

# 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**

### **2023 Incident Report Summary | Medicaid | Residential Services**

A systematic and comprehensive review of all incident reports 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 119 members from January 1, 2023 to December 31, 2023. The incident report data reflects all members served by RFYP in 2023, including members both admitted and discharged.

Supported Community Living and Habilitation supports were provided in community-based, residential settings. All incidents that occurred in 2023 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 2024 and reviewed for progress in six months. This allows RFYP the opportunity to assess if the actions taken are achieving the intended results.

## **Major Incident Summary**

<b>Residential Services Major Incident Summary</b>	<b>2022</b>	<b>2023</b>	<b>Comparative Analysis</b>
<b>Results in physical injury to or by the individual that requires physician's treatment or admission to hospital</b>	<b>20</b>	<b>18</b>	<b>-2</b>
• Intentional injury to self or others	4	3	-1
• Accident	12	13	+1
• Cause unknown/other	4	0	-4
• Under another person's care	0	2	+2
<b>Results in death</b>	<b>1</b>	<b>0</b>	<b>-1</b>
• Death of a member	1	0	-1
• Death of someone else	0	0	0
<b>Requires emergency mental health treatment</b>	<b>4</b>	<b>4</b>	<b>No change</b>
• Self-Injury	0	1	No change
• Other	4	3	No change
<b>Requires the intervention of law enforcement</b>	<b>7</b>	<b>8</b>	<b>+1</b>
• Member is the victim	2	1	-1
• Member is the perpetrator	4	3	-1
• Other	1	4	+3
<b>Requires the report of child abuse or dependent adult abuse</b>	<b>8</b>	<b>10</b>	<b>+2</b>
• By a staff member	7	8	+1

• By someone else	1	0	-1
• Unknown	0	2	+2
<b>Constitutes a prescription medication error or a pattern of medication errors that leads to physical injury, death, or emergency mental health treatment</b>	0	1	+1
• <b>Constitutes a prescription medication error as a result of staff</b>	0	0	0
○ Medication not administered	0	0	0
○ Wrong person	0	1	+1
○ Wrong medication	0	0	0
○ Wrong dose	0	0	0
○ Wrong time	0	0	0
○ Wrong method	0	0	0
• <b>Constitutes a prescription medication error as a result of declining/occurring under another person's care</b>	0	0	0
<b>Involves a consumer's location being unknown by provider staff who are assigned protective oversight</b>	8	14	+6
• Member elopement	8	14	+6
• Staff leaves member alone	0	0	0
• Another person/agency	0	0	0
• Other	0	0	0
<b>Total</b>	<b>49</b>	<b>55</b>	<b>+6</b>

1. **Trends:** In 2023, there were 14 incidents of member elopement which is an increase of six incidents compared to the previous year.



2. **Causes:** The cause of 12 of the 14 incidents of elopement were due to a member who has alone time in community, but he is struggling to check-in with his staff at the agreed upon time. RFYP is required to document the expired alone time. RFYP staff are working with the new member to identify an agreed upon plan for his safety.
3. **Extenuating Factors:** The member, RFYP, and the member's interdisciplinary team are working together to identify a plan that will allow the member as much independence as possible while ensuring his safety. When a new member is transitioning to twenty-four-hour care from living independently, it can be challenging to follow the service plan. The member is an active participant in the development of the service plan; however, it is challenging for them to follow the plan after the meeting.

### 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	Within 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

### 4. 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 or submit through web portal	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

5. **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 contributes 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.
6. **Prevention of Recurrence:** Staff training/retraining, staff discipline, environmental modifications, and policy review 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 the 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.

7. **Areas needing improvement.** Continuous communication with the new member regarding personal safety and following through with the service-plan. The team will continue to try to identify positive reinforcers that will encourage the member to follow the plan they developed.
8. **Actions taken to address the improvements needed.**  
Preventing acting-out behaviors by proactively by discussing their needs and wants informally at home and formally with the IDT.

### Minor Incident Summary

Residential Programs Minor Incident Summary	2022	2023	Comparative Analysis
Results in the application of basic first aid	10	6	-4
Results in bruising*	17	9	-8
Results in seizure activity	149	130	-19
Results in injury to self, to others, or to property	24	31	+7
• To self	23	22	-1
• To others	0	2	+2
• To property	1	7	+6
Constitutes a prescription med error as result of RFYP staff	9	8	-1
• Medication not administered	5	6	+1
• Wrong person	0	0	0
• Wrong medication	0	1	+1
• Wrong dose	1	0	-1

• Wrong time	3	1	-2
• Wrong method	0	0	0
<b>Constitutes a prescription med error as a result of:</b>	<b>7</b>	<b>0</b>	<b>-7</b>
• Declining	7	0	-7
• Under another person's care	0	0	0
<b>Total</b>	<b>216</b>	<b>184</b>	<b>-32</b>

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

- Trends:** In 2023, there was an overall decrease of thirty-two minor incidents compared to 2022. There was a decrease of seven incidents of members declining medication. There was an increase of seven incidents of incidents resulting in injury to self. Also, incident reports regarding seizure activity decreased by nineteen.
- Causes:** The member with the seizure condition is in good health and staff are closely following his seizure and health protocols resulting in less seizure activity. Medication Administration training is consistent and thorough and the agency is seeing less medication administration errors. The impacts of lower staff to member ratios are resulting in less members declining to take their medications. RFYP changed the staffing pattern for one of the members with a history of declining medications which was a success. Incidents resulting in injury to self were accidental and there was not an established pattern or cause. Incidents resulting in damage to property increased by seven and were due to member behavior and actions. When members are experiencing acting out behaviors, staff are trained to ensure the members' personal safety is the priority.
- Extenuating Factors:** The behavior of the members can change quickly. RFYP puts forth great effort to train staff on the individual needs of members, proactive behavior strategies, and positive behavior prevention strategies to maintain a safe and predictable environment.
- 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

5. **External Reporting Requirements:** There are no external reporting requirements for minor incidents.
6. **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.
7. **Prevention of Recurrence:** Staff training/retraining, staff discipline, environmental modifications, and policy review 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.
8. **Areas needing improvement.** Proactive communication with the members and environmental precautions to reduce minor injuries and acting out behavior.
9. **Actions to address the improvements needed.** Increase communication with members informally at home and formally at IDT meetings about positive reinforcement, safety, and safe behavior.

## 2023 Incident Report Summary: Regional Funding

A systematic and comprehensive review of all incident reports 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, 2023 to December 31, 2023. This analysis reflects the incidents documented for 3 members served by RFYP, including clients both added and discharged, during the year 2023.

Supported Community Living services were provided in community-based settings. All incidents that occurred in 2023 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 2024 and reviewed for progress in six months. This allows RFYP the opportunity to assess if the actions taken are accomplishing the intended results.

Region Incident Summary	2022	2023	Comparative Analysis
<b>Results in physical injury to or by the individual that requires physician's treatment or admission to hospital</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• 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
<b>Results in death</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• Death of a member	0	0	No Change
• Death of someone else	0	0	No Change

<b>Requires emergency mental health treatment for the individual</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• Self-Injury	0	0	No Change
• Other	0	0	No Change
<b>Requires the intervention of law enforcement</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• Member is the victim	0	0	No Change
• Member is the perpetrator	0	0	No Change
• Other	0	0	No Change
<b>Results from any prescription medication error</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• 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
<b>Is reportable to protective services</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• By a staff member	0	0	No Change
• By someone else	0	0	No Change
<b>Total</b>	<b>0</b>	<b>0</b>	<b>No Change</b>

- Trends:** There were zero incidents for the past three years for Regional members.
- Causes:** There is a small number of regional members. Staff are proactive in providing support to avoid incidents and discussing with members how to remain safe in their environment.
- Extenuating Factors:** The members receiving Regional funding are hourly and do not have 24-hour staffing.

#### 4. 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

#### 5. 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
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6. **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.
7. **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.
8. **Areas Needing Improvement:** There are no areas in need of improvement. There were zero incidents in 2023.
9. **Actions to Address the Improvements Needed:** There are no actions to implement to improve issues resulting in incidents. There were zero incidents in 2023.

## 2023 Incident Report Summary | Day Programming

A systematic and comprehensive review of all Day Habilitation incident reports 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 37 members from January 1, 2023 to December 31, 2023.

All services were provided at the RFYP Day Habilitation Program at 1705 S. 1<sup>st</sup> Avenue in Iowa City, Iowa and in the community. All minor and major incidents that occurred in 2023 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 2024 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

<b>Day Habilitation Major Incident Summary</b>	<b>2022</b>	<b>2023</b>	<b>Comparative Analysis</b>
<b>Results in physical injury to or by the individual that requires physician's treatment or admission to hospital</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• 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
<b>Results in death</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• Death of a member	0	0	No Change
• Death of someone else	0	0	No Change
<b>Requires emergency mental health treatment</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• Self-Injury	0	0	No Change
• Other	0	0	No Change
<b>Requires the intervention of law enforcement</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• Member is the victim	0	0	No Change
• Member is the perpetrator	0	0	No Change
• Other	0	0	No Change
<b>Requires the report of child abuse or dependent adult abuse</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• By a staff member	0	0	No Change

• By someone else	0	0	No Change
• Other	0	0	No Change
<b>Constitutes a prescription medication error or a pattern of medication errors that leads to physical injury, death, or emergency mental health treatment</b>	<b>0</b>	<b>0</b>	<b>No Change</b>
• 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
<b>Involves a consumer's location being unknown by provider staff who are assigned protective oversight</b>	<b>2</b>	<b>0</b>	<b>-2</b>
• Member elopement	1	0	-1
• Staff leaves member alone	1	0	-1
• Other person/provider	0	0	0
<b>Total</b>	<b>2</b>	<b>0</b>	<b>-2</b>

- Trends:** There were zero major incidents in 2023. Overall, total major incidents decreased by two compared to 2022.
- Causes:** No major incidents in 2023 is a result of consistent staffing and proactive staff training on safety and member specific protocols.
- Extenuating Factors:** The total number of members participating in the Day Habilitation program remains low and the program is operating on a reduced schedule.
- Internal reporting requirements:**

Internal Requirements	Timeline	Concerns
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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.

#### 5. 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.
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6. **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. In the event the program is suspended, staff have a re-training on all protocols before members begin services again.
7. **Prevention of Recurrence:** Staff training/retraining, staff discipline, environmental modifications, and policy review 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.
8. **Areas needing improvement:** The Day Habilitation program will increase training on safety protocols for community outings.
9. **Actions to address the improvements needed:** Additional informal and formal training will take place at weekly staff meetings, initial new hire training, and annual program training. Individual discussions will take place as necessary.

### Minor Incident Summary

Day Habilitation Minor Incident Summary	2022	2023	Comparative Analysis
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<b>Results in the application of basic first aid</b>	<b>2</b>	<b>2</b>	No change
<b>Results in bruising*</b>	<b>1</b>	<b>0</b>	<b>-1</b>
<b>Results in seizure activity</b>	<b>0</b>	<b>0</b>	No change
<b>Results in injury</b>	<b>0</b>	<b>4</b>	<b>+4</b>
• To self	0	3	+3
• To others	0	1	+1
• To property	0	0	No change
<b>Constitutes a prescription med error as result of RFYP staff</b>	<b>0</b>	<b>0</b>	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
<b>Constitutes a prescription med error as a result of:</b>	<b>0</b>	<b>0</b>	No change
• Declining	0	0	No change
• Under another person's care	0	0	No change
<b>Total</b>	<b>3</b>	<b>6</b>	<b>+3</b>

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

1. **Trends:** In 2023, there was an increase of three incidents resulting in injury to self. Overall, total minor incidents increased by three compared to 2022.

2. **Causes:** The incidents resulting in injury to self were accidental or cause unknown. Staff receive training on documenting every injury as an incident.

3. **Extenuating Factors:** Members' behavior can be unpredictable despite the proactive interventions and supports provided.

4. **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.

5. **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.

6. **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 contributes 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.



**7. Prevention of Recurrence:** Staff training/retraining, staff discipline, environmental modifications, and policy review 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.

**8. Areas needing improvement:** Ongoing training of new and existing staff on what constitutes an incident and what would require an incident report.

**9. Actions taken to address the improvements needed:** Day Habilitation supervisors will have ongoing review and discussion at weekly staff meetings.

## Satisfaction Survey Summaries

### Day Program Member Satisfaction Survey Summary

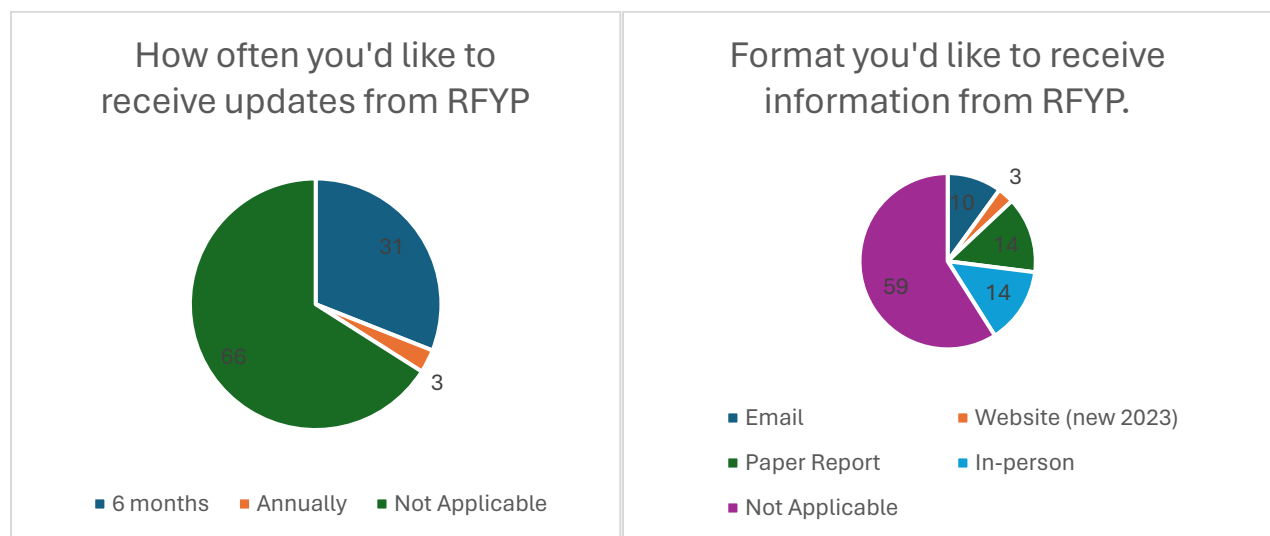
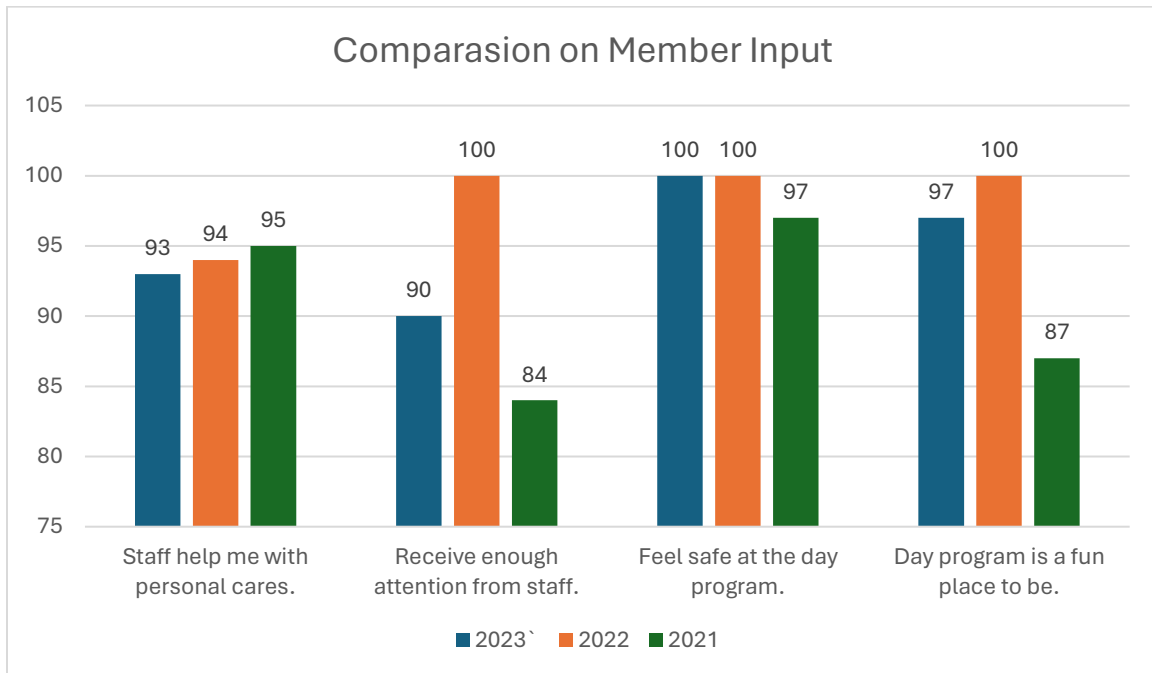
Reach For Your Potential, Inc. (RFYP) conducted a Satisfaction Survey to measure the level of satisfaction of the members of the Day Program. There were 29 satisfaction surveys responses received out of 33 surveys distributed (88%). Surveys were completed with all active members on the Day Habilitation program roster. 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 of previous survey results are included in the summary. Action plans for continuous quality improvement will be implemented in January 2024 and reviewed for progress in six months.

#### Key Findings

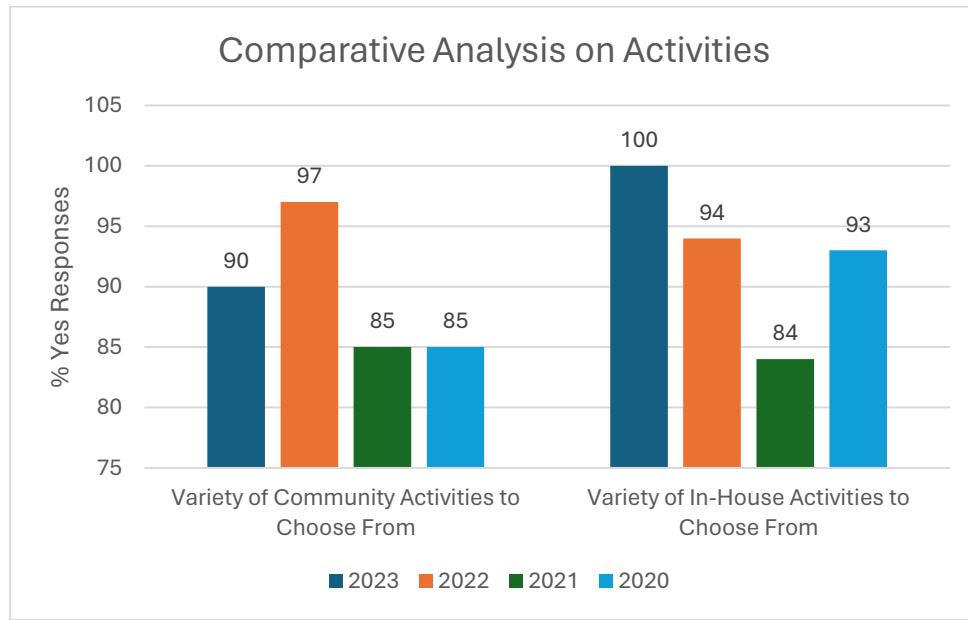
<u>Satisfaction Survey Questions</u>	<u>2022 Yes</u>	<u>2023 Yes Response</u>	<u>Comparative Analysis:  Yes Response</u>
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			<b><u>2022-2023</u></b>
Are you satisfied with RFYP's use of technology in the Day Habilitation program?	94%	100%	+6%
When you attend the Day Habilitation, do you receive information and answers to your questions quickly?	94%	90%	-4%
When you attend the Day Habilitation, are you satisfied with the medical and health care supports available?	97%	97%	No Change
Do you feel your interests and suggestions are reflected in the monthly activities calendar?	87%	87%	No Change
When you attend the Day Habilitation, are you satisfied with the level of attention you receive from the Day Program staff?	100%	90%	-10%
When you attend the Day Habilitation, do you feel your ideas and input are valued and respected?	100%	93%	-7%



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

- Staff changes/hires, events
- Outings
- How to help people



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"> <li>McDonalds, Petland</li> <li>Costco</li> <li>Go out for drinks, movies, bowling</li> <li>Out to eat</li> <li>Wendy's and McDonald's</li> <li>Barter Town</li> <li>Java House</li> <li>Go get drinks</li> <li>Get a drink</li> <li>Go get pop</li> <li>Movie theater</li> <li>Bowling, Zoo, aquarium (day trips)</li> <li>Menards</li> <li>Go bowling.</li> <li>Mall</li> </ul>	<ul style="list-style-type: none"> <li>Crafts, music therapy</li> <li>Sand art, air dry clay, painting wooden dogs.</li> <li>Listen to music, go out for drinks.</li> <li>Sing station, joking with staff and peers</li> <li>Crafts, Lincoln logs, music therapy</li> <li>Crafts</li> <li>Talk to staff about Pokémon</li> <li>Talk with my friends.</li> <li>Playing games with peers</li> <li>Get a Pepsi</li> </ul>	<ul style="list-style-type: none"> <li>Talk to staff about members that are bothering me</li> <li>Make more things blind-compatible</li> <li>I feel safe at Day Hab, but I don't always feel safe in my chair.</li> <li>Do not like going to parks for</li> <li>Outings</li> <li>Never quiet enough, get headaches.</li> <li>Be able to read my books</li> <li>New staff, more staff</li> </ul>

	<ul style="list-style-type: none"> <li>• Music, get a pop</li> <li>• Listen to music, tablet, crafts</li> <li>• Socializing and crafts</li> <li>• Watch the Price is Right</li> <li>• Staying in Day Hab</li> <li>• DJing music.</li> <li>• Play cards, painting, and exercising</li> <li>• Puzzles</li> </ul>	
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### **Barriers and Influencing Factors**

One of the goals of the RFYP Day Habilitation program is to provide daily opportunities for every member in attendance to participate in an activity in the community. A challenge that RFYP faces to accomplish this goal is finding staff that meet the qualifications to work at the Day Habilitation including a valid driver's license with a clean driving record.

### **What Did We Learn?**

RFYP members like to be active in the community and at the Day Habilitation program. They provided a variety of examples of activities and outings they enjoy. This input will inform the activity plans for the upcoming year.

### **What Are We Doing Well?**

1. 100% of members report they feel there is a variety of activities to choose from at the Day Habilitation (+6%).
2. Day Habilitation members report an increase in satisfaction with the use of technology at the Day Habilitation (+6%)
3. 100% of members report they feel safe at the Day Habilitation. This level of satisfaction is consistent with previous years.

<b><u>Areas of Concern</u></b>	<b><u>Proposed Improvements</u></b>
Members that attend the Day Habilitation program report a decrease in satisfaction with the level of attention they receive from the Day Program staff. (-10%)	The Day Habilitation program will start to recognize a member each week as the "Member of the Week". The goal is that the increase in personal attention from the staff, members, and other RFYP staff will help the members feel more valued, gain a sense of belonging, and that their attendance at the DH is appreciated by everyone. The





Members that attend the Day Habilitation program report a decrease in satisfaction with feeling their ideas and input are valued and respected. (-7%)	Member of the Week will also be able to make some key choices or present a few options or choices for activities.
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The proposed improvements will begin to be implemented in January 2024. Progress on the proposed improvements will be reviewed in June 2024.

