



FY21 Annual Management Report

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ANNUAL REPORT FY21

Executive Director's Message

I'm pleased to share updates from fiscal year July 2020 to June 2021 (FY21). Diversified Enterprises is celebrating 52 years and is one of the regions longest operating agencies providing services to people with intellectual and developmental (IDD) disabilities.

There's no denying that the sudden impact of a pandemic changed the way we deliver services to some of our communities most vulnerable individuals. By July of 2020, our team had pivoted and adapted to working remotely and delivering either virtual or individual supports safely to persons supported in our day and employment services. Meanwhile, in our residential operations, we developed new staffing patterns and implemented infection prevention measures while providing timely, supportive, and quality services to Individuals supported who were now quarantining at home. Our dedicated essential workers kept right on working and providing face-to-face services to those who needed it. I can't say it enough-our direct support professionals and host home providers are truly the heroes of our agency.

While a primary focus since the onset of the pandemic has been on keeping people safe from the COVID19 virus, we also recognized, and responded to, the need to provide technology to keep our staff and people supported connected virtually to their community. For the first half of this fiscal year, our team literally held 2-3 virtual events daily that help to prevent social isolation and facilitate engagement in the community. Our team of advocates connected with our United for Change advocates and lead advocacy training for DSP's and people supported in Georgia. They also had the opportunity to present at TASH and the Toronto Institute. We also recognized we needed to maintain some of our routine activities, so we had a weeklong virtual retreat, several drive through cook outs, a virtual Christmas party and virtual all staff meetings.

A highlight of this fiscal year was our getting the Moderna vaccine in January of 2021 so we could start vaccinating people supported, team members, families and our community. We were the first community IDD provider in South Georgia to get vaccines delivered. Thanks to our nursing team for managing that!

As we close out this fiscal year, I wish to thank Diversified Enterprises team members and host home providers for their dedication and the people we support for their fortitude in such uncertain times. In the coming year, we will continue to provide vital services that address what bot important to and important for the individuals we are honored to support in our community, while minimizing the risk of exposure to COVID19.

Dave Wilber, Executive Director / CEO

FY 21 Demographics Persons Supported (as of June 30, 2021)

African American/Black	87
Asian	0
White	52
Hispanic/Latino (Ethnicity)	1
Native (American or Alaskan)	0
Native Hawaiian or Other Pacific Islander	0
Othr(s),	0

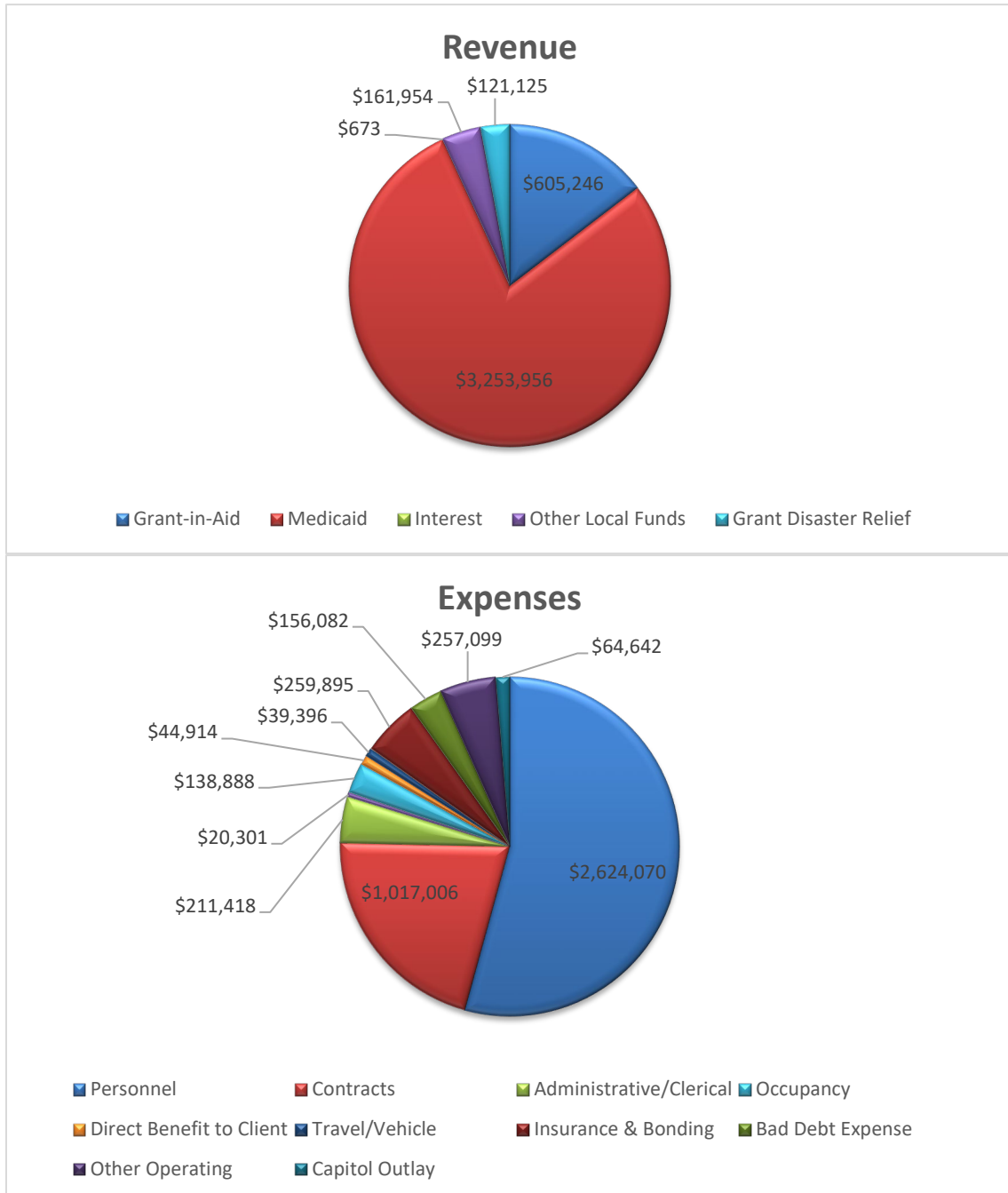
Gender	Number of Persons Served
Female	58
Male	82

