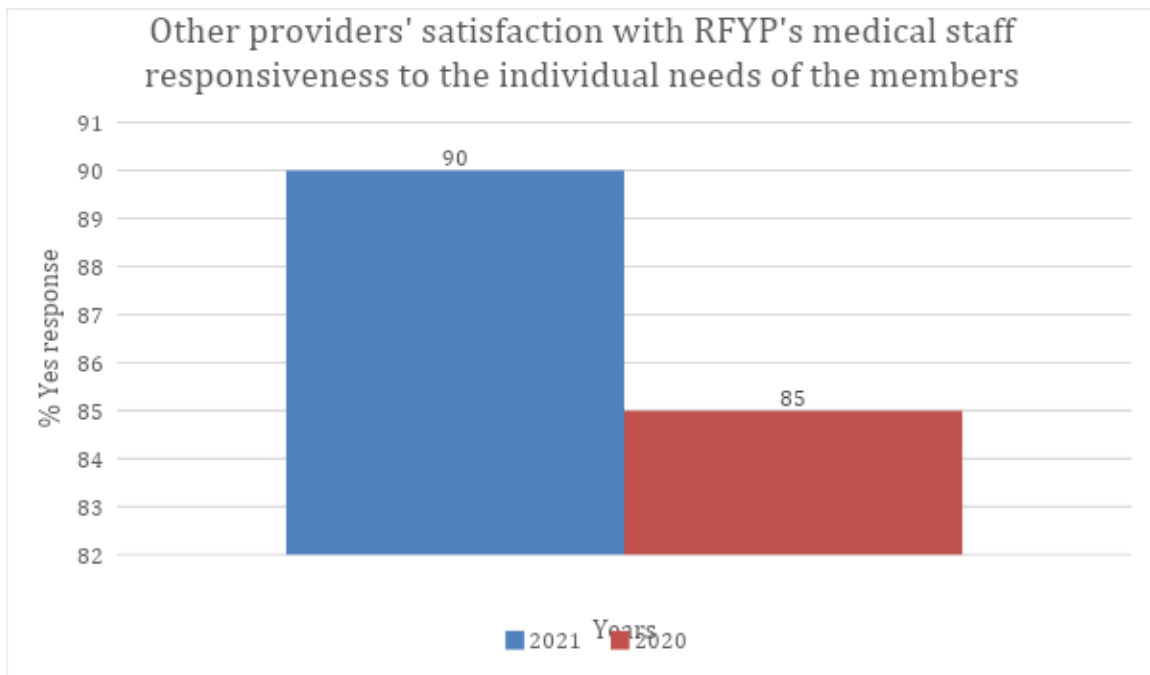
Impact of Extenuating Factors: The RFYP maintenance team consists of one person.

Objective #4: RFYP Medical Team is accessible to other stakeholders to answer any medical-related questions

- *Annual Performance Target* | 85% of other providers feel the medical team is accessible to answer any medical-related questions
- *2021 Performance Outcome* | 90% of other providers feel the medical team is accessible to answer any medical-related questions

RFYP met the performance target for this objective. This data was collected via the Other Provider Satisfaction Survey which is distributed annually. The RFYP medical team puts great effort towards developing positive and individualized relationships with other stakeholders. The medical team is available during office hours and after hours on evenings and weekends for questions, concerns, consultation, and/or advocacy. Healthcare coordination services are available for all RFYP members and information is available for stakeholders. The RFYP medical team and care coordination services removes barriers to health inequities by providing service access and empowers stakeholders to make informed choices.

Comparative Analysis: 2020-2021



Trends: Due to the longevity of the medical team staff, there is good rapport and working relationships among the groups. RFYP purchased the medical equipment for in-house COVID-19 testing for members and staff. This resulted in a very fast turnaround time for testing results and communication with all parties involved. Other stakeholders have taken advantage of the access to the medical team to discuss the members' health status, updates, and to confirm feelings of physical and emotional symptoms in 2021. This access to transparent and comprehensive health information has been a great benefit to everyone involved with the agency during COVID-19. Other stakeholders value the attention and care provided by the medical team. There is also a trend in telehealth and communication via teleconferencing in 2021.

Causes: The cause of the high satisfaction with having access to the medical team is attributed to RFYP's philosophy of service coordination. It is RFYP's expectation that staff are accessible to share information regarding the members' physical and emotional status resulting in quality services, informed decisions, and person-centered care. Due to the longevity of the medical team staff, they understand the members' needs and can be proactive with care and appointments.

Impact of Extenuating Factors: Medical team members worked direct care shifts during extreme staff shortages.

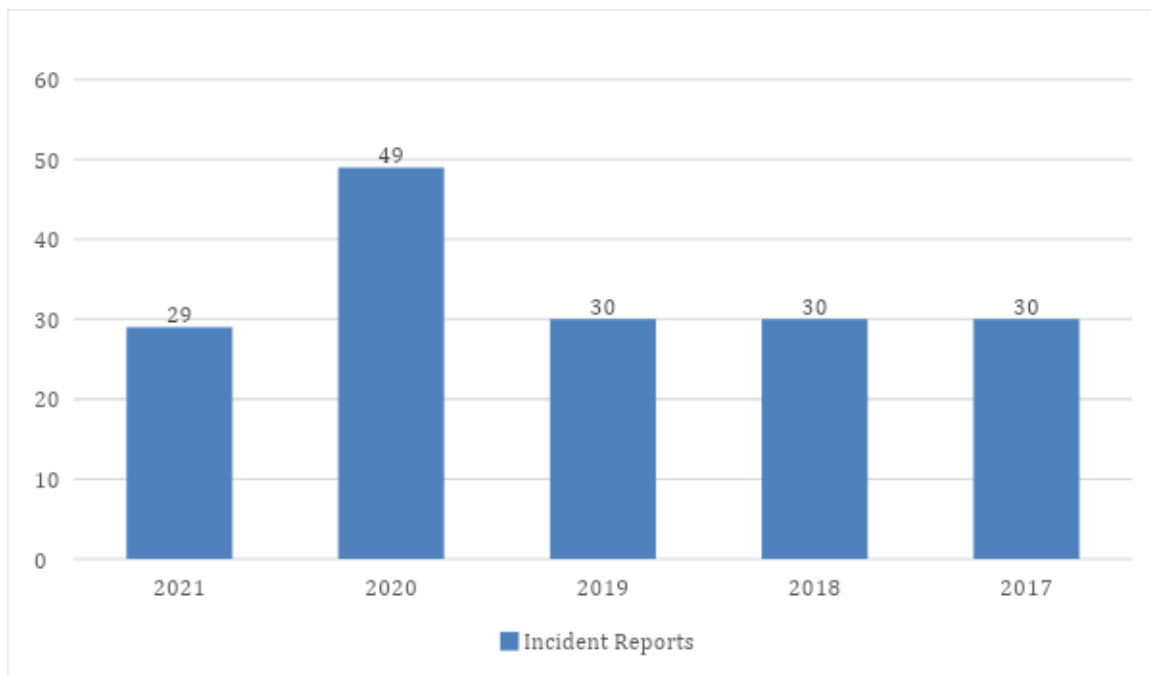
Domain 6: Business Function Measurement

Objective #1: Increasing medication passes as prescribed by RFYP staff (risk management)

- *Annual Performance Target* | 36 or less medication error incidents annually
- *2021 Performance Outcome* | 30 medication error incidents annually

RFYP met the performance target for this objective. All RFYP staff that provide (or may provide) direct care are required to take the medication manager course to ensure that medications are given safely and accurately. The importance of following the “Six Rights” of Medication Administration (right patient, drug, dose, route, time, documentation) are required. All medications are tracked using the Medication Administration Record system on the Accuflo platform. When there is an incident involving a medication administration error, an incident report is completed by the staff that identified the incident. The incident is immediately reviewed by the medical team and program director. Staff discipline may be necessary. All incident reports are tracked, analyzed, and a summary is completed biannually.

Comparative Analysis 2016-2021



Trends: A trend in 2021 for medication errors is due to meds not being passed at the scheduled time. A pattern in member behavior can be attributed to most of the medication passes that were not administered as scheduled. There was a medication error at one location that impacted all four roommates.

Causes: The cause of medication administration errors due to meds not being administered can be attributed to staff not following the policies and procedures they were trained on. RFYP’s personnel policy for medication errors is that staff receive disciplinary action due to not following medication administration policies.

Impact of Extenuating Factors: Staff turnover and staff shortages may have impacted medication errors.

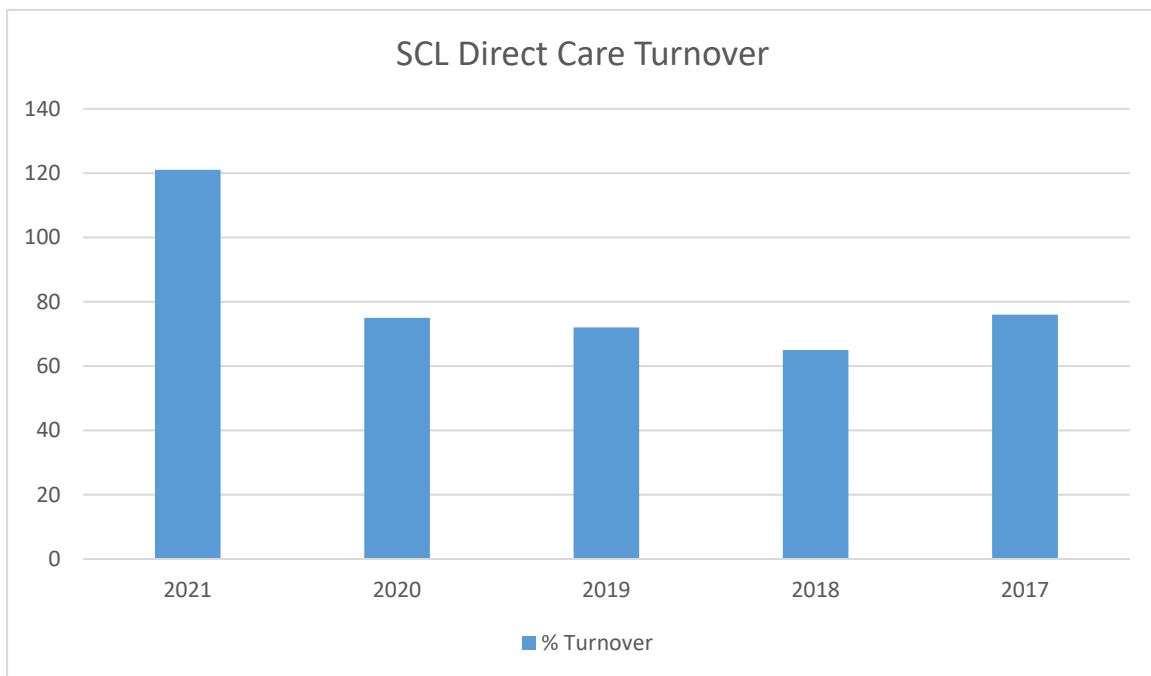
Objective #2: Decreasing agency turnover rates for direct care staff

- *Annual Performance Target | 60% turnover rate for direct care*
-

- 2021 Performance Outcome | 121% turnover rate for direct care

RFYP did not meet the performance target. This data is collected through personnel data in Quick Books software and is maintained by the Financial Department. Personnel turnover is an ongoing struggle for the agency, particularly in the direct care and Service Coordinator positions. Due to the agency employing many college students from Kirkwood Community College and the University of Iowa, direct care staff schedules may change every three to four months due to their educational responsibilities. Many hours go into training new staff by the HR Department and Service Coordinators. By decreasing the staff turnover rate, these departments and staff can use their time creating a better living environment, quality of life for the member, and delivering individualized services rather than training new staff.

Comparative Analysis 2012-2021



Trends: The trends of direct care staff turnover are involuntarily resignations and staff leaving jobs that require close contact with other people. These can be attributed to normal attrition and the impacts of the pandemic.

Causes: Health and safety concerns involuntary resignations due not following agency policies and procedures.

Impact of Extenuating Factors: Due to COVID-19 precautions and protecting the health and safety of the members and staff, there was extra attention dedicated to ensuring the health and safety of the members. Extra time and attention were focused on ensuring the members' health and safety which may have taken attention away from staff retention efforts from previous years.