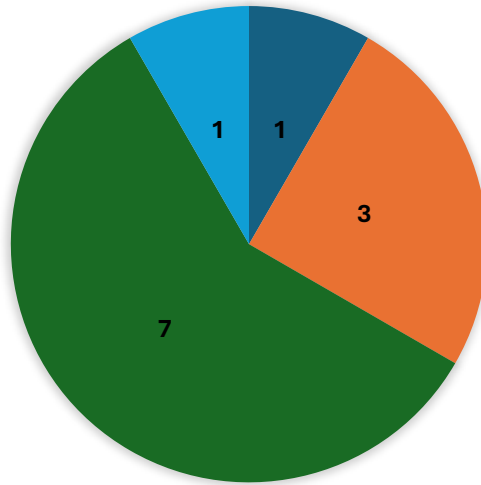
### Other Provider Satisfaction Survey Summary

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. There were 159 surveys distributed electronically via email or USPS to case management, medical, and other providers. 12 survey responses were returned (.08% response rate). 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 of previous survey results are included in the summary. Action plans for continuous quality improvement will be implemented in January 2024 and reviewed for progress in six months.

## 2023 RESPONDENTS

■ Case Manager (1) ■ Service Provider (3) ■ Medical Provider (7) ■ Other (1)



Distribution	2023	2022	2021
Case Management	16 distributed	15 distributed	29 distributed
Medical Provider	110 distributed	155 distributed*	53 distributed
Other Provider	33 distributed	44 distributed	52 distributed
<b>Total</b>	<b>155 distributed</b>	<b>214 distributed</b>	<b>134 distributed</b>

\*Distribution to medical providers increased due to mailing the survey to the providers that RFYP does not have emails for.

### What are your favorite things about RFYP?

- Staff/client relationships
- Looking out for patients' best interests
- Dedicated staff and nice homes
- Staff appear to provide good care and are invested in their client's wellbeing.
- Love the communication and always nice working with all of you.
- Clear communication about closures, subscriptions, billing, missed rides.
- There are certain coordinators and med team staff that go above and beyond.
- The consumers!

- Med team is easy to work with and we know how to get a hold of people to get things done.
- 

Is your communication experience with RFYP positive?

<b>2023 Yes</b>	75%	<b>2023 No</b>	25%
<b>2022 Yes</b>	100%	<b>2022 No</b>	0%

*Comparison within groups: 2023 Yes Responses*

Case Managers	0/1 Yes Response
Medical Provider	7/7 Yes Response
Other	1/1 Yes Response
Service Provider	0/3 Yes Response

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

<b>2023 Yes</b>	83%	<b>2023 No</b>	17%
<b>2022 Yes</b>	91%	<b>2022 No</b>	9%

*Comparison within groups: 2023 Yes Responses*

Case Managers	0/1 Yes Response
Medical Provider	7/7 Yes Response
Other	1/1 Yes Response
Service Provider	1/3 Yes Response

### What are the things that could be improved?

*Case Managers:*

- Community integration
- Communication and getting back to Case Managers

*Medical Provider*

- Community living
- Staff improvement on daily routines with hygiene
- Sometimes staff that attend appointments are not familiar with the day-to-day care of the client. It would be helpful to have staff who know the client well attend visits or provide information to be shared at the visit.
- Communicating changes in member status/new intakes

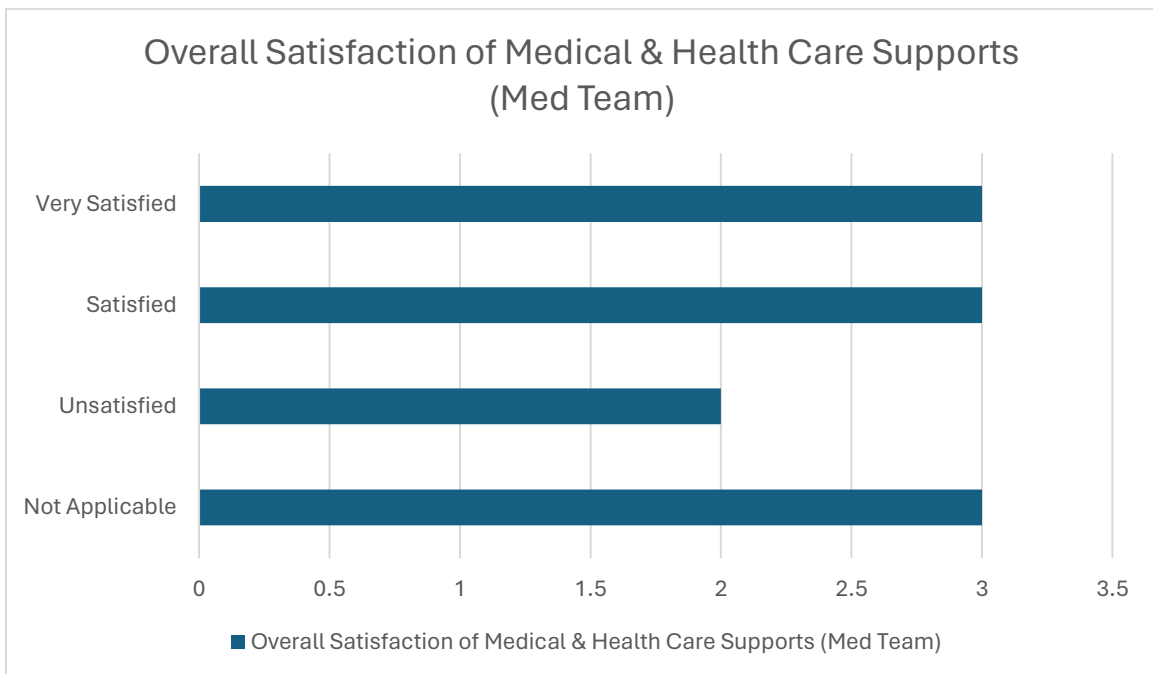
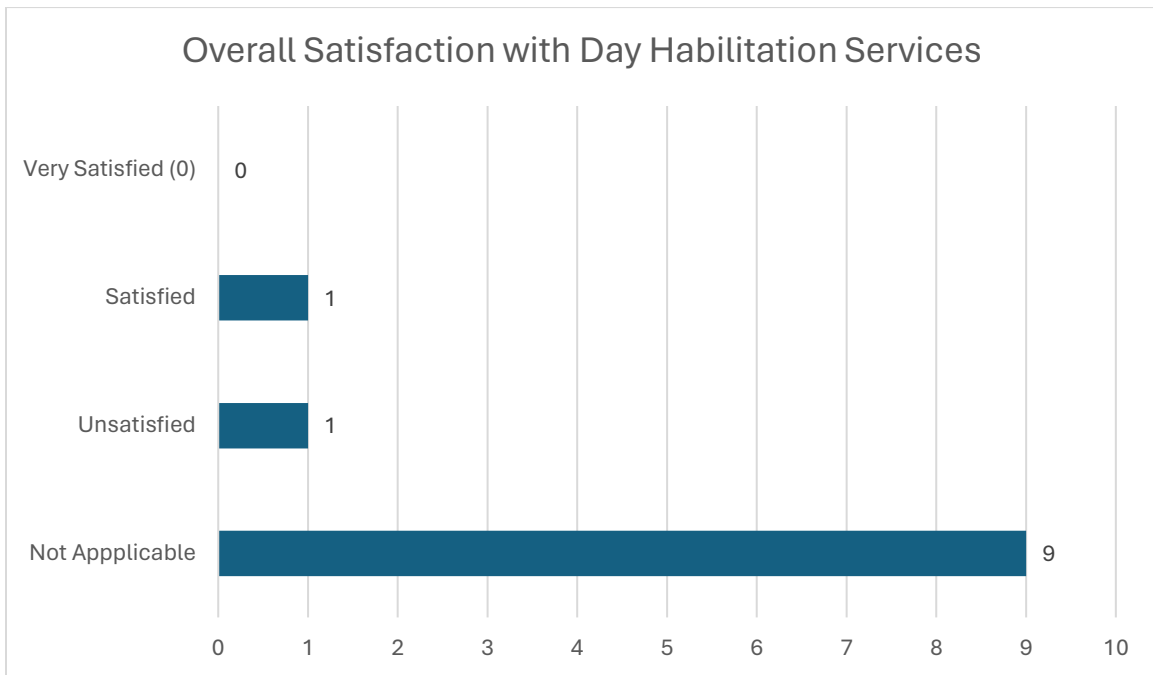
*Other:*

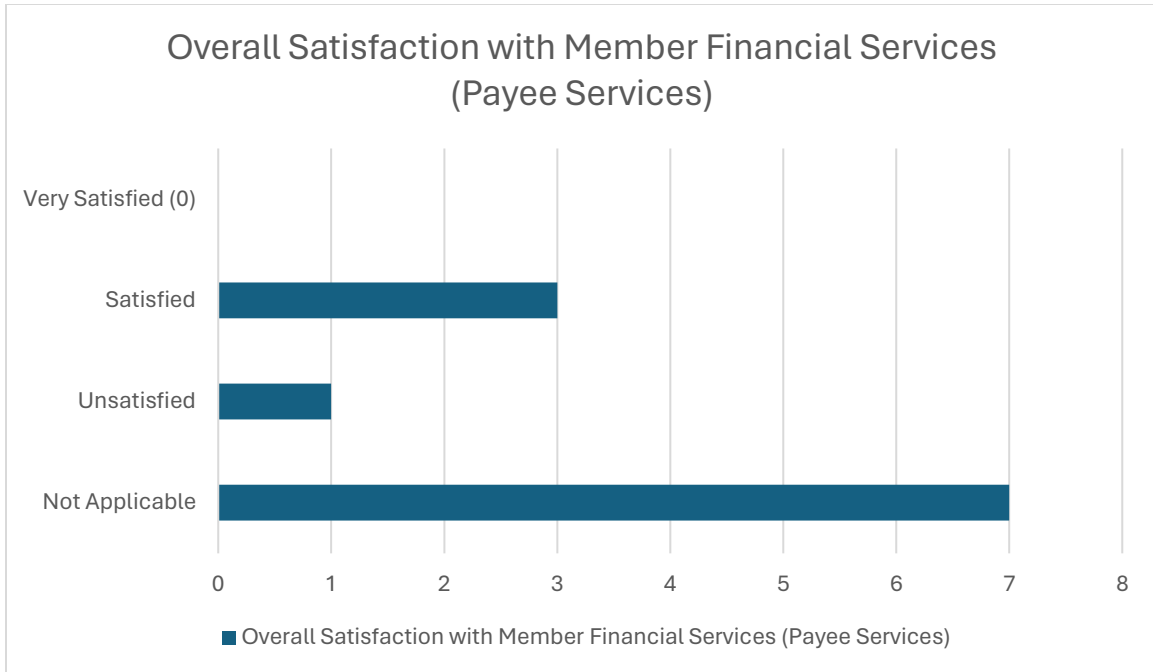
- Remembering to bring liquid medications and topicals that are not able to be sent via the mail

*Service Provider:*

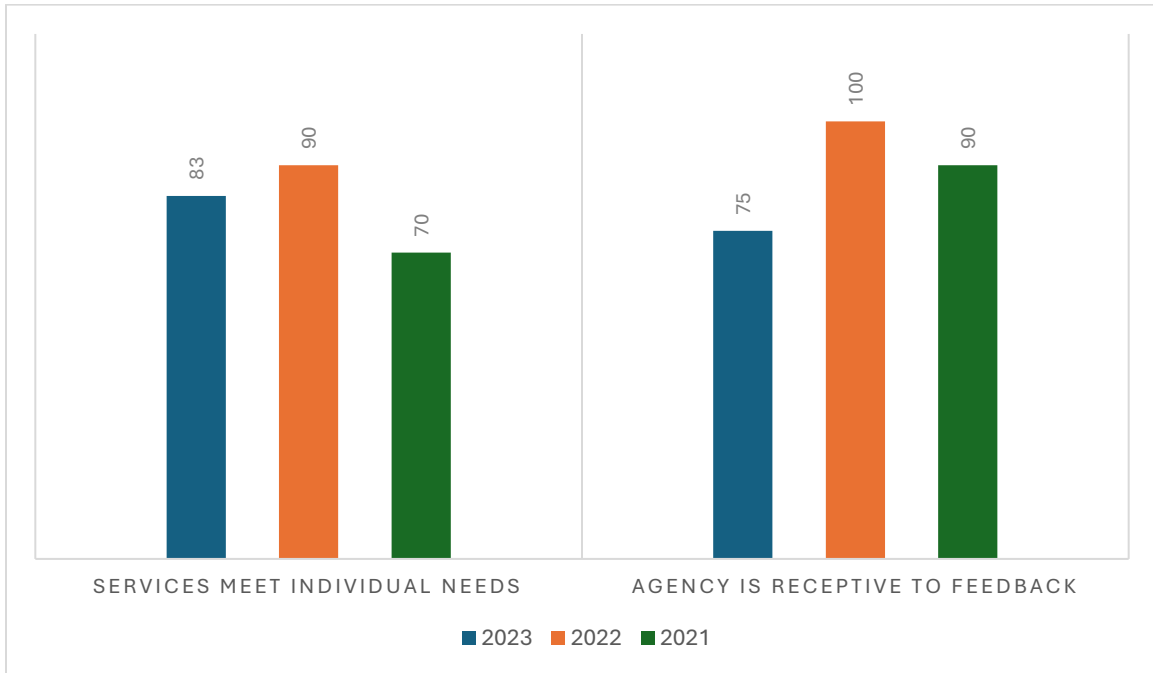
- We have a lot of missed rides in the evenings. Sometimes they are called in late or not all called in at one time which leads to confusion.
- Better communication and follow up
- Lots of areas. Care for consumers is questionable and really depends on who their staff is.
- Communication with other team members is a struggle.







## Comparative Analysis



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

2023 Yes	83%	2023 No	17%
<b>2022 Yes</b>	91%	<b>2022 No</b>	9%

*Comparison within groups: 2023 Yes Responses*

Case Managers	1/1 Yes Response
Medical Provider	7/7 Yes Response
Other	1/1 Yes Response
Service Provider	1/3 Yes Response

Do you feel RFYP respects individuals and values their differences?

2023 Yes	92%	2023 No	8%
<b>2022 Yes</b>	100%	<b>2022 No</b>	0%



*Comparison within groups: 2023 Yes Responses*

Case Managers	1/1 Yes Response
Medical Provider	7/7 Yes Response
Other	1/1 Yes Response
Service Provider	2/3 Yes Response

**Are you satisfied with RFYP's use of technology?**

<b>2023 Yes</b>	100%	<b>2023 No</b>	0%
<b>2022 Yes</b>	91%	<b>2022 No</b>	9%

*Comparison within groups: 2023 Yes Responses*

Case Managers	1/1 Yes Response
Medical Provider	7/7 Yes Response
Other	1/1 Yes Response
Service Provider	3/3 Yes Response

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

<b>2023 Yes</b>	92%	<b>2023 No</b>	8%
<b>2022 Yes</b>	91%	<b>2022 No</b>	9%

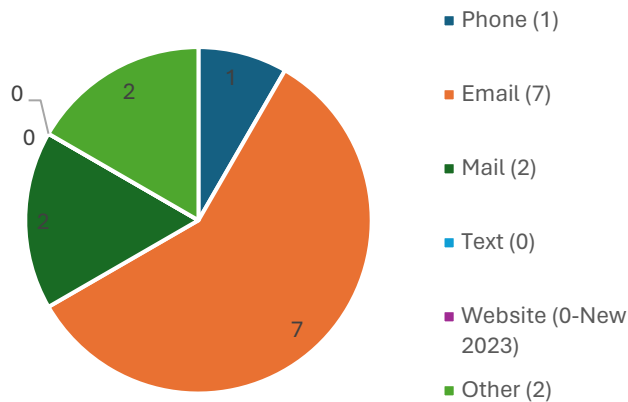
*Comparison within groups: 2023 Yes Responses*

Case Managers	1/1 Yes Response
Medical Provider	6/7 Yes Response
Other	1/1 Yes Response
Service Provider	3/3 Yes Response



How often would you like to receive information about RFYP's goals and accomplishments?	Every 6 months	25%
	Every 12 months	33%
	Not applicable	42%

Preferred method of communication with RFYP



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

*Case Management:*

- Agency plans to ensure member goal outcomes,
- Coordinator knowledge of progress and implementation
- Policy to address lack of attention to Case Managements questions and concerns

*Medical Providers:*

- How members' oral health goals are being facilitated
- Primary staff contact for clients
- Client status

*Other:*

- Camper's health/medical updates

*Service Providers:*

- Staff position changes
- Staffing updates and changes, seems like there's often a lot of changing faces and roles

### **Barriers and Influencing Factors**

It is important to note that there is a very low response rate from other providers (.07%). The feedback received represents a very small sample and does not represent the satisfaction of the diverse set of other providers that RFYP collaborates with on a daily basis.

### **What Did We Learn?**

The high turnover rate for Service Coordinators throughout 2023 has impacted communication with other providers. Service Coordinators are the staff that are responsible for most communication with other providers regarding the members they are serving.

### **What Are We Doing Well?**

1. All respondents reported 100% satisfaction with RFYP's use of technology and communication regarding the response to COVID-19.
2. There were 6 responses from medical providers. All six of the respondents reported they are satisfied with RFYP's services meeting the members' needs, respect of individual differences, use of technology, communication regarding COVID-19, sharing of information in a timely manner, and feel their communication experience with RFYP is positive.

Area of Concern	Proposed Improvement
The respondents reported a 8% decrease in satisfaction with RFYP sharing information in a timely manner.	Program Directors will check in with Service Coordinators (SC) regarding communication with Other Providers at the Wednesday SC meeting including timely responses to emails and voicemails, responding to requests for monthly updates from case managers and SC's reading documentation about their members so they are informed when giving updates.

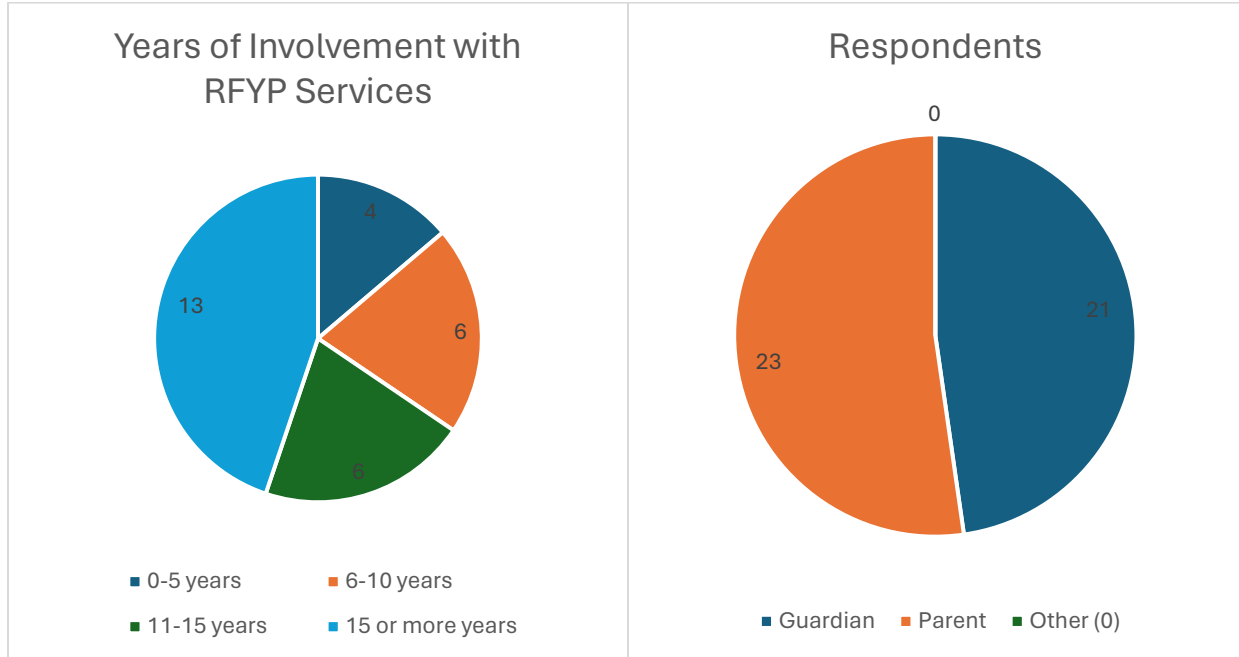


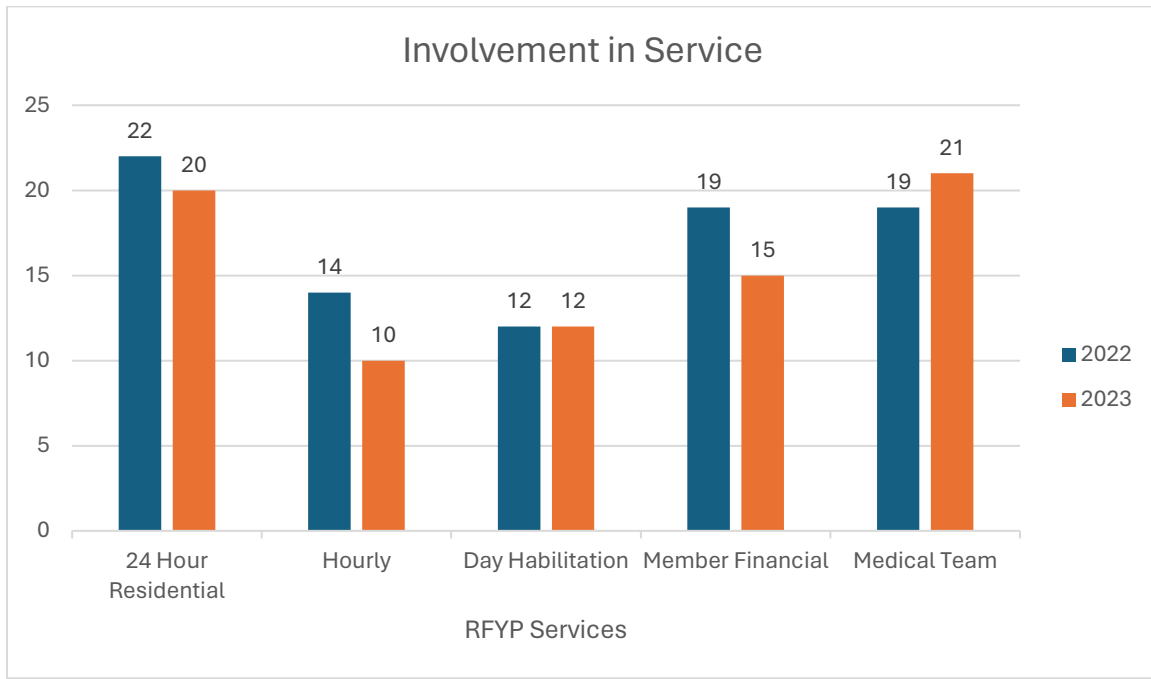
The proposed improvements will be implemented in January 2024, or as deemed appropriate by the RFYP administration. Progress on the proposed improvements will be reviewed in June 2024.

### Legal Guardian and Parent Satisfaction Survey Summary

Reach For Your Potential, Inc. (RFYP) conducted a survey to measure the satisfaction level of legal guardians and parents with the agency's services. Respondents can participate electronically via Survey Monkey or a paper survey option. There were 92 surveys distributed via email and USPS to legal guardians and parents 29 responses were received (32% response rate). The survey consisted of open-ended questions and yes/no questions which allows the participants to elaborate with comments.

