

BUTLER COUNTY
Board of
**DEVELOPMENTAL
DISABILITIES**
Supporting Possibilities

**2010 END OF YEAR UPDATES
LONG TERM GOAL I:
INDIVIDUALS CHOOSE THEIR LIFE ACTIVITIES AND GOALS**

Annual Goal 1: Adults who choose community employment will be supported to work successfully in an integrated employment setting and will earn at or above minimum wage level.

How we will measure success:

20 new individuals will obtain employment in an integrated setting that pays minimum wage or greater and maintain it for a minimum of 90 calendar days. (SSA)

25 new individuals will participate in paid internships as a way of becoming better prepared for working. (SSA)

We will hold at least 15 transition themed seminars to educate and empower families and students. (SSA)

End of Year Update:

28 new people were able to get competitive community jobs in 2010. 20 of the 28 people maintained those jobs into 2011.

10 people were able to participate in paid internships in 2010 at various sites in the community. 30 people participated in an enclave and received community work experience at or above minimum wage.

15 sessions were held in 2010.

SSA = Service and Support Administration

AS = Adult Services

Annual Goal 2: Adults who choose to participate in day habilitation programs will have options and choices for meaningful activities.

<u>How we will measure success:</u>
Maintain consumer satisfaction at 98% in adult day hab. (AS)
Measure percentage of referrals who require customized approach and/or who (requires more than 1:3 ratio of supervision). (AS)
Retail sales for InsideOut Studio will be maintained or exceed \$900.00 per quarter (30% increase from 2009). (AS)
Pay to artists represented by InsideOut Studio will be maintained or exceed \$390.00 per quarter (30% increase from 2009). (AS)
98% of annual assessments will be completed on time and with 100% accuracy. (AS)
98% of quarterly reviews of individual plans will be completed on time. (AS)
75% of individuals' goals reviewed will show maintenance or improvement of skills. (AS)
100% of performance evaluations of Adult Services Staff will be completed on time. (AS)
100% of case record reviews will be corrected within the same quarter of review. (AS)
25% of individuals receiving waiver services will have a satisfaction survey completed. (QA/QE)
Nursing staff will conduct 2 health education classes per quarter. (ANC)

<u>End of Year Update:</u>
129 satisfaction surveys completed with 99.75% satisfaction. This accounts for nearly 90% of the enrollment.
We continue to support a total of 11 individuals who do not meet their current acuity and require additional supports; this is 7% of our total enrollment.
Goal met. Retail sales totaled \$13,354.13
Goal met. \$4,413.56 paid to artists in 2010.
100% were timely with 100% accuracy.
100% were timely.
81% showed maintenance, improvement or mastery of skills.
78% were completed on time.
82% were corrected within the same quarter. (Some corrections relied on outside sources.)
20% of people receiving waiver services have had a satisfaction survey completed. (Personnel transfer 4 th quarter led to less being completed.)
Goal met; 8 classes completed in 2010.

QA/QE = Quality Assurance/Quality Enhancement ANC = Ancillary

Annual Goal 3: Families with children (0 – 3) will access services and supports that will meet their specific needs.

How we will measure success:

If parent chooses an individual budget, we will assess if the service met the child’s need. (EI)

All children (age 0-3) who receive Early Intervention Services for at least 6 months will show improvement in meeting their developmental milestones as evidenced by parent input, ongoing assessment and clinical opinion. (EI)

90% of families who receive services will indicate satisfaction with services. (EI)

All families receiving education from our Early Intervention Specialists and therapists for at least 6 months will show improvement in knowing how to educate their child as indicated by the Family Outcomes Survey.* (EI)

End of Year Update:

By the end of 2010, one family chose an Individual Budget. Another family was offered one, but refused and a third family that was offered an Individual Budget has accepted the protocol and will begin in 2011.

89 surveys were completed by families leaving the program for the year 2010 (19%). 100% of the families noted improvement in their child’s development.

98% of families surveyed in 2010 thought that we had done a good to excellent job of helping their family and were very satisfied with the services.

95% of the families surveyed indicated improvement in knowing how to help their child.

***Family Outcomes Survey is presented when families exit the program.**

EI = Early Intervention

**LONG TERM GOAL II:
INDIVIDUALS WILL CONTROL AND BE RESPONSIBLE
FOR ALLOCATED PERSONAL BUDGETS**

Annual Goal 4: Individuals will know what services cost and will make choices based on allocations available to them.

How we will measure success:

All families in EI will be given the number of service hours received and costs associated with those hours. (EI)

We will track acceptance and utilization of individual budgets. (EI)

End of Year Update:

The cost of each family's service was sent to every family enrolled in February of 2010.