Age	Number of Persons Served
06-17 (Children)	0
18-40 (Adult)	65
41-65 (Adult)	65
66+ (Adult)	11
Unknown Age Group	0

Other Characteristics of Persons Served	Number of Persons Served
Acquired Brain Injury	0
Alcohol and/or Other Addictions	1
Autism Spectrum Disorder	2
Developmental Disabilities	141
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 21 Financial Data

FY21 was a positive year for Diversified Enterprises as we continued to make strides toward our long-term financial goals. Total revenue for the agency was \$5,273,377 and expenses were \$4,833,711; resulting in revenue over expenses in the amount of \$439,666.

















FY 21 Strategic Plan




In 2017, Diversified Enterprises' Leadership Team set forth new goals, objectives, and reaffirmed the agency's mission statement during PATH planning and began development of a successful Strategic Plan. PATH planning was designed to establish a baseline for the agency and help spearhead comprehensive strategic planning in the summer of 2018. Since the establishment strategic workgroups and the implementation of our Strategic Plan, Diversified has accomplished many objectives since that time and FY21 was no different. We continue to work together to meet these goals for the good of the agency and the individuals we serve.

Strategic Goals






Leadership & Advocacy: Position the Agency and its members as valued advocates and as innovative leaders in Georgia.

-  *Continuation of Aktion Club community service activities: Book Drive, delivery of over 300 cards, baskets, and goody bags throughout the year to local convalescent homes during key holidays*
-  *GCDD Advocacy Day participation*
-  *SPADD: DE Director, Dave Wilber, Vice President of Board*
-  *Implemented multiple 'Town Hall' virtual meeting to discuss and answer questions related to Moderna Covid vaccinations*
-  *Acquired and administered Moderna vaccinations to individuals supported, DE employees, and friends/family/members of the public*
-  *100% of DE administrative staff received the Covid vaccination*
-  *Exchange Club: DE Behavior Specialist, Danny Hoover, current acting President*
-  *Uniting for Change and DE advocacy members, Mike Housel and Ratiel Shepherd, received the 'Stronger Together' award*
-  *Participation in advocacy story telling project entitled '6,000 Waiting'*
-  *United for Change: advocate participants from DE; Mike, Ratiel, and Michelle in leadership positions.*
-  *Family Violence Taskforce: Danny Hoover.*
-  *Parent to Parent state board participant for public schools, Yolanda Powell.*
-  *First in-person Aktion club meeting held in the park since Covid restrictions were lifted*
-  *Rallied and supported 'Home and Community Based Services Access Act' (HAA) bill*







Expansion: 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.

-  *Continuation of work towards 501c3 for residential opportunities*
-  *In progress: awaiting licensing/zoning for current 3 person group home to a 2 person shared home*
-  *Use of Therap to store records electronically*










Recognition: 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.