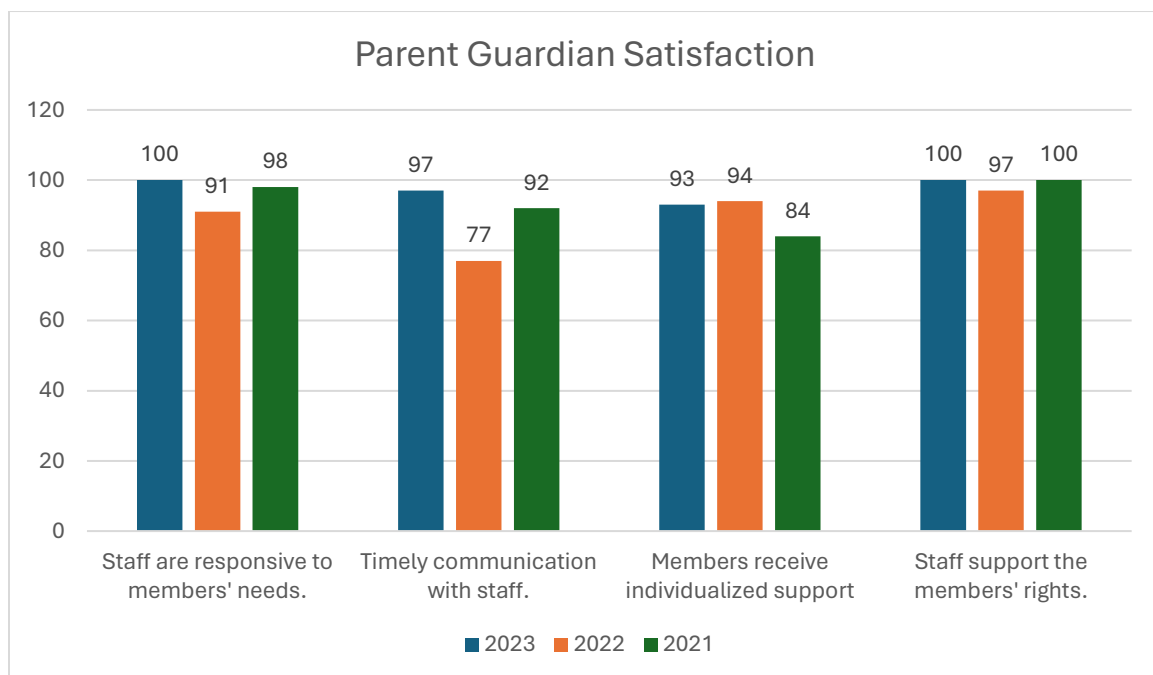
The 2023 Satisfaction Survey questions were analyzed and revised for relevance and clarity. The responses were analyzed to ensure data was clean, accurate, and complete. Survey results were compiled and sample responses are included. After gathering and reflecting on the results, the data was summarized 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 2024 and reviewed for progress in six months.



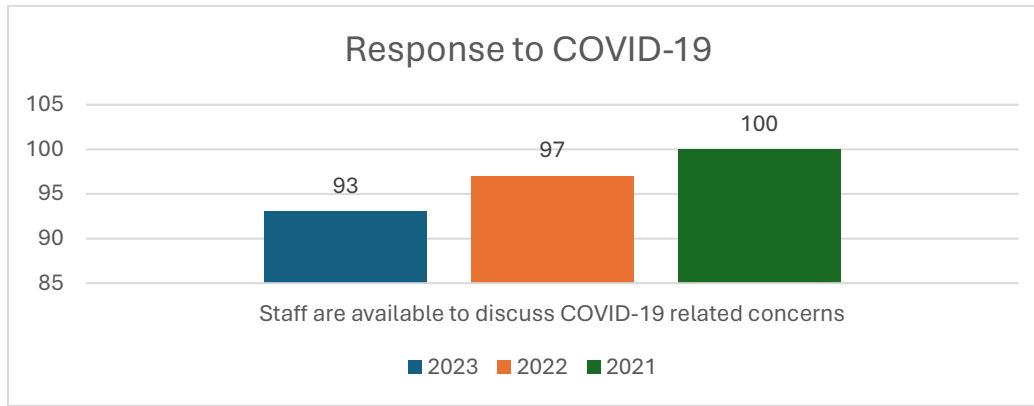


What are your favorite things about RFYP?	What areas can RFYP improve in?
<p>Outings</p> <p>Day care (Day Habilitation)</p> <p>They have Medical help available. They work hard at giving consumers the most independence he can have.</p> <p>24-hour care workers</p> <p>House staff is good</p> <p>Day trips</p> <p>Caring staff</p> <p>Helping member become independent</p> <p>They go the extra mile, they listen, &amp; try to improve.</p> <p>Safe</p> <p>Being close enough to provide help in an emergency situation</p> <p>The many wonderful things clients get to do to keep them busy and enjoy themselves. So many outings and interesting for them. Thank you all so much! Also. The great care...it's mostly above and beyond and so personal.</p> <p><b>KIND AND HELPFUL</b></p> <p>Staff professionalism, availability of office staff to assist in</p>	<p>Poor communication among staff to staff</p> <p>Teaching self-help for independent living</p> <p>Nothing</p> <p>Cooking</p> <p>The only thing that I can think of is to continue to learn more about traumatic brain injury.</p> <p>Reliable transportation, available drivers</p> <p>Quality and training of staff</p> <p>More staff that can drive. Thankful for the designated drivers specifically for Reach clients. Thank you!</p> <p>NONE</p> <p>More staff that can drive</p> <p>Being more creative with goals and ways to reach those goals.</p> <p>Communication</p> <p>None that we can think of.</p> <p>He is satisfied with just the errands. He is fifty years old and doesn't believe he needs anything else.</p> <p>Anticipating activates in local area which he enjoys &amp; keeps</p>

<p>times of crisis or concerns, genuine concern and respect for clientele</p> <p>The amount of independence clients are allowed.</p> <p>Keep residents busy. Staff is friendly.</p> <p>Stability and competence of caregivers. The practice patience with staff and clients, and with respect for staff</p> <p>Staff is easy to work with</p> <p>Taking him on errands</p> <p>Time with client 1:1 and arranging activities for him.</p> <p>Also managing his finances, and helping him with medical appointments</p> <p>The mission and goals of RFYP as they relate to the members</p> <p>The staff working with my brother truly care about him and are interested in his well-being.</p> <p>Full-service care, nursing &amp; medication management, rep payee</p> <p>The help, esp. finances &amp; daily living skills so that member can live as independently as possible; the respect for all the members; kind, available staff</p> <p>Personal touch. Better communication than previously</p> <p>Residence and accommodations</p> <p>CC, the caregiver!</p>	<p>him engaged .</p> <p>More group activities such as movies, bowling, dining out in restaurants. Involvement with grocery shopping.</p> <p>Paying employees more...they work so hard!</p> <p>Staff attention, need with respect for staff</p> <p>None</p> <p>Dietary guidance and meal planning</p> <p>Better training of the caregivers and close supervision.</p>
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## **COVID-19 Response and Communication**



## **Agency Use of Technology**

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

2023	2022	Comparison
Poor: 0%	Poor: 6%	-6%
Good: 41%	Good: 57%	-22%
Excellent: 59%	Excellent: 37%	+24%

## **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?

<b>2022 Yes</b>	97% Yes	<b>2022 No</b>	3%
<b>2023 Yes</b>	100%	<b>2023 No</b>	0%

Do you feel medical staff are accessible to communicate with you for routine questions and/or emergency situations?

<b>2022 Yes</b>	83%
<b>2023 Yes</b>	100%
<b>2022 No</b>	17%
<b>2023 No</b>	0%

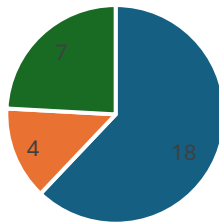
## **Member Financial (Payee) Support**

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

<b>2022 Yes</b>	89%	<b>2022 No</b>	11%
<b>2023 Yes</b>	88%	<b>2023 No</b>	13%

### Communication Preferences

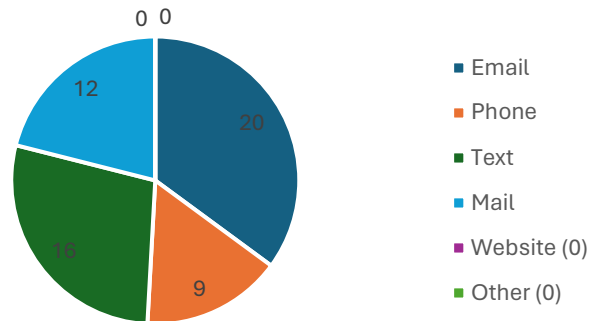
How often would you like to receive information about the agency?



■ Every 6 months ■ Every 12 months ■ Not applicable

How would you like to receive information about the agency?

(respondents can choose multiple responses)



■ Email  
■ Phone  
■ Text  
■ Mail  
■ Website (0)  
■ Other (0)

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

More of their improvements  
Staff changes and staff who is working with the consumer.  
Programming changes or special events  
Mental well-being, healthcare needs, social well-being  
Hiring process; qualifications they look for in employees; pay rate of hourly staff who are working most directly with clients  
Any changes and updates on Reach.  
CHANGES IN CARE  
Who's who regarding office staff; more informational background on new staff, especially on new SC's as they assume new positions or reassigned.  
I'm really just concerned about issues regarding our son.  
Residents' medical/health updates  
Health concerns about client. RFYP has done a great job especially during COVID.  
Problems encountered with client and anticipated activities  
Agency changes, staff affecting my son.  
New initiatives



Staffing updates, program changes  
 Is there still a board of directors/trustees who oversee the organization?  
 Financial stability, leadership  
 Important fiscal details  
 Healthy, everyday living plan - dietary, exercise plan  
 Changes in key positions

### **Overall Satisfaction with RFYP Programs**

2023	2023	2022	2022
<i>Day Habilitation</i>	<i>Residential Services</i>	<i>Day Habilitation</i>	<i>Residential Services</i>
Very Satisfied 41%	Very Satisfied 59%	Very Satisfied 26%	Very Satisfied 40%
Satisfied 17%	Satisfied 31%	Satisfied 20%	Satisfied 43%
Unsatisfied 0%	Unsatisfied 3%	Unsatisfied 3%	Unsatisfied 3%
Not applicable 41%	Not applicable 7%	Not Applicable 51%	Not Applicable 14%

### **Barriers and Influencing Factors**

RFYP acknowledges the low number of Service Coordinators available. The HR department is actively looking to recruit, hire, and retain Service Coordinators. Service Coordinators are the staff that are responsible for most communication with parents and legal guardians (in addition to the members' entire IDT) regarding the services that are being provided by RFYP.

### **What Did We Learn?**

The efforts that RFYP is making to provide quality services to members and transparent communication with guardians and parents is making a positive difference. Parents and guardians were more satisfied this year compared to the last two years with communication, responsiveness, individualized support, and supporting members rights.

### **What Are We Doing Well?**

1. Increase in satisfaction with Day Habilitation (+11) and Residential Services (+3).
2. Parents and guardians are very satisfied with the medical team's responsiveness to the needs of the members (100%) and that the medical team is available to communicate regarding routine medical questions and/or emergency situations (100%).

<b><u>Areas of Concern</u></b>	<b><u>Proposed Improvements</u></b>





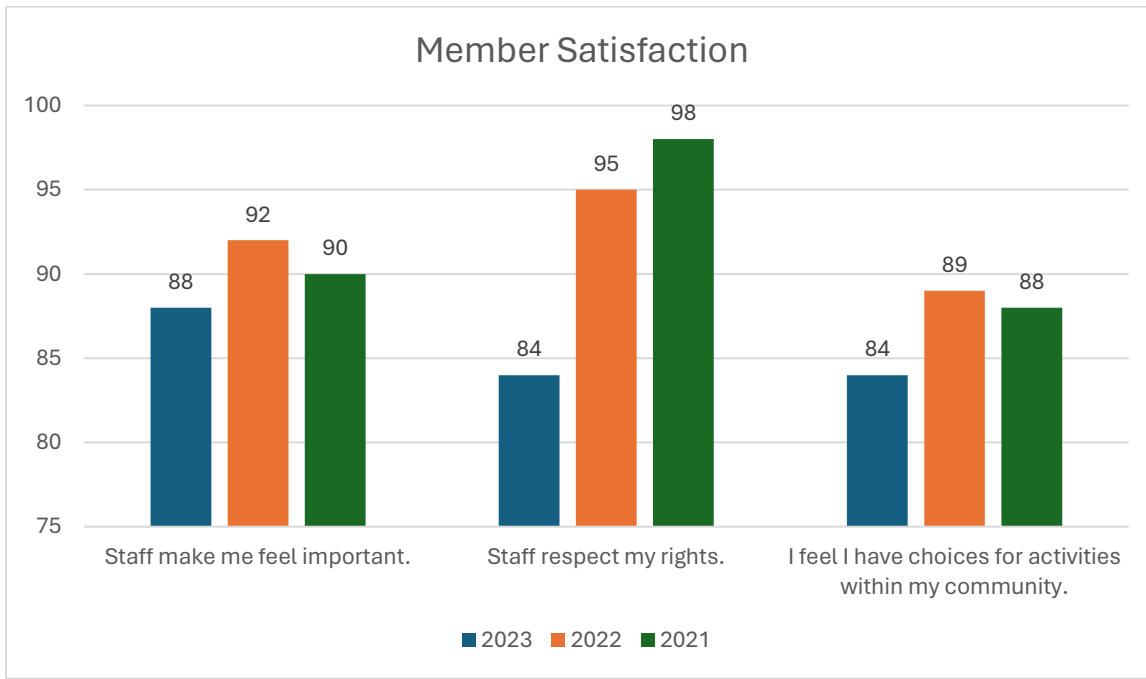
<p>There was a decrease in the response rate from parents and guardians for the 2023 satisfaction survey. 28 responses in 2023 and 36 responses in 2022.</p>	<p>Prior to the 2024 Satisfaction Surveys being distributed to parents and guardians, Service Coordinators will call or send a message to the parents and guardians they are working with to let them know o be watching for this in their inboxes or mailboxes. Service Coordinators will let the parents and guardians know that their input is valued and appreciated, and they will encourage them to take the time to respond to the survey. The goal is to increase the response rate of this group and obtain the feedback that RFYP needs for continuous quality improvement through reaching out personally to parents and guardians asking them to respond to the survey.</p>
<p>The proposed improvement will be implemented in January 2024, or as deemed appropriate by the RFYP administration. Progress on the proposed improvement will be reviewed in June 2024.</p>	

### **Residential Member Satisfaction Survey Summary**

Reach For Your Potential, Inc. (RFYP) conducted a satisfaction survey to measure the level of satisfaction of RFYP members participating in residential services. Surveys were distributed to all the current members receiving residential services with varying levels of functioning and from both site and hourly programs. The surveys were facilitated by RFYP staff and the data was entered into the Survey Monkey online survey platform. There were 68 survey responses returned out of 78 satisfaction surveys distributed (87% response rate).

The Satisfaction Survey questions were analyzed, simplified, 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 2024 and reviewed for progress in six months.

<b><u>Residential Member Services</u></b> <b><u>Survey Questions</u></b>	<b><u>2022 Yes Responses</u></b>	<b><u>2023 Yes Responses</u></b>	<b><u>Comparative Analysis: Yes Responses</u></b> <b><u>2022-2023</u></b>
Are you satisfied with the amount of attention you receive from your staff?	91%	84%	-5%
Do you have enough privacy in your home?	91%	90%	-1%
Do you receive information and answers to your questions quickly?	86%	68%	-18%
Do you get to choose parts of your daily routine?	90%	90%	No Change
Does staff help you to live a healthy lifestyle?	89%	90%	+1%
Do you feel safe in your home and community?	95%	90%	-5%
Do you feel staff respect and value you as an individual?	96%	84%	-12%
Are you satisfied with RFYP's use of technology?	94%	87%	-7%
Are you satisfied with the health care/medical supports you receive from the Medical Team?	89% (9% N/A)	90% (1% N/A)	+1%
Do you feel you are able to get answers to your questions about your finances (money)?	72% (20% NA)	76% (15% N/A)	+4%



**Please list your favorite games, crafts, and activities you like to do at home.**

- Watch the news
- Play blocks
- Play on the computer
- Watch movies and TV
- Listen to music
- Talk with my friends
- Bird watching
- Being outside
- Playing board and card games (BINGO, Pokémon, Monopoly, Sorry, Uno, War)
- Puzzles
- Cook
- Eat pizza
- Hangout with staff
- Sleep in
- Take naps
- Relax
- Play with Tinkerbell (cat)
- Baseball and football

**Please list your favorite places to visit in the community.**

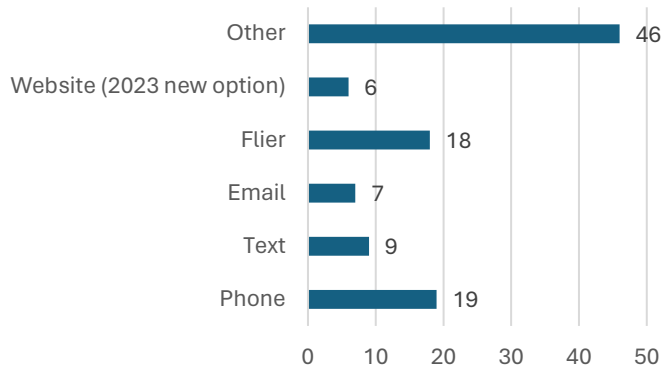
- Downtown
- Shopping
- Library
- Parks
- Taco Bell
- Coffee shops
- Parks and Rec
- My mom's house
- Wal Mart
- Red Lobster
- Studio 13
- Wendy's
- Camp Courageous
- Zoo
- Pizza Ranch
- Subway
- Hy-Vee
- Gas station
- Casino

- Watch Winnie the Pooh
- Watch The Price is Right

- Movie
- Stuff Etc.
- Java House
- Coral Ridge Mall
- Menards
- Carver Arena
- Old Capitol Mall

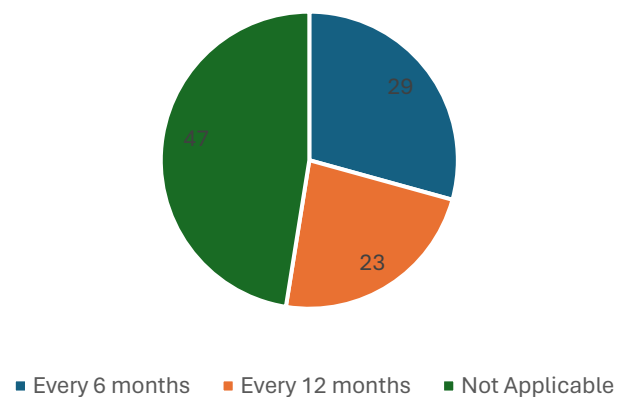
### Communication Preferences

How would you like RFYP to share agency information with you?



Members could choose multiple options.

How often would you like to receive updates about RFYP?



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

- Anything
- Trips
- Recipes
- New staff
- New procedures
- Parties
- Trips
- Exercise program
- Activities and outings

### **Additional Comments from Members**

- Help with finding a job, going to the zoo, taking vacations.
- I feel more positive about my life after moving into RFYP.

- Would like more independent outings/shopping
- Would like to have a paper with balance of savings each month. I would like to work with younger staff. I would like staff to spend more time helping me walk.
- Talk to staff about money, going out somewhere.
- Like Asma (staff) to help me at home. Calling my mom makes me feel safe.
- Feel like I need more medical support/assistance from home staff. Would like to have a chore list at home.
- Would like more staff for one-on-one outings.
- More accessible times for RFYP parties (evenings), more communication, be informed of things ahead of time.
- Make doorways bigger!
- I can hear everything from my bedroom and it scares me (bikes, motorcycles). The oven is also "a concern."
- Melissa does a great job. I like all my staff.

### **Barriers and Influencing Factors**

Service Coordinators are the staff that are responsible for most communication with other providers regarding the members they are serving. The high turnover rate for Service Coordinators throughout 2023 has impacted communication with other providers.

### **What Did We Learn?**

The members continue to want to remain active at home and in the community. They provided lots of examples of activities they enjoy and want to continue to participate in. This feedback will be the driving force behind the planning of activities at home and in the community.

### **What Are We Doing Well?**

1. Increase in members feeling they you are able to get answers to questions about finances (money) (+4%)
2. Slight increase in members feeling their staff help them live a healthy lifestyle (+1%).
3. Slight increase in satisfaction with health care/medical supports received from the Medical Team (+1%)

<b><u>Areas of Concern</u></b>	<b><u>Proposed Improvements</u></b>
18% decrease in satisfaction with members feeling they receive information and answers to their questions quickly?	RFYP purchased smart board monitors to install at a few residential locations to have the capability to push notifications to the homes from the office regarding the members' appointments and activity plans. The intention is that members' will have access to this information instantly and will feel that information is shared in a timely manner, they are aware of their personal schedules, and staff will be notified of the plans more efficiently.



The proposed improvements will be implemented in January 2024, or as deemed appropriate by the RFYP administration. Progress on the proposed improvements will be reviewed in June 2024.

### **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 email and paper copies. There were 63 survey responses returned out of 120 surveys distributed (53%). 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.

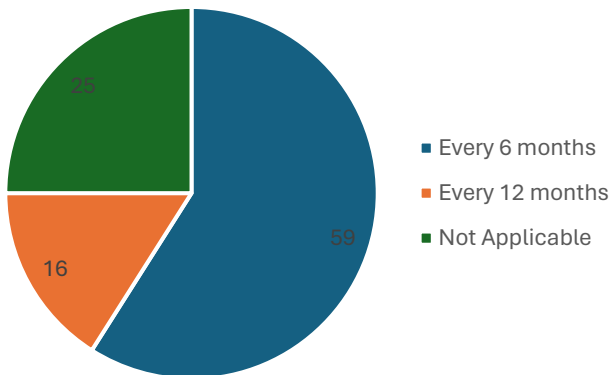
The Satisfaction Survey questions were analyzed and revised for relevance and clarity. The responses were analyzed to ensure data was clean, accurate, and complete. Survey results were compiled, and sample responses are included. After gathering and reflecting on the results, the data was summarized 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 of previous survey results are included in the summary. Action plans for continuous quality improvement will be implemented in January 2024 and reviewed for progress in six months.

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

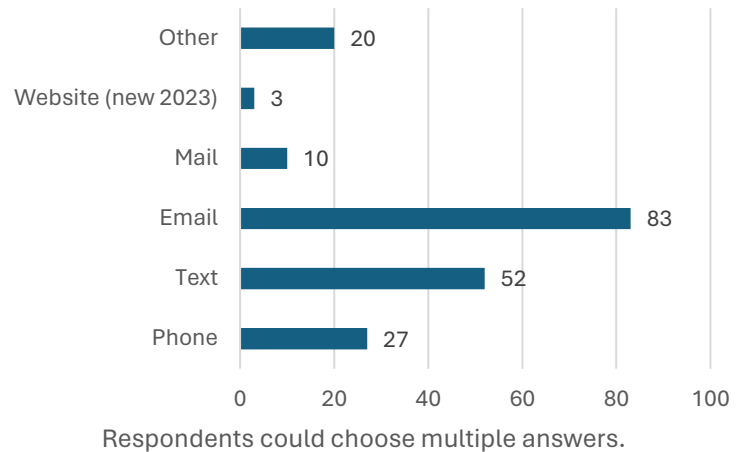
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I am satisfied with RFYP's use of technology.	8%	49%	42%	4%	59%	37%
I feel RFYP promotes a teamwork environment and a positive work culture.	8%	36%	56%	11%	43%	46%
I feel RFYP respects individuals and values their differences.	12%	32%	56%	6%	56%	38%

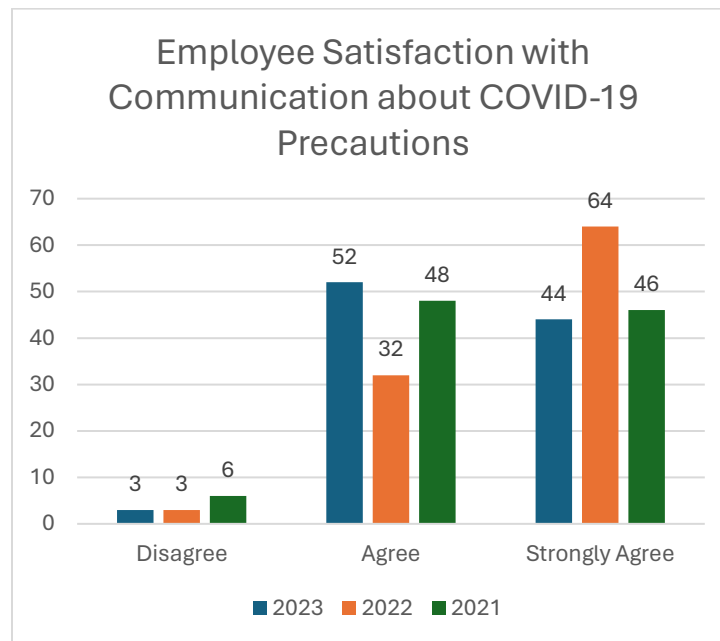
How often would you like to receive agency updates?



