ANNUAL REPORT

Mission: Empowering individuals supported to live, work and participate fully in their communities







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The Executive Director's Message

As we have closed out our first year together, July 2023 to June 2024 has not been without its celebrations and struggles. Diversified Enterprises has continued to be one of the most respected and sought-after IDD providers in the state for the past 55 years.

As we have struggled to bounce back from the pandemic, a staffing crisis has hit our industry nationwide. Diversified Enterprises has also struggled with high turnover rates and ever-increasing overtime hours. Our DSPs have shown perseverance and continued to deliver quality supports while other providers have had to close their doors due to the staffing crisis. I can't say enough about our direct support workers, host home providers, and even the leadership who have gone above and beyond this past year to make sure that people continue to live the lives that they love.

During the past year, our focus has shifted towards the development of the leadership skills of our management team. We believe that this will be the key factor in staff retention moving forward because people stay at jobs where they are valued, respected, and invested in. We have invested in outside consultants to teach our team more about EDI, giving feedback, dealing with different personalities, and team building. We hope to continue to grow as a team in the coming years.

As there are changes to rates and policies close on the horizon for the new year, we are hopeful that the staffing crisis is about to take a shift for the better. I believe in our team, and I know this year will be even better than the last!

Kristy Dominy
Executive Director/CEO

DEMOGRAPHICS OF PERSONS SUPPORTED

FY24

July 1st, 2023- June 30th, 2024

AGE							
22-40	31						
41-65	54						
66-85	12						

Gender								
Female	39							
Male	58							

Diagnosis	
Intellectual Disabilities	109
Pervasive and Specific Developmental Disorders	16
Disorders of Adult Personality and Behavior	19
Other	105

Race/Ethnicity						
Other	1					
Black/African American	58					
White	37					
Hispanic/Latino	1					



FINANCIAL REPORT

FY24

OVERVIEW

Total Revenue

\$4,747,004

Total Expenses

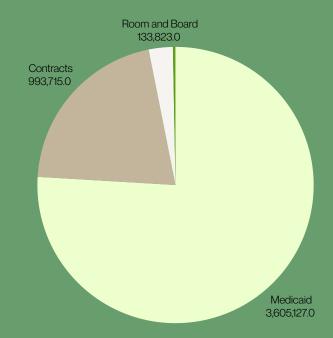
\$4,641,673

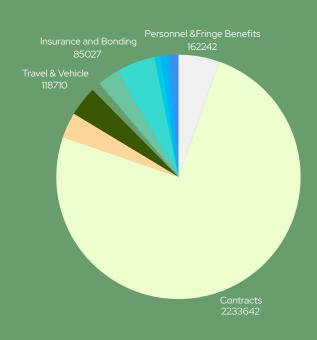
Total Revenue Over Expenses

\$105,331

Revenue Summary

During FY24, Diversified's final revenue budget of \$5,024,755 became an actual revenue budget of \$4,747,004. With the majority of our revenue coming from Medicaid, we are hoping to generate more revenue in other areas such as contracts and other local funds.





Expenses Summary

The total expenditures for FY24 were budgeted to be \$4,861,525 but were actually \$4,641,673. We are proud to report that our expense budget did not exceed itself during FY 24. Due to our expenditures being \$219,852 below the anticipate amount, DE was able to maintain revenue over expenses.

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Conclusion

FY24 was another positive year for Diversified Enterprises. Total revenue over expenses was \$105,331. DE continues to make strides towards maintaining this momentum and reaching other long term financial goals.

CONCLUSION

BUSINESS MEASURES

FY24

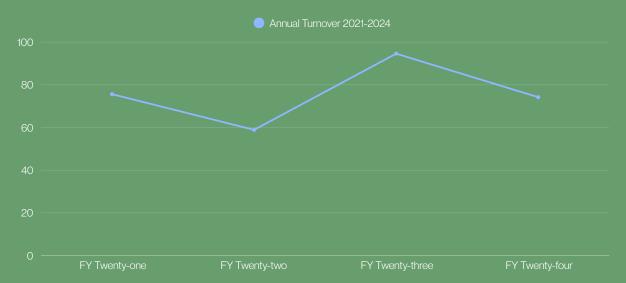
OVERVIEW

Overall Agency wide staff turnover ratio (excluding internal transfers and promotions)

Overview

74.2%

Turnover Ratios



DISCUSSION

The turnover rate is a critical metric for Diversified Enterprises as it reflects the percent of employees we have lost and retained. This information aids us in our efforts to minimize staff turnover. During FY24, turnover was calculated at 74.2%. This is 42.1% above the goal of <32.1% given by the National Core Indicators ™ (NCI ™) for the state of Georgia. The goal of < 32.1% derives from the Georgia benchmark data collected during the 2023 survey.