One individual budget was accepted and utilized in 2010 (last quarter only.)

NOTE: Older individuals already received budget information as part of their Individual Service Plan. Also, Individual Budgets for Early Intervention is a new offering for families if they desire.

LONG TERM GOAL III:

INDIVIDUALS ARE HEALTHY, SAFE AND TREATED WITH RESPECT

Annual Goal 5: Individuals' safety and health will be monitored by BCBDD.

How we will measure success:

MUI Trends and Patterns Committee will be held at least 2 times per year to monitor MUI's and make recommendations for prevention/reduction of MUI's. (QA/QE)

Annual MUI update training will be revised and implemented (QA/QE)

Number of trainings provided by nurses and the number of participants will be tracked. Level of satisfaction of assistance by nurse will be monitored via survey. (ANC)

33% of medication administration Quality Assurance Surveys will be completed. (ANC)

Level of satisfaction of training through Dental Program will be monitored via survey. (ANC)

End of Year Update:

Meetings were held in 3/10 and 9/10 to review MUI Trends and Patterns. Action Plans were developed and sent out in an effort to deter/prevent future MUI's.

Annual MUI training and post test was updated and has been conducted 11 times through 2010 to a variety of audiences.

This goal is being revised for 2011. Reports indicate most training for residential providers has been informal on an individual, as needed basis. Health teaching for individual situations has resulted in over 600 contacts for 2010.

All medication administration QA's assigned for 2010 were completed.

Satisfaction with services provided is 100% "satisfied".

Annual Goal 6: Individuals will participate in defining how their lives can be better.

How we will measure success:

A pool of 10 person-centered planning facilitators for individuals to work with will be developed. (SSA)

All interested Individual Providers will be recorded on DVD to allow for easier access of individuals and families during the initial selection process. (QA/QE)

In 2010 we will increase participation in self advocacy to 80 people who are consistently attending self advocacy projects such as: EPRO (Empowered People Reaching Out), SALT (Student to Adult Life Transition) trainings, fund raising projects participation, etc. (QA/QE)

End of Year Update:

Goal met.

A total of 7 interviews have been completed and have been uploaded onto the web site. Additional interested providers can schedule dates in 2011 for filming.

EPRO now has 75 members.

Annual Goal 7: Individuals who use Board facilities will be safe and secure.

How we will measure success:

Safety Committee recommendations on a community disaster plan are submitted to Superintendent by December 2010. (BO)

Facility based nurses will submit report to Program Services Administrator quarterly. (ANC)

End of Year Update:

Goal met. Recommendations are to have MOU with Emergency Management Agency and become a partner with Red Cross.

Goal met.

BO = Business Office

Annual Goal 8: Individuals who have intensive needs will have services that are designed and supported to meet their unique needs.

How we will measure success:

Begin START* project “planned respite” weekend services at the Seven Mile home during the first quarter of 2010. Provide at least one weekend of service during the first quarter and at least one weekend per month thereafter. (SSA)

At least 2 adults will receive respite and/or long term residential services through an adult foster care network. (SSA)

Follow-up reports will be provided within an established length of time post meeting that address effectiveness of technical assistance intervention. (ANC)

Certification through the Ohio Department of Corrections for individuals identified as having “sexually problematic behavior” will be granted by end of 2010. (ANC)

We will track number of people in the START* project supported by Family Focus staff. (ANC)

Strategy for input into residential placement options will be implemented. (ANC)

End of Year Update:

Total for year is 4,414.5 hours of START respite; goal was met.

Goal met. 1 new adult used respite twice. 1 new adult is in a long term AFC setting.

Goal met. Follow-up on technical assistance was timely and resulted in referrals as needed.

Certification received September 13, 2010.

All individual (18) in the START were supported by Family Focus.

Strategy was for Ancillary to focus on attending team meetings regarding residential options; as a result more involvement occurred by nurses and behavior specialists to address issues.

***START project – dual diagnosis project in conjunction with the Mental Health Board.**

Annual Goal 9: Individuals who live in housing contracted by BCBDD will live in safe, clean, well maintained and accessible homes.

How we will measure success:

Complete at least one session from the SALT (School to Adult Life Transitions) seminars on shared housing options. (SSA)

The non-profit housing agency will secure funding for the development of shared housing. (QA/QE)

Meetings with Partnerships for Housing will occur at least 2 times annually. (BO/QA)

End of Year Update:

Completed in October.

