

## FY18 Annual Management Report

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## **ANNUAL REPORT FY18 Executive Director's Message**

It is with great pride and accomplishment that I present to you, our Diversified Enterprises annual management report. The 2017-2018 fiscal year was my first full fiscal year as the Executive Director with the agency and it marked 49 years of service for Diversified Enterprises. One of the joys of preparing an annual report is that it gives us the opportunity to look back and be thankful for all that has been accomplished. The agency continued to build on the works of previous leaders to make Diversified Enterprises sustainable while maintaining our core value of providing supports "without walls". The strengths of this agency are the commitment by leadership for community inclusive services, person centered practices and the true recognition that people supported are the primary customer, for we simply exist to make positive impacts on people's lives.

The 2017-2018 fiscal year was exciting-we created a PATH plan to guide us, began implementing technology to work smarter not harder, and have been building partnerships that will have a lasting and positive impact for our agency. Diversified Enterprises of South Georgia obtained charitable 501c3 status and its separate Board of Directors will begin fundraising in late 2018. Our dedicated and talented staff have done an incredible job at expanding services while strengthening our programs and enhancing supports. Turnover is always a challenge, but our HR team was able to reduce turnover from 64.5% in FY17 to 54.2% in FY18. Our financial results were again positive in Fy18 and we were able to reward employees through our new performance-based pay program where we paid out over \$30,000 to Direct Support Professionals. Because our revenue growth continued, we made progress toward reaching our goal for unrestricted net assets depositing \$400,000, which represent the Agency's financial reserves (rainy day fund).

In August 2018, the Advisory Board, persons supported by the agency and staff will complete a Strategic Planning Session that brings about sustainability for the Agency for years to come.

I'd like to convey my appreciation of our staff members, who inspire us with their dedication to our mission of empowering individuals to participate fully in their community as well as the Tift County Board of Health and our volunteer Advisory Board for their leadership and insightful guidance. The most important member of our team continues to be the people we support, which is why we exist.

I look forward to continuing serving our community together.

David T. Wilber, Executive Director / CEO

## FY 18 Demographics Persons Supported (as of June 30, 2018)

African American/Black	92
Asian	0
White	54
Hispanic/Latino (Ethnicity)	2
Native (American or Alaskan)	0
Native Hawaiian or Other Pacific Islander	0
Other(s),	0

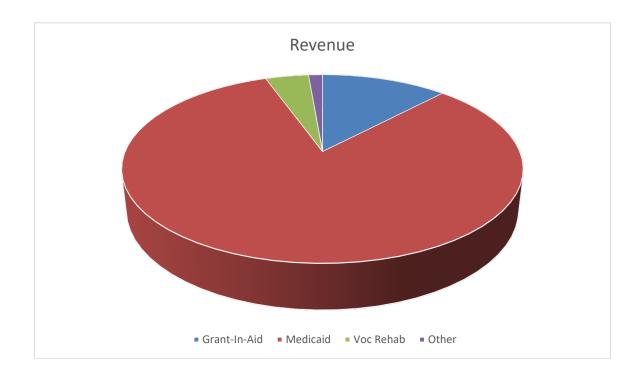
Gender	Number of Persons Served
Female	56
Male	92

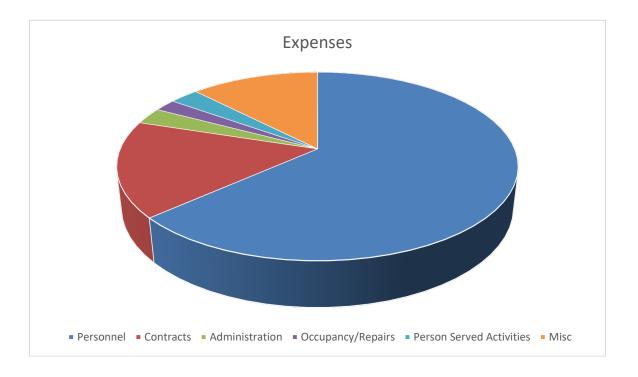
Age	Number of Persons Served
06-17 (Children)	1
18-40 (Adult)	79
41-65 (Adult)	56
66+ (Adult)	12
Unknown Age Group	1

Other Characteristics of Persons Served	Number of Persons Served	
Acquired Brain Injury		0
Alcohol and/or Other Addictions		1
Autism Spectrum Disorder		13
Developmental Disabilities	14	14
Dual Diagnosis – AOD/DD		0
Dual Diagnosis – AOD/MH		0
Dual Diagnosis – MH/DD		0
Hearing Impairments		4
HIV positive/AIDS		0
Homeless Individuals		0
Mental Disorders		0
New Immigrants		0
Other Addictions		0
Physical Disabilities		8
Unemployed/Underemployed		0
Visual Impairments		3
Dementia		0
Unknown Characteristics		

## FY 18 Financial Data

Diversified Enterprises had another positive year. Total Revenues were \$4,820,126 and Expenses were \$4,806,607 resulting in revenue over expenses of \$13,518.