CONCLUSION

The Annual Turnover Rate graph shows the turnover percentages for Diversified Enterprises during the past 4 fiscal years. Although the turnover percentage decreased during FY 24, we are still working to increase retention. These efforts include incentives for longevity as well as activities to boost the morale for all employees.

FY24 Strategic Planning



Satisfaction and Engagement

Recognition

Operational Integrity

Expansion

Leadership and Advocacy

Social Capital

Goal: To improve experiences with the Agency while increasing loyalty and retention.

Goal: To increase brand awareness and recognition to further Diversified Enterprises as an industry leader and the provider of choice while growing our influence in public policy.

Goal: To achieve operational excellence by merging people, processes, and assets into a well-defined, highly efficient and proactive agency.

Goal: To continue as an agency with strong and sustainable growth in both the quality and quantity of existing services while crafting person centered solutions to meet the needs of future markets to individuals with disabilities.

Goal: To position the Agency and its members as valued advocates and as innovative leaders in Georgia.

Goal: To build social capital (work/business opportunities, financial capital, power & influence, emotional support, and meaningful relationships) for members associated with Diversified Enterprises.

Satisfaction and Engagement

- · Established date to deploy surveys to collect satisfactory data
- · Deployed Satisfaction Survey for all Departments
- · Continued Tracking retention and turnover data
- · Formulated staff surveys by department
- Revised old survey
- Created Surveys for New Hires

Recognition

- Formulating plans for a Diversified Enterprises Newsletter Continued Nominations for The Dottie Adams Award, DSP of the Year, SPADD and WISE
- Virtual Recognition Board continued maintenance of the Diversified Enterprises website and Facebook Continued to increase the agency's recognition with logo items
- Continued partnerships with community clubs and organizations

Operational Intergrity

- Revamped quarterly performance metrics surveys
- Updated inventory fracking for all computers and other electronics Continued CARF standards training Continued reviewing and updating policies
 The Compliance Team resumed quarterly meetings

Expansion

- · Expanding Host Homes Services
- · Expanding Advisory Board
- Expanding Employment services to Pre-ETs
- Continuing to develop or recruit subject matter experts on, Aging, Autism, Employment, Meaningful Day
- Continued to attend career fairs and advertise job openings
- Continued Advocacy at school systems regarding transition to services and expanding knowledge of
- In progress: licensing/zoning for 3-person group home
- · Developing a Plan to create an Intensive Behavioral Home

Leadership and Advocacy

- · Aktion Club continued to participate in community service initiatives
- CEO and COO Attended the ACSES Conference
- Supported Employment Manager and CEO attend NAQ Conference
- CEO and COO became PCT Trainers
- · Self-Advocates continued to serve on Local Community Boards
- Continued to Develop Curriculum for Team Leader and DSP Training
- DDP and Residential Manager became PBS trainers

Social Capital

- Georgia Learning Community members CEO continued to serve on National APSE Board of Directors COO Georgia APSE Board Member
- Supported Employment Manager continued to serve on Parent to Parent Georgia Board of Directors New Residential Supervisors were Hired
- - Leadership Training through Mission 501
 Leadership Advance and Strategic Planning Completed 3/2024
 Continued to Participate in Capital Advocacy Days
 Persons Supported Continue to Serve on, Child Abuse Council, United for Change, and Sangha Network

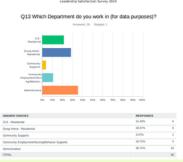
 - Continued Aktion Club recruiting and participation Leadership Team continues to attend trainings provided by outside entities DSP has completed enrollment in the DSP Certification Program



EMPLOYEE SURVEY RESULTS

FY24





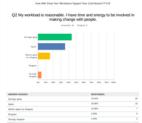
DISCUSSION

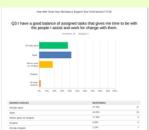
The Leadership Satisfaction survey shows data collected during FY 24 about our leadership team. We can conclude that over 70% of staff who participated in the data collection felt seen, heard and overall, adequately supported by their direct supervisors. We also acknowledge that less than 10% of staff did not feel seen, heard or supported as well as indifferent. The leadership team continues to create innovative ways to support staffs unique and individual needs.