What format would you like to receive agency updates?



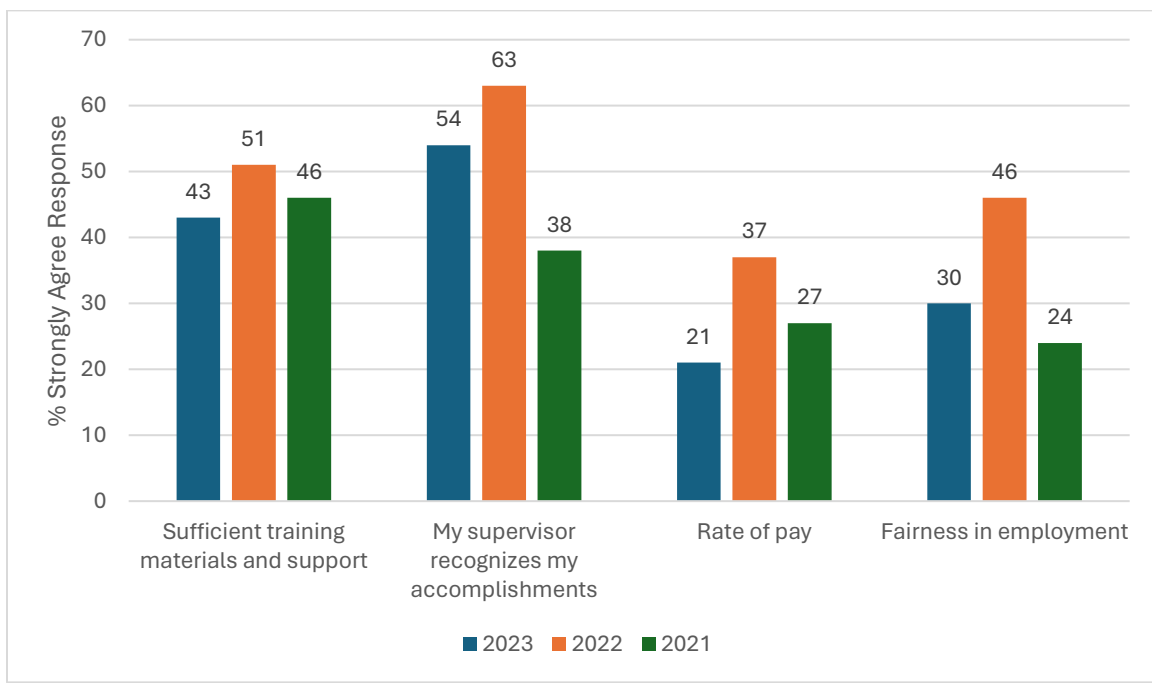




**What are the most important topics that you would like RFYP to share with you about the agency's goals and accomplishments?**

- Benefits and job openings
- Management of emergency crises
- Update on training available
- The agency's news
- Benefits
- How was annual evaluation of the agency
- Growth & Strategic plan
- Good news within agency about individual accomplishments and staff achievements
- Future planning and what's on the horizon
- How agency does in audits
- Employment advancement opportunities posted at homes
- The wellbeing of the members
- Relevant courses (training)
- How each area of RYFP truly affects the use of funds
- The little things that RYFP is doing to improve its quality of services.
- Ways that the agency has positively impacted the members.
- Progress made since the year before
- Agency progress and achievements related to audits and CARF
- Agency financial budget

## Comparative Analysis







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

- Hold regular meetings with staff to listen to their ideas and to solve any problems they might face during their work with the members.
- I am happy with the changes made over the past 2 years. Thank you.
- Visit the houses and pay attention to cleanliness.
- Increase the employees' rate of pay.
- Focus on true teamwork, decrease separation of office staff vs house staff, have more open communication, be more proactive and put staff first.
- Sometimes it feels like there is not enough time in the day to finish everything. Sometimes seems overwhelming.
- Motivate employees to do their best by encouraging and congratulating them.
- Effective communication related to what specific things are going on in the homes with the members.
- Creating life skills classes/sessions where member can learn basic life skills that will improve/increase their level of independence.
- Increase how we use technology to accomplish tasks.
- Respect between the company and staff.
- More follow through on staff accountability.
- Meetings with staff to explain the agency's finances. Where the company is and where they want to go. What plans they see for the future.
- More meetings between department groups to get on the same page.
- I like the way we work.

Barriers and Influencing Factors

RFYP employs many staff that are college students at Kirkwood Community College and University of Iowa. As a result of this, RFYP has to be flexible with scheduling and accommodate the academic calendar. This influences turnover, retention, and scheduling.

What Did We Learn?

A majority of staff reported the main reason they choose to work at RFYP is because they deeply care about the members and love helping people. The Human Resources department has put in monumental efforts to provide staff the training and professional development needed to help make staff feel successful at their job starting on day one of orientation.



### **What Are We Doing Well?**

1. 100% of staff reported they agree or strongly agree that they feel they have sufficient training materials and support to perform their job well.
2. RFYP respects individuals and values their differences (+6%).
3. My supervisor encourages and supports my personal and professional development. (+1%).

<b><u>Areas of Concern</u></b>	<b><u>Proposed Improvements</u></b>
There was a 7% decrease in satisfaction regarding staff feeling their ideas about improving services are valued.	“Stay interviews” just started being facilitated by Human Resources with 5 staff per month who have been working at RFYP 6 months or longer. This provides a safe space for staff to discuss what is going well, frustrations, and ideas for improvement. It also helps reinforce the “open door policy” and demonstrates to staff that RFYP is appreciative of their feedback. This procedure will continue throughout 2024.
There was a 3% decrease in satisfaction with staff feeling RFYP promotes a teamwork environment and a positive work culture.	Service coordinators schedule team meetings with the staff at the houses they supervise each month. HR department will join the meetings when appropriate to build rapport with the staff, listen to their input on what is going well, get an update on the daily routines and lifestyles of each member, and listen to the ideas of the staff for improvements.

The proposed improvements will be implemented in January 2024, or as deemed appropriate by the RFYP administration. Progress on the proposed improvements will be reviewed in June 2024.



## Performance Outcomes Summaries

### **2023 Annual Performance Outcomes Summary: Day Habilitation**

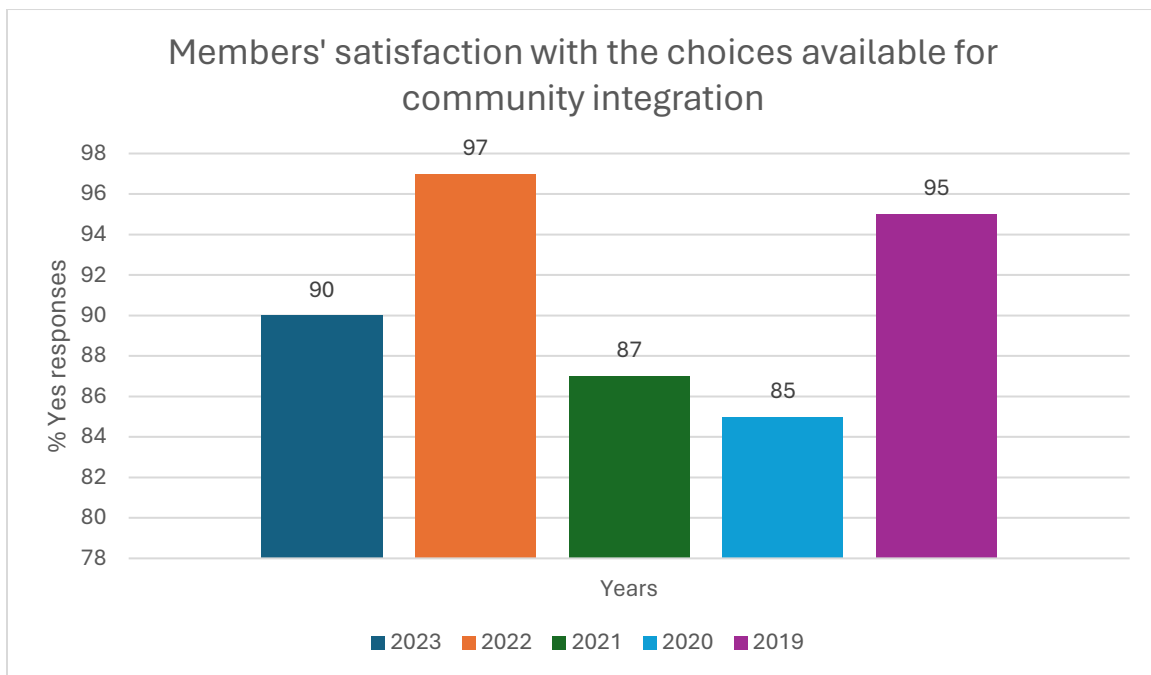
RFYP is committed to performance improvement through proactive and ongoing review, analysis, reflection, and transparency on goals and objectives for both service delivery and business functions. The results of the performance analysis for the Day Habilitation program are used to identify and implement 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.

#### ***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*
- 2023 Performance Outcome | 90% Satisfaction with the choices available for community integration

##### **Comparative Analysis:**



**The performance target for this objective was met.** This data was collected via the 2023 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:** Coffee shops and community outings with food and beverages options are very popular choices.

**Causes:** Community integration is high priority for the program. The members provide monthly input to the facilitator on community outings they want to go on, and the facilitator creates the schedule based on their input.

**Impact of Extenuating Factors:** Weather, staffing, transportation, seasonal changes, and the current status of COVID-19 impact community outings.

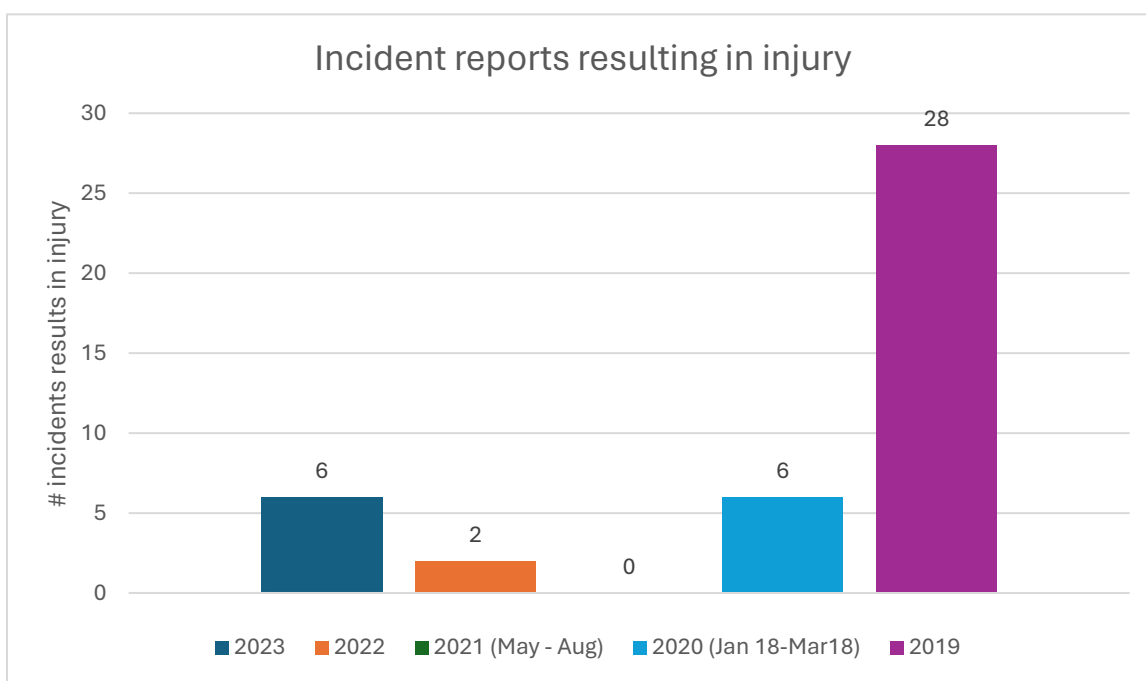
**Objective #2: RFYP maintains a physically safe day habilitation environment resulting in low injuries.**

- *Annual Performance Target | Maximum of 28 incidents total requiring basic first aid and incidents resulting in injury*
- **2023 Performance Outcome | 6 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:



**Trends:** The two incidents were isolated and no patterns were established.

**Causes:** The smaller group size, proactive environmental safety preparation, and individualized attention reduces the risk of injury.

**Impact of Extenuating Factors:** The Day Habilitation continues to operate at a lower capacity to mitigate the risk of spreading COVID-19.





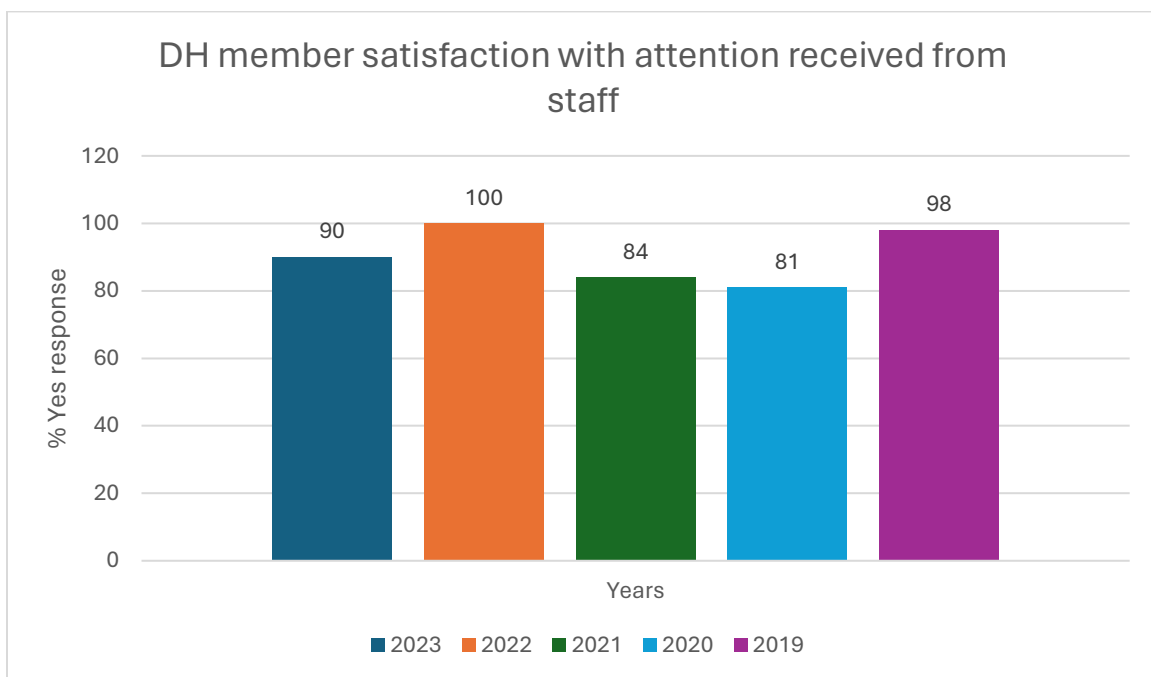
## Domain 2: Experience of Services Received and Other Feedback from Persons Served

### 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*
- *2023 Performance Outcome | 90% Day Habilitation Member Satisfaction reported on the Day Program Satisfaction Survey*

**RFYP met the performance target for this objective.** This data was collected via the 2023 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





**Trends:** The smaller group size allows for more 1:1 individual care and attention. Members like to participate in games, puzzles, crafts, discussions and eat lunch with staff.

**Causes:** The smaller ratio allows for quality relationships and trust between members and staff.

**Impact of Extenuating Factors:** Staff turnover impacts consistency and long term relationship building.

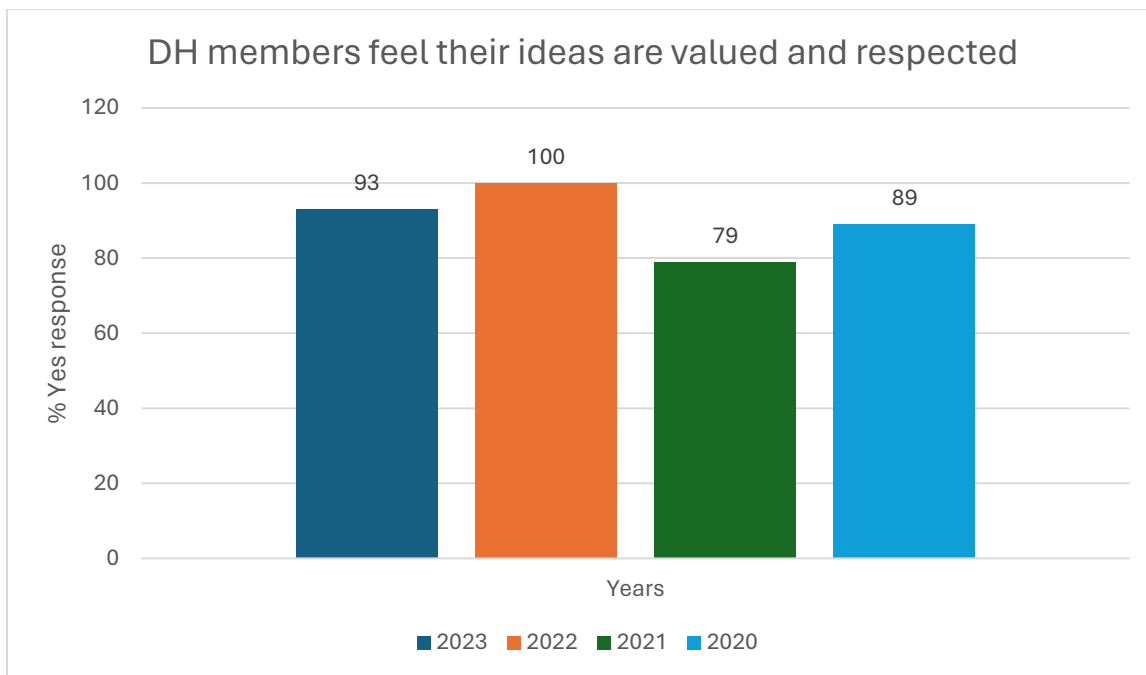
**Objective #2 - Members feel their ideas are valued and respected**

- *Annual Performance Target | 85% of members in the Day Habilitation program feel their ideas are valued and respected*
- 2023 Performance Outcome | 93% of members in the Day Habilitation program feel their ideas are valued and respected

**RFYP met the performance target for this objective.** This data was collected via the 2023 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:**

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**Trends:** Members provide input for outings and activities at least monthly and share ideas on a “dream board” of ideas on the wall throughout the month.

**Causes:** Day Habilitation programming is designed to meet the needs of the members and provide person-centered services.

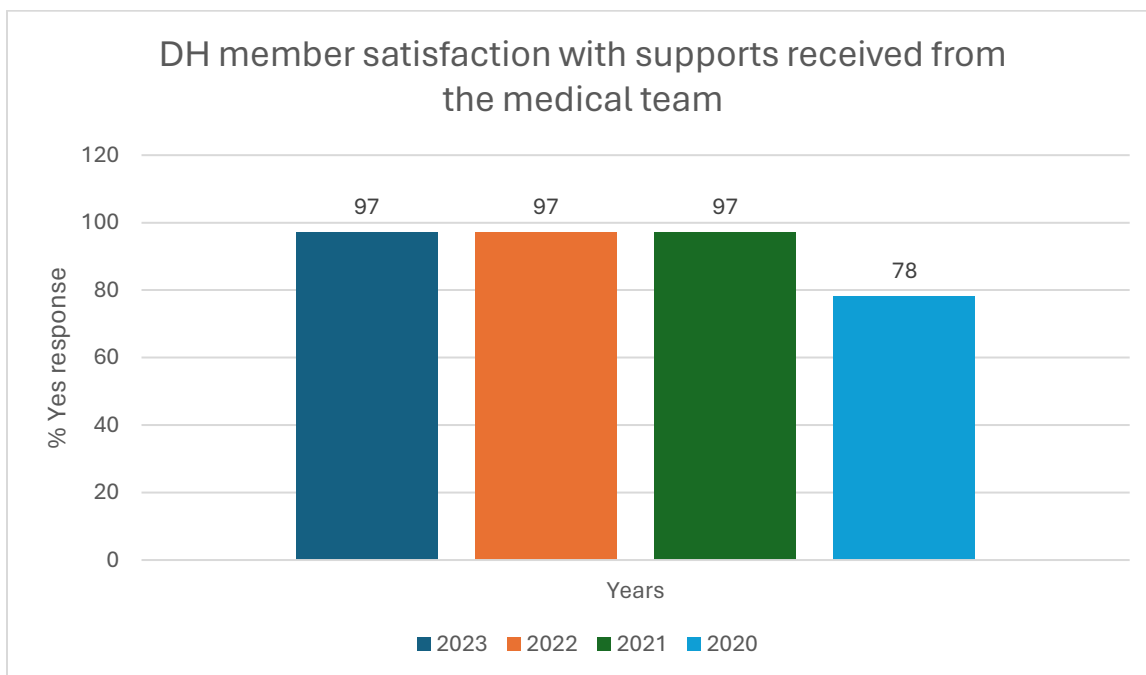
**Impact of Extenuating Factors:** The Day Habilitation staff cannot accommodate ideas for larger trips out of town or in crowded indoor spaces. The Day Habilitation plans outings for the whole group daily

### 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*
- **2023 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 2023 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 RFYP nurse and medical team assistants visit with members at the Day Habilitation on a regular basis to check in with them and informally assess how they are feeling.

**Causes:** The time spent increases trust between the members and RFYP nurse and provides an opportunity for informal assessments of the members' mental and physical health.

**Impact of Extenuating Factors:** The medical team has had very low to no turnover over the past few years. This consistency in staffing has helped the members build trust with the medical team.

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

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

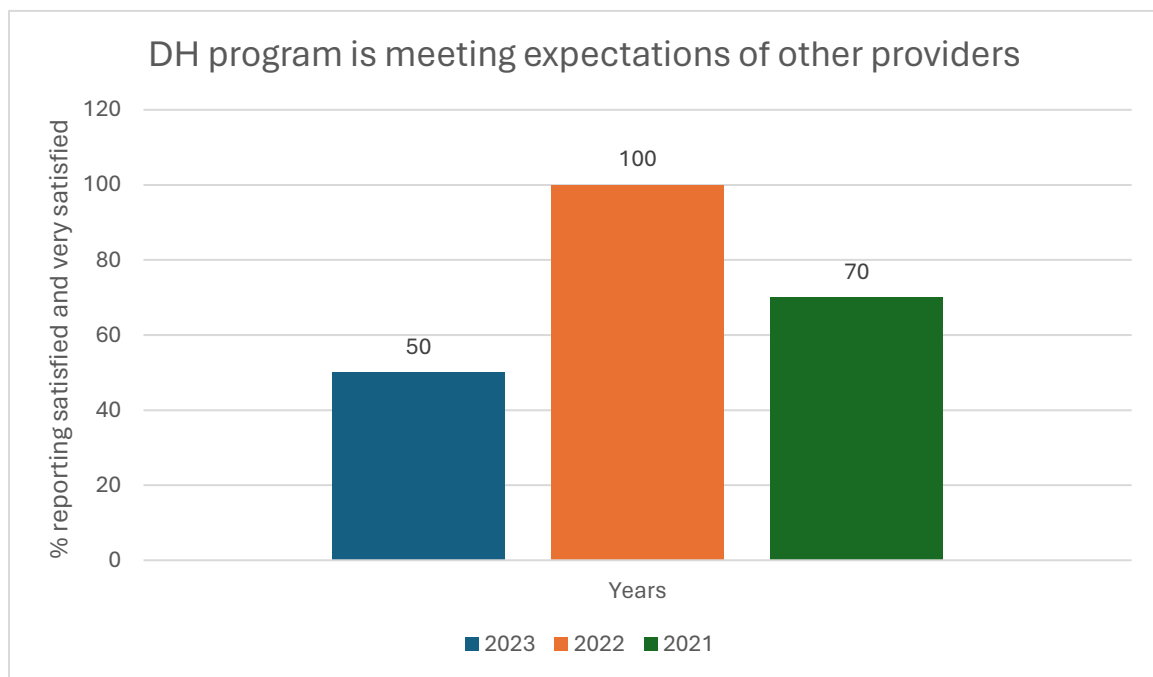
- *Annual Performance Target | 85% of stakeholders report the day program services are meeting their expectations*



- 2023 Performance Outcome | 50% 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:



**Trends:** A few Case Managers are asking about RFYP expanding their program hours.

**Causes:** Stakeholders would like the members to be active and in programming.

**Impact of Extenuating Factors:** Hiring staff for the Day Habilitation program, is more challenging because staff need to be comfortable with personal cares, vaccinated for COVID-19 and available during day shift hours. RFYP is considering adjusting the hours of the program, however this transition is complicated and will take time. Additionally, it is important to note that there were only 2 applicable responses for this question on the satisfaction survey. It is safe to assume that this is **not** the feeling of all of the stakeholders that RFYP DH collaborates with.