## FY 18 Strategic Plan

The Leadership Team set a new Strategic Plan through a PATH plan in June 2017 with new goals, objectives and a reaffirmation of our mission statement. The PATH planning was designed to establish a baseline for the agency and help spearhead comprehensive strategic planning in summer of 2018.

#### Strategic Goals

#### Goal #1: Agency Rebranding

- **Redesign Logo for Agency**-Goal Achieved December 2017 new logo was selected
- Redesign and publish new website. Goal Achieved Spring 2018 new website was launched

# Goal #2: Foster a work environment that recognizes the value of Direct Support Professionals.

- Increase professional training for DSP's-Goal Achieved-staff attended many professional trainings and employment staff are going through ACRE certification.
- **Encourage Certifications and competencies for staff**-Goal Achieved-Several staff became Certified Supported Employment Professionals.
- Increase recognition of staff through nominations and awards-Goal Achieved-12 staff received the Diversified Enterprises Person Centered Champion Award and 3 staff were nominated for the Dottie Adams DSP award with one winning.
- Develop and implement Employee Engagement Survey to measure
  Satisfaction: Goal Achieved- A survey was deployed in Summer 2017 and will be refined to redeployed in FY2018
- Develop and implement Employee Exit Survey: Goal Achieved- A survey was deployed in Summer 2017 and had 4 responses in FY18

## Goal #3: Create 501c3 separate not for profit Entity for the purposes of fundraising.

Create a recognized 501c3 entity -Goal Achieved-The Agency achieved its final step being recognized by the IRS in Fall 2017.

## Other Achievements:

Technology Improvements: mobile Agency Policies and office, electronic Procedures are available Performance Based Pay Increased Full-Time Staff documentation, website, to view etc. Agency's Financial Paid Leave for Full-Time Agency Picnic **Billable Nursing Services** Health has improved and Part-Time Staff Integration and Smooth Transition for People Mentorship in Peer Interactions for **Decreased Turnover** Supported from Community Employment People Supported Insitutions

## FY 18 Business Function Measures

Objective	Measure	Data Source	Goal	FY18
Minimize staff turnover	Overall Agency- wide staff turnover (excluding internal transfers and promotions)	Monthly Termination Report	<44.4%*	54.27%
	Agency-wide staff turnover < 6 months (excluding internal transfers and promotions)	Monthly Termination Report	<36.8*	18.01%

<sup>\*</sup>Georgia Benchmark Turnover data (National Core Indicators 2017)

#### **Discussion:**

The agency started trending turnover data more formally in 2017 including comparing agency turnover to benchmarked data for Georgia that was published by National Core Indicators™ (NCI™) which is a collaborative effort between the National Association of State Directors of Developmental Disabilities Services (NASDDDS) and the Human Services Research Institute (HSRI).Additionally, we revised our recruiting/selection methods, interview questions, and provided interviewer training to team leaders. We also instituted performance-based pay for non-management positions. In a comparison from calendar year 2016 and 2017, the agency was able to reduce turnover from 72.9 to 63.85, a realized annual reduction of 9.05%, however the agency continues to trend higher than the benchmarked goal and the agency will continue to look at efforts to increase overall retention. Retention of employees <under 6 months is positively above the benchmarked data and the agency believes that increased attention around selection will improve employee retention.

## **Employee Engagement Survey Results**

#### **Employee Engagement Survey FY 18**

#### Q1: What department do you work in?

Answer Choices	Response	S
Administration (Hr/Finance/Records/DDP's/Behavioral)	21.28%	10
Community Supports	10.64%	5
Residential Group Homes	10.64%	5
Residential Specialized Teams	10.64%	5
Supported Employment	6.38%	3
Nursing	4.26%	2
Is there a specific location or house/person you work with?	36.17%	17
Total		47

#### Q2: My supervisor and I have a good working relationship.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>6.12%</b> 3	<b>0.00%</b> 0	<b>10.20%</b> 5	<b>30.61%</b> 15	<b>53.06%</b> 26	49	4.24