-  *Continuation of social media participation and networking*
-  *Created and participated in local, regional, state, and national videos showcasing DE efforts to promote advocacy, the agency, and DSP pay*
-  *Increased agency recognition with logo items*
-  *Individuals supported and DE staff recognized for their efforts in advocacy across multiple media outlets*
-  *Continued partnerships with community clubs, organizations, and schools*










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

-  *Continued participation in the Aktion Club: DE participants/officers*
-  *Advocate and Advanced DSP certification participants*
-  *Continued participation in the School Governance Committee, member Yolanda Powell, entering her 3rd term*
-  *DSP workforce crisis for higher wages participants.*
-  *Participated in the GA CEO video.*
-  *Community Employment provided self-made videos specifically for 'Employment Celebration'*

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

-  *Implemented new phone/networking system agency wide*
-  *Introduced/reviewed updated CARF Standards*
-  *\$240,000 added to rainy-day fund/money market accounts*
-  *Applied/received a total of \$125,121 in Cares Act/Disaster Relief funding*
-  *Prepared for implementation of Electronic Visit Verification (EVV) for all CLS services*
-  *Succession plans developed for administrative/managerial positions*
-  *An increase of Telehealth doctor visits averaging 4 visits per month*
-  *Participated in our first remote audit by DCH*
-  *Transitioned to an electronic record filing system*

Satisfaction & Engagement: To improve experiences with the Agency while increasing loyalty and retention.

-  ***Continued partnerships with community clubs, organizations, and schools***
-  ***Continuation of annual events such as “drive-thru” picnics/cookouts, virtual parties, and delivery of holiday treats while maintaining Covid safety measures***
-  ***Introduced sign-on bonuses for new hires***
-  ***Continued Performance Based Pay for DSP staff***
-  ***DSP essential worker monetary incentives due to Covid pandemic***
-  ***Continuation of virtual networking for individuals supported and DSP staff to stay socially active and engaged while practicing Covid safety measures***
-  ***Continuation of virtual Bingo/games held weekly for individuals supported***
-  ***Continuation of weekly use of Teams virtual platform for admin/personnel/staff to stay connected***
-  ***Revision of program specific satisfaction surveys with individual supported input***

Other Achievements:

Agency-Wide updated phone and networking systems	DE Nominees for Region SPADD Awards: Inez Thomas, Veronica Boone, & Martha Johnson	Advocate, Ratiel Shepherd, hosts 'Community Strong', a weekly Zoom show for Uniting for Change	Covid mandates & restrictions lifted state- wide
SPADD Regional acting President: Dave Wilber	Stronger Together award recieved by Mike Housel & Ratiel Shepherd on behalf of Uniting for Change	Covid Relief funds received and distributed agency-wide	Promotion and participation of DSP Pay Increase through Local, State, and National Events
Actively Promoted Advocacy through Local, State, and National Events	Increased Participation in Multiple Advocacy Groups	Increased Social Media Engagement & Networking	Michelle Tabor & James Groves successfully released from skilled nursing and rehab

Business Function Measures

Objective	Measure	Data Source	Goal	FY21
Minimize staff turnover	Overall Agency-wide staff turnover (excluding internal transfers and promotions)	Monthly Termination Report	<44.4%*	3.57%
	Agency-wide staff turnover < 6 months (excluding internal transfers and promotions)	Monthly Termination Report	<36.8*	6.7%

*Georgia Benchmark Turnover data (National Core Indicators 2017)

Discussion:

Diversified continues to use the National Core Indicators™ (NCI™), a collaborative effort between the National Association of State Directors of Developmental Disabilities Services (NASDDDS) and the Human Services Research Institute (HSRI), for comparing agency turnover to benchmarked data for the state of Georgia. In 2018, the agency revamped the entire interview process from recruiting/selection methods to providing interviewer training to team leaders, and instituted performance-based pay for non-management positions. These improvements were fully implemented by FY19. Additionally, Diversified began efforts to increase the hourly wage of direct support through active participation in strategic ways while continuing to look for other avenues to increase overall retention such as implementing weekly pay and service recognition incentive. Diversified maintained approximately 15 open positions throughout FY 21.

Although turnover has significantly improved from FY17 to FY21, turnover continues to be problematic for not only state funded agencies such as Diversified, but for programs like it across the United States. Covid-19 has had a direct impact on many business functions, including turnover. Direct Support Professionals (DSP) are some of the lowest paid professionals taking care of the most vulnerable population. Diversified continues to be committed in making increased DSP pay a priority by joining other local, state, and national groups/organizations in advocating for higher pay to help minimize turnover. The implementation of sign-on bonuses and essential worker Covid relief funds for staff in FY21 was not as effective as hoped and did not seem to minimize turnover. We continue to work to identify ways to keep staff employed and engaged beyond 6 months. According to agency data, newly hired employees who make it through the first 6 months of employment are significantly more likely to stay employed with our agency indefinitely.