EMPLOYEE SURVEY RESULTS CONTINUED

FY24













DISCUSSION

During our participation in the Learning Journey hosted by the *Sangha Unity Network Inc.*, Diversified Enterprises leaders were provided with this survey tool titled "*How Well Does Your Workplace Support Your Contributions?*". This survey was used to aid the leadership team in gauging what supports are needed to give staff the tools they need to build meaningful and powerful relationships with the people they support. According to the data collected, less than 10% of staff felt that their workplace does not provide adequate support in helping them to foster relationships with the people they support. 60% of staff felt that their supervisors value the relationships they have with the people they support and encourage them to work to make change that matters to people. Less than 20% of staff who participated in the data collection presented results that were indifferent. Based on the data collected we can conclude that more than half of the staff who participated in the data collection, feel that they are being supported to foster meaningful relationships with the people they assist and support. Diversified Enterprises will continue to use this survey tool to continue gauging our success in creating a person-centered organization for all!

RESIDENTIAL SATIFACTION SURVEY RESULTS

FY24







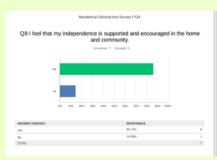














DISCUSSION

The Residential Satisfaction Survey results show that 100% of people who participate in the data collection feel that they; have all of their basic needs, are satisfied with their health, get along with the people they know and see often, and are overall satisfied with their lives. Areas for improvement that were identified consist of matters such as; time spent in the community, satisfaction with the home they live in, feeling safe within their homes and feeling overall good about oneself and their abilities. These survey results have been used to address the identified areas of deficit and to continue the enhancement of residential services. Surveys will continue to be deployed to collected data to ensure satisfaction of residential services recipients.

SUPPORTED EMPLOYMENT SATIFACTION SURVEY RESULTS

FY24



DISCUSSION

The Supported Employment Satisfaction Survey shows that there is a 100% satisfaction for all of the identified areas except one. 1 survey response shows that 20% out of the people who participated in the survey feel that their strength and weaknesses are not taken into account in their current job placement. The supported employment staff and manage have been frequently checking in with people receiving this service, to ensure that their current positions are fulfilling and meaningful to them. Data will continue to be collected to ensure the satisfaction of all Supported Employment participants.

COMMUNITY SUPPORTS SATIFACTION SURVEY RESULTS

FY24



SUMMARY

The Community Supports data collected shows that out of those who participated in the survey, 80% were satisfied with their choice of community activities and feeling that their independence was being supported in their home. The other areas of interest such as safety, and the professionalism of the support staff received satisfaction ratings of 100%. Satisfaction data will continue to be collected to aid Diversified Enterprises in providing satisfactory person centered supports for all!

COMMUNITY EMPLOYMENT FY24

OVERVIEW

Program Census 7/1/23-6/30/24

29

Effectiveness Measures: Not Met Efficiency Measures: **R/E \$4,492, E/R \$13,785**