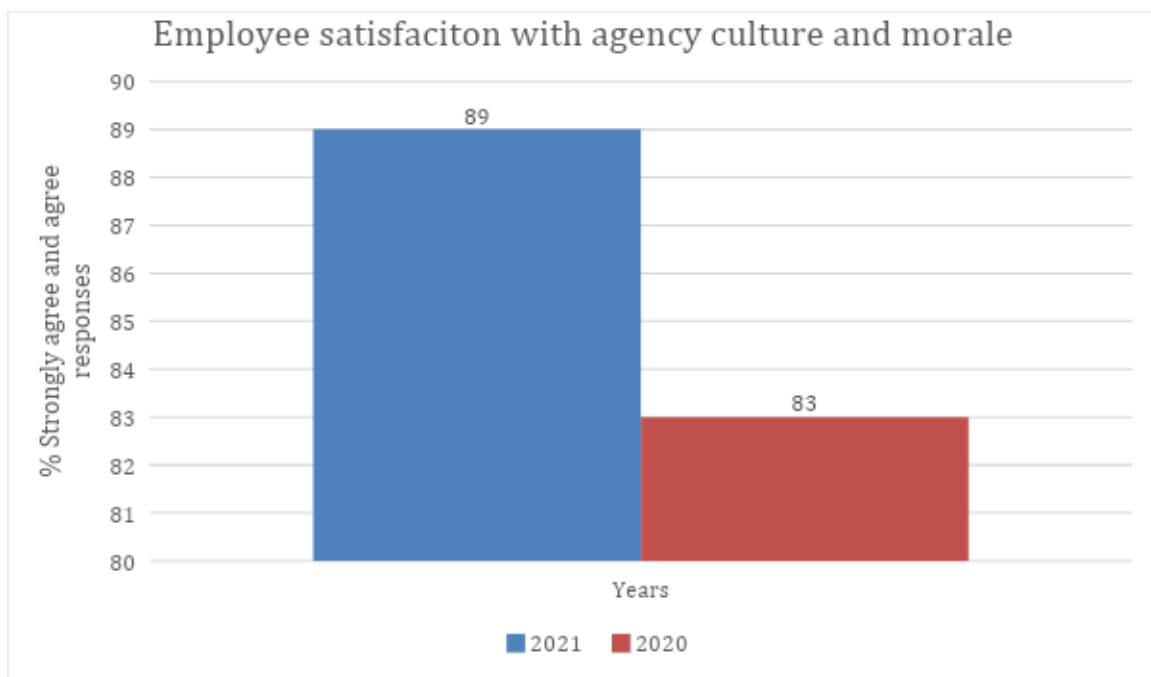
Action Plan for Improvement: The agency is planning to continue team-building activities. Not only will this improve the workplace culture, but it will also attract more people to apply for open positions. Positive working relationships and recognition from the program supervisors contribute to decreasing staff turnover.

Objective #3: Increase agency morale and culture to ensure a positive work environment

- *Annual Performance Target* | 85% of staff responding they feel RFYP has a positive agency culture
- *2021 Performance Outcome* | 89% of staff responding they feel RFYP has a positive agency culture

RFYP did not meet the performance target for this objective. This data was collected via the Staff Engagement Survey which is distributed annually. Being responsive and flexible to the needs of the staff are high priorities of RFYP. RFYP puts great effort into agency culture and work morale to reduce staff turnover, improve productivity and efficiency, and retain staff. Most importantly, RFYP wants staff to feel engaged and satisfied at work and in their personal lives.

Comparative Analysis: 2020-2021



Trends: Staff appreciate the noticeable efforts being made to improve culture agency-wide. They appreciate the activities and food provided by the agency to promote teambuilding and a fun work atmosphere.

Causes: Working through the pandemic in direct care and in the office has been challenging and RFYP recognizes this. Time, resources, and attention to providing a safe work and living environment were the priority of RFYP in 2021.

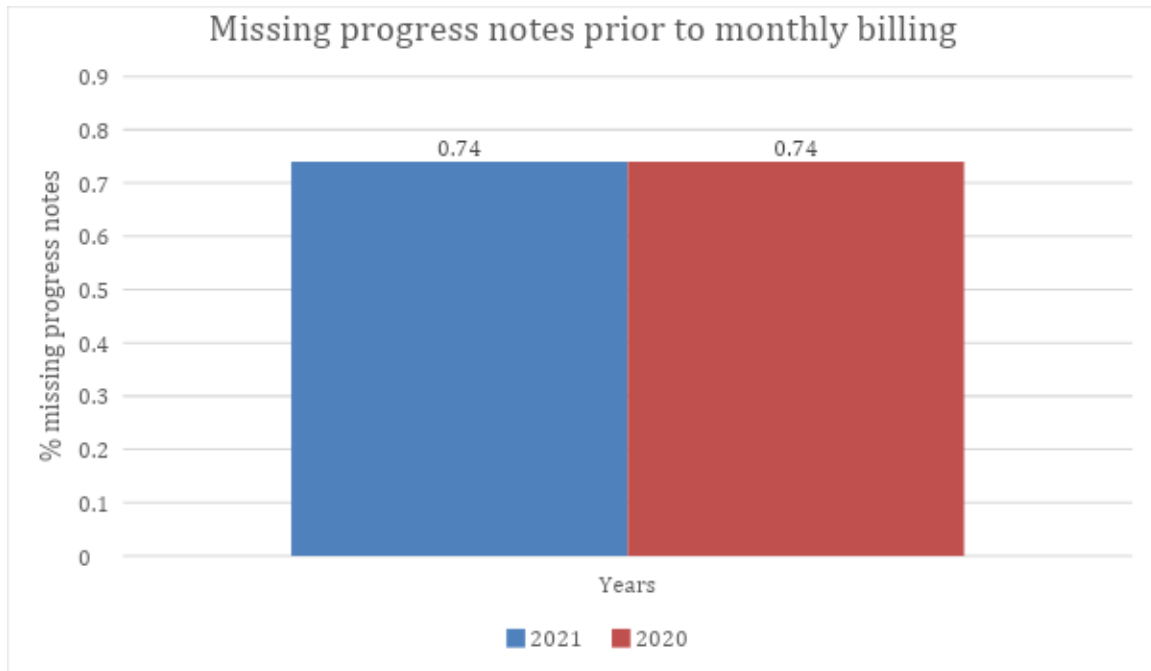
Impact of Extenuating Factors: Due to COVID-19 precautions and protecting the health and safety of the members and staff, there was extra attention dedicated to ensuring the health and safety of the members. Extra time and attention were focused on ensuring the members' health and safety which may have taken attention away from efforts to increase agency morale compared to previous years.

Objective #4: Daily progress notes are submitted on time for maximum monthly financial reimbursement for services

- *Annual Performance Target | 0.75% progress notes missing prior to monthly billing*
- *2021 Performance Outcome | 0.74% progress notes missing prior to monthly billing*

RFYP met the performance target for this objective. This data is collected through the Quality Assurance department and monitored by the Financial Department.

Comparative Analysis:



Trends: There has been high turnover and staff shortages. New staff are not as proficient with completing progress notes on time after each shift as existing staff.

Causes: Staff are encouraged to make a log of notes throughout the shift so their progress notes can be accurate, detailed, and take less time to complete at the end of the shift. Additionally, if a progress note is not completed immediately after the shift and the staff resigns, that note cannot be written by another person. This is a direct financial loss to the agency since they cannot use that progress note for billing purposes.

Impact of Extenuating Factors: Progress notes are completed online and require internet access. There are neighborhoods that have frequent internet outages. It is important to note that RFYP missed the performance target by only .01%.

2021 Annual Performance Outcomes Summary: Day Habilitation

RFYP is committed to performance improvement through proactive and ongoing review, analysis, reflection, and transparency on goals and objectives for both service delivery and business functions. The results of the performance analysis for the Day Habilitation program are used to identify and implement data-driven actions to improve the quality of programs and services and to inform decision making. Performance information that is accurate and understandable to the target audience is shared with persons served, personnel, and other stakeholders in accordance with their interests and needs. The objectives and action plans for improvement are reviewed biannually to ensure progress is being made, to ensure relevance, and to make changes as necessary.

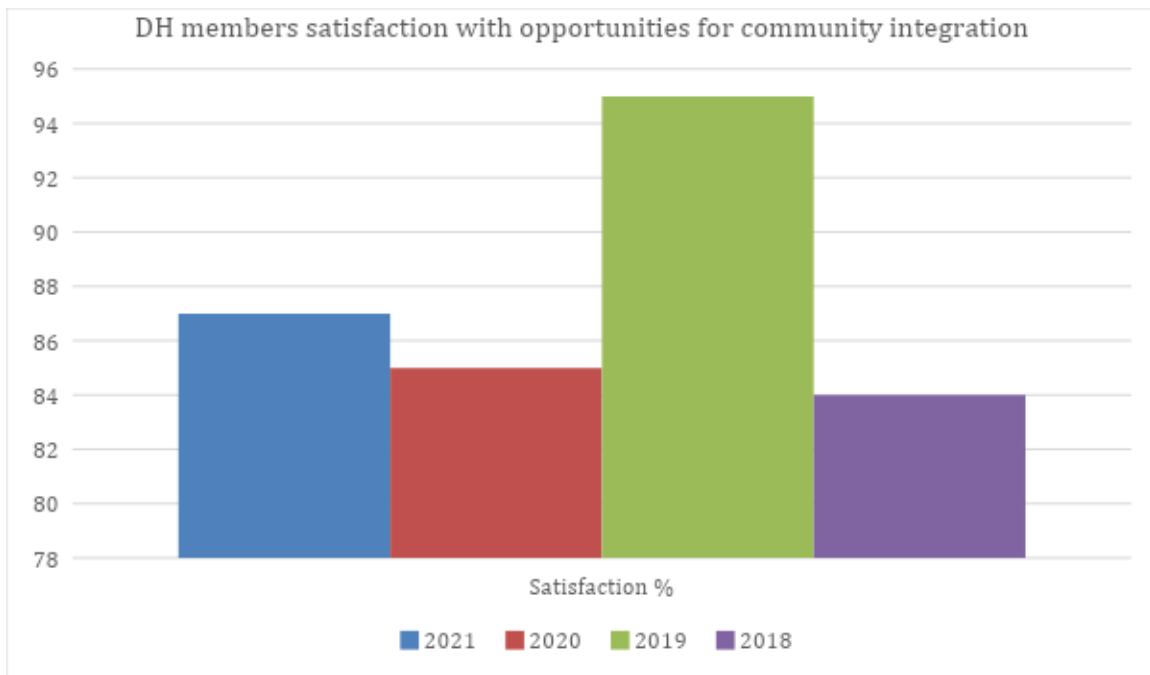
The Day Habilitation program was open and active only May 3, 2021 to September 1, 2021. The Day Habilitation program was suspended prior and after that time frame due to COVID-19 precautions. This extenuating factor highly influences all domains of the Performance Outcomes for this program. Most outcome data come from satisfaction surveys. There was a three-month delay from when the program was open and active until the satisfaction surveys were distributed. This may have impacted the responses of the members, guardians, staff, and other stakeholders.

Domain 1: Results Achieved for Persons Served

Objective # 1: RFYP provides choices for community integration

- *Annual Performance Target | 85% Satisfaction with the choices available for community integration*
- *2021 Performance Outcome | 87% Satisfaction with the choices available for community integration*

Comparative Analysis 2018-2021



The performance target for this objective was met. This data was collected via the 2021 Day Program Member Satisfaction Survey which is completed annually. RFYP puts forth great efforts to plan opportunities for members to choose from to be involved within their community, as well as arranging for staffing and transportation to and from events. The Day Program Facilitator, Service Coordinator, and/or direct care staff ask members what they would like to do for the upcoming month's outings and activities. Member input is received, recorded, and then outings are planned using this information.

Trends: Members enjoy nature walks, visits to parks, and taking walks. The Day Habilitation was operating at limited capacity to protect their health and safety during the pandemic.

Causes: Over the past year and prior, there was a trend for RFYP Day Habilitation activities taking place outdoors or in open spaces due to the pandemic.

Impact of Extenuating Factors: The pandemic was an extenuating factor impacting all of the RFYP programs in 2021. Due to a spike in Covid-19 cases in the community, RFYP suspended the Day Program on September 1, 2021.