CHDO (Community Housing Development Organizations) Board has now been active since 4/10. With the development of this board our agency will benefit from the Neighborhood Stabilization Program. Two lots have been purchased, and construction will begin in 2011. A duplex will be built, with 2 bedroom units. A home will also be built to occupy 4 tenants who are currently residing in a licensed home.

Goal met.

**LONG TERM GOAL IV:
INDIVIDUALS ARE SUPPORTED TO CARRY OUT PLANS AND BUDGETS
IN ORDER TO MEET THEIR INDIVIDUAL NEEDS**

Annual Goal 10: Individuals will receive natural supports from within the community to meet their specific individual needs.

How we will measure success:

2 additional community organizations will agree to be involved with individuals. (SSA)

Identify 10 individuals to use only transportation services (with no Leisure Coaching) to access community events. (SSA)

3 group respite activities will occur per year. (ANC)

End of Year Update:

Goal met. PRISM (Miami University, Middletown), First Church of God in Monroe, and Campbell Soup Company.

10 individuals utilized this transportation support in 2010.

Completed 2 group respite activities

Annual Goal 11: Children in school will receive supports from BCBDD.

How we will measure success:

School districts will indicate their satisfaction with services of classroom behavior consultants. (ANC)

Families who request support from a Family Focus Specialist will receive that support within 6 months. (ANC)

The Family Focus program serves the same or more families who have requested services with the same number of staff as in 2009. (ANC)

97% of families who receive assistance by the Family Focus program will indicate satisfaction with their services. Satisfaction surveys are sent to families when their case is closed. (ANC)

OT referrals for supports in-home will be tracked. (ANC)

Families who attend the transition education series will indicate 95% satisfaction with the information they are given. (SSA)

End of Year Update:

Satisfaction Survey report completed for the 2009-2010 school year – satisfaction from all districts served. 26 new referrals were received for classroom consultation for the 2010-2011 school year so far.

Goal met.

Family Focus currently serving 62 individuals with the capacity to serve 80.

Only 33% returned surveys; 95% were satisfied with services.

In-home supports provided for 1 school age child.

Goal met.

Annual Goal 12: Individuals will be supported by stable, qualified BCBDD staff.

How we will measure success:

100% of evaluations come with a newly signed, and if necessary, updated position description. (HR)

100% of all employees will obtain and maintain appropriate certification, as applicable. (HR)

Implement and track web-based training with 100% staff compliance. (HR)

Provide up to six training sessions over the course of the year. (HR)

95% of staff will have a current evaluation on file (within previous 12 months). (HR)

New evaluation tool will be developed and supervisors will be trained by December 2010. (HR)

100% of probationary staff will have received at least one evaluation before completing probation. (HR)

100% of new employees will complete orientation within 90 days of start date. (HR)

Maintain or improve on employee participation in employee assistance and wellness programs from 2009. (HR)

Employee satisfaction survey will be sent out and analyzed by December 2010. (HR)

Voluntary turnover will be 10% or less annualized rate; exit interviews at 100%. (HR)

Decrease non-FMLA sick leave by 2%. (HR)

End of Year Update:

Goal met.

100% staff compliance.

100% staff compliance.

Goal met.

94% have been done within 12 months and 99% within 13 months.

Completed.

100% compliance for the year.

100% compliance for the year.

Participation in wellness programs increased with the introduction of new programs including the Amazing Race and “Biggest Loser” contests.

Completed.

Turnover rate of 5.8% for the year. 100% completion of exit interviews.

Overall non-FMLA sick leave use is down by 3% for the year.

HR will keep supervisors informed of status of FMLA cases utilizing bi-weekly updates. (HR)

100% of FMLA qualifying events are properly certified and/or recertified; no one will exceed 12 week limit. (HR)

2 online training modules will be developed for the “MRDD Works” program. (ANC)

Level of training effectiveness will be based on pre and post tests. (ANC)

Goal met.

Goal met.

Modified existing modules on line, added one module.

91% of staff scored 80% on training post tests.

HR = Human Resources

Annual Goal 13: Individuals will be supported by people (other providers) with specialized training, experience, and knowledge about disabilities and appropriate strategies to support success.

How we will measure success:

The Accessibility Committee will work on developing and completing up to 2 trainings for providers and county staff related to cultural diversity.

Will develop a Marketing Consultant through grant dollars to increase awareness of the “Quality Loves Company” web site and to highlight ARC programs. Consultant will also work to secure materials for DSP (Direct Service Provider) development and training. (QA/QE)

Develop pre-certification training for interested individuals to become providers, based on revised OAC rule. (QA/QE)

Level of training effectiveness will be based on pre and post tests. (ANC)

End of Year Update:

One training was provided in 2010.