#### Q3: My supervisor asks for my ideas and suggestions to improve our services.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>8.33%</b> 4	<b>14.58%</b> 7	<b>14.58%</b> 7	<b>25.00%</b> 12	<b>37.50%</b> 18	48	3.69

#### Q4: My supervisor tells me when I have done a good Job.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>6.38%</b>	<b>8.51%</b>	<b>19.15</b> %	<b>27.66%</b>	<b>38.30%</b>	47	3.83

#### Q5: My supervisor makes sure I have the training and skills needed to do my job.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>4.17%</b>	<b>2.08%</b>	<b>10.42%</b> 5	<b>33.33%</b> 16	<b>50.00%</b> 24	48	4.23

#### Q6: My supervisor treats all employees fairly.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>8.51%</b> 4	<b>2.13</b> %	<b>19.15%</b> 9	<b>25.53%</b> 12	<b>44.68%</b> 21	47	3.96

#### Q7: Communication within my department/work location is good

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>6.25%</b>	<b>2.08</b> %	<b>20.83%</b> 10	<b>25.00%</b> 12	<b>45.83%</b> 22	48	4.02

#### Q8: I have the opportunity to provide feedback and input for key decisions within my department / work location.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>4.26%</b> 2	<b>8.51%</b> 4	<b>17.02%</b> 8	<b>29.79</b> % 14	<b>40.43</b> %	47	3.94

#### Q9: Communication between senior leadership and employees is good at Diversified Enterprises

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>2.27</b> %	<b>4.55%</b> 2	<b>25.00%</b>	<b>34.09%</b> 15	<b>34.09%</b> 15	44	3.93

#### Q10: I am kept informed of things I need to know at Diversified Enterprises

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>4.17%</b> 2	<b>4.17%</b> 2	<b>20.83%</b> 10	<b>35.42%</b> 17	<b>35.42</b> %	48	3.94

## Q11: I receive the information I need to keep me focused on how to provide the best person-centered services to the individuals supported

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>4.17%</b> 2	<b>0.00%</b> O	<b>20.83%</b> 10	<b>33.33%</b> 16	<b>41.67%</b> 20	48	4.08

#### Q12: I understand and believe in the mission of Diversified Enterprises

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>4.17%</b>	<b>0.00%</b> O	<b>6.25%</b> 3	<b>27.08%</b> 13	<b>62.50%</b> 30	48	4.44

#### Q13: Diversified Enterprises demonstrates that it is a Person-Centered Organization through its employees.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>4.17%</b> 2	<b>0.00%</b> O	<b>22.92</b> %	<b>20.83%</b> 10	<b>52.08%</b> 25	48	4.17

#### Q14: Diversified Enterprises demonstrates an interest in the well-being and morale of the people who work here.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>4.26%</b>	<b>6.38%</b> 3	<b>21.28%</b> 10	<b>27.66%</b>	<b>40.43%</b> 19	47	3.94

#### Q15: My job at Diversified Enterprises is meaningful and makes a difference.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>4.35%</b> 2	<b>0.00%</b> 0	<b>4.35%</b> 2	<b>34.78%</b> 16	<b>56.52%</b> 26	46	4.39

## Q16: If I was offered a similar position with similar pay by another company, I would choose to stay with Diversified Enterprises.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Weighted Average
☆	<b>6.25%</b>	<b>6.25%</b> 3	<b>20.83%</b> 10	<b>22.92</b> %	<b>43.75%</b> 21	48	3.92

#### Q17: OVERALL, how would rate Diversified Enterprises as a place to work?

	Poor	Fair	Good	Very Good	Excellent	Total	Weighted Average
☆	0.00%	8.70%	30.43%	26.09%	34.78%		
	0	4	14	12	16	46	3.87

#### Discussion:

The agency deployed their first engagement survey in FY18, however, it was not deployed in such a way that the results could be separated by department or operations. Additionally, the response rate was approximately 37% of the workforce at the time it was deployed. The leadership reviewed the results and based on the results several actions were put into place to address areas scoring lower than a 4.00. Those actions included: Diversified YOU-a leadership training program offered monthly to assist emerging leaders in improving skills, Performance based Pay-designed to address low wages in the field while encouraging attention toward good fiscal management, and increased attendance by the Executive Director at Person Centered Organization meetings to quickly respond and resolve issues and improve communication. Future surveys will be developed so that specific department or operations can get better feedback

#### Performance Outcome Measures

#### **Social Capital Index**

Bonding Social Capital:	86.1%	National Average:	64%
Bridging Social Capital:	83.8%	National Average:	53%
Social Capital Index:	85.2%	National Average:	60%

#### **Basic Assurance Index**

Health and Safety Index:	66.3%	National Average:	79%
Human Security Index:	71.7%	National Average:	64%
Basic Assurance Index:	69.3%	National Average:	<b>73%</b>

Our data shows that Diversified Enterprises exceeds the national averages except in the areas of health and safety and basic assurances. Our review of these areas indicates this is due to the nature of the individuals supported by Diversified Enterprises who tend to be more medically fragile, older and or behaviorally challenged than the general populations.