Service Access: Not Met Satisfaction Measure: Met

Total Persons Supported

29

ENESS RES	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
EFFECTIVENESS MEASURES	Succesful Placements	Referrals reach 5th VR cycle by 6 months (180 day placement)	July 1, 2023 to June 30, 2024	Actual VR Billing Invoices	Program Manager	80%	1 Placement	The Community Employment Manager has met with GVRA management in hopes of building a better relationship. We plan to continue networking with them to increase referrals.
NCY	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtaine d By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
EFFICIENCY	Maximum number of billable hours	VR and Employment	July 1, 2023 to June 30, 2024	Billing Invoice	Program Manager	Billable Hours Per Staff/Monthly	Not Met	GRVRA did not refer anyone to Diversified Enterprises. The Supported Employment manager has met with GVRA management to discuss the breakdown in the referral process. DE leadership will continue to foster a relationship with GVRA in hopes of supporting more individuals who will be referred by them
	Meet of Exceeded budgeted revenue	Employment revenue, VR, SFS, Waiver	July 1, 2023 to June 30, 2024	Actual Financial performance vs. budget	Program Manager	Revenue over Expeses	\$4,492	Even though there was decrease of revenue in the 4th quarter, there was revenue over expense in the last quarter. However, in the first 3 quarters, there was expense over revenue in the amount of \$13,785.
ACCESS JRES	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
SERVICE ACCE MEASURES	Maximize the number of people supported by SE	SE Group and SE Invididual	July 1, 2023 to June 30, 2024	Successful GVRA Referrals	Program Manager	5 Successful Referrals Quarterly	0 Placements	The Supported Manager along with the DDP will continue to collaborate with GVRA to maximize the the number of referrals and people supported.
CTION	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
SATISFACTION	Maximize satifaction of employees and stakeholders	Employees and Persons Supported	July 1, 2023 to June 30, 2024	Surveys	DDP	Employees/Stake holders- 4.0 and 75% Person Supported	Met	Surveys were deployed and the results show that over 75% of staff and persons supported that participated are satisfied. Surveys will continue to be deployed to capture areas of satisfaction and deficit.

Results: The exchange in power and turnover of staff at the GA Vocational Rehab has caused the lack of referrals for Diversified Enterprises. The Community Employment manager has begun bridging the gap by making contact and reestablishing relationships with the new staff and administrative GVRA team. With these efforts being made to make connections, we forsee and increase in persons served and revenue during the next fiscal year.

COMMUNITY SUPPORT

OVERVIEW

Program Census 7/1/23-6/30/24

58

Effectiveness Measures: Met
Efficiency Measures: R/E \$55,889
Service Access: Not Met
Stakeholder Satisfaction Measure: Met

Total Persons Supported

58

EFFECTIVENESS MEASURE	Indicator	Applied To (Target Group)	Time of Measu re	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
EFFECT	Maximize achievement of outcomes	People Supported	July 1, 2023 to June	Person outcomes measured	Program Manager	75%	100%	Persons supported have become more involved in selecting their goals. Completing person focused worksheets with DDP has empowered individuals to gravitate towards activities they love. We will continue on this momentum.
EFFICIENCY MEASURE	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
EFFIC	Meet of Exceed Budgeted Revenue	Actual financial s vs budget	July 1, 2023 to June 30, 2024	Actual financials vs budget	COO/Program Manager	Revenue over Expenses	\$55,889	Community Supports performed well this year. Each quarter was completed with revenue over expenses.
ACCESS	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtaine d By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
SERVICE ACC MEASURE	Maximize number of people	New	July 1, 2023 to	Region 4 Field Office/	Program			During FY24 there was one individual added during the 4th quarter. The Program Manager and DDP will
	supported	Referrals	June 30, 2024	SC Referral s	Manager	1 Individual per quarter	1 Placement	continue to work together to screen/review all referrals. They will also continue to keep open lines of communication with SC to keep them aware of vacancies.
SATISFACTION MEASURE	supported Indicator	Applied To (Target Group)		Referral			1 Placement Actual Results	screen/review all referrals. They will also continue to keep open lines of communication with SC to keep them

CONCLUSION

Our Community Support Services continue to provide meaningful day services without walls! We have seen an increased amount of participation from persons supported in the process of choosing their goals and the frequency in which they address them. As we continue to accept referrals, we are also anticipating an increase in revenue.

COMMUNITY LIVING SERVICES

FY24

OVERVIEW

Program Census 7/1/23-6/30/24



Effectiveness Measures: Met
Efficiency Measures: **R/E \$46,469 E/R \$6,406**

Service Access: Not Met Stakeholder Satisfaction Measure: Met Total Persons
Supported