Employee Engagement Survey Results

Employee Engagement Survey FY 21

	Admin	Community Supports	Community Employment	Group Homes	Specialized Teams	Overall FY20 & 21	Overall FY19	Overall FY18
Manager/ Supervisor Communication						NA	4.22	3.99
Engagement						NA	3.96	3.98
						NA	4.19	4.12
Average						NA	4.1	4.03
Performance Pay						NA	3.37	N/A
# of Responses						NA	77/124	47/100
% of Responses						NA	62%	39%

Discussion: Employment engagement was not surveyed FY20 and FY21 years due to Covid. Aside from PBP, communication has been a low scoring category across departments. Departmental managers/supervisors have been using this time to collaborate ideas for better communication strategies that can be employed.

Performance Metrics FY21

Community Employment Program

Program Census July 1, 2020	Program Census June 30, 2021	Total Persons Supported FY21
28	28	28

Effectiveness Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench- mark)	Actual Results
Successful Placements	Referrals reach 5 th VR cycle by 6 months (180 day placement)	July 1, 2020 to June 30, 2021	Actual VR billing Invoices	Program manager	80%	0% of Successful Referrals

Results: Not met. FY21 is down from FY20. Covid has negatively impacted referrals. Now that pandemic mandates/restrictions have been lifted, referrals have already increased and FY22 looks to be promising.

Recommendations and Actions: Review FY20 data results and determine if the goal needs revising or if circumstances were the main issue.

Efficiency Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench- mark)	Actual Results
Meet or exceed budgeted revenue	Employment Revenue, VR, SFS, Waiver	July 1, 2020 to June 30, 2021	Actual financial performance vs. budget	COO / Program Manager	revenue over expenses	\$11,615 Total Revenue Over Expenses at the end of FY21

Results: Met. Three out of four quarters ended with revenue over expenses. One quarter ended with a loss.

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

Community Employment 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 Billable Hours	VR and Employment	July 1, 2020 to June 30, 2021	Billing Invoice/notes	Program Manager	72% Billable Hours Per Staff /Monthly	75% Billable Hours

Results: Met. In FY21, 3 out of 4 quarters had 72% billable hours monthly. Quarter 1 was the only quarter not able to sustain the 72%.

Recommendations and Actions: Continue to maximize billing for waiver and CIE.

Stakeholder Satisfaction Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench- mark)	Actual Results
Maximize satisfaction of all Employees	Engagement Surveys / Turnover	July 1, 2020 to June 30, 2021	Survey	Program Manager	Survey >4.0 Turnover Less than 30%	N/A

Results: The staff survey has not been deployed at this time due to Covid-19.

Recommendations and Actions: FY19's survey score was over-all 4.43, with communication in need of improvement. The leadership team have been working on a plan to increase responses that will yield better results.

Community Support Program

Program Census July 1, 2020	Program Census June 30, 2021	Total Persons Supported FY21
63	63	63

Effectiveness Measure

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, 2020 to June 30, 2021	Person Outcomes Measured	Program manager	75%	96.25% Achievement

Results: Exceeded goal. Goal was increased to 75% in FY20. FY21 had an achievement of 96.25% compared to 95% in FY20, giving an increase of 1.25%.

Recommendations and Actions: Continue Pre ISP meetings which give the individuals supported time to think about the goals that they want to work on prior to the ISP.

Efficiency Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench- mark)	Actual Results
Meet or exceed budgeted revenue	Actual financial performance vs. budget	July 1, 2020 to June 30, 2021	Actual financial performance vs. budget	COO / Program Manager	Revenue Over Expenses	\$24,853 Total Revenue Over Expenses at the end of FY21

Results: Met. All four quarters ended with excess revenue over expenses. Since many community activities were still suspended, this definitely had an impact on revenue amounts.

Recommendations and Actions: Continue to stay under budget by reviewing monthly finance reports.

Community Support Program

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	New Referrals	July 1, 2020 to June 30, 2021	Reg. 4 Field Office/SC Referrals	Program Manager	1 Individual per quarter	No Admissions

Results: Not met. There were very few referrals needing community supports during FY21. The pandemic along with restrictive community mandates contributed to the decline.

Recommendations and Actions: Continue to work closely with and develop relationships with field office, SC, and other agencies to increase referrals.

Satisfaction Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Maximize Engagement and Satisfaction of all Employees	Community Support Staff	July 1, 2020 to June 30, 2021	Survey	Program Manager	Survey >4.0 Turnover Less than 30%	N/A

Results: Staff surveys have not been deployed at this time due to Covid-19.

Recommendations and Actions: This measure was met in FY19, the last time implemented, with communication needing improvement. Departmental teams have been working on a plan to increase responses that will yield better results in the communication area.