**Social Capital index** measures the collective value of all "social networks" [who people know] and the inclinations that arise from these networks to do things for each other.

**Bonding social capital** is a type of social capital that describes connections *within* a group or community characterized by high levels of similarity in demographic characteristics, attitudes, and available information and resources. Bonding social capital exists between 'people like us' who are 'in it together' and who typically have strong close relationships. Examples include family members, close friends, and neighbors.

**Bridging social capital** is a type of social capital that describes connections that link people across a cleavage that typically divides society (such as race, or class, or religion). It is associations that 'bridge' *between* communities, groups, or organizations.

**Health and safety index** combines multiple performance indicators of health and safety into a single, evidence-based measure.

**Human Security index** consists of three Indices that include economic, environmental, and social indicators.

**Basic Assurances**® are a balance between concerns for individual Health, Safety and Security and the necessity of social constructs such as Respect, Natural Supports and Social Networks to ensure sustainable outcomes for people

## **CQL Performance Areas**

# People are connected to natural supports. People have intimate relationships. People have friends.

### People interact with other members of the community.

**Achievements:** Diversified Enterprises continues to be committed to supporting individuals to connect with and maintain healthy relationships with friends, family, and others in the community. Diversified Enterprises recognizes the benefits of having natural support networks and we provide the supports that foster positive connections.

**Challenges:** Diversified Enterprises recognizes the difficulties of creating natural support networks where there is little or no family involvement present. We have also found that in a few cases, family involvement can cause other areas of the person's life to diminish (health, safety, etc.). In these cases, we still encourage the individual to connect with those family members, but we also assist them with creating a positive relationship. We have also supported individuals to grow a natural support network through friendships and social roles where family connections cannot be made.

## People perform different social roles. People participate in the life of the community.

**Achievements:** Diversified Enterprises continues to be committed to celebrating the accomplishments of the people we support and our employees. We encourage our employees and people supported to expand their own social roles and these are recorded through a one-page profile. We assure that our staff understand the meaning of social roles through training. We actively explore interests by supporting them to participate in community activities, church, social gatherings, sporting events and other events of their choice. DE believes that one of the most powerful social roles that a person can have is to be employed and we support people to achieve and maintain their employment while also developing relationships with employers and co-workers.

**Challenges:** Development of meaningful social roles can be challenging. Social roles often change and evolve with the person's interest. With an expanding aging population, often people find themselves unable to participate in the activities that they once could. In a few cases, an individual's challenging behaviors can hinder the development of social roles. Limited resources can also be challenging in a small community that does not offer some of the interests that individuals may have.

# People are safe. People have the best possible health. People use their environments. People experience continuity and security.

**Achievements:** The coordination of care between the staff and nurses has greatly improved with the implementation of the electronic medication administration report and health tracking through the Therap system. We have also improved our medication and proxy care training for staff. Continuity of care has also been expanded by building relationships with local physicians and other health care providers. Individuals are given information regarding their care in words that they can understand which builds continuity and a relationship between the person and a clinician that they can trust. Our safety team has taken the initiative to ensure that emergency preparedness steps and training is being implemented throughout the agency.

**Challenges:** It is a given that no one will be healthy all the time. Our aging population has shown trends through incident reporting of increasing health issues and safety concerns such as falls, injuries, and ER visits. Often our biggest challenge is knowing what to expect and having a contingency plan in place for those unknowns.

# People exercise rights. People are treated fairly. People are free from abuse and neglect. People are respected.

People choose when to share personal information.

**Achievements:** Diversified Enterprises is committed to supporting individuals to advocate for their rights and the rights of others. We have established a culture in which services are age appropriate and encourage independence. We provide people with the opportunity to exercise their rights and educate them on the responsibilities that accompany those rights. We support and educate individuals on life choices such as marriage, risky behaviors, and what they spend their money on. We encourage individuals to think about the consequences before they act. We utilize a human rights committee for decisions regarding rights restrictions that are written into a behavior support plan. Diversified Enterprises implements policies and procedures that define, prohibit, and prevent abuse, neglect, mistreatment and exploitation of the people we support.