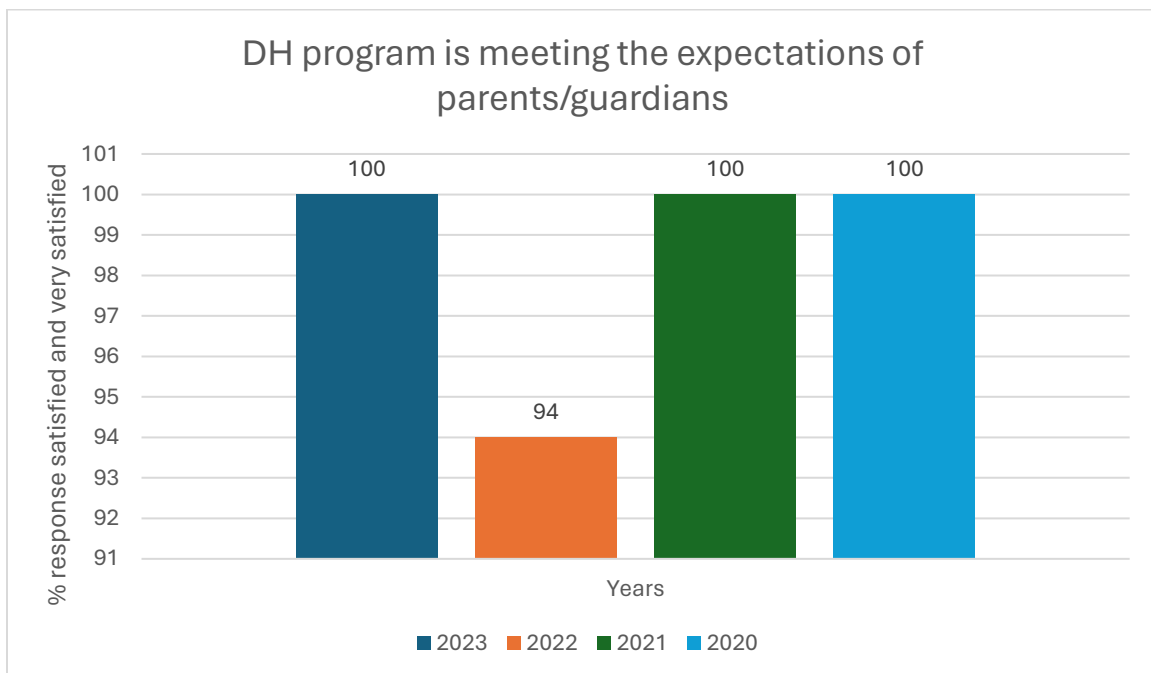
**Action Plan for Improvement:** RFYP Administration will discuss the options for expanding program hours, hiring staff, and ensuring transportation and staff are available.

**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*
- **2023 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:**



**Trends:** Staff consistently engage in communication via email and encourage guardians to visit the Day Habilitation.



**Causes:** RFYP follows through with the Service Coordination and Open Door policies.

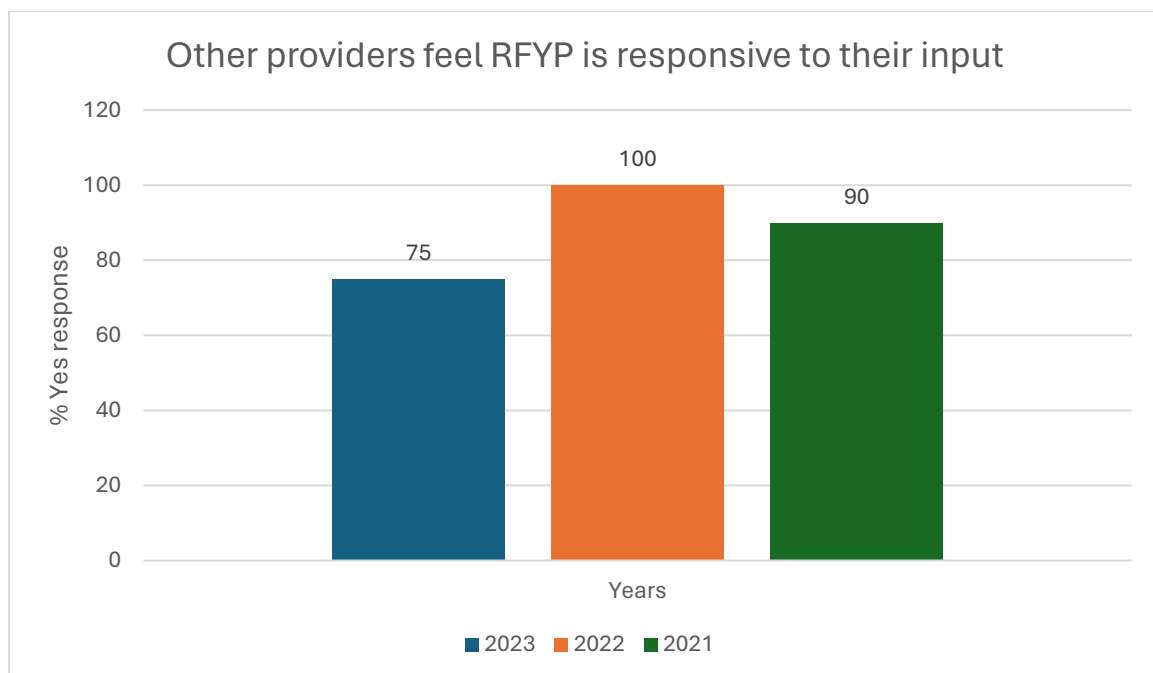
**Impact of Extenuating Factors:** Guardians appreciate the transparency and quick response times regarding health status of the members.

**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.
- 2023 Performance Outcome | 75% of other stakeholders report they feel RFYP is receptive to their requests/suggestions/inquiries.

**RFYP did not meet 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:** RFYP seeks input regularly regarding the members' goals, schedules, desires, and daily routines. RFYP implements what is in the scope of services the agency can provide.

**Causes:** RFYP follows through with the Service Coordination Policy and ensures the interdisciplinary team (including the member) are involved when developing annual goals. RFYP seeks input at ISP meetings, informal communication, satisfaction surveys, etc.

**Impact of Extenuating Factors:** There is a low response rate for the satisfaction surveys. The satisfaction score is not representative of all stakeholders. RFYP frequently engages in discussions about the scope of what RFYP the Day Habilitation to ensure the team has realistic expectations.

**Action Steps for Improvement:** After RFYP staff receive the input and implement the suggestions that fall into the scope of services RFYP can provide, staff will follow back up with the person that made the suggestion. This way they know their input was appreciated and implemented.

#### **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**

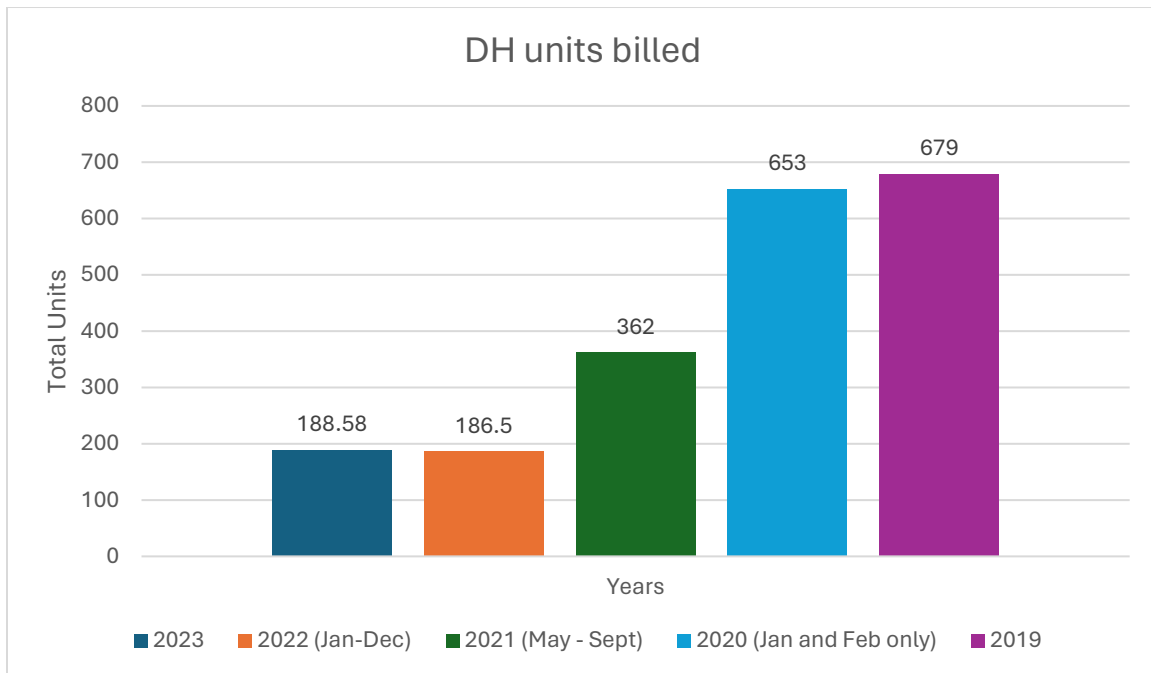
- *Annual Performance Target | 200 units billed per month on average*
- *2023 Performance Outcome | 188.58 units billed per month on average*

**RFYP did not meet 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 January 1, 2023 – December 31, 2023.

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**





**Trends:** The RFYP Day Habilitation roster, daily schedule, and staffing patterns are lower than before the pandemic.

**Causes:** The changes in the members' schedules at the day habilitation are due to staffing and billing patterns.

**Impact of Extenuating Factors:** The members' schedules vary each day due to their participation in other programming such as work, appointments, and other day programs.

**Action Plan for Improvement:** The RFYP financial department and Program Director of the Day Habilitation will reevaluate the performance target for 2024. Additionally, the hours of operation and schedules of the members will be reevaluated to see if the program can accommodate more members for a longer period of time.

### ***Domain 5: Service Access Measures***

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

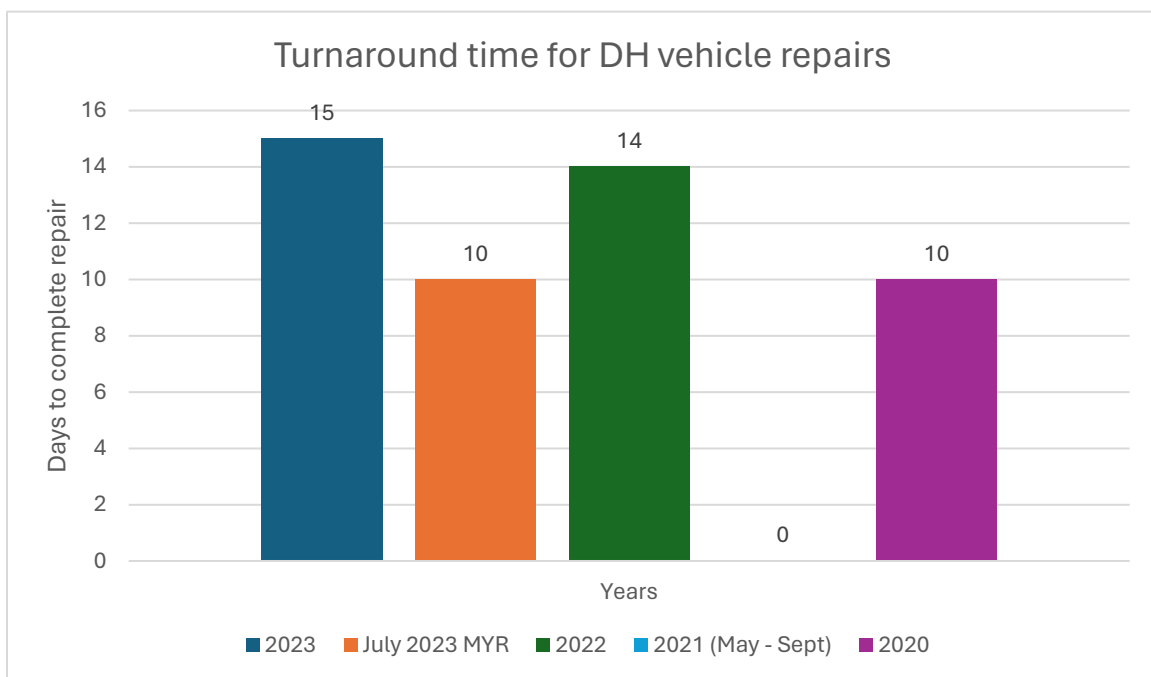
- *Annual Performance Target / 15 days or less wait time from received date to completion date for Day Habilitation vehicle maintenance requests*



- 2023 Performance Outcome | 15 days average wait time from received date to completion date for vehicle maintenance requests

**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.

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 needs 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:** Due to the specialty of the lift vans there are limited options for repair/service shops. Most vehicle maintenance tasks are for oil changes and general maintenance since many of the vehicles are new or leased.

**Causes:** Turnaround time is impacted by the schedule of the local vehicle maintenance businesses.



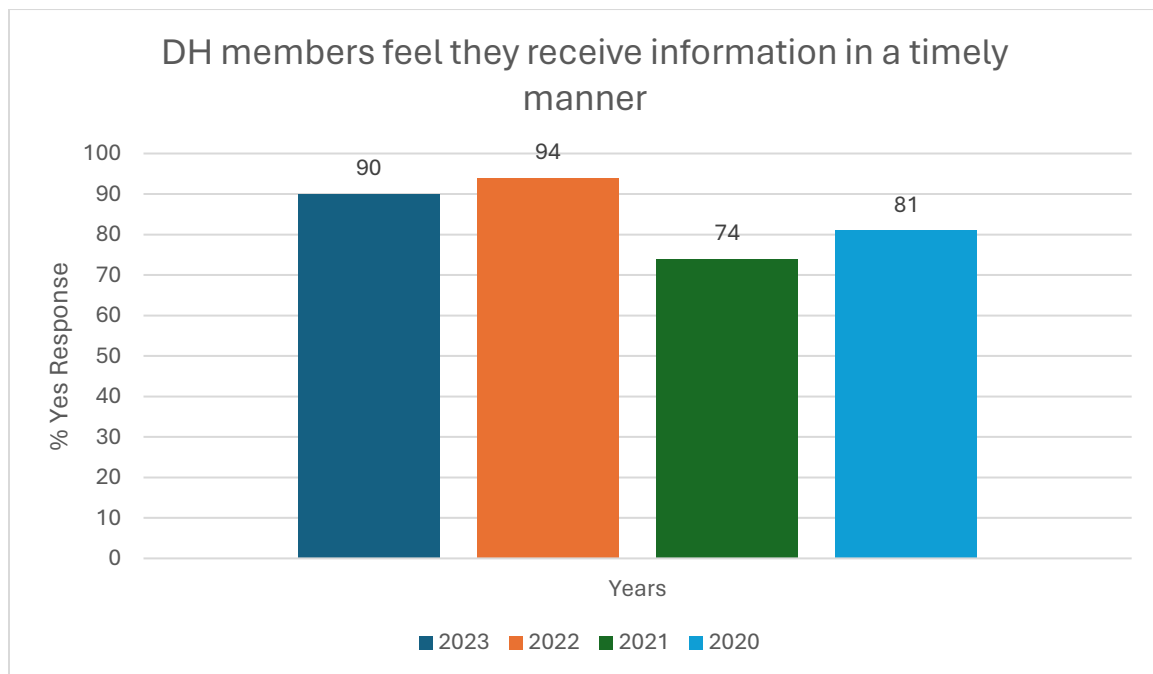
**Impact of Extenuating Factors:** Lift van repairs and maintenance take longer to complete. The lift van repair turnaround time was 41 days. RFYP adjusted the target to be 15 days for 2023 due to supply shortages are impacting repair shops. The lift vans also are more specialized and have more technology in the van. This requires a specialized maintenance shop to do the repair with special parts and slows down the repair turnaround time.

**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*
- **2023 Performance Outcome | 90% of day habilitation members report they feel they receive information and answers to their questions in a timely manner**

**RFYP met 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 seeking information about what the upcoming outings will be and what the end of the month party theme will be.



**Causes:** Communication and timely response times are strong due to the small member to staff ratio.

**Impact of Extenuating Factors:** Most members attend 2 days per week and may have to wait for their answer due to their Day Habilitation schedule.

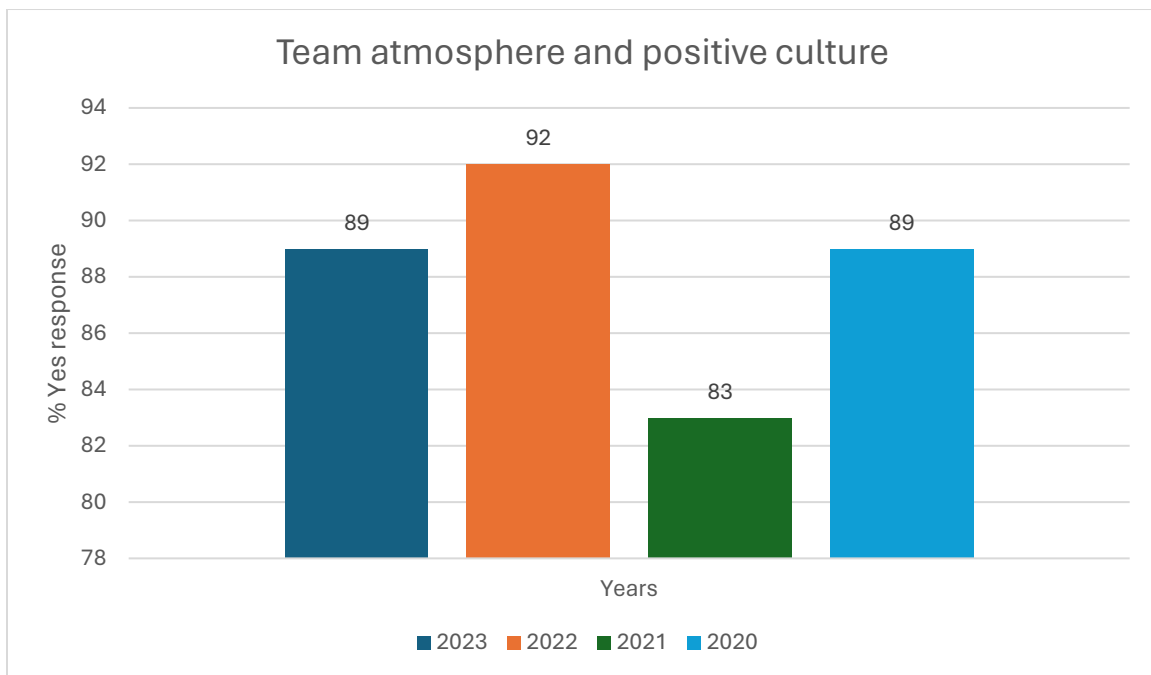
### ***Domain 6: Business Function Measurement***

#### **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*
- *2023 Performance Outcome | 89% of staff responding feel RFYP has a positive agency culture*

**RFYP met the performance target for this objective.** This data was collected via the Employee 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:** Staff appreciate the supportive work culture, staff appreciation parties, retainment bonuses, and RFYP swag (especially RFYP shirts). Staff are feeling appreciated for their work and dedication to the agency and members.

**Causes:** The change in the staff training model to staff development model. The HR department is taking a lot of time to grow the skills of the staff and ensure they feel appreciated for their time, dedication, and commitment.

**Impact of Extenuating Factors:** HR is seeking additional service coordinators and putting more effort into supporting service coordinators with people-management skills.

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

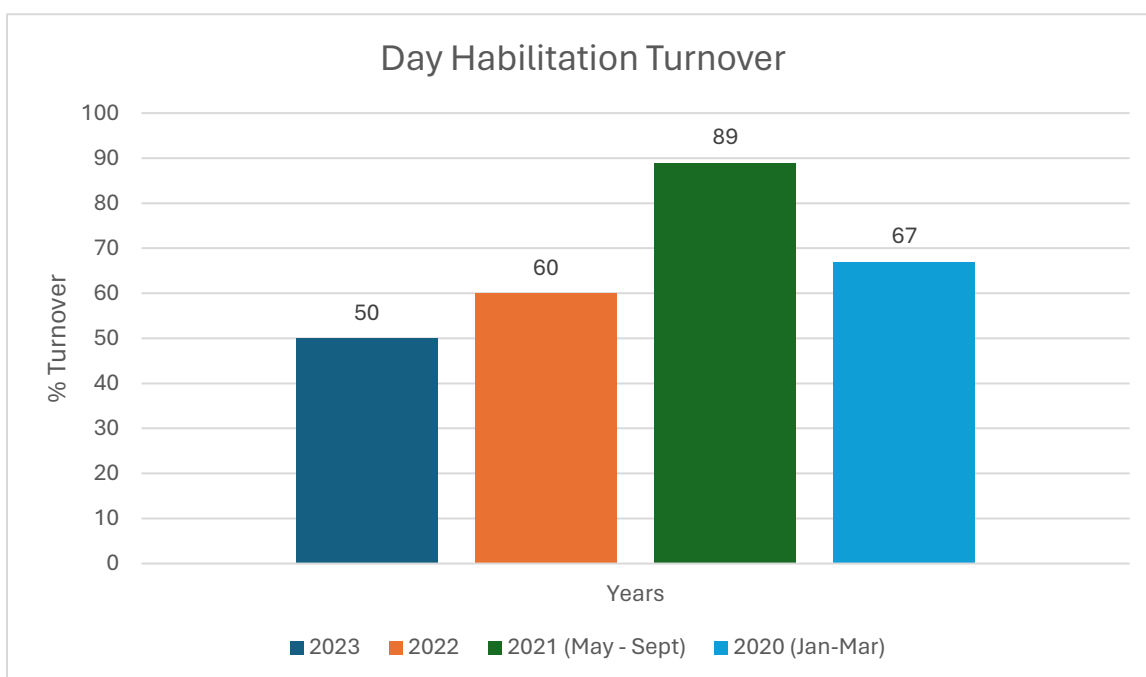
- *Annual Performance Target | 60% Day Program Staff Turnover Rate*
- *2023 Performance Outcome | 50% Day Program Staff Turnover Rate*

**RFYP met the performance target.** This data is collected through personnel data in ADP software and is maintained by the Human Resources 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



**Trends:** All terminations from the Day Habilitation program were voluntary due to personal circumstances.

**Causes:** The agency has adopted a new approach to staff development. Human Resources and supervisors are committed to taking a retraining approach instead of disciplinary approach. The HR department and supervisors are taking time to understand the gaps and challenges staff are facing, identify root causes of issues, and creating a more supportive culture.

