



2011 ANNUAL ACTION PLAN – 3RD QUARTER 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:	3rd Quarter Update
20 new individuals will participate in paid internships/employment experiences.	Individual Model- 4 in 3 rd quarter. 7 total to date. Liz Enclave Model- 30 people
At least 5 individuals will obtain employment (self or wage) in this effort.	3- (2 self and 1 customized)

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

How we will measure success:	3rd Quarter Update
Consumer satisfaction will be at least 98% in the board adult day habilitation.	16 surveys completed with 100% satisfaction.

<p>Retail art sales at Inside Out Studio will be \$2,000 or higher per quarter. Pay to artists will be \$800 or higher per quarter.</p>	<p>Retail art sales = \$2,772.50 (138% of our goal)</p> <p>Pay to artists (27) = \$1,311.25 (164% of our goal)</p>
<p>Hab Coordinator/Instructor Supervisors will spend 40% of the program day within the program area.</p> <p>98% of all assessments in adult day hab program will be completed timely with 100% accuracy.</p> <p>98% of quarterly reviews of Individual Plans will be completed on time.</p>	<p>Meeting this goal at 30% (4 HC's spent 133.5 hours out of expected 440 hours for the quarter)</p> <p>17 assessments completed 3rd quarter – 82% completed on time with 82% accuracy. (Issues of timeliness and accuracy were dealt with and a plan of correction is in place.)</p> <p>95 quarterly reviews of IP's were completed – 75 (79%) completed on time. (Issues of timeliness and accuracy were dealt with and a plan of correction is in place.)</p>
<p>85% of the individuals' goals will show maintenance or improvement in skills.</p>	<p>77% of the goals showed maintenance, improvement, or mastery.</p>
<p>Facility Nurses will hold 1 Health Ed class per quarter for individuals in Adult Program.</p> <p>A Health Ed Curriculum manual will be developed by the end of 2011.</p>	<p>1 class this quarter on topic of "Protecting Yourself from Someone Else's Germs."</p> <p>Manual completed.</p>

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

How we will measure success:	3rd Quarter Update
<p>All geographic teams will be working with the Primary Service Approach for Early Intervention Services by the end of third quarter.</p> <p>After 6 months of receiving services through the Primary Service Provider approach, families will indicate improvement in supporting their child’s development.</p> <p>All children, within 6 months of services, will show improvement in meeting developmental milestones.</p>	<p>Goal met. All geographic teams have specific Service Coordinators and DD staff assigned to the team.</p> <p>Based on the Family Outcomes Survey, 100% of the families surveyed felt they had improved their understanding of how to help their child.</p> <p>Based on the Family Outcomes Survey, 93% of families surveyed felt that their child had made progress</p>
<p>90% of families participating in Early Intervention specialized programming for Autism Spectrum Disorders will demonstrate understanding of how to engage their child in interactions.</p>	<p>The Social Communication Team for Children suspected to have an Autism Spectrum Disability served 12 children and their family member or guardian. Parents and Guardians participating showed an average of 17% improvement on the Functional Emotional Assessment Scale.</p> <p>Children participating showed an average of 28% improvement on the Functional Emotional Assessment Scale.</p> <p>Overall improvement for the entire group measured by the Functional Emotional Assessment Scale was 20%.</p> <p>Based on Family feedback 100% of the families felt that the Social Communication Team helped their family.</p>

**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.

<u>How we will measure success:</u>	<u>3rd Quarter Update</u>
All Early Intervention families using an individual budget will submit progress reports indicating progress in targeted areas stated in IFSP.	Goal met. 100% of the families receiving Individual Budgets provided a quarterly progress report from their service provider. Currently 6 families are utilizing and Individual Budget, with 2 families pending to receive an Individual Budget.
Letters to Early Intervention families notifying of 2011 cost for their services will be sent first quarter.	After the last quarter of 2011, Families will be sent a letter indentifying how much service they received for the year, and the cost of that service.

**LONG TERM GOAL III:
INDIVIDUALS ARE HEALTHY, SAFE AND TREATED WITH RESPECT**

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

<u>How we will measure success:</u>	<u>3rd Quarter Update</u>
Reduction of overall Office of Incident Review caseload size at any one time.	There has been a reduction in open cases compared to last year, despite an increase in MUIs filed in the same time period.

<p>By third quarter, there will be team collaboration in 95% of the prevention plans for all reported UI/MUI cases.</p>	<p>The new MUI prevention planning process was designed during the first quarter. It went into effect 4/1/11. A form to document the plan and team collaboration has been implemented for every MUI.</p>
<p>Hold Major Unusual Incident Trends and Patterns Committee 2 times in 2011. (Includes recommendations for prevention and reductions of incidents.)</p>	<p>The Trends and Patterns Committee meetings were held 3/10/11 and 9/15/11. The committee created action plans after each meeting to address trends and patterns. The first plan was implemented in the 2nd/3rd quarters and the second plan is currently being implemented.</p>
<p>Update Memorandum of Understanding with law enforcement and courts by end of 2011.</p>	<p>Based on their input from other agencies and our consideration, this will be postponed until 2012 to ensure it is current with MUI rule (to be updated 2012) and meets the needs of all parties involved.</p>
<p>Meet quarterly with Office of Incident Review and Provider Compliance departments of Council of Government members.</p>	<p>An OIR COG meeting was held 2/24/11. Arranging additional meetings has been difficult. One has been scheduled for November. The QA COG meetings were held 1/27/11, 4/7/11, and 7/7/11.</p>
<p>Impact of support of community based nurse working with Investigative Agents will facilitate more timely medical case closure.</p>	<p>OIR now has an RN on staff for consult. Community nurses remain available to assist when needed.</p>

<p>All Health Records will be updated according to ISP schedule.</p> <p>The number of “special reviews” requested in response to identified concerns in health and safety will decrease.</p>	<p>All records updated. Working with SSA workgroup on revision of Health Record review and info included in it.</p> <p>3 “special reviews” conducted by community based nurses this quarter.</p>
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Annual Goal 6: Individuals will participate in defining how their lives can be better.