Community Living Services

Program Census July 1, 2020	Program Census June 30, 2021	Total Persons Supported FY21
8	8	8

Effectiveness Measure

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, 2020 to June 30, 2021	ISP goals	Program manager	50%	37.5% Achievement

Results: Not met. 1st quarter was met at 50% completion of goals, with quarter 3 at its highest with 100% achievement. Quarter 4 was at the lowest due to behavior. Quarter 2 metrics could not be located and could increase results. This measure is down 20% from FY20.

Recommendations and Actions: Target goal for FY20 and FY21 was a result of the revised FY19 measure to include a more obtainable achievement percentage. Incorporate a more collaborative approach and utilize departmental resources/supports. Continue to track/monitor goals in OnTarget.

Efficiency Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench-mark)	Actual Results
Meet or exceed budgeted revenue	Management and leadership	July 1, 2020 to June 30, 2021	Actual financial performance vs. budget	COO / Program Manager	revenue over expenses	\$78,976 Total Revenue Over Expenses at the end of FY21

Results: Met. All 4 quarters ended with excess revenue over expenses.

Recommendations and Actions: Continue to monitor for billing errors and continue to maintain expenses under revenue.

Community Living Services

Service Access Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results
Maximize number of people supported	New Referrals	July 1, 2020 to June 30, 2021	Reg. 4 Field Office/SC Referrals	Program Manager	One New Placement by End of Year	0 Placements

Results: Not met. Although CLS had several referrals throughout FY21, due to extraordinary behavioral/medical needs, CLS housing costs, and/or low staffing; placement was not advisable.

Recommendations and Actions: Continue expanding capacity for new referrals by working closely with and developing relationships with field office, SC, and other agencies.

Satisfaction Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results
Maximize Employee Engagement and Satisfaction	CLS Staff	July 1, 2020 to June 30, 2021	Survey	Program Manager	Survey >4.0 Turnover Less than 30%	N/A

Results: Staff surveys have not yet been completed due to Covid.

Recommendations and Actions: FY19's survey score was 3.86 with communication in need of improvement. The Residential team are working on a plan to increase responses that will yield better results.

Group Home Services

Program Census July 1, 2020	Program Census June 30, 2021	Total Persons Supported FY21
18	17	17

Effectiveness Measure

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, 2020 to June 30, 2021	ISP goals	Program manager	50%	73.7% Achievement

Results: Met. All 4 quarters met at or above 70% which is well above the target goal.

Recommendations and Actions: These outcomes were achieved in part due to person-centered practices, pre-ISP planning, departmental collaboration, Quality Assurance team, Support Coordination team, Behavioral Support, and Leadership team. Maintain and continue a collaborative team approach for best results.

Efficiency Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Meet or exceed budgeted revenue	Management and Leadership	July 1, 2020 to June 30, 2021	Actual financial performance vs. budget	COO / Program Manager	revenue over expenses	\$66,570 Total Revenue Over Expenses at the end of FY21

Results: Exceeded. All 4 quarters maintained revenue over expenses.

Recommendations and Actions: Continue to stay under budget by reviewing monthly finance reports.

Group Home Services

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	New referrals	July 1, 2020 to June 30, 2021	Referral data	Program Manager	One Referral per Quarter	6 referrals

Results: Met. Although group homes met the target goal of 1 referral per quarter, none were viable candidates for the group home vacancy that required a very specific tenant.

Recommendations and Actions: Continue to seek expansion for the opportunity of new referrals. Continue to maintain relationships with field office, SC, and other agencies.

Service Access Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Maximize Capacity of Group Homes	New referrals	July 1, 2020 to June 30, 2021	Referral data	Program Manager	95% Occupancy	80.5% Occupancy

Results: Group Homes had 3 quarters at 77.78% capacity and 1 quarter at 88.9%. Factors throughout the year such as 2 individuals in rehabilitation and 1 death, on top of the 1 vacancy due to discharge, were key for not meeting the target goal of 95%. Group Homes began FY21 with 1 vacancy and ended with 2.

Recommendations and Actions: Continue to look for and entertain viable referral candidates. Collaborate with the region field office and support coordination agencies. Look at expansion and zoning of homes.

Group Home Services

Satisfaction Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Maximize Employee Engagement and Satisfaction	Group Home Staff	July 1, 2020 to June 30, 2021	Survey	Program Manager	Survey >4.0 Turnover Less than 30%	N/A

Results: Staff surveys have been temporarily suspended due to Covid-19.

Recommendations and Actions: FY19's survey score was 3.8 with communication in need of improvement. The Residential team have been working on a plan to increase responses that will yield better results.