**Impact of Extenuating Factors:** The agency hired a second Day Hab Facilitator to be active with the direct care staff and work on the floor with the members alongside the staff. This additional support for direct care staff helps build confidence in the staff and more opportunities for ongoing, informal coaching and mentoring from the facilitator. Additionally, staff like the Day Habilitation program work schedule (8am-4pm). Staff work a consistent day time schedule with a reduced number of members.



## Day Habilitation Performance Indicators

Day Habilitation 2024															
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	2023 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. RFYP 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	90%	Yes	97%	Activity calendars are planned based on the input of members. There are daily opportunities for community outings	11/1/23-12/31/23	Spring 2024	1
SDOH: Neighborhood and Build Environment	2. RFYP 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 and incidents resulting in injury per year	6	Yes	2	Including basic first aid and incidents resulting in injury for calculating the performance target	1/1/2024-1/30/2024	Spring 2024	2
Domain 2: Experience of Services Received and Other Feedback from <u>Persons Served</u> : 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	2023 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	90%	Yes	100%	Attention towards members is discussed at weekly staff meetings.	11/1/23-12/31/23	Spring 2024	3
Internal Focus Area	2. DH Members feel their ideas are valued and respected.	% 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 input is heard and drive decisions for their services	QA Department, SC, and Program Director	85% reporting YES	93%	Yes	100%	Showing members respect is discussed at weekly staff meetings.	11/1/23-12/31/23	Spring 2024	1
SDOH: Health & Health Care	3. DH Members are satisfied with the individual supports received from the medical team	% 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 mental and physical health care needs are prioritized and attended to promote their health and safety	QA Department, SC, and Program Director	85% reporting YES	97%	Yes	97%	Medical team has staff that have been at RFYP for a long time. This consistency helps with member satisfaction and consistency in care.	11/1/23-12/31/23	Spring 2024	2
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															
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	2023 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. Day Program services are meeting the expectation of Other Providers	% of satisfied and very satisfied responses on the Other Stakeholder Satisfaction Survey	Other Providers	Annually (October)	Other Provider Satisfaction Survey (electronic or paper survey option)	RFYP is prioritizing expectations of other providers to ensure high quality programming for the member.	QA Department, SC, and Program Director	85% reporting Satisfied or Very Satisfied	50%	No	100%	Low response rate. Only 2 responses for this question. RFYP gathers information from other providers in multiple ways.	11/1/23-12/31/23	Spring 2024	1



Internal Focus Area	2. Day Program services are meeting the expectation of Parents/Guardians	% of Yes responses on the Parent/Guardian Satisfaction Survey	Parent/Guardians	Annually (October)	Parent/Guardian Satisfaction Survey (electronic or paper survey option)	RFYP is prioritizing expectations of parents and guardians to ensure high quality programming for the member.	QA Department, SC, and Program Director	85% reporting YES	100%	Yes	94%	RFYP seeks input from guardians and other stakeholders regularly.	11/1/23-12/31/23	Spring 2024	1
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 open communication experience to provide quality person-centered services.	QA Department and Program Director	85% reporting YES	75%	No	100%	RFYP implements the suggestions, however changes to programming can take longer than other providers would like.	11/1/23-12/31/23	Spring 2024	2
Domain 4: Efficiency measures: Resources Used and Results Achieved for the Persons 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	2023 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	188.58	Yes	186.5	Members' schedule and health changes quickly. This impacts their attendance at the DH.	1/1/2024-1/30/2024	Spring 2024	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	2023 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	Program Director	15 business days or less on average annually	15	Yes	14	Vehicle maintenance repair businesses experiencing slow shipping times and delays in scheduling repairs.	1/1/2024-1/30/2024	Spring 2024	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	90%	Yes	94%	Low ratio of members to staff	11/1/23-12/31/23	Spring 2024	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	2023 Actual Results Achieved	Perf. Target Met (yes/no)	Previous Year Results	Describe Exacerbating 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	92%	RFYP supports staff in a variety of ways to improve agency culture including staff parties, bonuses, stay interview, and referral/retention bonuses.	11/1/23-12/31/23	Spring 2024	1
RFYP Internal Focus	2. Decreasing day habilitation personnel turnover rates.	Day Habilitation Turnover Rate	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.	Human Resources Director	75% (new 2022)	50%	Yes	60%	RFYP currently has a low staff to member ratio.	11/1/23-12/31/23	Spring 2024	2

## 2023 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.

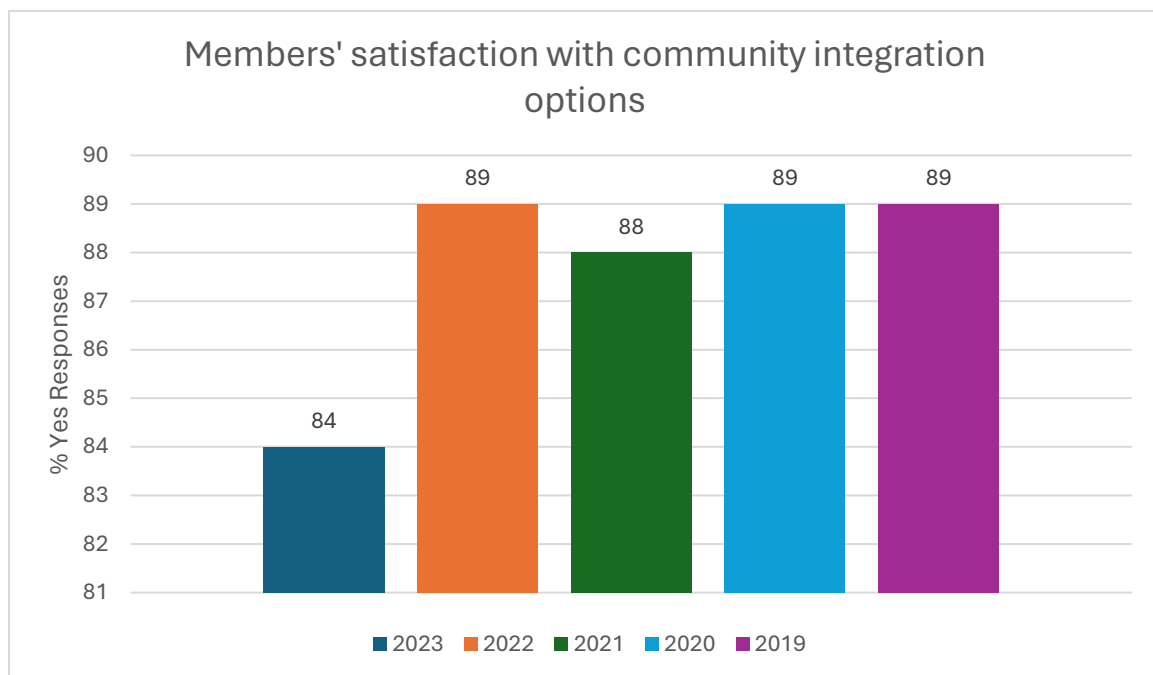


## Domain 1: Results Achieved for Persons Served

### 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*
- **2023 Performance Outcome | 84% of RFYP members report they feel RFYP provides choices for community integration**

#### Comparative Analysis



**RFYP did not meet 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:** RFYP members enjoy in-house activities and community outings such as going to the movies, bowling, and participating in Aktion Club. RFYP plans weekly options for activities on the Engagement Calendar. The calendar is developed with ideas from the members and outings they've reported that they have enjoyed in the past.

**Causes:** RFYP follows through with the Community Integration Policy. The agency tracks weekly engagement to ensure all members are engaged in their community and with their peers.

**Impact of Extenuating Factors:** The target was missed by only 1%. The health of the members, weather, staffing, and transportation impact community outings and participation in activities.

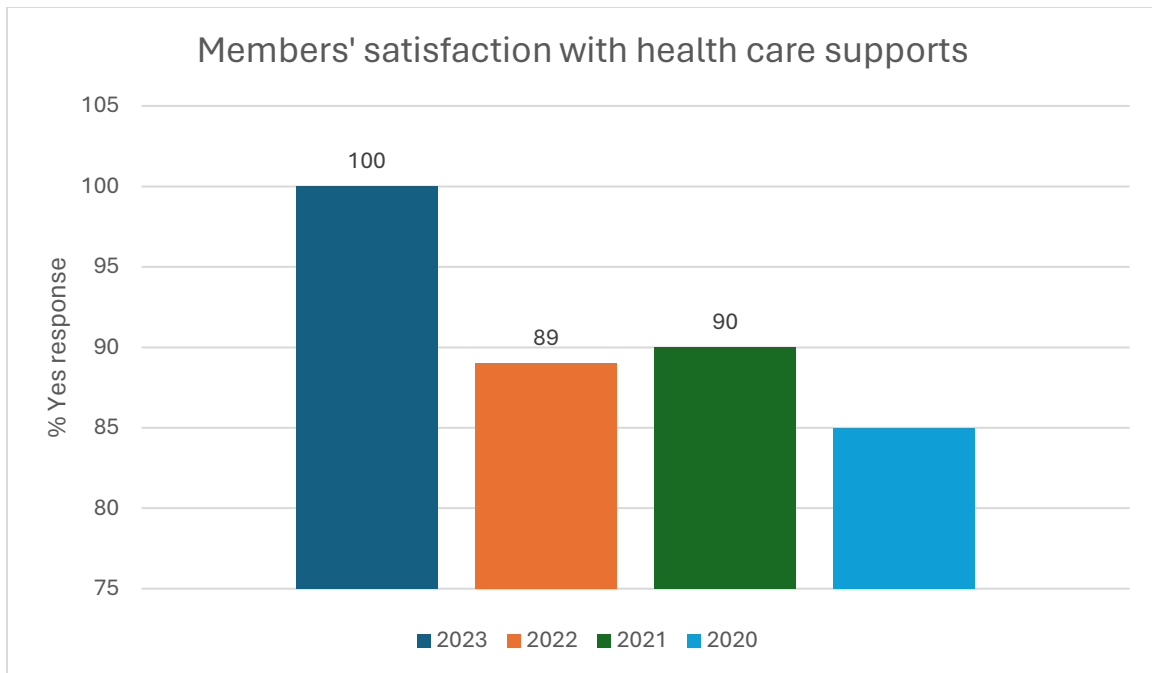
**Action Plan for Improvement:** Continue to offer community outings that are suggested by the members. Also, seek more responses to the Satisfaction Survey so the agency can get feedback based on a larger number of responses.

## **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*
- **2023 Performance Outcome | 100% 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:** Members have a strong relationship and strong level of comfort with the medical team.

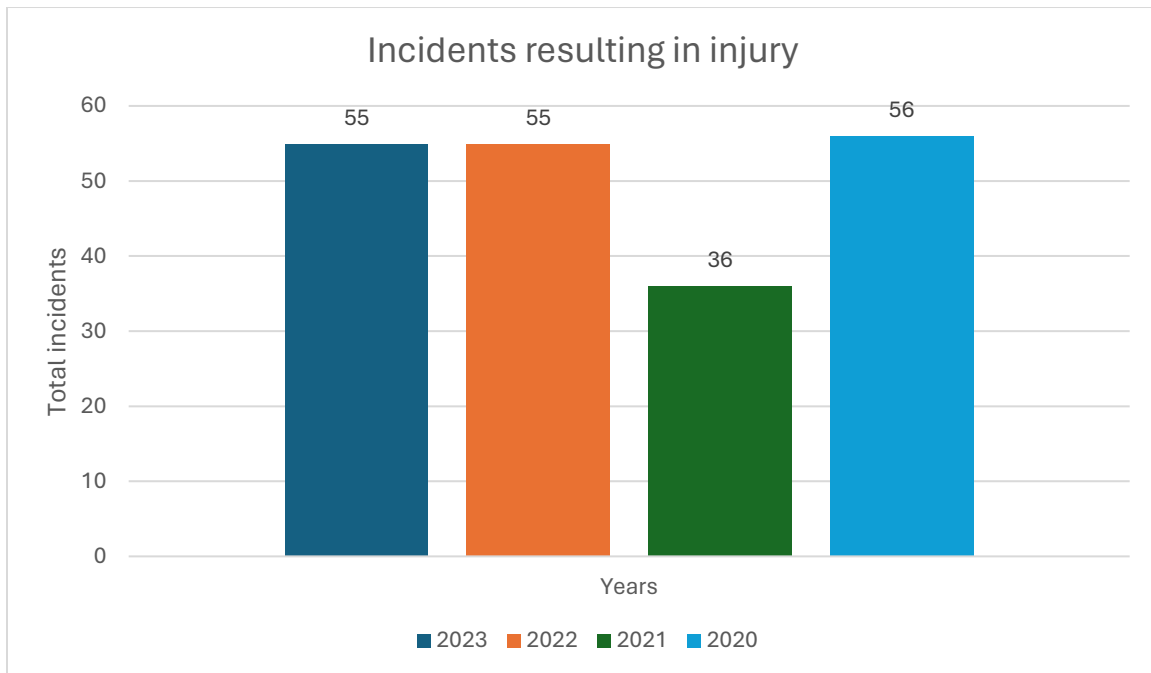
**Causes:** There has been no staff turnover in the medical team department. The consistency and longevity of staff allows for strong relationships. The medical team members understand the members' medical history.

**Impact of Extenuating Factors:** Some medical appointments cannot be flexible, and the members must take what is available which may impact their work or day program schedule.

### 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
- 2023 Performance Outcome | 55 incident reports documenting incidents resulting in basic first aid and injury

### Comparative Analysis:



**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:** The incidents did not establish a pattern. They were results of isolated accidents and unique situations.

**Causes:** The incidents were a result of members’ behavior or “other”. The behavior of the members can change quickly. RFYP puts forth great effort to train staff on the individual needs of members, proactive behavior strategies, and positive behavior prevention strategies to maintain a safe and predictable environment. There were no injuries due to environmental conditions in the home or in the community. This increase in outings, day programs, work options, and activities at home and within the community can be correlated to the increase in incidents.

**Impact of Extenuating Factors:** Members are very active at home and in the community.



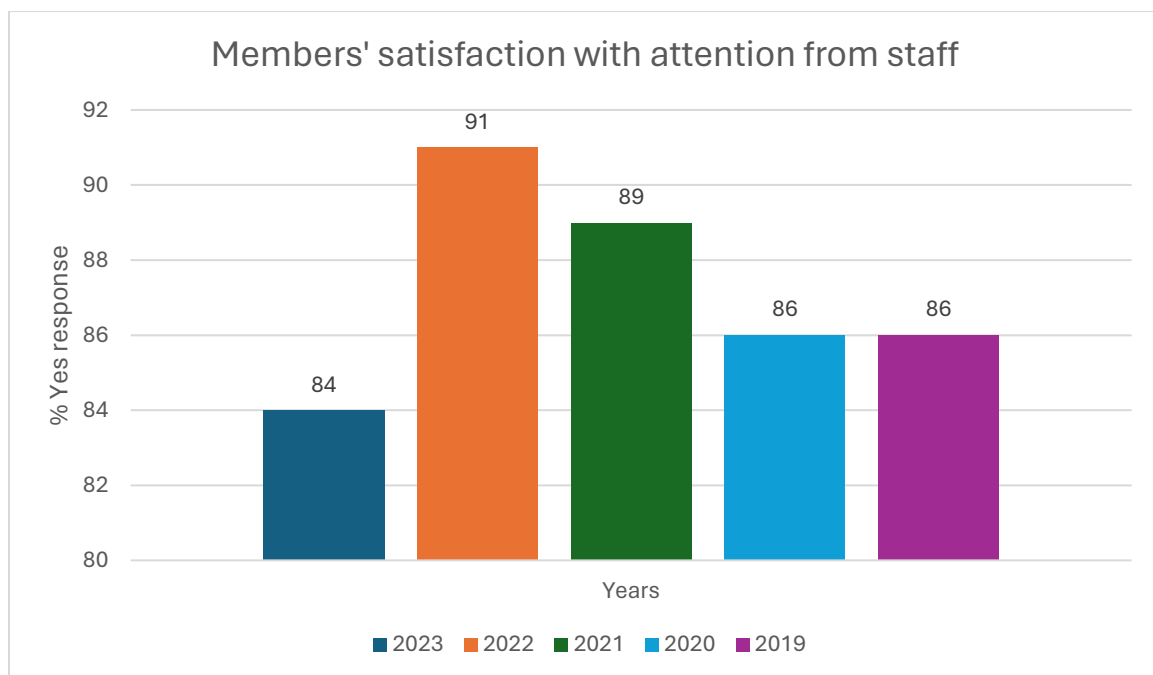
## ***Domain 2: Experience of Services Received and Other Feedback from Persons Served***

### **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*
- **2023 Performance Outcome | 84% of members are satisfied with the level of attention they receive from staff**

**RFYP did not meet 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**



**Trends:** Member's like the 1:1 staffing when it is available.

**Causes:** RFYP staffing has remained consistent and there is less of a staff shortage compared to previous years



**Impact of Extenuating Factors:** RFYP missed the target by only 1%. Approximately half of the residential members responded to the satisfaction survey. The low response rate and input reflects only half of the members (not all) involved in services.

**Action Plan for Improvement:** Seek additional responses by members for the satisfaction survey to obtain a more accurate sense of the satisfaction of all members.

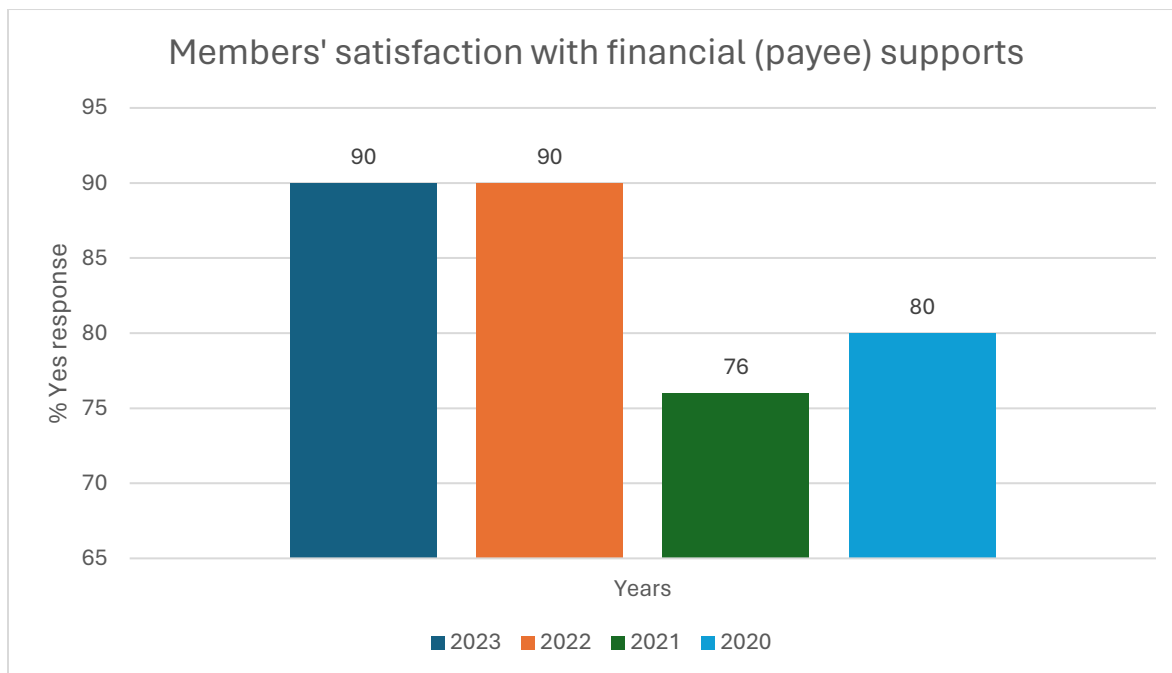
**Objective #2: Members are satisfied with the financial support available to them**

- *Annual Performance Target | 85% of members are satisfied with the financial support available to them*
- 2023 Performance Outcome | 90% of members are satisfied with the financial support available to them

**RFYP met 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**





**Trends:** Staff in the member financial department has been consistent. Members have been satisfied with the communication from the member financial department.

**Causes:** Consistent staffing allows for stronger relationship development and staff can develop an understanding of the members' communication preferences and financial history.

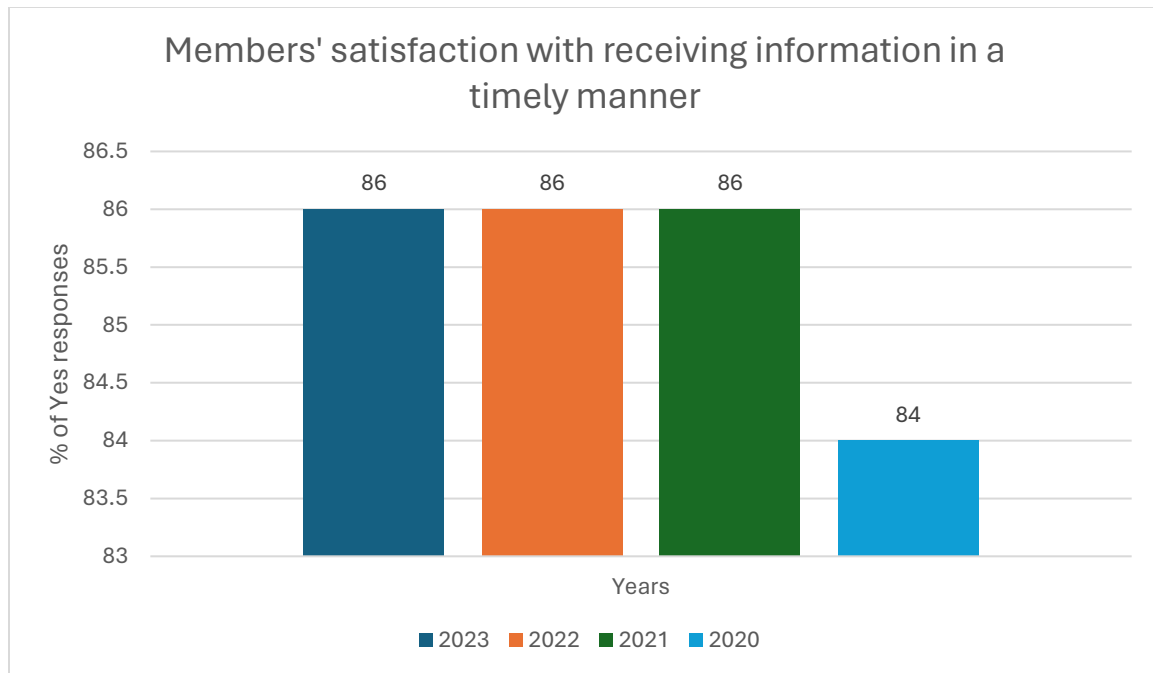
**Impact of Extenuating Factors:** RFYP staff monitor trends with social security, taxes, and rebates which may impact the members maximum allowed monthly balance.

**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*
- **2023 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:** Members would like daily information about activities and upcoming events, transportation plans, and medical appointments.

**Causes:** RFYP follows through with the Community Integration Policy and offers members choices regarding what they wish to participate in. RFYP also tries to communicate with members in a timely manner.

**Impact of Extenuating Factors:** The health of the members, weather, staffing, and transportation impact community outings and participating in activities.