6

/ENESS URE	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtaine d By	Goal (Target or Benchmark)	Actual Results	Recommendations and Results
EFFECTIVENESS MEASURE	Maximize achievement of outcomes.	Person Supported	July 1, 2023 to June 30, 2024	ISP Goals	Program Manager	50%	50%	Persons supported continued to exceed the outcome measures during FY24. With the support of DSPs and the residential management team, Persons Supported are expected to continue meeting their goals.
EFFICIENCY MEASURE	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Results
EFFIC	Meet or exceed budgeted revenue	Actual financial s vs budget	July 1, 2023 to June 30, 2024	Actual Financial performa nce vs budget	COO/Prog ram Manager	Revenue over Expenses	\$ 46,469	During FY24, CLS experienced a total revenue over expenses of \$46,469. However, CLS also experience expense over revenue during the 3rd quarter. This was due to frequent service interruptions due to factors such as hospitalizations and disruption of Medicaid eligibility. The team continues to work to mitigate such risk.
ERVICE ACCESS MEASURE	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Results
SERVICE	Maximize number of people supported	New Referrals	July 1, 2023 to June 30, 2024	Region 4 Field Office/S C Referrals	Program Manager	One New Placement by End of the Year	0 Placements	There were no new placements during this year. This was due to the lack of vacancies within the agency as well as a server shortage of staff. As we continue to remedy the shortage of staff, we will continue to receive a
FACTION	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Results
SATISFACTI	Maximize Employee Engagement and Satisfaction	CLS Staff and Persons Support ed	July 1, 2023 to June 30, 2024	Surveys	DDP	Employees/ Stakeholders> 4.0 and 75% Person Supported	Met	The data collected suggest that 100% of the participants who participated in the data collections are satisfied with the services that they are currently receiving.

CONCLUSION

The Community living supports program continues to provide supports to the same number of individuals. Although, there were no new placements during FY 24, the team continues to receive and review referrals for future opportunities to provide supports. Individuals within the CLS program continue to thrive while reaching and exceeding the goals that they have set for themselves with assistance from the team. As we move forward into the new fiscal year, the team will continue to support CLS program participants and other services areas in advocating for themselves and reaching their goals.

GROUP HOME SERVICES

FY24

OVERVIEW

Program Census 7/1/23-6/30/24

177

Effectiveness Measures: Not Met
Efficiency Measures: Met
Service Access: Not Met
Stakeholder Satisfaction Measure: Met

Total Persons
Supported

17

VENESS URE	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtaine d By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
achiever	Maximize the achievement of outcomes	Person Supported	July 1, 2023 to June 30, 2024	ISP Goals	Program Manager	50% Outcomes Achieved	75%	Goal compliance presented itself as an issue during the 1st quarter. The residential management team worked with DSP and individuals supported to encourage working towards achieving their goals. DDPs have been speaking with individuals prior to their ISP meetings to make sure goals align with what is important to them. The team will continue to collaborate in this manner to achieve further success in maximizing achievement outcomes.
EFFICIENCY MEASURE	Indicator	Applied To (Target Group)	Time of Measu re	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
EFFIC	Meet or exceed budgeted revenue	Management and Leadership	July 1, 2023 to June 30, 2024	Actual Financial performnace vs. budget	COO/Program Manager	Revenue over Expenses	\$411,774	Group Home Services completed FY24 with revenue of expenses totaling \$411,774. Group Home Services will continue to remain under budget by continuously reviewing the monthly finance reports.
SERVICE ACCESS MEASURE	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtaine d By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
SERVICE	Maximize number of people supported	New Referrals	July 1, 2023 to June 30, 2024	Referral Data	Program Manager	One Referral per quarter	2 referrals reviewed	Group Home Services reviewed referrals all quarters except for one. During the 3rd quarter, the attention of the team was redirected to a person supported who was in Host Home and wanted to move into a group home setting. A vacancy was found, and they were relocated. The team will continue to review referrals monthly.
SATISFACTION MEASURE	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
SATISF	Maximize satifaction of employees and stakeholders	Satisfact ion Surveys	July 1, 2023 to June 30, 2024	Surveys	DDP	Surveys > 4.0 Turnover Less than 30%	Met	During the fiscal year there was a satisfaction rate of about 75% for those who participated in the data collection. Surveys will continue to be deployed to aid in the effort of sufficient person centered supports service delivery.

CONCLUSION

The Residential Team continues to offer training and coaching in goal compliance. The time continues remind persons supported of their rights to change their goals if they feel that the goal is not a good fit. This empowers the people we supported to navigate their journey to greater independence and living a life that is meaningful to them. As we move forward, the team will continue to review more referrals in hopes of providing supports to others as vacancies present themselves.