Host Home Supported Living Program

Program Census July 1, 2020	Program Census June 30, 2021	Total Persons Supported FY21
14	14	14

Effectiveness Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Maximize Person Centered Services of all persons Supported	People supported	July 1, 2020 to June 30, 2021	Monthly visits in total compliance with HHLSP Operational Standards.	Program manager	97% Compliant	99.5% Compliant

Results: Met. Although in person visits were suspended due to Covid, the HH manager utilized mandatory virtual visits remotely for monthly visits that were not always announced. The HHP's were pro-active in learning and utilizing ways to keep individuals supported socially engaged and safe electronically while maintaining compliance.

Recommendations and Actions: Continue to help HHP's maintain due dates and operational standards. Continue utilizing remote modalities of work and learning. Consider using routine reminders and develop HHP self-check for use prior to monthly visit.

Efficiency Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Meet or exceed budgeted revenue	Management And Leadership	July 1, 2020 to June 30, 2021	Actual financial performance vs. budget	COO / Program Manager	revenue over expenses	\$27,256 Total Revenue Over Expenses at the end of FY21

Host Home Supported Living

Results: Met. All 4 quarters maintained revenue over expenses.

Recommendations and Actions: Continue to stay under budget by reviewing monthly finance reports and ensure all days are billed and paid as it happens. This will assist in correcting or identifying errors within the system or data entry errors.

Service Access Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Maximize number providers available	Community Stakeholders	July 1, 2020 to June 30, 2021	Excel spreadsheet	Program Manager	3 per Year	1 new HHP

Results: Not met. Due to limited access and in-person mandates because of Covid, there was a marked decrease of HHP applications. And because of the rigorous vetting process, many of those did not remain viable applicants through the course of the process. Through FY21, 3 applicants made it to the panel review stage and of those 3, only one applicant remained to be accepted as an HHP. Now that many Covid restrictions/mandates have been lifted, there has been an influx of new applicants that look promising as we enter into FY22.

Recommendations and Actions: Although the vetting process is quite long, it does an outstanding job eliminating unworthy applicants and is a crucial part of the process. Continue to seek ways to increase interest and awareness of HHLSP opportunities such as consider the use of Indeed and/or local job fairs for recruitment.

Host Home Supported Living

Stakeholder Satisfaction Measure

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Bench mark)	Actual Results
Maximize Engagement and Satisfaction of Employees	Staff	July 1, 2020 to June 30, 2021	Survey	Program Manager	Survey >4.0 Turnover Less than 30%	N/A

Results: Due to Covid-19, staff surveys were not deployed.

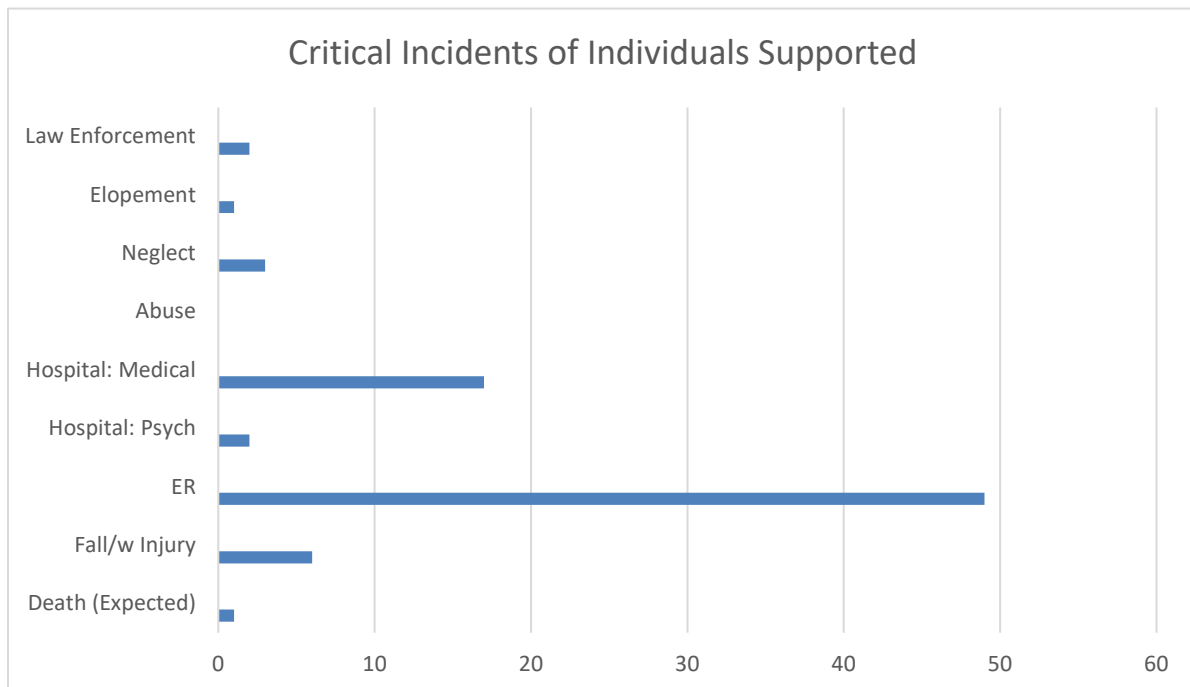
Recommendations and Actions: FY19's survey score was 3.9 with communication in need of improvement. The Residential team have been working on a plan to increase responses that will yield better results.