Marketing Consultant was contracted through grant. Got a web site up; attended provider fair and continues development.

Goal met. Training has been developed in conjunction with BCBDD Agency Orientation. There have been 53 potential providers that have attended training in the year 2010.

93% of provider staff who attended training scored at 80% on post tests.

LONG TERM GOAL V:

THE PUBLIC WILL BE KNOWLEDGEABLE ABOUT HOW WE ACCOMPLISH OUR MISSION AND WILL TRUST HOW RESOURCES ARE MANAGED

Annual Goal 14: The Board will monitor costs and stay within the budget due to careful management of resources.

How we will measure success:

No increase of health insurance to Board will be proposed for 2011. (HR)

Of cases that go to litigation, 100% will have a positive result. (HR)

Maintain facility-based adult day enrollee attendance at 90% (based on daily enrollment). (AS)

Administration and Business offices will survey Board staff for effectiveness of supports to them by December, 2010. (Admin, BO, HR)

By end of 2011, data will show that all transportation is provided within reimbursement rate costs. (BO)

Year end revenues and expenditures will be within 2% of projected 2010 budget. (BO)

Adult Services will monitor revenue and expenditures. Gap between revenue and expenditures in Adult Services will be at 40% or less. (AS)

End of Year Update:

The rate of increase for 2011 will be 9.5% which includes a 2% increase due to health care legislation mandates.

No litigation.

Overall attendance rate of 87.6% was maintained over the course of the year.

Survey completed. Overall, results were positive.

We are in the process or working with our Adult Services team to combine our personnel to do both transportation and adult day services and split the cost between the services to bring the services delivery cost within reimbursement rates.

For the year 2010, we will be under budget by 6%. Several items were significantly under budget, utilities (thanks to a new contract with First Energy in June 2010), contract services, training, and other expenses (apparently over budgeted and/or cost saving measure incorporated by staff throughout the year.)

Goal met. Currently, we have an 18% gap between expenditures and revenue.

Annual Goal 15: The Board will inform the public about the effectiveness of services and the accomplishments toward its Mission.

How we will measure success:

At least 6 published communications will be completed. (COMM)

Sample survey of web site redesign will show high level of usability and effectiveness. (COMM)

There will be an increased number of “hits” on web site and increased duration on web site after redesign. (COMM)

COMM = Communications

End of Year Update:

5 newsletters mailed in 2010.

In 2010 a new web site design was unveiled. A Facebook page and a Twitter feed were also established for the Board.

There was a 44% increase in hits on our web site this year. We were unable to track duration on new web site so we were unable to compare duration.

Annual Goal 16: The Board will maximize Medicaid revenues.

How we will measure success:

90% of SSA TCM billers will bill at the 60% target according to the Business Office billing records. (SSA)

100% of other billers of TCM will be at target. (ANC, QA)

Adult Services will maintain staffing at each facility to (at least) minimally meet acuity standards (based on the daily enrollment) 100% of the time. (AS)

End of Year Update:

92% met target.

80% met target.

Staffing levels met acuity, based on daily attendance, 100% of the time.

Annual Goal 17: The Board will develop a marketing plan and assist Friends of Citizens with Disabilities, the Political Action Committee, to prepare for next levy campaign in 2012.

How we will measure success:

The Friends of Citizens with Disabilities will raise \$30,000 in 2010. (COMM)

End of Year Update:

This year, \$12,524.57 was raised, 50% of goal. 27% improvement over last year.

Annual Goal 18: The Board will monitor trends for service needs and make adjustments to programs and facilities, as necessary, to meet the needs of individuals receiving services.

How we will measure success:

A formal list of recommendations for more efficient and effective operation of service coordination will be presented to the Superintendent. (SSA)

There will be a reduction in the number of residential openings in existing settings by 20% and a reduction in the number of people living alone. (SSA)

Families will express high level of satisfaction with assistance provided by transition coach to apply for system services. (SSA)

Behavior Supports will meet timelines for intake/referral. (ANC)

EI will meet timelines for intake/referral. (EI)

By fall 2010, primary service model will be implemented. (EI)

End of Year Update:

No formal recommendations have been made although the work group has initiated some procedural changes and will continue to work in 2011.

20% decrease in people living alone and 13% decrease in vacancies.

We have discontinued this contract because there were few requests by families for the transition coach.

Goal met.

Goal met.

Not met due to cancellation of trainers. One team is implementing the model; full implementation can be expected by fall 2011.