### ***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**

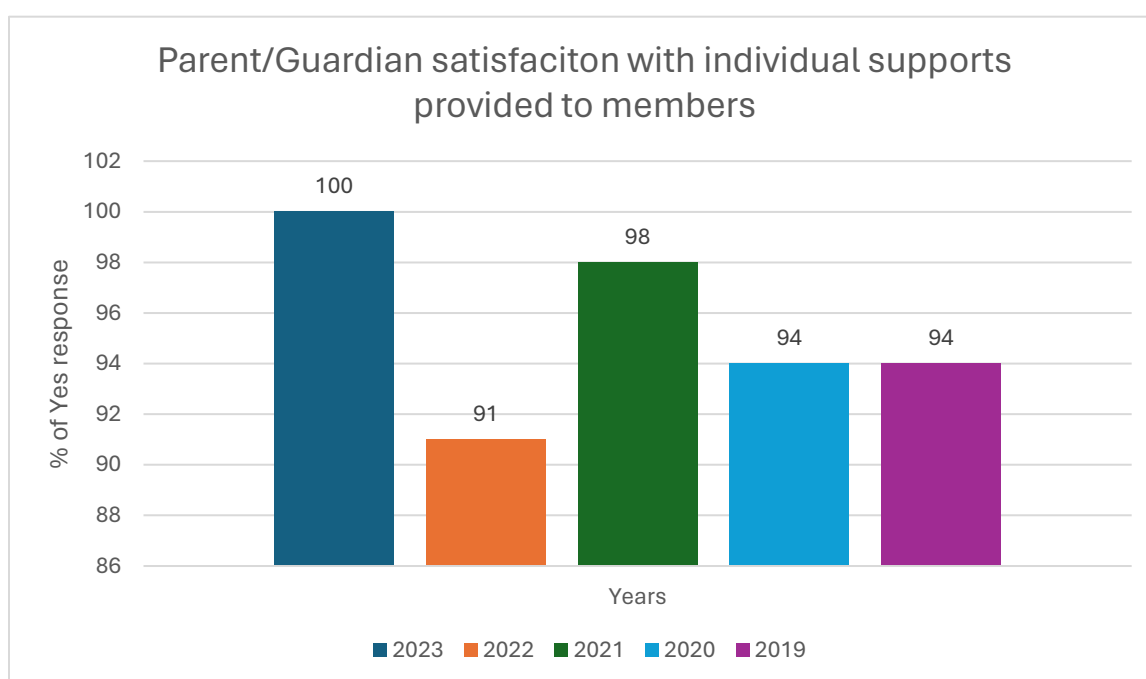
- *Annual Performance Target | 85% of guardians feel satisfied with the staffs' responsiveness to the needs of the members*



- 2023 Performance Outcome | 100% 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



**Trends:** Guardians expect that each member will receive individualized attention.

**Causes:** Person-centered services is the goal of members, staff, guardians, and RFYP. RFYP is working towards getting ratio of members to staff lower.

**Impact of Extenuating Factors:** If there is a higher ratio of staff to member it impacts community outings and other tasks because the one staff is tending to 4-5 members.

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

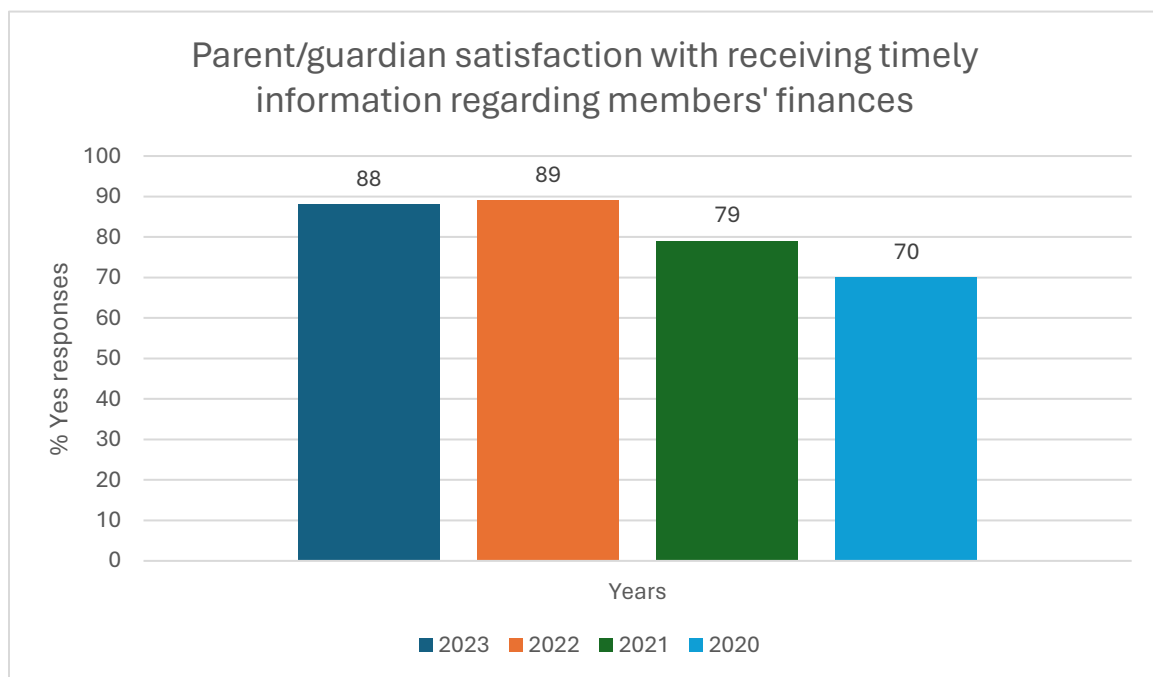
- *Annual Performance Target | 85% of guardians report they feel they receive member financial information in a timely manner*



- 2023 Performance Outcome | 88% of guardians report they feel they receive member financial information in a timely manner

**RFYP met 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:** Staff in the member financial department has been consistent. Guardians have been satisfied with the communication from the member financial department.

**Causes:** Consistent staffing allows for stronger relationship development and staff can develop an understanding of the guardians' communication preferences and members' financial history.

**Impact of Extenuating Factors:** RFYP staff monitor trends with social security, taxes, and rebates which may impact the members maximum allowed monthly balance.

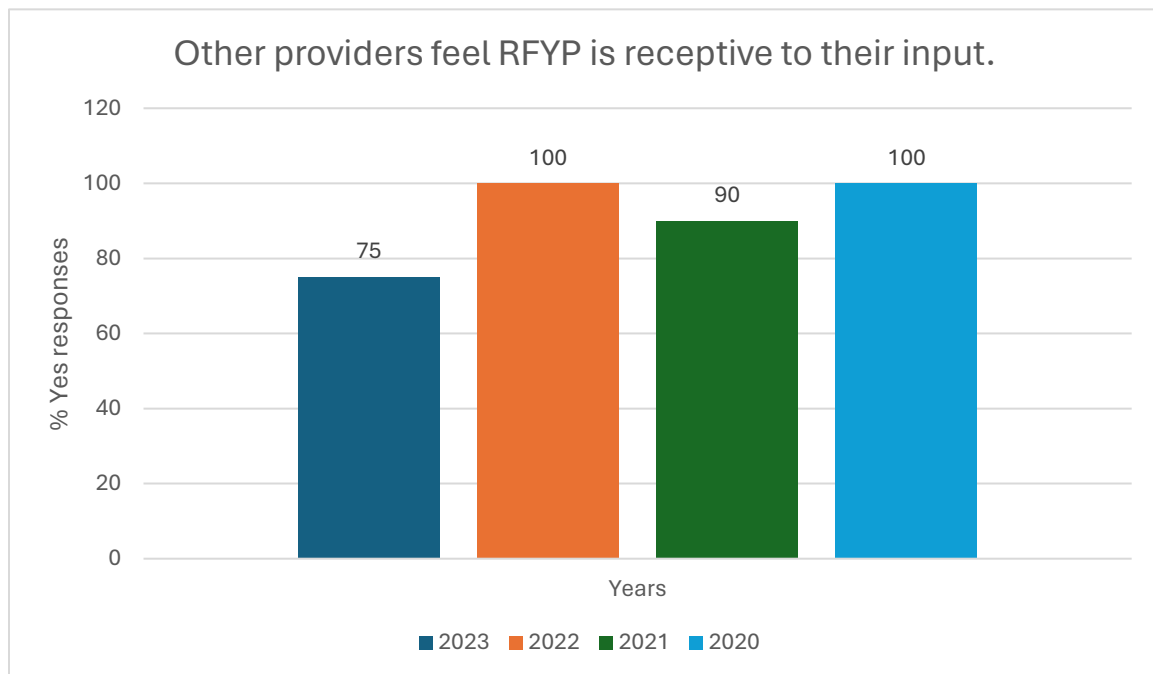
**Objective #3: Other stakeholders feel RFYP is receptive to their requests/suggestions/inquiries**



- *Annual Performance Target | 85% of other providers report they feel RFYP is receptive to their requests, suggestions, and/or inquiries*
- *2023 Performance Outcome | 75% of other providers report they feel RFYP is receptive to their requests, suggestions, and/or inquiries*

**RFYP did not meet 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:** Case managers like to get regular updates about the members' health and activities. They appreciate transparency and open communication.

**Causes:** RFYP provides input regarding the progress of goals. RFYP seeks input and adjusts services to deliver the best possible person-centered services

**Impact of Extenuating Factors:** When there is a new member with a new IDT, RFYP puts forth great efforts to educate them on the strengths of the agency and supports the agency can and cannot provide.



**Action Plan for Improvement:** RFYP acknowledges the agency needs to hire additional Service Coordinators. This position has the responsibility of communicating information with the team, especially guardians. Human Resources is putting forth great effort into hiring more staff for this position.

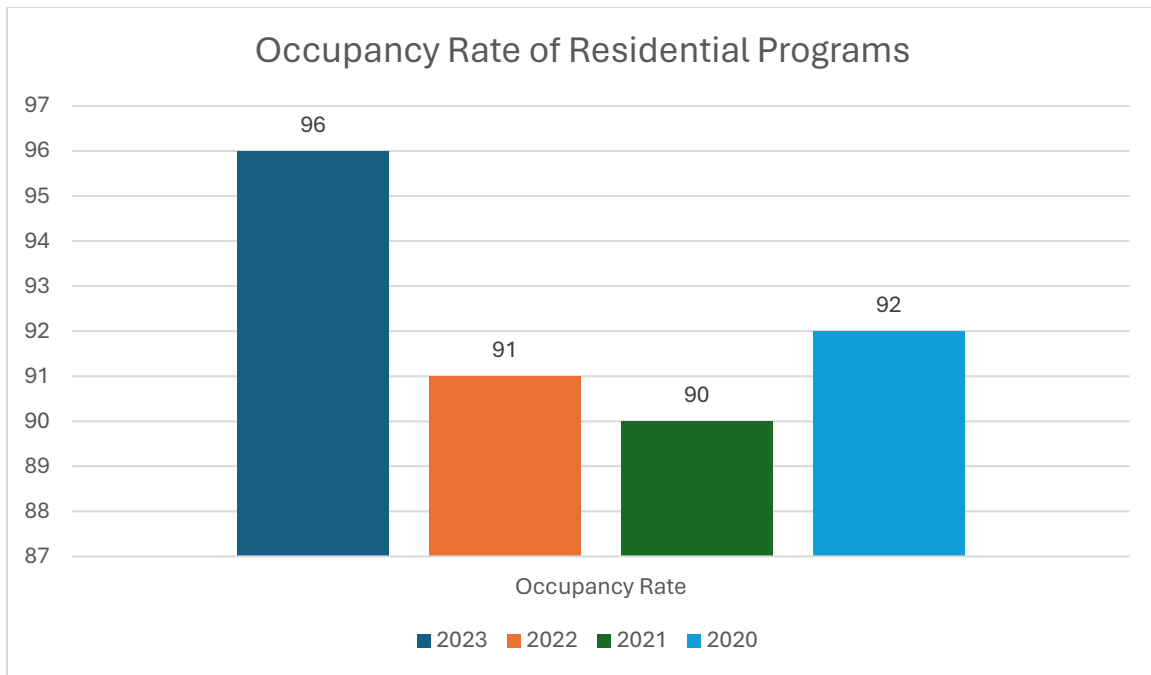
#### **Domain 4: Resources Used To Achieve Results for the Persons Served**

**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*
- *2023 Performance Outcome | 96% 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:**



**Trends:** Members choose to stay in at RFYP residential locations because of the great efforts to provide individualized support, options for activities and community integration, and the wellness program.

**Causes:** RFYP is proactive and responsive to the evolving needs and circumstances of the members and guardians. RFYP closely screens applicants to be sure their goals and needs can be met by RFYP’s scope of services.

**Impact of Extenuating Factors:** Relationships with referral sources remains in good standing.

## Domain 5: Service Access Measures

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

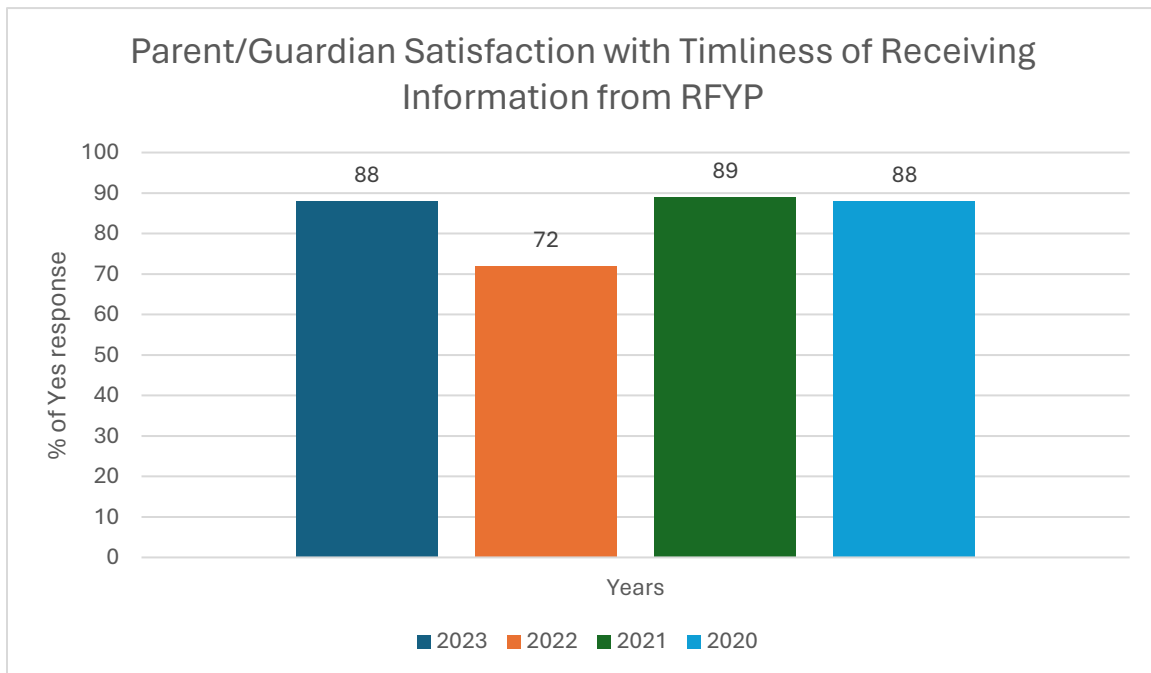
- *Annual Performance Target | 85% of parents/guardians feel they receive information regarding the member or services provided in a timely manner*



- 2023 Performance Outcome | 88% 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:** RFYP has put forth extra attention and diligence in communication.

**Causes:** There has been a staff shortage with Service Coordinators.

**Impact of Extenuating Factors:** Service Coordinators are responsible for most of the communication with parents and guardians. When the agency is short staffed, other staff take on additional responsibilities to ensure all tasks are complete for all members.



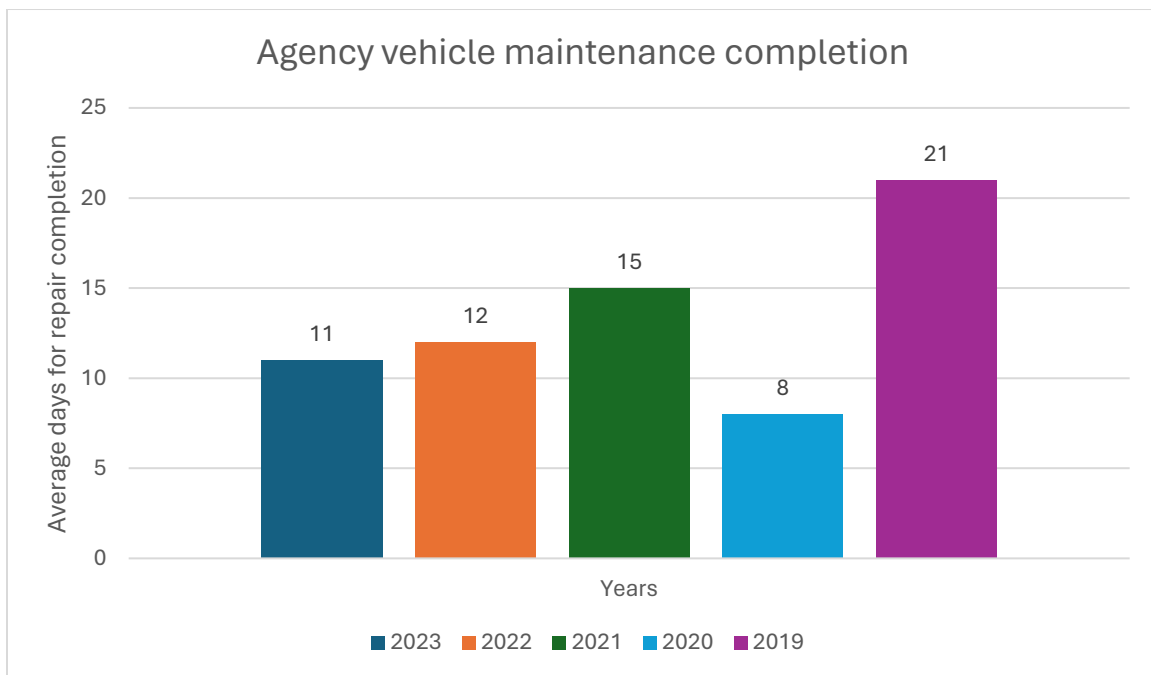


## **Objective #2: Wait time on agency vehicle maintenance requests completion**

- *Annual Performance Target | 15 days or less wait time from received date to completion date for vehicle maintenance requests*
- 2023 Performance Outcome | 11 days average wait time from received date to completion date for Day Habilitation vehicle maintenance requests

**RFYP met 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**



**Trends:** Most vehicle maintenance requests are for minor repairs and oil changes.

**Causes:** Turnaround time is impacted by the schedule of the local vehicle maintenance businesses and the availability of the (one) maintenance staff. RFYP is leasing new vehicles to ensure the safety of the members and less repairs needed. There is also one maintenance staff person responsible for all home, office, DH, and vehicle maintenance.

**Impact of Extenuating Factors:** The lift vans also are more specialized and have more technology in the van. This requires a specialized maintenance shop to do the repair with special parts and slows down the repair turnaround time. Local vehicle repair businesses are experiencing a shortage of parts, slower shipping times, and slower scheduling patterns.

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

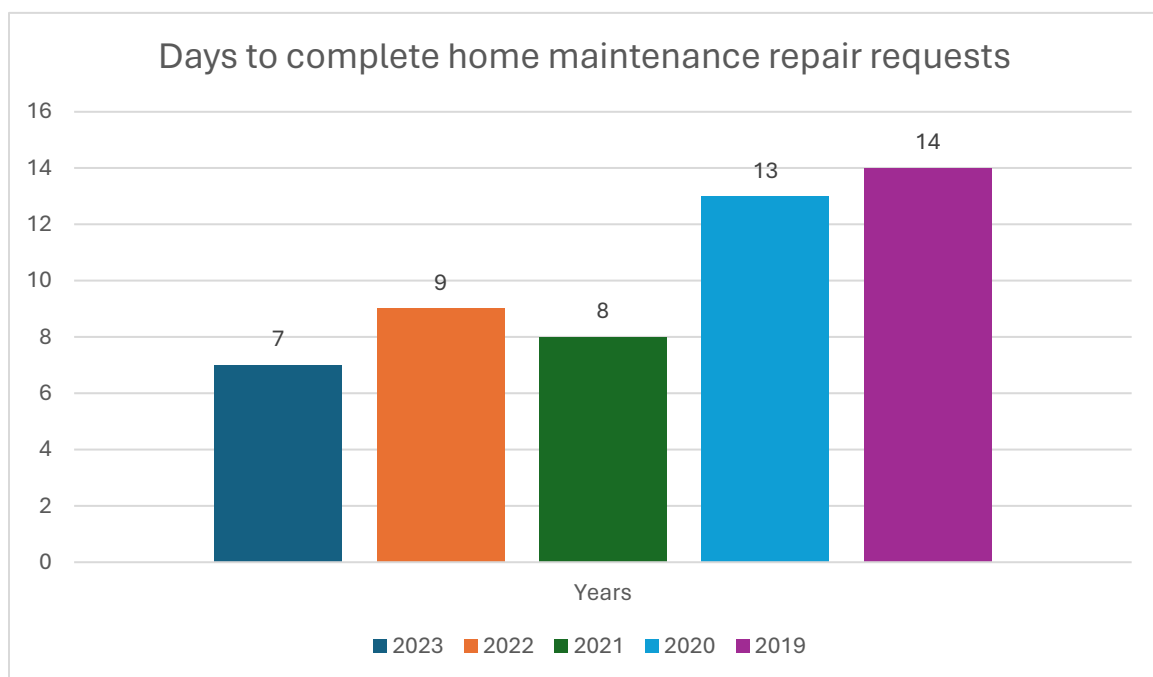
- *Annual Performance Target | 14 days average wait time from received date to completion date for home/property maintenance requests*
- **2023 Performance Outcome | 7 days average wait time from received date to completion date for home/property maintenance requests**

**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. Daily, 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



**Trends:** There is a pattern of work order requests for household items that are due to wear and tear including light bulbs, ceiling fans, and door latches.

**Causes:** Many of the RFYP homes are new construction so do not require any major maintenance or upkeep. As the homes it is expected to see improvements needed due to constant wear and tear due to being lived in 24/7.

**Impact of Extenuating Factors:** There is one maintenance staff person responsible for all home, office, DH, and vehicle maintenance.

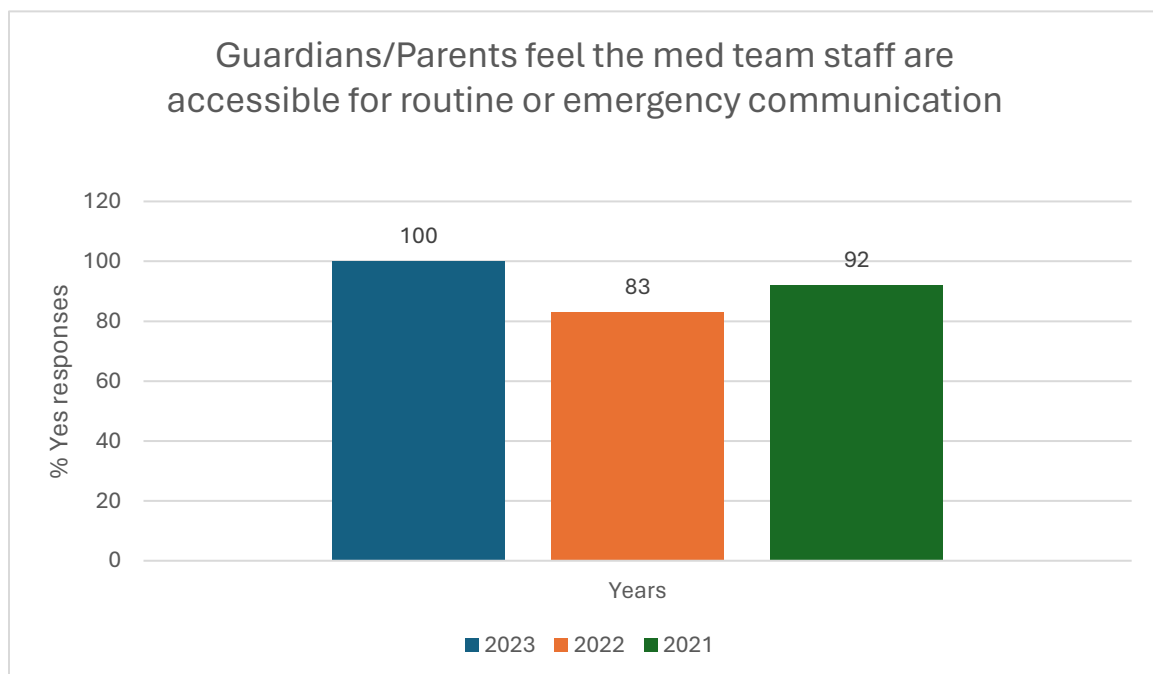


**Objective #4: RFYP medical staff are accessible to communicate with legal guardians and/or parents for routine questions and/or emergency situations.**

- *Annual Performance Target | 85% of parents and/or guardians feel the medical team is accessible for communication for routine questions and/or emergency situations.*
- **2023 Performance Outcome | 100% of parents and/or guardians feel the medical team is accessible for communication for routine questions and/or emergency situations.**

**RFYP met the performance target for this objective.** This data was collected via the Legal Guardian/Parent Satisfaction Survey which is distributed annually. The RFYP medical team puts great effort towards developing positive and individualized relationships with parents and guardians. 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 parents and guardians. The RFYP medical team and care coordination services removes barriers to health inequities by providing service access and empowers members, parents, and guardians to make informed choices.