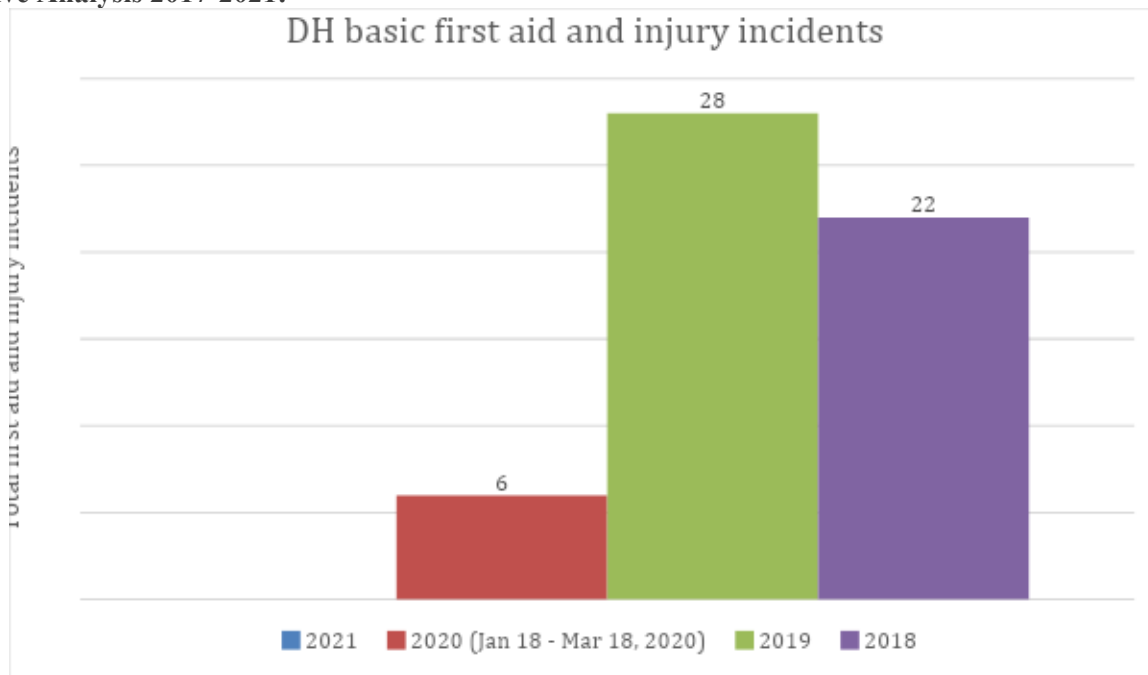
Objective #2: RFYP maintains a physically safe day habilitation environment resulting in low injuries

- *Annual Performance Target | Maximum of 28 incidents total requiring basic first aid and incidents resulting in injury*
- **2021 Performance Outcome | Zero incidents total requiring basic first aid and incidents resulting in injury**

RFYP met the performance target for this objective. Incident report data is tracked using the incident report tracking spreadsheet which is maintained by the Program Director Assistant. Incident reports are summarized biannually. Incident reports are completed by direct care staff and reviewed by Service Coordinators, Program Directors, and Medical Team (if

necessary). Disciplinary action and retraining of staff may be required depending on the incident. RFYP takes a proactive approach by offering a comprehensive training schedule so staff are informed and educated on how to protect the health and safety of the members and prevent incidents.

Comparative Analysis 2017-2021:



Trends: There are no reported incidents involving injury.

Causes: The Day Habilitation was open May to August 2021. During this time, there was a small group of members attending each day. The staff were able to provide close attention and supervision to the small group of members in their care.

Impact of Extenuating Factors: Due to COVID-19 precautions and protecting the health and safety of the members and staff, the Day Habilitation program was suspended on September 1, 2021.

Domain 2: Experience of Services Received and Other Feedback from Persons Served

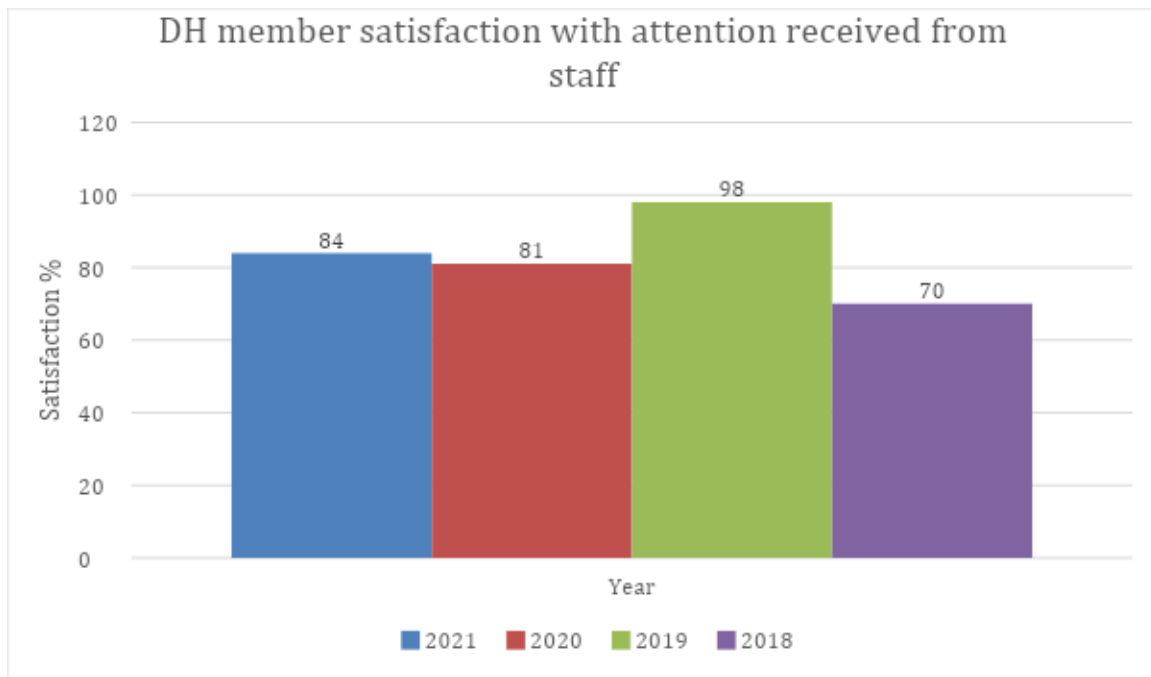
Objective #1 - Members are satisfied with the level of attention they receive from their Day Habilitation staff

- *Annual Performance Target | 85% Day Habilitation Member Satisfaction reported on the Day Programs Satisfaction Survey*

- 2021 Performance Outcome | 84% Day Habilitation Member Satisfaction reported on the Day Program Satisfaction Survey

RFYP did not meet the performance target for this objective. This data was collected via the 2021 Day Program Member Satisfaction Survey. RFYP provides training to all staff regarding person-centered services and individualized supports at hire, annually, and ongoing as needed. It is the expectation that staff are supporting the unique needs of the members and providing the attention that is desired. It is a high priority of RFYP that members feel their physical, social, and emotional needs are prioritized and attended to.

Comparative Analysis 2018-2021



Trends: RFYP Day Habilitation members value one-on-one time and attention from the staff. Although staff do their best to provide this attention to each member, they need to be mindful of ensuring care for all of the members. Members have a pattern of wanting to be with their “favorite staff”.

Causes: Staff support the members’ independence by encouraging them to make choices and challenge themselves to build on their strengths and skills. Staff are sensitive to the members’ desire to have their full attention and assistance.

Day Habilitation staff turnover and attendance at the Day Habilitation impacts daily staffing ratios of staff to members which impacts the attention to members. Typically, the goal is to keep the ratio to one staff to five members (1:5), however, this needs to be adjusted when there is turnover or if staff are not present for a shift. Safeguards are in place, such as SCL staff that are also trained to be substitute staff at the Day Habilitation.

Impact of Extenuating Factors: Staff turnover and program suspensions are extenuating factors that impact this outcome.

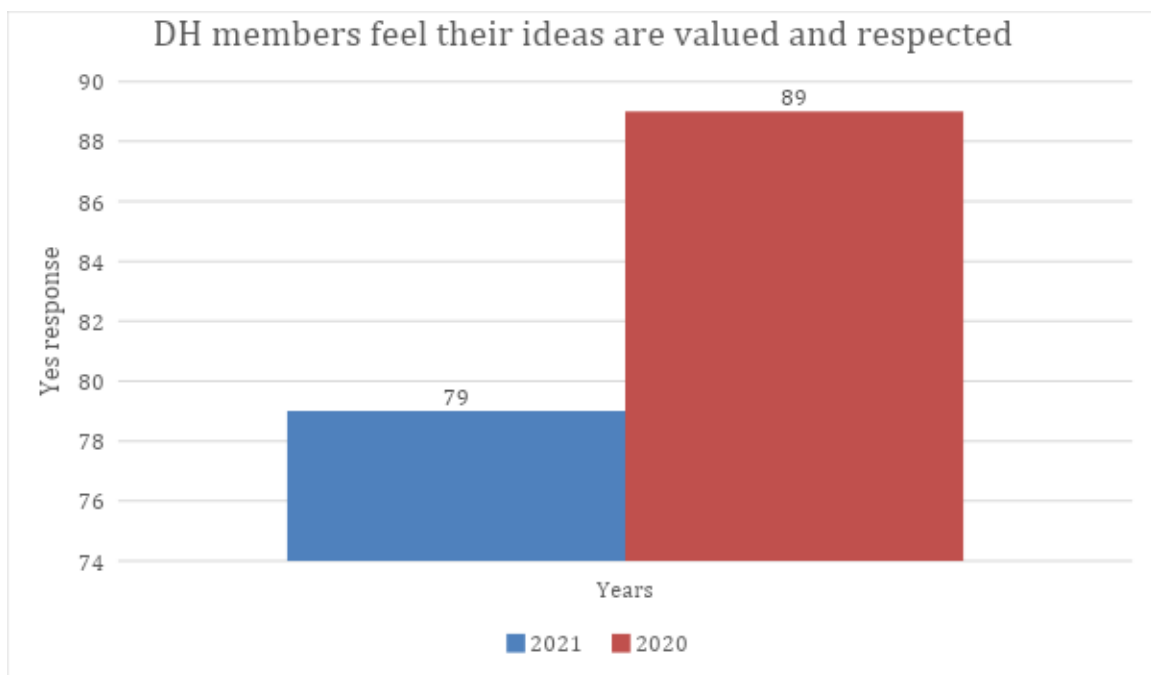
Action Plan for Improvement: When the Day Habilitation reopens, the staff will participate in an orientation to review expectations, procedures, member-specific care, etc.

Objective #2 - Members feel their ideas are valued and respected

- *Annual Performance Target | 85% of members in the Day Habilitation program feel their ideas are valued and respected*
- 2021 Performance Outcome | 79% of members in the Day Habilitation program feel their ideas are valued and respected

RFYP did not meet the performance target for this objective. This data was collected via the 2021 Day Program Member Satisfaction Survey. RFYP respects and values the input, ideas, and satisfaction of the members. RFYP ensures that each member has the same opportunities to participate in aspects of life to the best of their abilities and desires. RFYP seeks the members' input for all aspects of the program including but not limited to the daily activities, community outings, daily schedules, and individualized services. It is a high priority to RFYP that members feel their input is heard and drive the decisions regarding their services

Comparative Analysis:



Trends: Staff seek the members' input on a monthly basis regarding activities and outings they'd like to participate in. Members of the RFYP Day Habilitation share their input regarding community outings, in-house activities, holiday and birthday parties, and the overall environment. RFYP strives to have the RFYP Day Habilitation reflect the members' input and desires and offer choices of activities and outings.

Causes: RFYP staff are intentional about providing an environment that is built upon respect, inclusivity, and trust. A tension exists between members wanting more assistance and attention versus staff encouraging them to use their skills and build their independence. Training on providing person-centered services and member-specific needs takes place at hire, annually, and informally during weekly staff meetings.

Impact of Extenuating Factors: Staff turnover and day program suspensions are extenuating factors that impact this outcome. Due to COVID-19 precautions and protecting the health and safety of the members and staff, the Day Habilitation program was suspended on September 1, 2021. The satisfaction survey was distributed in November 2021. This gap in time since the members received Day Habilitation services may have influenced and/or impacted the members' responses. Members of various levels of functioning completed the surveys on their own and others received assistance from trained RFYP staff.

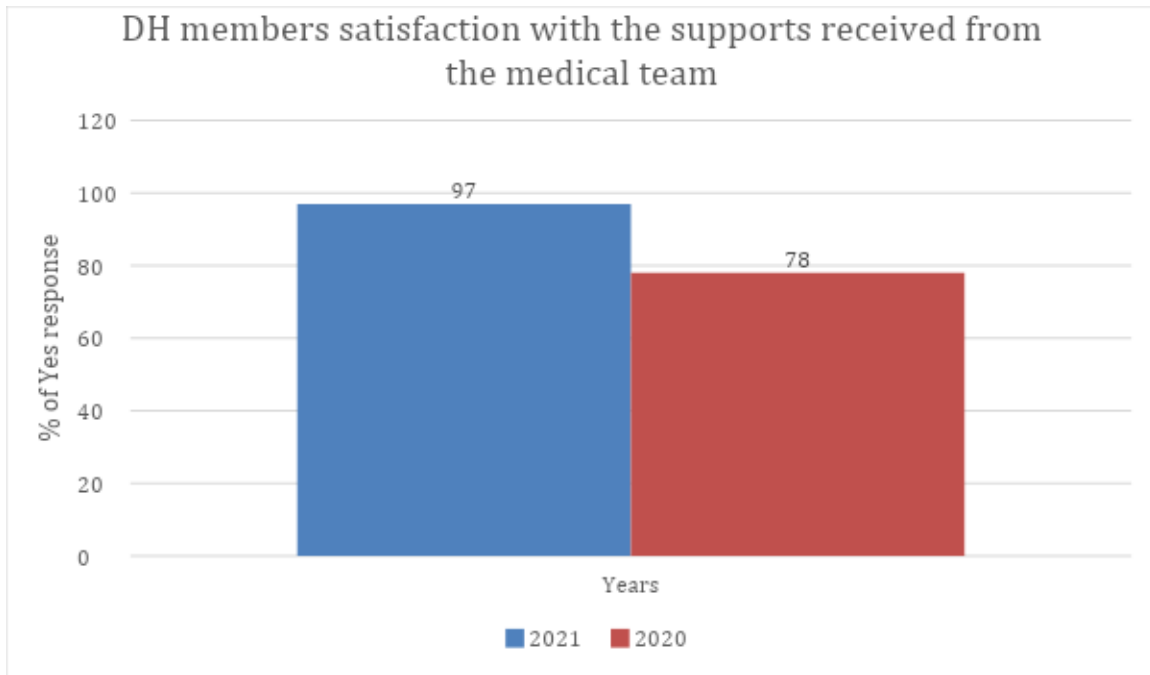
Action Plan for Improvement: When the staff are developing the monthly calendars of activities and outings, the name of the member that suggested that idea will be added to the calendar. This will provide an avenue for positive attention and build the members' confidence in providing their input and ideas.