HOST HOME SUPPORTED LIVING

FY24

OVERVIEW

Program Census 7/1/23-6/30/24



Effectiveness Measures: Met
Efficiency Measures: **E/R 16,950 R/E 106,636**Service Access: Not Met
Stakeholder Satisfaction Measure: Met

Total Persons
Supported

8

EFFECTIVENESS MEASURE	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
EFFEC"	Maximize Person Centered Services of all persons supported		July 1, 2023 to June 30, 2024	Monthly Visits in total compliance with HHLSP Operational Standards	Program Manager	Compliant	Compliant	Host Home Life Sharing Providers continue to meet expectations of maintaining their home in compliance with DBHDD HHLSP operational standards.
ENCY	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
EFFICIENCY	Meet or Exceed budgeted revenue	Management and Leadership	July 1, 2023 to June 30, 2024	Actual financial performance vs. budget	CCO/ Program Manager	Revenue over Expenses	\$106,636	Host Home Supported Living had revenue over of expenses totaling \$106,636. Although Host Home did experience revenue over expense, during the 3rd quarter, Host Home Services had expenses over revenue totaling \$16,950. This was due to the loss of two persons supported.
ACCESS	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
SERVICE ACCESS MEASURE	Maximize number of providers available	Community Stakeholders	July 1, 2023 to June 30, 2024	Surveys	Excel Spreadsheet	Program Manager	0 Persons Added	There were people who expressed interest in becoming providers during FY24. Some did not follow through the process of completing an application. Others completed the application process but did not qualify due to background discrepancies. The team will continue to answer inquires and recruit possible providers.
SATISFACTION MEASURE	Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results	Recommendations and Actions
SATISF	Maximize satifaction of employees and stakeholders	Satisfaction Surveys	July 1, 2023 to June 30, 2024	Surveys	DDP	Maximize satisfaction of person supported and stakeholder results > 4.	Met	There were no complaints reported during FY24. Both Host Home Providers and persons supported reported satisfaction percentages of 100%.

The Host Home Service area continues to thrive! Through monthly and quarterly visits from management, the Host Home Providers continue to be in compliance. The team continues to receive and review referrals while simultaneously interviewing potential host home providers. We are hopeful that this service area will continue to grow.

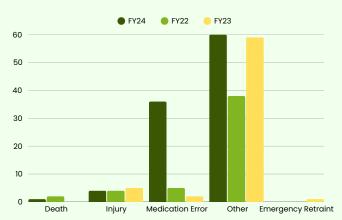
CONCLUSION

COMPLAINTS AND INCIDENT REPORTS

JULY 1ST, 2023 - JUNE 30TH, 2024

Critical Incidents

In FY24 we saw an increase in the amount of reported medication errors. This is due to a new system we implemented to increase oversight of medication administration procedures. Since implementing this new reporting system, we have seen a decrease in the amount of medication and charting errors. We were unfortunate to have one death of an elderly individual during the year. Incidents that fall into the category of other are; emergency room visits that were due to challenging behaviors, minor altercations, instances of physical or verbal aggression and sensitive situations.

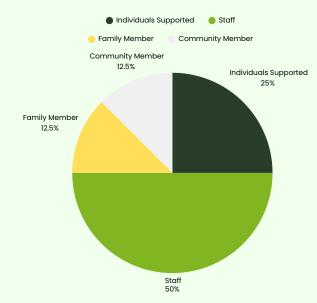


Definition of Critical Incident

 A Critical Incident is a serious or unusual event involving an individual receiving services.

Complaints

A complaint consists of a belief that a person supported has received poor quality services from the agency (please note that a rights violation must always be reported). During the year there was a total of 6 complaints. Two of these reports consisted of a possible abuse and/or neglect. Both allegations were substantiated and all staff members involved were terminated. All complaints are investigated by the DDP and/or HR in an attempt to gather information from all parties involved to reach the best solution.



Definition of a Complaint

A complaint consists of a belief that a person supported has received poor quality services from the agency (please note that a rights violation must always be reported).



Our team continues to meet regularly, to discuss these issues as well as discuss ways to further mitigate risk. The Human Rights Committee continues to meet to review all behavior support plans as well as urgent matters that may involve potential abuse, neglect and exploitation of individuals supported. Minutes are taken at all meetings and all topics discussed are reviewed by the Compliance Committee.

BIBLIOGRAPY

GEORGIA NATIONAL CORE INDICATORS TM 2023 SURVEY RESULTS

MAKE A DIFFERENCE A GUIDEBOOK FOR PERSON CENTERED DIRECT SUPPORT JOHN O' BRIEN AND BETH MOUNT 4TH PRINTING PAGE