**Comparative Analysis:**





**Trends:** Legal Guardians and parents frequently discuss the members’ health status, updates, and to confirm feelings of physical and emotional symptoms with the medical team staff. This access to transparent and comprehensive health information is an asset to RFYP.

**Causes:** Access to the medical team is a strong component of 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. The medical team staff understand the members’ needs and can be proactive with care coordination.

**Impact of Extenuating Factors:** Medical team staff have to assess each health related incident. There may be a delay in communication if the staff are attending to an emergency situation with another member.

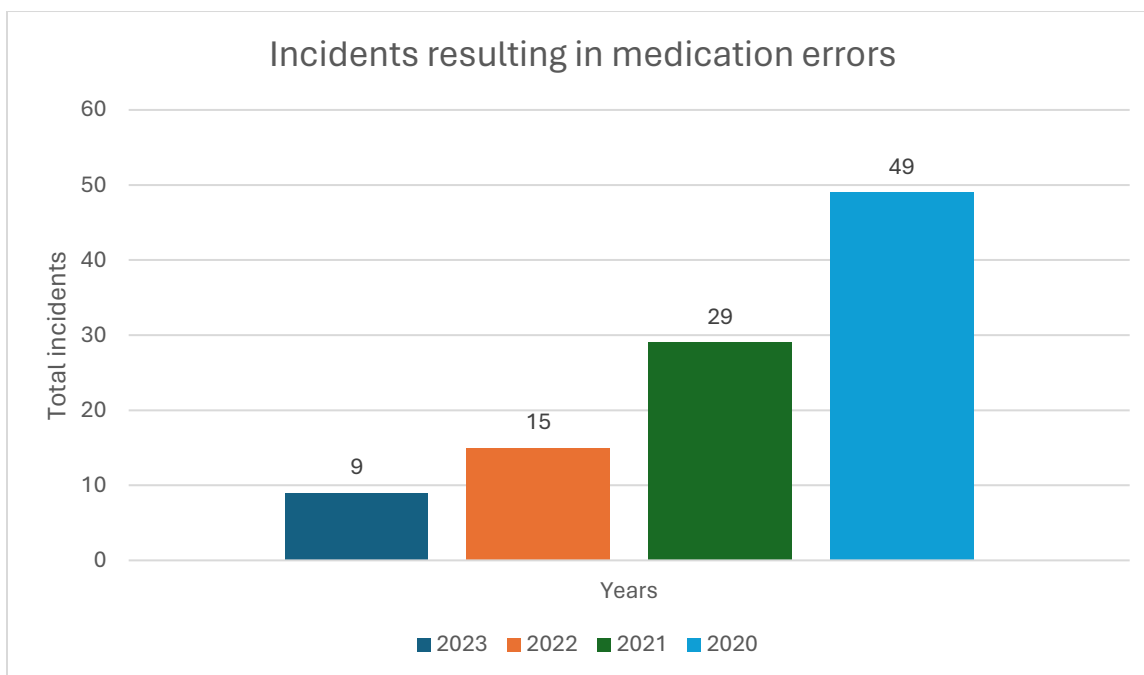
## Domain 6: Business Function Measurement

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

- *Annual Performance Target | 36 or less medication error incidents annually*
- 2023 Performance Outcome | 9 medication error incidents

**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:**



**Trends:** Six medication errors were due to medication not being administered within the approved window for medication administration.

**Causes:** The causes were not consistent. The errors were identified with different staff each time. The staff did not follow policy and procedure for passing medications within the approved time frame.

**Impact of Extenuating Factors:** Inconsistent staffing patterns increase the risk of medication administration errors.

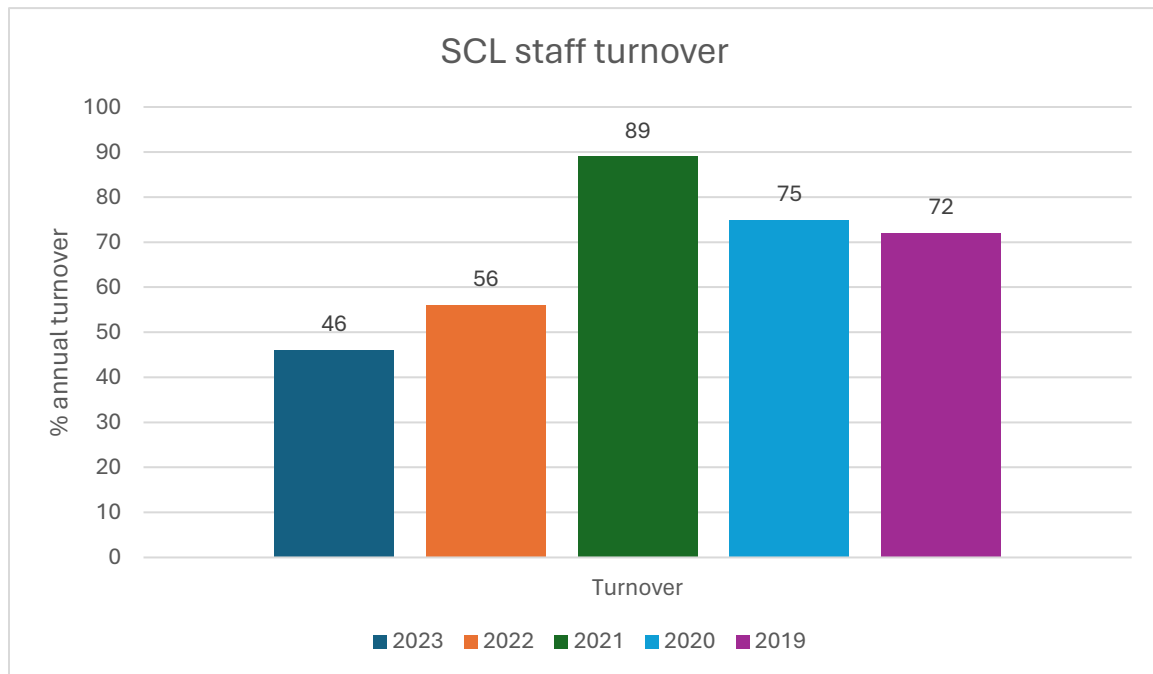
## Objective #2: Decreasing agency turnover rates for direct care staff

- *Annual Performance Target* | 60% turnover rate for direct care
- 2023 Performance Outcome | 46% turnover rate for direct care

**RFYP met the performance target.** This data is collected through personnel data in ADP software and is maintained by the Human Resources 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:



**Trends:** RFYP has a high number of staff born outside of USA and speak English as a second language. Staff are traveling again back to their home countries and are gone for more than a few months. Many do reapply when they return to the area.

**Causes:** The staff development model has evolved taking a retraining approach instead of a disciplinary approach. The HR department is meeting staff at their level, translating documents into the first language of staff, establishing a staff mentoring program, taking time to understand the gaps, and creating a supportive culture.

**Impact of Extenuating Factors:** Immigration issues have caused a need for international staff to return to their home countries to take care of these issues.

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

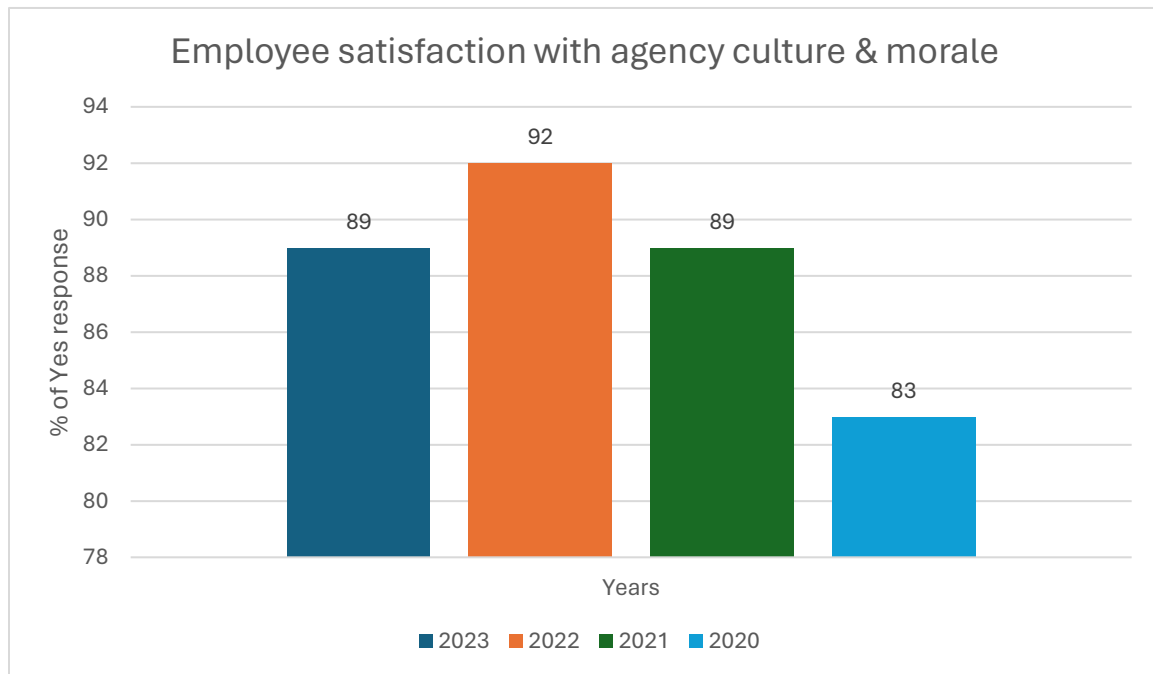
- *Annual Performance Target* | 85% of staff responding they feel RFYP has a positive agency culture
- *2023 Performance Outcome* | 89% of staff responding they feel RFYP has a positive agency culture

**RFYP met the performance target for this objective.** This data was collected via the Employee 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:



**Trends:** Staff appreciate the supportive work culture, staff appreciation parties, retainment bonuses, and RFYP swag (especially RFYP shirts). Staff are feeling appreciated for their work and dedication to the agency and members.

**Causes:** The change in the staff training model to staff development model. The HR department is taking a lot of time to grow the skills of the staff and ensure they feel appreciated for their time, dedication, and commitment.

**Impact of Extenuating Factors:** Service Coordinators receive training and reminders about taking an approach of appreciation and support. HR is supporting service coordinators with more training on people-management skills.

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

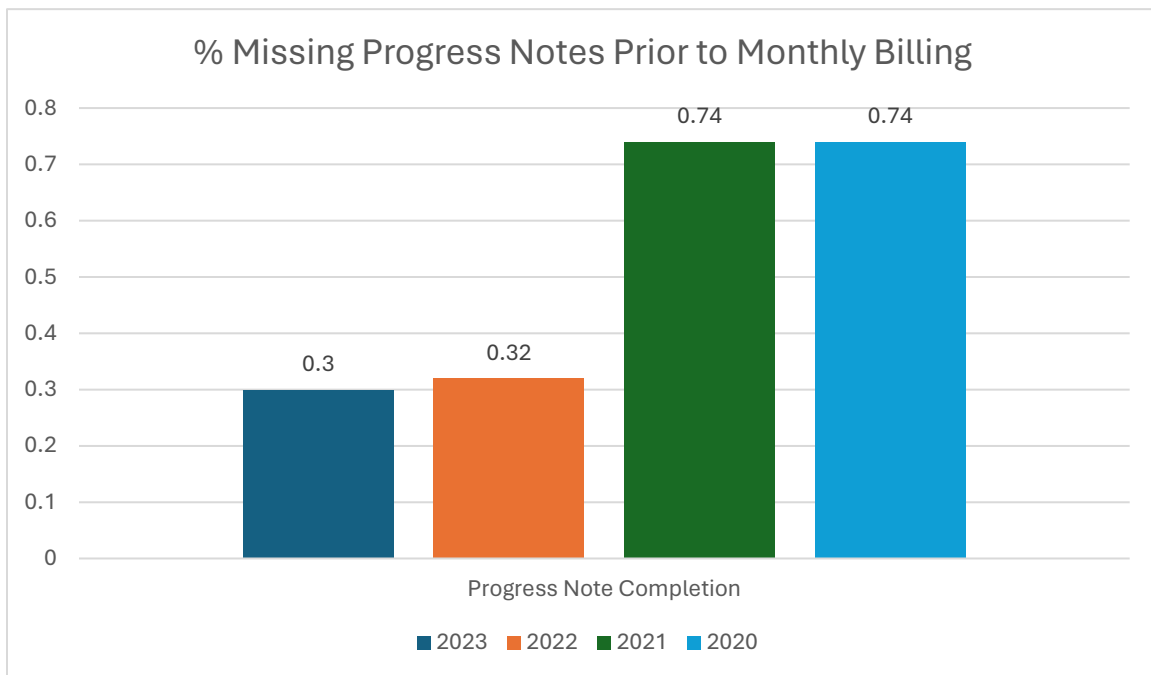




- *Annual Performance Target | 0.75% progress notes missing prior to monthly billing*
- *2023 Performance Outcome | 0.30% progress notes missing prior to monthly billing*

**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:** New staff are not as proficient with completing progress notes on time and before the end of the shift as existing staff. We have also implemented a new documentation system in 2023 (SetWorks) and that transition has been difficult for some staff because we are requiring staff to check a box for every goal objective the member has (NA,NO,YES-if the member completed goal).

**Causes:** Staff are adjusting to a new documentation platform and new policies have been implemented for documentation on progress notes. 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:** Internet outages impact the staff's ability to complete progress notes. Another extenuating factor is that a large portion of our staff have a language barrier and documentation is difficult in general.



## Supported Community Living Performance Indicators

SUPPORTED COMMUNITY LIVING 2024															
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 (Fall)	Member Satisfaction Survey (electronic or paper survey option)	Members are active participants in their community.	QA Department and Program Director	85% YES Responses	84%	No	89%	Members' suggestions for community outings can sometimes be too far from Iowa City.	11/1/23-12/31/23	Spring 2024	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 (Fall)	Parent/Guardian Satisfaction Survey (electronic or paper survey option)	Health care equity and advocacy	QA Department and Program Director	85% YES Responses	100%	Yes	89%	This department has had very low turnover and the staff have long term relationships with members and guardians.	11/1/23-12/31/23	Spring 2024	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	55	Yes	55	There are a variety of safety precautions, inspections, and training. This results in low injuries.	1/1/23-1/30/23	Spring 2024	2
Domain 2: Experience of Services Received and Other Feedback from <u>Persons Served</u> : 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 (Fall)	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	91%	Missed the target by only 1%. Members enjoy 1:1 staffing and that arrangement is not feasible on a regular basis.	11/1/23-12/31/23	Spring 2024	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 (Fall)	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	90%	Yes	90%	The Member Financial Team has an additional staff member. This allows for more communication with members.	11/1/23-12/31/23	Spring 2024	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 (Fall)	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	86%	Members have access to all staff during business hours.	11/1/23-12/31/23	Spring 2024	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	2023 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 (Fall)	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	100%	Yes	91%	Service coordinators put forth great efforts to remain in constant communication with guardians.	11/1/23-12/31/23	Spring 2024	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 (Fall)	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	88%	Yes	89%	The Member Financial Team has an additional staff member. This allows for more communication with guardians.	11/1/23-12/31/23	Spring 2024	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 (Fall)	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	75%	No	100%	Service coordinators put forth great efforts to remain in communication with other providers. RFYP can implement suggestions that are within the scope of the services the agency provides.	11/1/23-12/31/23	Spring 2024	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	96%	Yes	91%	Members enjoy having options for community activities and participating in the Wellness Program.	1/1/23-1/30/23	Spring 2024	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	2023 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 (Fall)	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	88%	Yes	72%	Service coordinators put forth great efforts to remain in constant communication with guardians.	11/1/23-12/31/23	Spring 2024	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	Program Director	15 business days	11 days	Yes	12	Revised to business days since maintenance team works weekdays and maintenance shops are open Monday - Friday.	1/1/23-1/30/23	Spring 2024	1
SDOH: Neighborhood & 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	Program Director	14 days average	7 days	Yes	9	Revised to 14 days since maintenance staff do not work weekends.	1/1/23-1/30/23	Spring 2024	1
SDOH: Health & Health Care	4. RFYP medical team staff are available for routine and/or emergency communication	% reporting YES on Parent/Guardian Survey	Active Residential Parent/Guardian	Annually (Fall)	Parent/Guardian Satisfaction Survey (electronic or paper survey option)	Accessible agency medical supports and resources	QA Department and Program Director	85% reporting YES	100%	Yes	100%	This department has had very low turnover and the staff have long term relationships with members and guardians.	11/1/23-12/31/23	Spring 2024	2

## Discharge and Post-Discharge Follow-Up Summary Report

### Residential and Day Habilitation Discharge from 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 2023 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 2024 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.

<b>Residential Services</b>
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		2023	2022
<b>Total Residential Discharges</b>	January 1, 2023 to December 31, 2023	3	8
<b>Years Participating in Residential Services</b>	0 to 1 year	1	0
	2 to 5 years	0	2
	6 to 10 years	2	3
	10+ years	0	3
<b>Sex</b>	Male	1	3
	Female	2	5
<b>Age</b>	18 to 40	3	3
	41 to 63	0	2
	64 to 86	0	3
<b>Funding</b>	BI Hourly	0	0
	BI Daily	0	3
	Home Based Habilitation	0	0
	ID Hourly	3	1
	ID Daily	0	1
	Region Hourly	0	2
<b>Ethnicity</b>	Asian Pacific	0	0
	Hispanic	0	0
	Caucasian	3	8
	Black	0	0
	Other	0	0
<b>Reason for Discharge</b>	Family Home	2	1
	New Provider	1	2
	Passed Away	0	1



	Independent Living	0	1
	Other	0	3

1. **Trends:** Two of the members who chose to discharge from RFYP services chose to return to their family home. All of the individuals that responded to the discharge survey replied that they felt involved in the discharge process and they were all between 18-40 years old.
2. **Causes:** RFYP respects the members' right to choose who provides services to them. RFYP provides support throughout the discharge process.
3. **Post Discharge Follow Up:** No respondents reported any barriers to housing and 90% of respondents report no barriers to healthcare after leaving RFYP. 80% of respondents rated their overall experience with the discharge process good or excellent.
4. **Barriers to Satisfaction:** One member that discharged from RFYP services felt that there were not enough hours available and other members felt they would have their needs better met by living at home or with another provider.
5. **What Did We Learn:** RFYP understands that members who have a previous history of living in the family home are accustomed to care from people they are very familiar with. RFYP has learned it is easier for some members to transition and adjust to living in an agency home, and sometimes it is harder for others. RFYP has learned there are some measures and strategies that can be put into place to help new members acclimate to living in their own home with staff support. Ultimately, some members will still choose to move back to their family home or try another agency that they feel will meet their needs closer to what their family may have been providing previously.
6. **What Are We Doing Well:** RFYP successfully involves all of the members of the interdisciplinary team and the member in the discharge process. They seek their input and communicate all of the updates as the member transitions to a new provider or to living with a family member.
7. **Areas of Concern:** One respondent said they discharged the member from RFYP because there were not enough hours available. Although this individual felt there were not enough hours available, RFYP provided an adequate number of hours based on their Individual Service Plan. However, RFYP understands that despite there being an appropriate amount of services, the member may have still felt they were not receiving enough support.
8. **Proposed Improvements:** RFYP will make sure to get feedback from members and their team, especially new ones, to gauge whether the member feel like they are receiving enough support. If the member identifies specific ways services are lacking for them, RFYP will work with the member and their team to see what can be done to help the individual feel more supported. RFYP



will utilize opportunities such as ISP and team meetings, satisfaction surveys and regular day to day communication to get feedback from the individual and their team.

9. **Extenuating Factors:** Although Discharge and 30-Day Follow Up surveys were sent to a majority of the individuals and interdisciplinary teams, they are optional to complete. The responses on the surveys may not be representative of all discharged members, families, and teams.

### Day Habilitation Discharge Summary

		2023	2022
<b>Total Day Habilitation Discharges</b>	January 1, 2023 – December 31, 2023	7	8
<b>Years Participating in Day Habilitation Services</b>	0 to 1 year 2 to 5 years 6 to 10 years 10+ years	0 4 1 2	0 5 1 2
<b>Sex</b>	Male Female	3 4	5 3
<b>Ages</b>	18 to 40 41 to 63 64 to 86	4 2 1	4 4 0
<b>Funding</b>	BI Hourly BI Daily Home Based Habilitation ID Hourly ID Daily Region	0 7 0 0 0 0	0 2 1 0 3 1
<b>Ethnicity</b>	Asian Hispanic Caucasian Black Other	0 0 6 1 0	1 0 7 0 0
<b>Reason for Discharge</b>	Family Home New Provider Passed Away Independent Living Other	1 5 0 0 1	1 3 0 0 4



1. **Trends:** Two of the members who chose to discharge from RFYP services chose to return to their family home. All of the individuals that responded to the discharge survey replied that they felt involved in the discharge process and they were all between 18-40 years old.
2. **Causes:** RFYP respects the members' right to choose who provides services to them. RFYP provides support throughout the discharge process.
3. **Post Discharge Follow Up:** 80% of respondents rated their overall experience with the discharge process good or excellent.
4. **Barriers to Satisfaction:** One respondent on the discharge survey said there were too many people at the Day Hab for their preference and another responded said they discharged because they wanted to focus more on working.
5. **What Did We Learn:** The large group size can be overwhelming to members. Occasionally members report it is too noisy or overcrowded.
6. **What Are We Doing Well:** RFYP implements a thorough discharge process, and provides services to members until they are fully ready to transition to the next program. Additionally, RFYP respects the members' right to choose providers. The agency is supportive of the members' decisions and will be available if the member wants to return to RFYP in the future.
7. **Areas of Concern:** RFYP encourages community outings and wants the members to be active in their community. Group size during the outing is a concern. It is important that everyone has an opportunity to participate in outings, but there needs to be a plan for the members that do not prefer to be in large groups.
8. **Proposed Improvements:** As we continue to add new members to Day Hab we will be focusing on smaller groups for outings. This will ensure we can provide Day Hab services to more individuals while remaining aware that large groups may be overwhelming for some of the people we serve.
9. **Extenuating Factors:** Although Discharge and 30-Day Follow Up surveys were sent to all of the individuals and interdisciplinary teams, they are optional to complete.

<p>The proposed improvements will be implemented in January 2024, or as deemed appropriate by the RFYP administration. Progress on the proposed improvements will be reviewed and documented in June 2024.</p>
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