Objective #3 – Day Habilitation members are satisfied with the individual supports received from the medical team

- *Annual Performance Target | 85% of Day Habilitation Members are satisfied with the individual supports received from the medical team*
- 2021 Performance Outcome | 97% of Day Habilitation Members are satisfied with the individual supports received from the medical team

RFYP met the performance target for this objective. This data was collected via the 2021 Day Program Member Satisfaction Survey. RFYP provides training to all medical team staff regarding person-centered services and individualized supports. It is the expectation that all of the medical team staff are supporting the needs of the members and providing the attention that is desired. It is a high priority of RFYP that members feel their medical needs and wellbeing are prioritized and attended to.

Comparative Analysis:



Trends: The medical team responds quickly to members’ health care needs. Members want access to the medical team to discuss current health status, updates about life, upcoming appointments, and confirm feelings of physical and emotional symptoms. Members of the RFYP Day Habilitation value the attention and care provided by the medical team.

Causes: RFYP has a medical team on staff and on-call during the evenings and weekends. This organizational framework provides a direct connection among members, guardians, staff, and health care providers across all RFYP programming.

Impact of Extenuating Factors: Members were home most of the day. They were able to remain healthy and the medical team could visit with them at any time. Prior to the pandemic, it was more challenging to visit with the members and schedule appointments since each member has a unique work and day program schedule.

Domain 3: Experience of Services Received and Other Feedback from Other Stakeholders

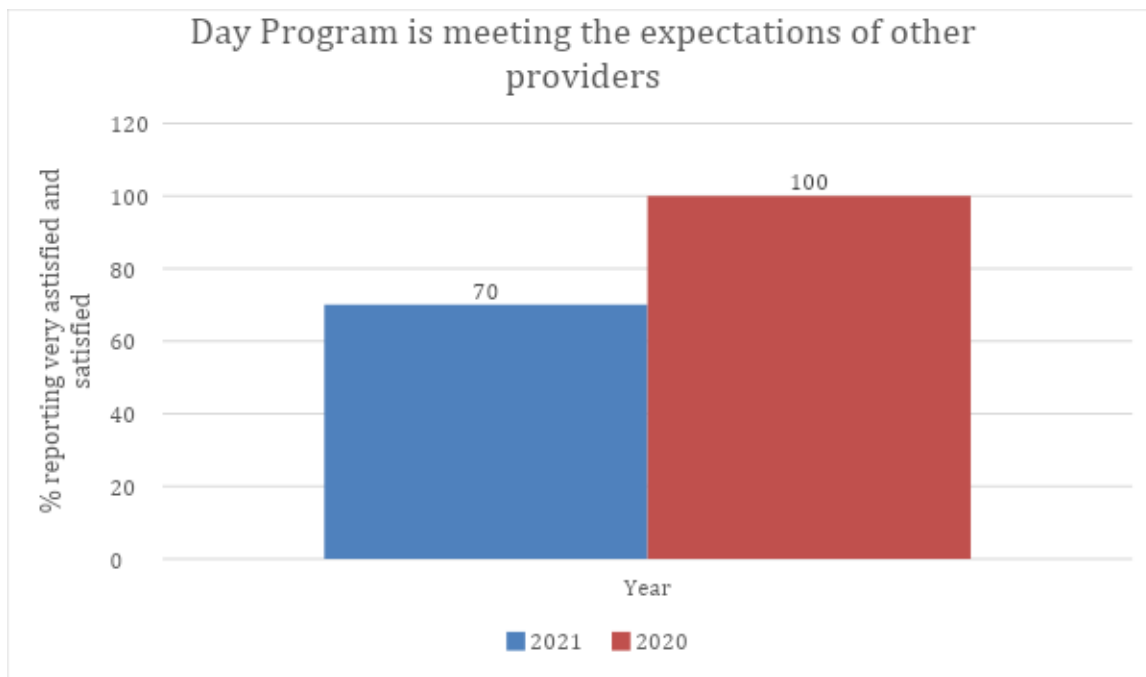
Objective #1 - Day Program services are meeting the expectations of other stakeholders

- *Annual Performance Target | 85% of stakeholders report the day program services are meeting their expectations*
- *2021 Performance Outcome | 70% of stakeholders report the day program services are meeting their expectations by selecting satisfied or very satisfied.*

RFYP did not meet the performance target for this objective. This data was collected via the annual Other Stakeholders Satisfaction Survey. RFYP strives for overall program satisfaction of stakeholders to ensure the program is meeting and

exceeding their expectations. Effective interdisciplinary disciplinary teams convey many benefits to both the members and team members including health outcomes, enhanced satisfaction, and efficient use of resources.

Comparative Analysis: 2020-2021



Trends: There is a trend in other stakeholders’ desire for the members to be involved in as many activities as they desire and receive individualized attention.

Causes: RFYP provides individuals supports and encourages independence. Day Habilitation is a group setting. There is tension between wanting to provide individualized supports and encouraging the members to use their self-help skills. The Day Habilitation has 60 members enrolled and staff support them in small groups with a ratio of 1:6. The IDT’s feedback provides RFYP the input to remain responsive to the dynamic needs of the members and engage in consistent and ongoing performance improvement.

Impact of Extenuating Factors: Staff turnover and program suspensions are extenuating factors that impact this outcome.

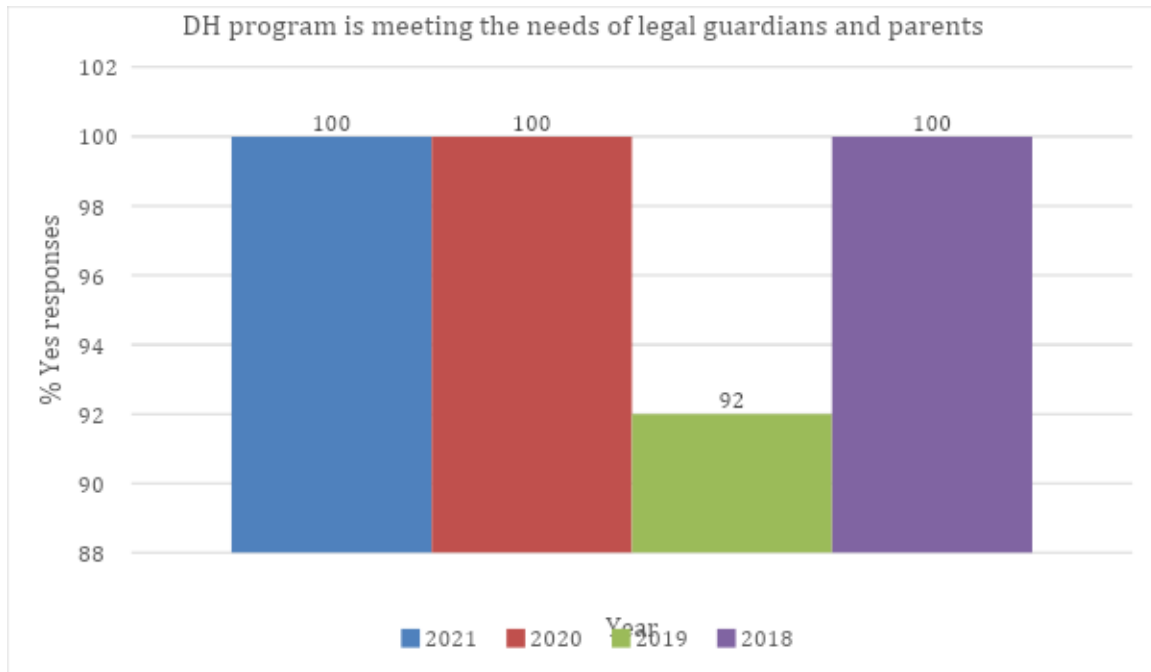
Action Plan for Improvement: Staff training will include appropriate customer service techniques for members and visitors to the Day Habilitation including acknowledging their presence and answering all questions a visitor may have. If the staff are unsure of the answer, they will be trained to find a service coordinator or program director to assist the visitor.

Objective #2: Day Program services are meeting the expectations of Legal Guardians/Parents

- *Annual Performance Target | 85% of parents and legal guardians report day program services are meeting their expectations*
 - 2021 Performance Outcome | 100% of parents and legal guardians report day program services are meeting their expectations
-

RFYP met the performance target for this objective. This data was collected via the annual Parent/Legal Guardian Satisfaction Survey. RFYP strives for overall program satisfaction to ensure RFYP is prioritizing expectations of parents and legal guardians. Effective interdisciplinary disciplinary teams convey many benefits to both the members and interdisciplinary team members including health outcomes, enhanced satisfaction, and efficient use of resources.

Comparative Analysis 2018-2021:



Trends: There is a trend in guardians/parents' desire for the members to be involved in as many activities as they desire and receive individualized attention.

Causes: RFYP provides individuals supports and encourages independence. Day Habilitation is a group setting. There is tension between wanting to provide individualized supports and encouraging the members to use their self-help skills. The Day Habilitation has 60 members enrolled and staff support them in small groups with a ratio of 1:6. RFYP strives to provide services in a family-like environment that reflects the members' strengths and provides individualized attention. Guardians are encouraged to bring their concerns to the attention of the administration directly, if needed, for immediate resolution.

Impact of Extenuating Factors: Staff turnover and program suspensions are extenuating factors that impact this outcome.

Objective #3: Other stakeholders feel RFYP is receptive to their requests/suggestions/inquiries

- Annual Performance Target | 85% of other stakeholders report they feel RFYP is receptive to their requests/suggestions/inquiries.

- 2021 Performance Outcome | 90% of other stakeholders report they feel RFYP is receptive to their requests/suggestions/inquiries.

RFYP met the performance target for this objective. This data was collected via the Other Stakeholder Satisfaction Survey which is distributed annually. It is important to RFYP that other providers and stakeholders feel that RFYP is open to their input and is always looking for ways to improve. Effective interdisciplinary disciplinary teams convey many benefits to both the members and team members including health outcomes, enhanced satisfaction, and efficient use of resources.

Comparative Analysis:

Trends: The trend regarding input received by RFYP from other stakeholders includes but is not limited to:

- Ideas for engaging and individualized environments
- Member-specific information sharing to ensure protocols are implemented
- Community outing suggestions
- Coordination of other providers' schedules to make the daily schedule seamless and easy on the member

Causes: The cause of the high level of satisfaction is due to RFYP implementing policies for communication and transparency. Other stakeholders appreciate the Open-Door Policy, transparent communication, access to the medical team, and comprehensive service coordination. RFYP strives to provide services in a family-like environment which provides individualized attention. Other stakeholders are encouraged to bring their concerns to the attention of the administration directly, if needed, for immediate attention.

Impact of Extenuating Factors: Due to COVID-19 precautions and protecting the health and safety of the members and staff, the Day Habilitation program was suspended on September 1, 2021. The satisfaction survey was distributed in November 2021. This gap in time since other stakeholders interacted with Day Habilitation services may have influenced and/or impacted their responses. Additionally, the six-month review meeting with the Individual Service Plan Interdisciplinary Team have been happening intermittently due to Covid-19 precautions.