**Challenges:** It is a challenge for individuals of limited cognitive and/or verbal ability to manage their own healthcare information and be able to articulate this information to healthcare providers. Because of this reason, often staff have to support the individual in giving personal information to health care providers to ensure the continuity of care for the person.

People choose where and with whom they live.
People choose where they work.
People choose services.
People choose personal goals.
People realize goals.

Achievements: Diversified Enterprises gathers information for the implementation of a personcentered plan by communicating with the person in their preferred method of communication, talking to the people that know them best, and taking into considerations the risks factors that are specific to the individual. We have improved our data collection and monitoring of goal progress for individuals. We encourage individuals to make choices regarding their work, play, and living arrangements. We someone expresses a wise to change something in their life, such as wanting to move or change services, Diversified Enterprises educates them on the steps it will take to achieve the goal and support them in achieving the goal. Achievements are celebrated and acknowledged. Diversified Enterprises has utilized Able accounts to support individuals with the financial aspect of goal achievement.

Challenges: Often, as human beings, we want to live above our means. In some cases, individuals do not have the resources to live in the home of their dreams or purchase that sports car they always wanted. We have also found that there are a few individuals that have a love for change in their lives and they want to move or change jobs often. Often, this will make data skewed because these few seem to be always looking for that "next best thing".

## **Operations Performance Metrics FY18**

Fiscal year 2018 began the transition from Accreditation under the Council of Quality and Leadership (CQL) to The Rehabilitation Accreditation Commission (CARF). While we continued to comply with our CQL requirements for tracking outcomes, we also began the transition to a new series of measures under our future accreditation. As a result, we began putting systems in place and establishing objectives to measure the following performance areas:

**Efficiency**- measures the quality of supports / outcomes of services or results & achievements for persons supported

**Effectiveness**-measures how effective the agency is with resources. They are usually time or financially oriented.

**Service Access**-*Measures the ability to serve-addressing waiting lists, capacity, expansion.* 

**Satisfaction**-measures directed at satisfaction of persons supported by the agency and other stakeholders.

## **Community Employment Program**

Program Census	Program Census	Total Persons Supported
July 1, 2017	June 30, 2018	FY18
61	64	91

## **Effectiveness Measures**

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Successful Placements	Referrals reach 5 <sup>th</sup> VR cycle by 6 months (180- day placement)	July 1, 2017 to June 30, 2018	Actual VR billing Invoices	Program manager	80%	33.25%

Results: Not met, 1<sup>st</sup> and 2<sup>nd</sup> quarters 60 and 67%, last 2 quarters billing did not reach 5<sup>th</sup> phase due to slow job placement.

Recommendations and Actions: Review this year's result; determine does this goal need to be revised.

## Community Employment Program – Efficiency Measures

Indicator	Applied	Time of	Data Source	Obtained	Goal	Actual
	То	Measure		By	(Target	Results
	(Target				or	for FY
	Group)				Bench	18
					mark)	
Meet or exceed	Employment		Actual	COO / Program	revenue	\$75,867 total
budgeted	Revenue, VR,	July 1, 2017 to	financial	Manager	over	revenue over
revenue	SFS, Waiver	June 30, 2018	performance		expenses	expenses
			vs. budget			

Results: Met all 4 Quarters Total Revenue=\$198,733, total expenses\$122,866

**Recommendations and Actions:** Maintain working under budget and review monthly finance reports

## Service Access Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Result s
Maximize number Successful VR Referrals	VR Billing Phase 1 & 2	July 1, 2017 to June 30, 2018	VR Billing invoice	Program Manager	20 successful	22 successful referrals for year

Results: Met worked to grow relationship with VR to increase referrals

Recommendations and Actions: Maintain growth with VR referrals

## Stakeholder Satisfaction Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Result s
satisfaction of all	Engagement Surveys / Turnover	July 1, 2017 to June 30, 2018	Survey	Manager	Survey >4.0 Turnover Less than 30%	No Turn over

Results: Met, no turnover

Recommendations and Actions: Maintain less than 30% turnover

## **Community Support Program**

Program Census	Program Census
<b>July 1, 2017</b>	<b>June 30, 2018</b>
85	80

## **Effectiveness Measures**

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Maximize achievement of outcomes	People Supported	July 1, 2017 to June 30, 2018	Person outcomes measured	Program manager	70%	75%