Critical Incident Review

All critical incidents are reviewed on a quarterly and annually basis to determine any trends or contributing factors to incidents that have occurred. This helps the agency identify areas that may need improvement to ensure and increase the level of 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.

There were a total of 81 Critical Incidents during FY21.



Review:

FY21 shows a comparatively higher number of ER visits and hospitalizations than that in FY20. The increase of ER visits and hospitalizations in FY21 is, in part, due to the effects of Covid-19. Although Covid vaccinations among individuals supported was obtained, Covid symptoms and exposure were not taken lightly which led to higher-than-normal ER traffic due to an increase of standard of care protocols. Many of these visits led to hospitalizations. Falls with injury remained the same at 6 individuals. Diversified has a large population of individuals with significant behavioral challenges who continue to have intermittent behavioral crises even with 24/7 specialized care and behavior intervention. Incidents directly related to behavioral events were 2 law enforcement intervention, 1 elopement, and 2 hospitalizations.

Critical Incident Review

Continued:

Overall, in FY21, ER visits and hospitalizations were the only categories with significant increase. ER visits increased by 26 incidents and hospitalizations increased by 8 incidents. Although we had no abuse or exploitation allegations in FY21, we did have 3 alleged incidents of neglect. All of which were unsubstantiated and closed by a region investigator. Additionally, we had 1 expected death of an individual with an on-going, yet terminal, medical diagnosis (cancer). All other categories remained the same or decreased.

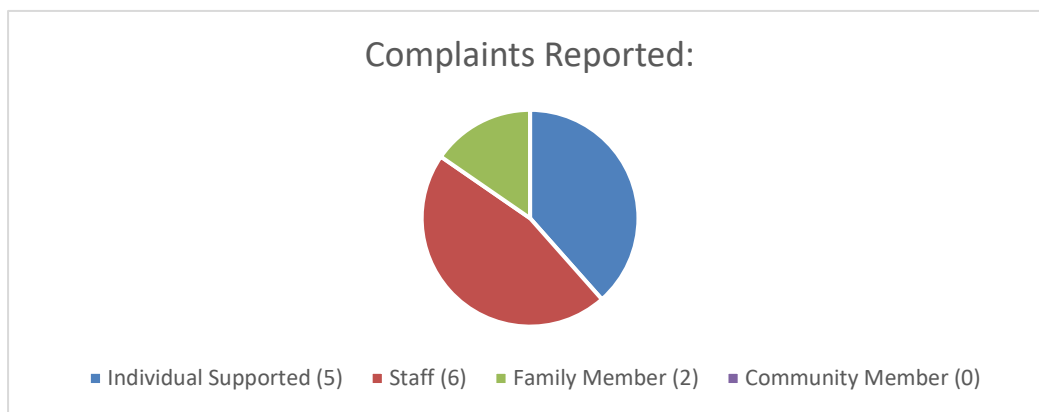
Complaints Review

As a part of the Compliance and Ethics Committee, our agency has established a system for reporting, filing, and reviewing complaints. Anyone may file or report a complaint with Diversified Enterprises if they feel that our agency, services, or practices are unacceptable or unsatisfactory; however, it is designed for those persons who are directly receiving services or support from our agency. It is one of the many avenues Diversified has that encourage self-advocacy.

A complaint is reviewed and followed up within 7 days of receipt. Although most complaints are easily satisfied and resolved, there are times when more investigation is needed, or it may need to be upgraded to a formal complaint at which time it may be warranted to proceed with a Critical Incident report. All complaints are reviewed quarterly and annually by our Compliance and Ethics Committee to better serve the individuals we support.

Definition: 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). Diversified Enterprises encourages complaints to be brought to the attention of the team leader or program manager for resolution first. Generally, this is done by discussing the concerns directly with staff.

There was a total of 13 complaints for FY21.