Domain 4: Resources Used to Achieve Results for the Persons Served

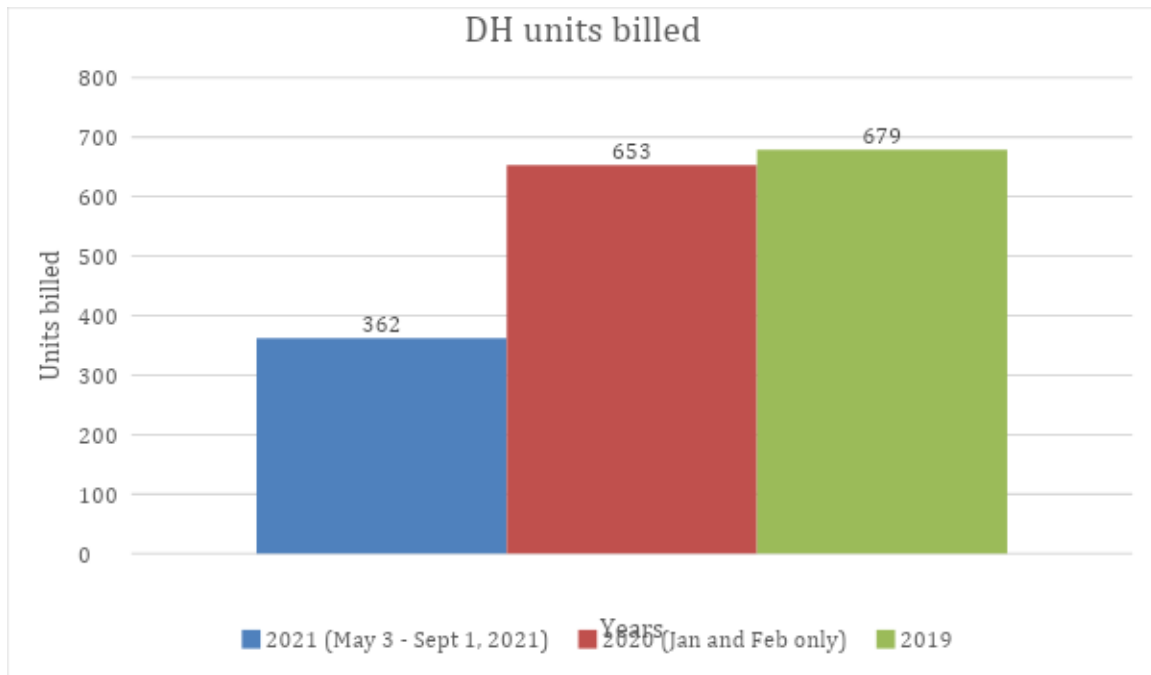
Objective #1 – The Day Habilitation billing units are monitored monthly to maintain fiscal health

- *Annual Performance Target | 200 units billed per month on average*
- 2021 Performance Outcome | 362 units billed per month on average (January and February only)

RFYP met the performance target for this objective. This data is collected and maintained by the Financial Department. The enrollment of Day Program members and their units are monitored closely by the Financial Director and Executive Director to promote fiscal health and ensure financial stability. This data was collected from the billing census worksheets for May 3, 2021 to September 1, 2021. The suspension of the day program impacted billing units. RFYP was not able to bill for Day Habilitation services due to the Day Habilitation programming suspension.

The member enrollment and billing census worksheets are analyzed by the Financial Director and reported to the Executive Director on a monthly basis. If there are key changes to the number of billable units, the results are reported to the Board of Directors to notify of any major budget modifications.

Comparative Analysis 2018-2021



Trends: RFYP Day Habilitation members' schedules can change rapidly, without notice at times. Slight changes in the daily schedules of the members influence how many units may be billed. The data used to calculate the units billed per month was not a full year, therefore trends are difficult to determine.

Causes: The collected data is not a full year of information; therefore, the data is not accurately comparable to 2020.

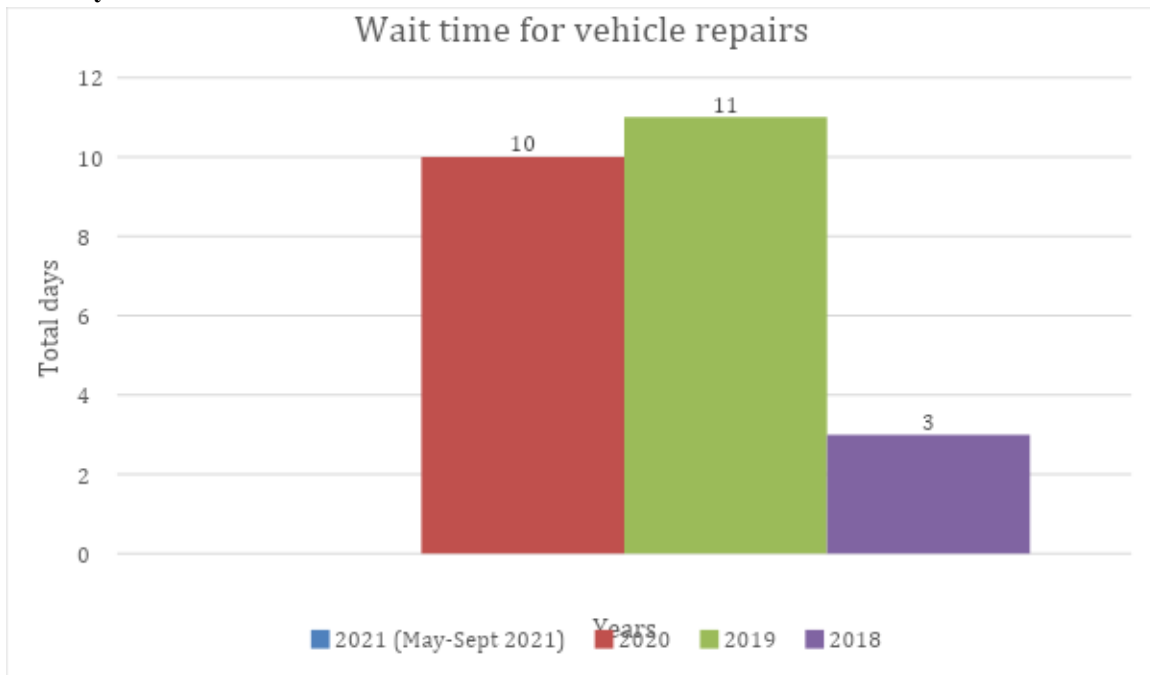
Impact of Extenuating Factors: RFYP had to quickly pivot select business functions and billing procedures in response to programming and staffing changes due to COVID-19.

Domain 5: Service Access Measures

Outcome #1 - Wait time on Day Habilitation vehicle maintenance requests completion

- *Annual Performance Target | 10 days or less wait time from received date to completion date for Day Habilitation vehicle maintenance requests*
- *2021 Performance Outcome | Zero days average wait time from received date to completion date for vehicle maintenance requests*

Comparative Analysis 2018-2021



RFYP met the performance outcome for this objective. This data was collected from the work order log spreadsheet that is maintained and monitored by the Program Director who supervises the maintenance staff. Due to COVID-19 precautions and protecting the health and safety of the members and staff, the Day Habilitation program was suspended for most of 2021. This data represents vehicle maintenance requests received from May 2021 to September 2021 (not a full year of data) for vehicles 58, 59, 56, and 16.

Work orders are completed by staff to alert the maintenance department regarding vehicle repairs or anything on the property that is in need of attention. The work orders are entered into the work order log/spreadsheet. The work order log becomes an ongoing list of tasks for the maintenance department. The work order received date, completion date, costs, and any special notes about the repairs are also tracked on this spreadsheet. There are typically four vehicles dedicated for the day program between 8am-5pm Monday through Friday. RFYP believes access to safe and accessible transportation is necessary to support the members with accessing community integration opportunities. When a vehicle is in need of repairs or is not able to be used due to repair or damage issues, it negatively impacts the members' ability to access their scheduled activities, appointments, or be involved within their community.

Trends: In 2021, the vehicles were driven less due to members and staff staying home and staying safe because of the pandemic. The vehicles reserved for use by Day Habilitation staff remained at the houses since the Day Habilitation program was suspended.

Causes: The cause of this can be due to the drastic change in the program model due to COVID-19. Vehicles were driven less and required less maintenance due to the pandemic. Additionally, RFYP is also leasing new vehicles resulting in fewer repairs needed. There is also a newer lift van that is under warranty resulting in fewer days lost for maintenance.

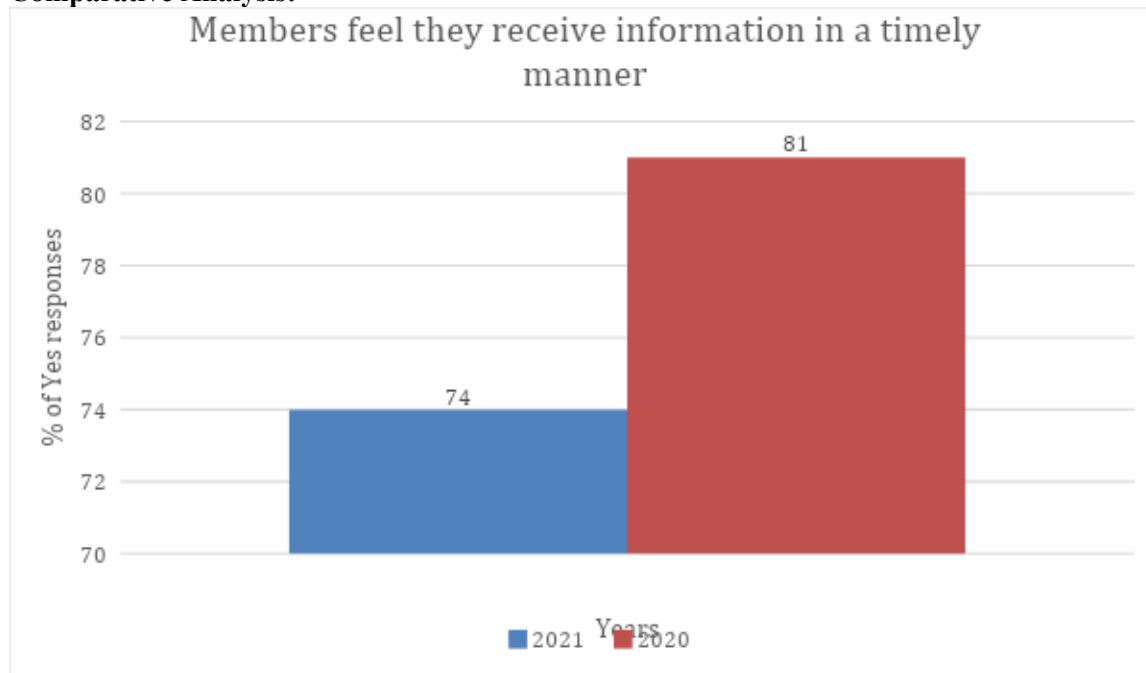
Impact of Extenuating Factors: Due to COVID-19 precautions and protecting the health and safety of the members and staff, the Day Habilitation program was suspended on September 1, 2021.

Objective #2 - Day Habilitation members receive information and answers to their questions in a timely manner

- *Annual Performance Target | 85% of day habilitation members report they feel they receive information and answers to their questions in a timely manner*
- *2021 Performance Outcome | 74% of day habilitation members report they feel they receive information and answers to their questions in a timely manner*

RFYP did not meet the performance target for this objective. This data was collected via the Day Program Member Satisfaction Survey which is distributed annually. Members' feedback regarding the timely communication of information can lead to better service coordination and members feeling empowered to make informed decisions about circumstances that directly affect their lives.

Comparative Analysis:



Trends: There is a pattern of members asking for information regarding upcoming community outings, in-house activities, future holiday and birthday parties, staff and members' daily schedules, snack availability, and seeking information from their SCL Service Coordinator. This is due to the Day Habilitation program being in the same building as the main office. RFYP members have the expectation of timely communication, and RFYP strives to provide them with information as efficiently as possible.

Causes: Staff shortages, high turnover, and temporary staff filling shifts makes it challenging to have all the answers ready and available. Staff may need to seek out multiple people's input to give an accurate answer to the members' questions. RFYP puts forth great effort to seek input from the members, answer their questions, and meet their expectations.

Impact of Extenuating Factors: Staff turnover and program suspensions are extenuating factors that impact this outcome.

Action Plan for Improvement: The Day Habilitation program will start with a smaller roster when it reopens. Staff to member ratio will be smaller for the first few months. Staff will be trained on meeting the members' individual needs and how to reassure the members that they are seeking out the information to their questions, so the members do not feel as if their questions are being ignored. RFYP will also resume six-month review ISP meetings. This will provide the space and time for feedback and communication with members, parents, guardians, and other stakeholders regarding their satisfaction and input for improvement for the program.