Results: Met and exceeded goal

Recommendations and Actions: Increase goal to 80% FY 19

## **Efficiency Measure**

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results for FY 18
Meet or exceed budgeted revenue	Actual financial performance vs. budget	July 1, 2017 to June 30, 2018	Actual financial performance vs. budget	COO / Program Manager	•	Net Income \$240,907

Results: Met all 4 Quarters Total Revenue=\$589,582, total expenses\$348,675

Recommendations and Actions: Maintain working under budget and review monthly finance reports

## Community Support Program – Service Access Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Maximize number of people supported	# of successful referrals	July 1, 2017 to June 30, 2018	Reg. 4 Field office	Program Manager	2 per quarter	4 successful for the year

Results: Not met 3 quarters, Field office did not make referrals

Recommendations and Actions: Work closely with field office, SC, and other agency to increase referrals

## Person Centered Supports Satisfaction Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Result s
Maximize Person Centered Services of all persons Supported	Active waiver customer	July 1, 2017 to June 30, 2018	Completion of 21 outcome interviews	Program Manager	90% of interviews completed on time	

Results: Interviews exceeded

Recommendations and Actions: Due to the lengthy process of CQL data entry in the new system, it was difficult to enter data. The agency will move from CQL accreditation to CARF accreditation and the (Personal outcome measure) POM is an item trademarked by CQL. The POM will no longer be utilized. Develop similar questionnaire utilizing Survey Monkey or Therap to capture individuals input regarding satisfaction.

## **Community Living Services**

Program Census	Program Census	Total Persons Supported		
July 1, 2017	June 30, 2018	FY18		
7	8	8		

## **Effectiveness Measures**

Indicator	Applied	Time of	Data Source	Obtained	Goal	Actual
	То	Measure		By	(Target	Results
	(Target				or	
	Group)				Bench	
					mark)	
To maximize	Person		ISP goals	Program	70%	65%
achievement of	Supported	July 1, 2017 to		manager		
outcomes		June 30, 2018				

Results: Did not meet goal for the year but improved from first quarter thru the forth.

Recommendations and Actions: Review this year's result; determine does this goal need to be revised.

## **Efficiency Measure**

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results for FY 18
Meet or exceed budgeted revenue	Management and leadership	July 1, 2017 to June 30, 2018	Actual financial performance vs. budget	COO / Program Manager	revenue over expenses	Net Income \$335,238

Results: Met all 4 Quarters Total Revenue=\$1168478, total expenses\$833,240

Recommendations and Actions: Maintain working under budget and review monthly finance reports.

## Community Living Services-Service Access Measure

Indicator	Applied	Time of	Data Source	Obtained	Goal	Actual
	То	Measure		By	(Target	Results
	(Target				or	
	Group)				Bench	
					mark)	
Maximize	New referrals		Referral data	Program	One per	2 during
number of		July 1, 2017 to		Manager	Quarter	calendar year
people supported		June 30, 2018				

Results: two referrals were received achieving 50% of goal.

Recommendations and Actions: Expand capacity for new referrals. Work closely with field office, SC, and other agency to increase referrals

## Person Centered Supports Satisfaction Measure

Indicator	Applied	Time of	Data Source	Obtained	Goal	Actual
	То	Measure		By	(Target	Result
	(Target				or	S
	Group)				Bench	
					mark)	
Maximize Person	Person		Completion of	Program	90% of	87.5%
Centered	Supported	July 1, 2017 to	21 outcome	Manager	interviews	
Services of all		June 30, 2018	interviews		completed	
persons					on time	
Supported						

Results: Overall interviews completed were 87% 3% under goal.

Recommendations and Actions: Due to the lengthy process of CQL data entry in the new system, it was difficult to enter data. The agency will move from CQL accreditation to CARF accreditation and the (Personal outcome measure) POM is an item trademarked by CQL. The POM will no longer be utilized. Develop similar questionnaire utilizing Survey Monkey or Therap to capture individuals input regarding satisfaction.

## **Group Home Services**

<b>Program Census</b>	Program Census	<b>Total Persons Supported</b>
July 1, 2017	June 30, 2018	FY18
14	13	16

## **Effectiveness Measures**

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
To maximize achievement of outcomes	Person Supported	July 1, 2017 to June 30, 2018	ISP goals	Program manager	70%	97.5%

Results: Goal Met

Recommendations and Actions: Continue to make goals person centered.