Review:

Up 5 complaints from FY20, Diversified's in-house complaints totaled 13 for FY21. All complaints were investigated and resolved. Two out of 6 staff complaints violated or restricted the human rights of individuals supported and these staff were terminated. One out the 6 staff complaints was for alleged abuse/harassment of co-workers which was ultimately substantiated, and the staff was terminated. Five out of 5 individual supported complaints were successfully resolved, as were 2 out of 2 complaints made by the same family member who questioned quality of care. Diversified met with the family member and together set protocols in place that satisfied the family while respecting the rights of the individual, as well as staff and the family. There were no community members to file a complaint for FY21.

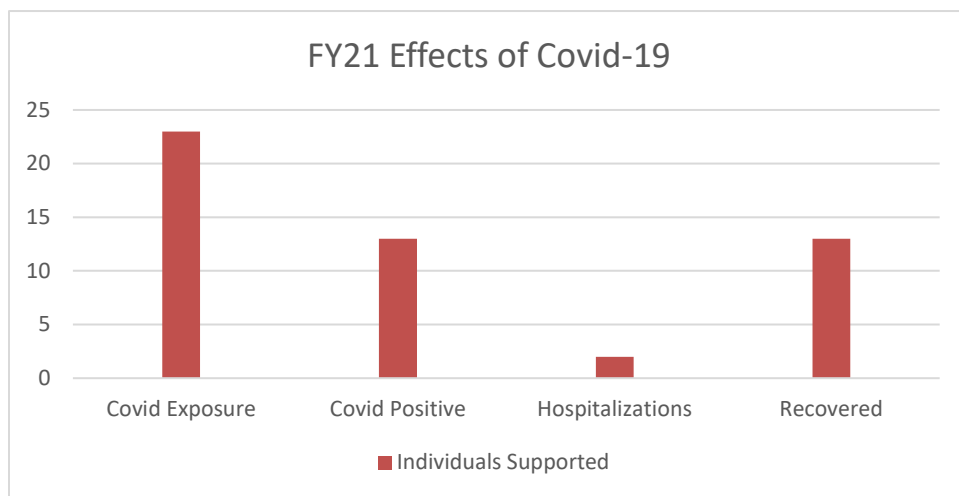
Response to Covid-19

Little did we know when we closed the Diversified office to the public on March 13, 2020 that we would still be in much of the same position today. One year and 3 months later, Covid-19 is still hanging around and our office remains 'loosely' closed to the public. Many of our office staff have returned and are able to conduct business with the public in a very limited and guarded capacity in the foyer of the office. Additionally, many of our residential and community support programs have had stay at home restrictions lifted with precautionary protocols. Diversified remains steady but guarded in our quest to safely re-open at full capacity in the near future.

Early on in 2019, the decision to take swift action by our director, David Wilber, even before the government issued any mandatory orders, proved to be the helping hand that kept Covid-19 from ravishing through our residential programs and agency. Community supports were temporarily suspended and individuals in our residential programs were asked to follow 'stay at home' measures. When other agencies and organizations similar to ours were frantically looking for PPE and cleaning supplies, Diversified was fully stocked and were able to provide all of our residential programs with the protection they needed, while maintaining adequate reserve for future use. The Diversified team pulled together, working around the clock, to ensure the health and safety of the individuals supported and all agency personnel/staff. Below are some additional ways in how we did that.

Further, Diversified was one of the first of Georgia's agencies to ask for and acquire the Covid-19 vaccination for not only individuals' supported and staff, but also for friends, family, and the limited public. After much research by Diversified's director, the Moderna version was selected and administered. By the end of FY21, 100% of Diversified's residential population and administrative managers/staff had been vaccinated. Additionally, we had a high percentage of individuals receiving community supports and other program participants that were also vaccinated. And with a lot of the country beginning to lift and/or decrease some of the more restricting Covid safety measures and communities re-opening to the public during this time, due to the high number of vaccinated individuals supported and Covid safety measures/protocols, Diversified had a relatively low number of individuals who contracted Covid-19 over the course of FY21. Other agencies were not as fortunate. Diversified ended FY21 with 13 individuals supported testing positive for the virus. Although most were treated for only mild symptoms, 2 individuals were hospitalized, with all 13 individuals making a full recovery.

As we strive to keep individuals supported and staff safe from Covid, we can no longer imagine a world without the virus in it. Diversified continues to be committed to Covid prevention while helping to guide and navigate individuals supported safely back out into their communities to resume activities that have been unavailable for far too long.



Diversified Enterprises is committed to providing innovative and person-centered services for individuals with disabilities. We strive to provide individuals with developmental disabilities the opportunities to make contributions while establishing and maintaining relationships with the people in their respective communities. We support over 150 people in 8 counties throughout South Georgia and just celebrated 50 years of service.

The Agency maintains its Employment First philosophy and is proud of its diverse community base services and comprehensive array of residential supports that help people live independently, have meaningful employment, and be an active and contributing 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