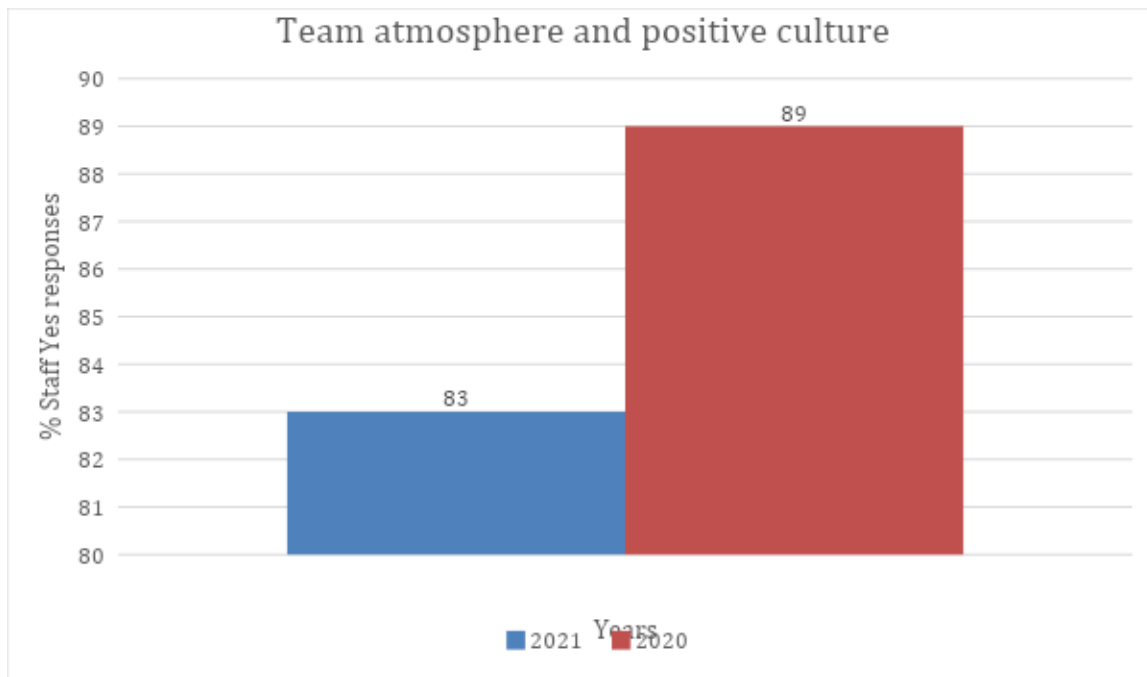
Domain 6: Business Function Measurement

Objective #1 - Increase agency morale and culture to ensure a positive work environment

- *Annual Performance Target* | 85% of staff responding feel RFYP has a positive agency culture
- 2021 Performance Outcome | 83% of staff responding feel RFYP has a positive agency culture

RFYP did not meet the performance target for this objective. This data was collected via the Staff Engagement Survey which is distributed annually. Being responsive and flexible to the needs of the staff are high priorities of RFYP. RFYP puts great effort into agency culture and work morale to reduce staff turnover, improve productivity and efficiency, and retain staff. Most importantly, RFYP wants staff to feel happy at work and in their personal lives.

Comparative Analysis:



Trends: During 2021, there was a pattern of being short-staffed, having a high turnover, and working with staff from other areas that were filling in for staff that had left or were on a leave of absence.

Causes: Throughout the pandemic, the agency experienced staff shortages, staff being unavailable due to illness, and high turnover. The Day Habilitation program was only open for three months in 2021, which also impacts morale. The fast-paced, dynamic day program environment requires staff that are ready to work as a team and collaborate. If attitudinal barriers exist, it will prevent RFYP from providing a fun and engaging environment for the members. Professionalism, dependability, and positive communication allow the environment to function.

Impact of Extenuating Factors: Due to COVID-19 precautions and protecting the health and safety of the members and staff, the Day Habilitation program was suspended in September 2021. The satisfaction survey was distributed in November 2021. This delay may have influenced the staffs' responses. Also, there was extra attention dedicated to ensuring the health and safety of the members. Extra time and attention were focused on ensuring the members' health and safety which may have taken attention away from efforts to promote a positive work environment compared to previous years

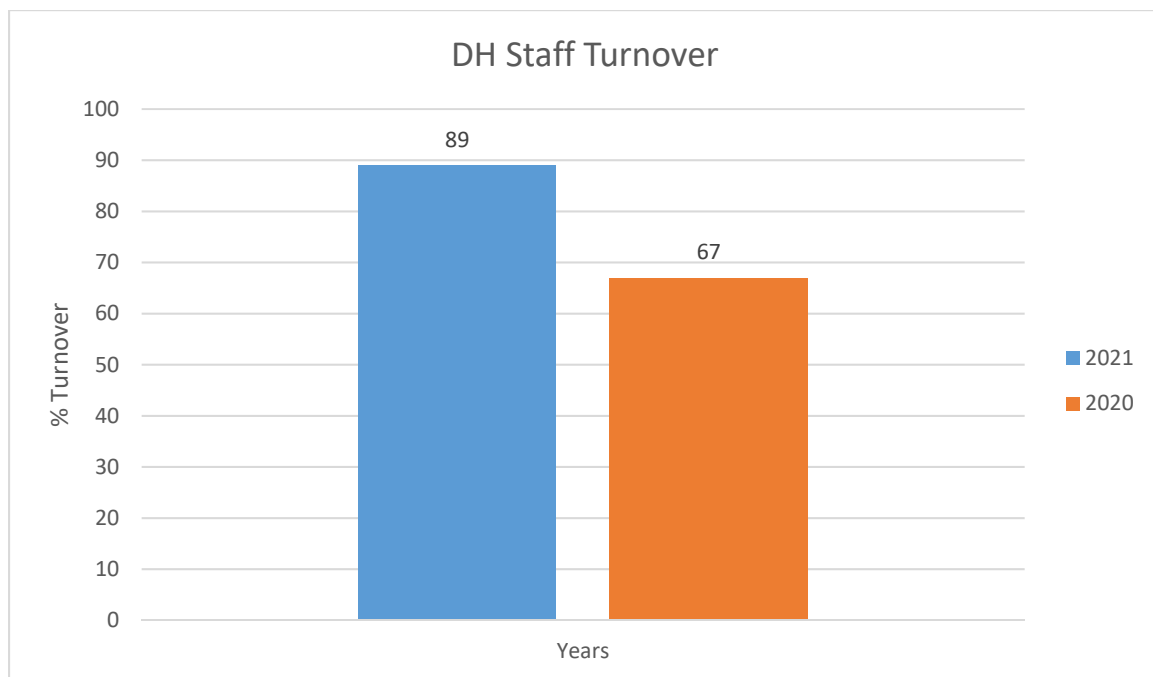
Action Plan for Improvement: The Day Habilitation Program Director will embed the FISH Philosophy during staff meetings. The Day Habilitation staff and leadership will implement the strategies of this philosophy throughout the workday.

Objective #2 - Decreasing personnel turnover so supervisors can spend less time training new staff and more time providing efficient services to members

- *Annual Performance Target | 60% Day Program Staff Turnover Rate*
- *2021 Performance Outcome | 89% Day Program Staff Turnover Rate*

RFYP did not meet the performance target. This data is collected through personnel data in Quick Books software and is maintained by the Financial Department. Personnel turnover is an ongoing challenge for the agency, particularly in the direct care and Service Coordinator positions. Due to the agency employing many college-age students from Kirkwood Community College and the University of Iowa, direct care staff schedules may change every three to four months due to their educational responsibilities. Many hours go into training a new staff by the HR Department and Service Coordinators. By decreasing the staff turnover rate, these departments and staff can use their time creating a better living environment, quality of life for the member, and delivering individualized services rather than training new staff.

Comparative Analysis: A comparative analysis of benchmarks from previous years is not equally comparable to 2020.



Trends: Staff were reassigned to other programs when the Day Habilitation program was suspended.

Causes: The Day Habilitation was only open three months in 2021. Staff were reassigned to SCL programming or found other jobs.

Impact of Extenuating Factors: Intermittent programming, turnover, and staff shortages impacted this outcome. Due to COVID-19 precautions and protecting the health and safety of the members and staff, there was extra attention dedicated to ensuring the health and safety of the members. Extra time and attention were focused on ensuring the members' health and safety which may have taken attention away from staff retention efforts from previous years.

Action Plan for Improvement: The Day Habilitation Program Director will embed the FISH Philosophy during staff meetings. The Day Habilitation staff and leadership will implement the strategies of this philosophy throughout the workday. Positive working relationships and recognition from the program supervisors contribute to decreasing staff turnover.

Performance Outcomes Spreadsheets

Day Habilitation 2021

Through personalized care and assistance, Reach for Your Potential, Inc. provides comprehensive residential and day habilitation services for adults with disabilities. Our goal is to help you reach your personal best.

Domain 1: Results Achieved for Persons Served (Effectiveness Measures) Measuring change over time is inherent in the measurement of results achieved for the persons served. Data collected at the beginning of services, at specific intervals during services, at the end of services, and/or at a point(s) in time following services

| Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | How Does This Improve the Members' Lives | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Communicate Information | Priority |
|--|---|--|--|--|--|--|---|--|-------------------------|---------------------------|-----------------------|--|---------------------------------|--------------------------------------|----------|
| SDOH: Social & Community Context | 1. RFP provides DH members choices for community integration. | % of Yes responses on the Day program Satisfaction Survey | Active Day Program Members | Annually (October) | Day program Member Satisfaction Survey (electronic or paper survey option) | Members are active participants in their community. | QA Department and Program Director | 85% YES Responses | 87% | Yes | 85% | Day Hab Programming suspended September 2021 due to COVID-19 Precautions | 10/1/2021-10/31/2021 | Spring 2022 | 1 |
| SDOH: Neighborhood and Build Environment | 2. RFP maintains a safe day habilitation environment preventing injuries resulting in basic first aid | # of incident reports resulting in the application of basic first aid. | Active Day Program Members | Daily | Incident Reports | Members are provided a safe environment to engage in Day Habilitation activities | Direct Care Staff, Facilitators | Max 28 incident reports for basic first aid applied per year | 0 | Yes | 6 | Day Hab Programming suspended September 2021 due to COVID-19 Precautions. This data represents June 2- September and is not a full year of data. | Bi-Annually (June and December) | Spring 2022 | 2 |

Domain 2: Experience of Services Received and Other Feedback from Persons Served: The perception of the persons served regarding their experience with the program/service provides valuable feedback on how well the program/service is meeting or met their expectations in areas such as service responsiveness, respect, informed choice, participation, and overall value.

| Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | How Does This Improve the Members' Lives | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Communicate Information | Priority |
|---------------------|---|--|--|--|--|---|---|--|-------------------------|---------------------------|-----------------------|--|-----------------------------|--------------------------------------|----------|
| Internal Focus Area | 1. DH Members are satisfied with the level of attention they receive from day program staff | % of Yes Responses on the Day program Member Satisfaction Survey | Active Day Program Members | Annually (October) | Day Program Member Satisfaction Survey (electronic or paper survey option) | Members feel their social and emotional needs are prioritized and attended to | QA Department, SC, and Program Director | 85% reporting YES | 84% | No | 81% | Day Hab Programming suspended September 2021 due to COVID-19 Precautions | 10/1/2021-10/31/2021 | Spring 2022 | 3 |

| Benchmarks, Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | How Does This Improve the Members' Lives | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Communicate Information | Priority |
|--------------------------|--|---|--|--|--|--|---|--|-------------------------|---------------------------|-----------------------|---|-----------------------------|--------------------------------------|----------|
| SDOH: Economic Stability | 1. The Day Habilitation units are monitored monthly to maintain fiscal health. | Day Habilitation Census | Financial Dept QuickBooks Database | Monthly Average | Day Hab Daily Attendance and Units entered into QuickBooks for Reimbursement | Monitoring of the census to ensure continuation of services for members and avoid any disruption to the members schedule | Financial Director | 200 units | 362 | Yes | 653 | This data represents May, June, July, and August 2021. Day Hab Programming suspended September 2021 due to COVID-19 Precautions. This data is not a full year of data. The performance outcome was lowered to 200 units for 2021. | 1/1/22 | Spring 2022 | 1 |

Domain 5: Service Access Measures: Service access addresses the organization's capacity to provide services to those who desire or are in need of receiving services

| Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | How Does This Improve the Members' Lives | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Communicate Information | Priority |
|----------------------------------|---|---|--|--|--|--|---|--|-------------------------|---------------------------|-----------------------|--|-----------------------------|--------------------------------------|----------|
| SDOH: Social & Community Context | 1. Limit wait time on Day Hab vehicle maintenance requests | Maintenance work order assigned date vs. complete date | Maintenance Department | Daily | Maintenance Work Order Form Tracking | Access to community and civic participation | Financial Director and Executive Director | 10 days or less on average annually | 0 | Yes | 10 | Day Hab Programming suspended in September 2021 due to COVID-19 Precautions. This data is not a full year of data. | 1/1/22 | Spring 2022 | 1 |
| SDOH: Education | 2. Day Habilitation members receive information and answers to their questions in a timely manner | % reporting YES on Day program member satisfaction survey | Day program members | Annually (October) | Day program Member Satisfaction Survey (electronic or paper survey option) | Effective and consistent sharing information allowing members to feel informed and empowered with minimal delays | QA Department and Program Director | 85% YES Responses | 74% | No | 81% | Day Hab Programming suspended September 2021 due to COVID-19 Precautions | 10/1/2021-10/30/2021 | Spring 2022 | 2 |