## **Efficiency Measure**

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results for FY 18
Meet or exceed budgeted revenue	Group Homes	July 1, 2017 to June 30, 2018	Actual financial performance vs. budget	COO / Program Manager	revenue over expenses	Net Income \$389,320

Results: Met all 4 Quarters Total Revenue=\$1,480,677, total expenses\$1,091,357

Recommendations and Actions: Maintain working under budget and review monthly finance reports

## **Group Home Services**

### Service Access Measure

Indicator	Applied	Time of	Data Source	Obtained	Goal	Actual
	То	Measure		By	(Target	Results
	(Target				or	
	Group)				Bench	
					mark)	
Maximize	New referrals		Referral data	Program	2 per	4 referrals
number of		July 1, 2017 to		Manager	Quarter	added
people supported		June 30, 2018			when	
					vacancy	
					exists	

Results: 4 The group home operated 1st quarter 76% occupancy, 2nd quarter 76% occupancy, 3rd quarter 76% occupancy, and 4th quarter 88% occupancy.

Recommendations and Actions: Expand capacity for new referrals. Work closely with field office, SC, and other agency to increase referrals

#### Service Access Measure

Indicator	Applied	Time of	Data Source	Obtained	Goal	Actual
	То	Measure		By	(Target	Results
	(Target				or	
	Group)				Bench	
					mark)	
Transition	# of successful		Discharge	Program	2	1 person
individuals	of individual	July 1, 2017 to	data	Manager	individual	
supported to more	who transition	June 30, 2018			S	
individualized	to smaller				annually	
living arrangement	settings					

Results: Goal met, 1 person returned to being supported by their family and one person moved to a CLS setting.

Recommendations and Actions: Work closely with Host Home Manger and Residential Director to maintain or exceed benchmark of placing people supported into less restrictive environment.

## Person Centered Supports Satisfaction Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench	Actual Result s
					mark)	
Maximize Person	Person		Completion of	Program	90% of	70%
Centered	Supported	July 1, 2017 to	21 outcome	Manager	interviews	
Services of all		June 30, 2018	interviews		completed	
persons					on time	
Supported						

Results: The 70% of outcomes completed, benchmark was not met.

Recommendations and Actions: Due to the lengthy process of CQL data entry in the new system, it was difficult to enter data. The agency will move from CQL accreditation to CARF accreditation and the Personal outcome measure (POM) is an item trademarked by CQL. The POM will no longer be utilized. Develop similar questionnaire utilizing Survey Monkey or Therap to capture individuals input regarding satisfaction.

## Host Home Supported Living Program

Program Census	Program Census	Total Persons Supported
July 1, 2017	June 30, 2018	FY18
12	11	14

### **Effectiveness Measures**

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
People supported develop natural supports	People supported	July 1, 2017 to June 30, 2018	HRST data tracking comment section & daily documentatio n	Program manager	4 natural support relations hips per year	Exceeded 6 total

Results: 6 natural supports were added in the year. 4 for one individual supported and 2 for another.

Recommendations and Actions: Continue to support and train providers on access, social engagement, and developing social roles. Will also enroll providers in trainings hosted by DBHDD and GA Collaborative.

## **Efficiency Measure**

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results for FY 18
Meet or exceed budgeted revenue		July 1, 2017 to June 30, 2018	Actual financial performance vs. budget	COO / Program Manager	revenue over expenses	\$77,149 revenue over expenses

Results: Met: Total Revenue=\$598,370, total expenses\$521,221

Recommendations and Actions: Review of weekly/month report of actual funding received to ensure all days are billed and paid. Maintain working under budget and review monthly finance reports

## Shared Living/Host Homes Program - Service Access Measure

Indicator	Applied	Time of	Data Source	Obtained	Goal	Actual
	То	Measure		By	(Target	Results
	(Target				or	
	Group)				Bench	
					mark)	
Maximize	Community		Excel	Program	4 per	1 new host
number	Stakeholders	July 1, 2017 to	spreadsheet	Manager	year	home
providers		June 30, 2018				provider
available						1 current &
						return

Results: There was a total of four potential providers were interviewed. Two were declined by the interview panel. One new host home provider was established in FY18. One potential host home provider was pending approval.

Recommendations and Actions: Consider use of Indeed and attendance at local job fairs to recruit.

## Person Centered Supports Satisfaction Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Result s
Maximize Person Centered Services of all persons Supported	People Supported	July 1, 2017 to June 30, 2018	Completion of 21 outcome interviews (POM)	Program Manager	90% of interviews completed on time	

Results: Personal outcome measure (POM) interviews were complete; however, only 20% of interviews were entered into either Council for Quality and Leadership system or File Maker Pro application.