Domain 6: Business Function Measurement

| Benchmarks, Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | Activities to Sustain & Enhance the Organization | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Communicate Information | Priority |
|------------------------|--|---|--|--|--|--|--|--|-------------------------|---------------------------|-----------------------|--|-----------------------------|--------------------------------------|----------|
| RFYP Internal Focus | 1. RFYP promotes a team work environment to promote a positive agency culture. | Staff Engagement Survey | All RFYP Staff | Annually | Staff Engagement Survey (electronic or paper option) | Staff and members will thrive positive and healthy agency culture resulting in consistent staffing and long-term relationships | Program Directors and Human Resources Director | 85% reporting Agree or Strongly Agree | 89% | Yes | 83% | NEW Objective 2020, Day Hab Programming suspended March 2020 due to COVID-19 Precautions | 10/1/2021-10/30/2021 | Spring 2022 | 1 |
| RFYP Internal Focus | 2. Decreasing agency personnel turnover rates. | Agency Turnover Rate | Financial Department and Human Resources Dept. | Annually | QuickBooks | Consistent and long-term staffing has a beneficial effect on the payroll. Training new workers has a high cost. RFYP wants to invest in the business functions that will enhance member care and sustain the organization. | Financial Director | 60% | 85% | No | 67% | Day Habilitation program specific turnover was 100%. Day Hab Programming suspended March 2021 and Sept 2021 due to COVID-19 Precautions. This data is not a full year of data. | 1/1/22 | Spring 2022 | 2 |

SUPPORTED COMMUNITY LIVING 2021

Through personalized care and assistance, Reach for Your Potential, Inc. provides comprehensive residential and day habilitation services for adults with disabilities. Our goal is to help you reach your personal best.

Domain 1 : Results Achieved for Persons Served (Effectiveness Measures) Measuring change over time is inherent in the measurement of results achieved for the persons served. Data collected at the beginning of services, at specific intervals during services, at the end of services, and/or at a point(s) in time following services

| Benchmarks, Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | How Does This Improve the Members' Lives | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Share Info | Priority |
|--|---|--|--|--|---|---|---|--|-------------------------|---------------------------|-----------------------|---|-----------------------------|-------------------------|----------|
| SDOH: Social & Community Context | 1. RFYP provides members choices for community integration. | % of Yes responses on the Member Satisfaction Survey | Active Residential Members | Annually (October) | Member Satisfaction Survey (electronic or paper survey option) | Members are active participants in their community. | QA Department and Program Director | 85% YES Responses | 88% | Yes | 89% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/21-12/31/21 | Spring 2022 | 1 |
| SDOH: Health & Health Care | 2. RFYP provides individualized medical and health care supports to meet members' needs | % of Yes Responses on the Parent/Guardian Satisfaction Survey | Active Residential Parent/Guardian | Annually (October) | Parent/Guardian Satisfaction Survey (electronic or paper survey option) | Health care equity and advocacy | QA Department and Program Director | 85% YES Responses | 90% | Yes | 85% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/21-12/31/21 | Spring 2022 | 2 |
| SDOH: Neighborhood and Build Environment | 3. RFYP maintains safe living environments preventing injuries resulting in basic first aid | # of incident reports resulting in the application of basic first aid and incidents resulting in injury. | Active Residential Members | Daily | Incident Report Tracking Spreadsheet | Members are provided a safe residential environment | Direct Care Staff, Facilitators | Max 64 incident reports for incidents resulting in injury or application of first aid per year | 36 | Yes | 56 | Members home more due to COVID-19 and Day Hab Programming suspended | 1/1/22-1/20/22 | Spring 2022 | 2 |

Domain 2: Experience of Services Received and Other Feedback from Persons Served: The perception of the persons served regarding their experience with the program/service provides valuable feedback on how well the program/service is meeting or met their expectations in areas such as service responsiveness, respect, informed choice, participation, and overall value.

| Benchmarks, Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | How Does This Improve the Members' Lives | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Communicate Information | Priority |
|------------------------|--|---|--|--|--|---|---|--|-------------------------|---------------------------|-----------------------|---|-----------------------------|--------------------------------------|----------|
| Internal Focus Area | 1. Members are satisfied with the level of attention they receive from staff | % of Yes responses on the Member Satisfaction Survey | Active Residential Members | Annually (October) | Member Satisfaction Survey (electronic or paper survey option) | Members feel their social and emotional needs are prioritized and attended to | QA Department, SC, and Program Director | 85% reporting YES | 89% | Yes | 86% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/21-12/31/21 | Spring 2022 | 2 |

| | | | | | | | | | | | | | | | |
|--------------------------|--|--|----------------------------|--------------------|--|---|---|-------------------|-----|-----|-----|---|------------------|-------------|---|
| SDOH: Economic Stability | 2. Members are satisfied with the financial support available to them | % of Yes responses on the Member Satisfaction Survey | Active Residential Members | Annually (October) | Member Satisfaction Survey (electronic or paper survey option) | Members feel empowered to ask questions and receive answers about their finances | QA Department, SC, and Program Director | 85% reporting YES | 76% | No | 80% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/21-12/31/21 | Spring 2022 | 3 |
| SDOH: Education | 3. Members receive answers to their questions in a timely manner to make informed personal choices | % of Yes responses on the Member Satisfaction Survey | Active Residential Members | Annually (October) | Member Satisfaction Survey (electronic or paper survey option) | Effective and consistent sharing information empowering the member to make informed choices | QA Department, SC, and Program Director | 85% reporting YES | 86% | Yes | 84% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/21-12/31/21 | Spring 2022 | 1 |

Domain 3: Experience of Services Received and Other Feedback from Other Stakeholders: The perception of stakeholders regarding their experience with the program/service provides valuable feedback on how well the program/service is meeting or met their expectations

| Benchmarks, Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | How Does This Improve the Members' Lives | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Communicate Information | Priority |
|--------------------------|--|---|--|--|---|---|---|--|-------------------------|---------------------------|-----------------------|---|-----------------------------|--------------------------------------|----------|
| RFYP Internal Focus | 1. Guardians are satisfied with the staff's responsiveness to the needs of the members | % of Yes responses on Parent/Guardian Satisfaction Survey | RFYP Parents & Legal Guardians | Annually | Parent/Guardian Satisfaction Survey (electronic or paper survey option) | The members' daily living needs are prioritized and attended to | QA Department and Program Director | 85% reporting YES | 98% | Yes | 94% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/21-12/31/21 | Spring 2022 | 2 |
| SDOH: Economic Stability | 2. Guardians feel they receive timely member financial information | % of Yes responses on Parent/Guardian Satisfaction Survey | RFYP Parents & Legal Guardians | Annually | Parent/Guardian Satisfaction Survey (electronic or paper survey option) | Transparent, effective, and consistent sharing of the members' financial information for informed choices | QA Department and Program Director | 85% reporting YES | 79% | No | 70% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/21-12/31/21 | Spring 2022 | 2 |
| RFYP Internal Focus | 3. Other providers feel RFYP is receptive to their requests/suggestions/inquiries | % of Yes responses on Other Providers Satisfaction Survey | Other Providers | Annually | Other Providers Satisfaction Survey (electronic or paper survey option) | Reciprocal and receptive communication experience improves services for the members | QA Department and Program Director | 85% reporting YES | 90% | Yes | 100% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/21-12/31/21 | Spring 2022 | 1 |

Domain 4: Efficiency measures: Resources Used and Results Achieved for the Persons Served.

| Benchmarks, Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | How Does This Improve the Members' Lives | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Communicate Information | Priority |
|------------------------|------------|---|--|--|---|--|---|--|-------------------------|---------------------------|-----------------------|--|-----------------------------|--------------------------------------|----------|
|------------------------|------------|---|--|--|---|--|---|--|-------------------------|---------------------------|-----------------------|--|-----------------------------|--------------------------------------|----------|

| SDOH: Economic Stability | 1. To provide quality services and avoid interruptions to the members, SCL program monitors how many members are enrolled. | SCL Census Data | Financial Department | Monthly | QuickBooks | Monitoring of the census to ensure continuation of services for members | Financial Director and Executive Director | 87% Monthly Occupancy Rate | 90% | Yes | 92% | Members home more due to COVID-19 and Day Hab Programming suspended | 1/1/22-1/20/22 | Spring 2022 | 1 |
|--|--|---|--|--|---|---|--|---|-------------------------|---------------------------|-----------------------|---|-----------------------------|--------------------------------------|----------|
| Domain 5: Service Access Measures: Service access addresses the organization's capacity to provide services to those who desire or are in need of receiving services | | | | | | | | | | | | | | | |
| Benchmarks, Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | How Does This Improve the Members' Lives | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Communicate Information | Priority |
| SDOH: Education | 1. Parents/Guardians receive information regarding the member or services provided in a timely manner | % of Yes Responses on the Parent/Guardian Satisfaction Survey | Active Residential Parent/Guardian | Annually (October) | Parent/Guardian Satisfaction Survey (electronic or paper survey option) | Reciprocal and transparent communication experiences improves services for the members | QA Department and Program Director | 85% YES Responses | 89% | Yes | 88% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/21-12/31/21 | Spring 2022 | 2 |
| SDOH: Social & Community Context | 2. Wait time on agency vehicle maintenance requests completion | Maintenance work order received date vs. Complete date on Work Order Tracking | Maintenance Department | Daily | Maintenance Work Order Form Tracking Spreadsheet | Access to community and civic participation | Financial Director and Executive Director | 10 days average | 15 days | NO | 8 days | Members home more due to COVID-19 and Day Hab Programming suspended | 1/1/22-1/20/22 | Spring 2022 | 1 |
| SDOH: Neighborhood and Build Environment | 3. Wait time on home maintenance work order request completion | Maintenance work order received date vs. Completed date | Maintenance Department | Daily | Maintenance Work Order Form Tracking Spreadsheet | High quality, accessible living conditions for residential members | Financial Director and Executive Director | 14 days average | 8 days | Yes | 13 days | Members home more due to COVID-19 and Day Hab Programming suspended | 1/1/22-1/20/22 | Spring 2022 | 1 |
| SDOH: Health & Health Care | 4. RFYP medical staff are responsive to the individual needs of the member. | % reporting YES on Parent/Guardian Survey | Active Residential Parent/Guardian | Annually | Other Providers Satisfaction Survey (electronic or paper survey option) | Accessible agency medical supports and resources | QA Department and Program Director | 85% reporting YES | 90% | Yes | 85% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/21-12/31/21 | Spring 2022 | 2 |
| Domain 6: Business Function Measurement | | | | | | | | | | | | | | | |
| Benchmarks, Focus Area | Objectives | Performance Indicators (how is the objective evaluated) | Whom Applied To (who data gathered from) | Time of Measure (when the data is collected) | Data Source (how the data is collected) | Activities to Sustain & Enhance the Organization | Obtained By (who collects/maintains the data) | Performance Target Established by Organization | Actual Results Achieved | Perf. Target Met (yes/no) | Previous Year Results | Describe Extenuating Factors: Demographics, barriers, challenges | Timeframe for Data Analysis | Timeframe to Communicate Information | Priority |
| SDOH: Health & Health Care | 1. Increasing medications passed as prescribed by RFYP staff (Risk Management) | Medication Error Incident Reports for major and minor incidents | RFYP Residential Staff | Daily | Incident Report Tracking Spreadsheet | Medication administration accuracy is imperative to manage risk and promote a safe environment | Program Director and RFYP Nurse | 36 or less medication errors | 30 | Yes | 30 medication errors | Members home more due to COVID-19 and Day Hab Programming suspended | 1/1/22-1/20/22 | Spring 2022 | 3 |
| RFYP Internal Focus | 2. Decreasing agency personnel turnover rates. | Agency Turnover Rate | Financial Department and Human Resources Dept. | Annually | QuickBooks | Decreasing personnel turnover so supervisors can spend less resources training new staff and more time fulfilling the mission of the organization | Financial Director | 60% | 89% | No | 75% | Members home more due to COVID-19 and Day Hab Programming suspended | 1/1/22-1/20/22 | Spring 2022 | 2 |
| RFYP Internal Focus | 3. Increase agency morale and culture to ensure a positive work environment | Staff Engagement Survey | All RFYP Staff | Annually | Staff Engagement Survey (electronic or paper option) | RFYP values a team-based environment and positive agency culture | Program Directors and Human Resources Director | 85% reporting Agree or Strongly Agree | 89% | Yes | 83% | Members home more due to COVID-19 and Day Hab Programming suspended | 11/1/2021-12/31/2021 | Spring 2022 | 1 |
| RFYP Internal Focus | 4. Daily progress notes are submitted on time for maximum monthly financial reimbursement for services | Financial Dept. | RFYP Residential Staff | Monthly | P Note Monthly Tracking Spreadsheet | Reimbursement for services for sustained and consistent cash flow | Financial Department and Quality Assurance | 0.75% progress notes missing prior to monthly billing | 0.74% | yes | 0.74% | Members home more due to COVID-19 and Day Hab Programming suspended | 1/1/22-1/20/22 | Spring 2022 | 1 |

Discharge Summaries

2021 Discharge and Post-Discharge Follow-Up Summary Report: Residential and Day Habilitation Services

Reach For Your Potential, Inc. (RFYP) seeks input from members and guardians at discharge and post-discharge through discussions, participation at discharge meetings, phone calls, and emails electronically via Survey Monkey and/or a paper feedback survey. RFYP maintains an open-door policy during and after services are provided. The input received in 2021 was thoughtfully reviewed, summarized, and analyzed for trends, influencing factors were identified, and proposed improvements to be implemented in the upcoming year were identified. Action plans for continuous quality improvement will be implemented starting in January 2022 and reviewed for progress in six months.

The RFYP discharge procedure is a coordinated effort among the interdisciplinary team including but not limited to the member, RFYP staff, guardians, other care providers, and case managers. Input received at the end of services and points-in-time after services are an invaluable resource that may improve the agency's policies and procedures. In addition, the input may improve continuity and coordination of care and a safe transition to other programs and providers. The data collected are used to improve and strengthen RFYP programs and services.

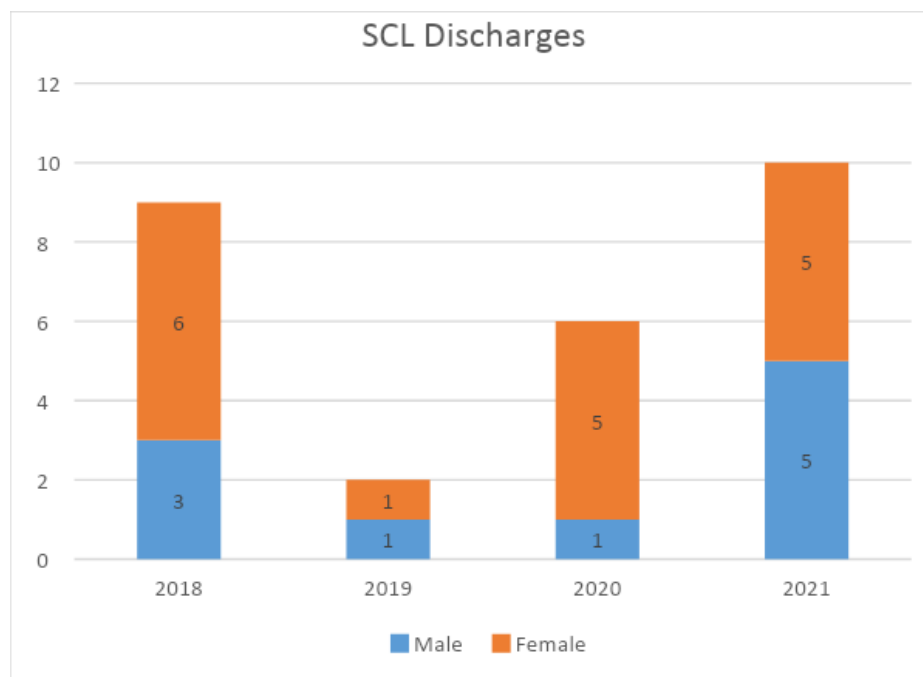
Upon discharge, RFYP provides the Interdisciplinary Team a comprehensive discharge summary. The summary details the current status of the member's finances, upcoming medical and all other appointments, medications, personal items, and/or household supplies purchased by the member.

Residential Services Discharge Summary

| | | |
|--|-----------------------------|----|
| Total Residential Discharges | January 2021 -December 2021 | 10 |
| Years Participating in Residential Services | 0 to 1 year | 1 |
| | 2 to 5 years | 3 |
| | 6 to 10 years | 3 |
| | 10+ years | 3 |
| Sex | Male | 5 |
| Sex | Female | 5 |
| Ages | 18 to 40 | 3 |
| | 41 to 63 | 5 |
| | 64 to 86 | 2 |
| Funding | BI Hourly | 0 |
| | BI Daily | 1 |
| | Home Based Habilitation | 0 |
| | ID Hourly | 1 |

| | | |
|-----------------------------|--------------------|--------|
| | ID Daily Region | 8 0 |
| Ethnicity | Asian Pacific | 0 |
| | Hispanic | 0 |
| | White | 9 |
| | Black | 1 |
| | Other | 0 |
| Reason for Discharge | Family Home | 1 |
| | New Provider | 3 |
| | Passed Away | 4 |
| | Independent Living | 1 |
| | Other | 1 |

Comparative Analysis 2018-2021



Trends: Discharge trends in 2021 include members passing away unexpectedly. Additionally, members chose to move to a new provider or family home.

Causes: RFYP supports and respects the members' independent choices and preferences of program participation. There were three members that moved to other providers for a higher level of care or more independence. Additionally, two members voluntarily discharged to live closer to family or live with family members. The passing of four members was unexpected.

Post Discharge Follow Up: RFYP was highly involved in the planning and coordinating of the End of Life Celebrations for the members that passed away in 2021. The guardians and family members of the members that passed away were very appreciative of the support. One of the members had no family involvement, so the members were like that person's family.

Additionally, there is a tension between providing individualized supports for SCL services and full nursing assistance services. RFYP tries to balance this tension and provide services that meet the members' expectations while still trying to foster independence. In one case, a member desired to have nursing supports in a nursing home rather than SCL residential supports.

Barriers to Satisfaction: Members' desired to live closer to family or seek more (or less) supports than what RFYP provides. RFYP supports the person's right to choose services and respects their choices when they choose to move to a new provider.

Extenuating Factors: There was a higher than typical number of members passing away in 2021. This impacts the members emotionally as well as the agency's projected budgets.

What Did We Learn: The satisfaction of the programs and supports RFYP provides changes quickly. RFYP respects the members' right to choose services and will provide all supports possible for smooth transitions to new providers. RFYP is flexible but can only provide the services within its scope.

What Are We Doing Well: When a member is preparing to discharge from services, RFYP is committed to continuing to provide care and services until the member moves in with a new provider or family member, or the team has agreed to a plan for independent living for the individual. RFYP will not discharge the member until alternate services are established. RFYP will go above and beyond to support the individual in the environment that best fits their needs including providing additional staffing and paying for the member to reside in a hotel room with staffing support until they are able to transition to their new provider. RFYP is also committed to transparency in communication and a team approach to service coordination.

Areas of Concern: RFYP would also like to increase the response rate for the discharge and post-discharge survey from members and guardians.

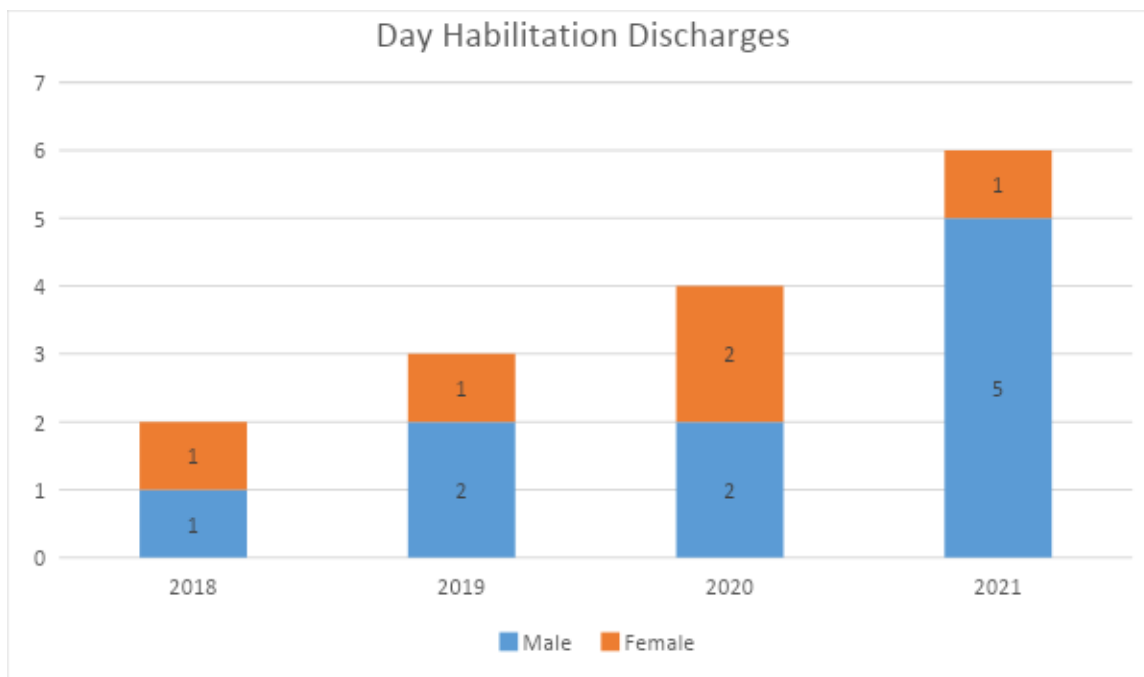
Proposed Improvements: RFYP will seek discharge and post-discharge input from the case managers in addition to guardians and parents. RFYP will email these groups a survey link.

Day Habilitation Discharge Summary

| Total Day Habilitation Discharges | January 2021 – December 2021 | 6 |
|--|------------------------------|---|
| Years Participating in Day Habilitation Services | 0 to 1 year | 0 |
| | 2 to 5 years | 2 |
| | 6 to 10 years | 0 |
| | 10+ years | 4 |

| | | |
|-----------------------------|-------------------------|---|
| Sex | Male | 5 |
| Sex | Female | 1 |
| Ages | 18 to 40 | 3 |
| | 41 to 63 | 3 |
| | 64 to 86 | 0 |
| Funding | BI Hourly | 0 |
| | BI Daily | 0 |
| | Home Based Habilitation | 0 |
| | ID Hourly | 0 |
| | ID Daily | 6 |
| | Region | 0 |
| Ethnicity | Asian | 1 |
| | Hispanic | 0 |
| | White | 5 |
| | Black | 0 |
| | Other | 0 |
| Reason for Discharge | Family Home | 0 |
| | New Provider | 1 |
| | Passed Away | 2 |
| | Independent Living | 0 |
| | Other | 3 |

Comparative Analysis 2018 - 2021



Trends: A trend in 2021 were members voluntarily discharging due to the desire for more work hours rather than day habilitation hours, to live closer to their family, and deciding they are satisfied with staying home without day habilitation services. Additionally, there were discharges due to members passing away unexpectedly.

Causes: RFYP supports and respects the members' choices and preferences of program participation. The members' reasons for wanting to discharge were supported by an Interdisciplinary Team. It is notable that the Day Habilitation was only open for three months in 2021. Members were home during the day which gave them the opportunity to reconsider their options for day programming.

Post Discharge Follow Up: There was a trend with members wanting to stay home and not return to daytime programming. They reported being happy at home and participating in activities and community outings with their roommates and SCL staff.

Barriers to Satisfaction: The large group size and noise level of the Day Habilitation program can be overstimulating for some members.

Extenuating Factors: The program was open only three months of 2021. At that time, all Day Habilitation members returned to their residential program for services during the day. In addition, if a member is dissatisfied with the residential program and seeking a new residential provider, the Day Habilitation services will most likely also be discontinued.

What Did We Learn: The Day Habilitation has a roster of 60 members, but the members are divided into smaller groups with a 1:6 ratio. Despite the agency's best efforts to maintain an engaging and person-centered environment, this model is not right for all members.

What Are We Doing Well: The Day Habilitation program is flexible to the members' frequent scheduling changes. Additionally, the Day Habilitation also provides round trip transportation for members to participate in RFYP Day Habilitation services. Typically, a member participates in programs with multiple providers throughout the week. The weekly schedule is dependent upon the schedule of the other providers. Day Habilitation staff are also trained at hire, annually, and weekly during staff meetings about person-centered services and member-specific needs. The engagement calendar also offers a variety of activities at the Day Habilitation and within the community. RFYP is committed to continuing to provide care and services until the member moves in with a new provider or family member. RFYP will not discharge the member until alternate services are established, or the team has a plan that is appropriate for the member without Day Habilitation services.

Areas of Concern: Low response rate of the discharge survey and post-discharge survey.

Proposed Improvements: RFYP will seek discharge and post-discharge input from the case managers in addition to guardians and parents. RFYP will email these groups a survey link.