Recommendations and Actions: Due to the lengthy process of CQL data entry in the new system, it was difficult to enter data. The agency will move from CQL accreditation to CARF accreditation and the (Personal outcome measure) POM is an item trademarked by CQL. The POM will no longer be utilized. Develop similar questionnaire utilizing Survey Monkey or Therap to capture individuals input regarding satisfaction.

### **Behavior Supports**

Behavior Supports had 16 individuals receiving services as of July 2017. During FY18, two individuals were discharged. A total of 9 additional referrals started receiving supports during the fiscal year. 2 in September 2017, 1 in January 2018, 3 in March 2018, 2 in May 2018 and 1 in June 2018

As of June 30, 2018, there were 23 individuals receiving behavior support services from Diversified Enterprises.

The estimated capacity is 27 individuals, although this may be adjusted higher as the part time DDP gained approval to begin providing behavior supports during FY2018 and is supporting one individual.

#### **Nursing Services**

Nursing Services had 9 individuals receiving billable nursing services as of July 2017. During FY18, two individuals were discharged, and two individuals were added during the year. As the end of FY18, there were 10 individuals receiving nursing services (RN and/or LPN) from Diversified Enterprises.

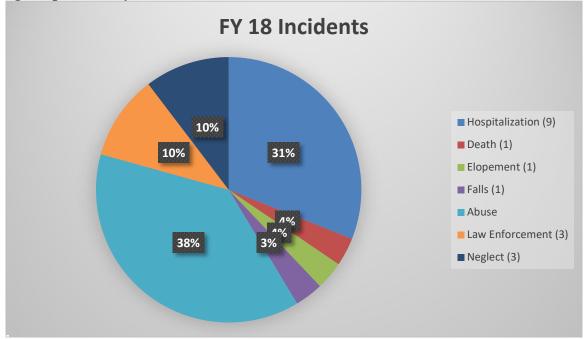
Nursing services are also responsible for Personal Care for Private Home Care provider services licensed under the Georgia Department of Community Health and, as of FY18, we have 6 individuals receiving those services.

# Critical Incident / Health & Safety Review

On an annual basis, all critical incidents are reviewed to determine any trends or contributing factors to incidents occurring. This helps to identify areas of improvement and increase the health and safety of the individuals we support.

Definition: A Critical Incident is a serious or unusual event involving an individual receiving services. Some examples of a critical incident are; unexpected illness or injury, a fall that requires medical intervention, aggressive or unusual behavior, law enforcement intervention etc.

During the period July 1, 2017 to June 30, 2018, there were a total of 30 Critical Incidents.



#### Review:

The agency had a total of 30 incidents from July 1, 2017 through June 30, 2018 as compared to 46 the previous fiscal year. There was one sudden unexpected death at the hospital of a 66-year-old individual receiving services in the group home. Additionally, there were 9 other hospitalizations with individuals returning home a decrease of 17 from the previous year. Of note, there were 11 incidents of abuse, 5 which were substantiated as compared to 14 the previous year with two substantiated. Upon review of FY18 data, four (4) resulted from the same incident involving two staff-both committing physical and psychological abuse and one other incident was substantiated at the group home. In all cases staff were terminated immediately. The high number of reports of abuse are attributed to both staff and persons supported being strong advocates and repeated training around mandatory reporting. The agency is not hesitant in reporting and investigating allegations and sees those that are unfounded as training opportunities. The law enforcement interventions of persons supported (3) are attributable to the behavioral supports needed by those served by the agency this was a decrease of two from the previous year. Our Agency incident review team meets monthly to review all incidents and make recommendations. Agency preventative

actions are documented in the risk management plan.

## **Complaints Review**

Definition: A complaint consists of a belief that the person supported received poor quality services from the agency (please note it is not a rights violation which must always be reported). Diversified Enterprises encourages complaints to be brought to the attention of the team leader or program manager for resolution. Generally, this is done by discussing the concerns directly with staff.

There were no complaints in FY 18.

Diversified Enterprises is committed to providing innovative and person-centered services for individuals with disabilities. We strive to provide individuals with developmental disabilities opportunities to make contributions while establishing and maintaining relationships with the people in their community. We support over 150 people in 8 counties throughout South Georgia.

The Agency maintains its Employment 1st philosophy and is proud of its diverse community-based services and comprehensive array of residential supports that help people live independently, have meaningful employment and be a part of their community.

#### **Our Mission**

Empowering individuals supported to live, work, and participate fully in their community.

#### **Our Vision**

To release the potential of individuals supported to live the life they love

#### Our Values

Person Centered \* Collaboration \* Empowerment \* Innovation \* Leadership