<u>How we will measure success:</u>	<u>3rd Quarter Update</u>
<p>As part of bi-monthly EPRO (Empowered People Reaching Out) meetings, a core group of veteran EPRO members will coordinate leadership trainings for newer members; there will be a graduating class of 25 advocates/leaders by December 2011.</p>	<p>In the third quarter 2011, EPRO sponsored two meetings. Four EPRO Advocacy Leaders led two breakout sessions at the Provider Fall Conference 10/8/2011, concerning what it takes to be an advocacy leader, as well as how to run an advocacy meeting. Expect to graduate 25 by December.</p>

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

<u>How we will measure success:</u>	<u>3rd Quarter Update</u>
<p>100% of agency’s safety checks and mandated in-services will occur.</p> <p>End of year summary will indicate any areas needing improvement.</p>	<p>Monthly meetings were held and monthly reports distributed to all facilities.</p>
<p>The annual accessibility review will take place during third quarter and a summary will be completed by the end of the year.</p>	<p>This was not formally completed; however, Sites Supervisor will complete review early in 4th quarter. Since consolidation and moves there should be no issues to report or act on.</p>

Number of similar reported incidents in our adult facilities (of a medical nature) will decrease.	LC was down 2 and MC was up 1.
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Annual Goal 8: Individuals who have intensive needs will have services that are designed and supported to meet their unique needs.

<u>How we will measure success:</u>	<u>3rd Quarter Update</u>
Effectiveness of the Technical Assistance Team (TAT) will be determined by follow up assessment 3 months after the special team meetings. Results will be summarized by end of year.	Representative from BC Mobile Crisis attending TAT meetings. Referred 2 individuals to supports in collaboration with mental health agencies.
Effectiveness of the support team for Problematic Sexual Behaviors will be measured by tracking the number of repeat offenses, compliance with plan and/or court involvement. Summary will be provided at end of year.	Met with Judge Sage and described the program. Asked for assistance in gaining support from the judicial system.
Actively engage at least 5 elderly parents/families in exploration of residential options.	Worked with 2 families this quarter. Neither ready for residential at this time.
Behavior Support intake services will be received within 4 weeks of referral date.	10 new referrals were received in the 3 rd quarter. 8 of 10 new referrals received Intake services within 4 weeks of referral date.

Serve at least 15 new individuals in 2011 in the START (Systematic Therapeutic Assessment Respite Treatment) project for dually diagnosed individuals.	Served 15 new individuals in START this year.
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Annual Goal 9: Individuals who live in the community will have supports available to them.

How we will measure success:	3rd Quarter Update
Hold 2 meetings with Partnerships for Housing to monitor contract and to plan strategically.	We have had 2 meetings and made progress in planning.
Waivers will be allocated according to plan.	We are on track with the plan. This year we have new capacity of 12 new IO waivers through the 3 rd quarter (two have yet to be approved due to a backlog at JFS).

**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 community will measure success:	3rd Quarter Update
The agency will become a formal partner with the Red Cross.	Completed.
Community volunteers will support 1/3 of the individuals who participate in the planned respite activities.	This has not been an option because of specialized needs of participants, we have used staff volunteers.

<p>Add 2 additional organizations that will actively support individuals.</p> <p>Increase membership of Community Action Team (CAT).</p>	<p>GE-IT group has expanded supports to Project Search and Project Life students.</p> <p>Barn-n-Bunk became partners with Bridges to Transition.</p> <p>Dr. Mark Frazer brought hot air balloon with Future Leaders from high schools throughout Butler County and included providers- RIO- Liberty Center, Middletown Center and Goodwill Care.</p> <p>Added one new member to the CAT this quarter. This resulted in a free community workspace for a Griffin Hammis entrepreneur.</p>
<p>10 new individuals will use community transportation (outside of leisure/rec coaching services).</p>	<p>4 new in 3rd quarter, 9 total for year.</p>
<p>Complete at least 3 presentations to community organizations, businesses and/or schools with community partners to foster community support.</p>	<p>2 this quarter - Miami University Middletown Psychology Class and Women Living United- Cincinnati United Way.</p>

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

How we will measure success:	3rd Quarter Update
<p>School districts will indicate satisfaction with classroom consultation services via annual survey.</p>	<p>No new information to report.</p>

There will be 3 group respite opportunities offered in 2011.	March 18 th ; August 13 th ; December 3 rd .
There will be one social skills group offered.	The first Relationship Class was held 1 time a week for 6 weeks beginning September 6, 2011. 8 individuals were registered with an average of 2 participants each week.
There will be one siblings group offered.	Sib Shop took place on June 6, 2011.
A service guide will be developed to assist families in accessing local resources.	Service Guide 75% completed.
Serve at least 30 of target group of Board eligible students through Bridges to Transition.	32 on caseload. 16 worked over the summer and 5 more are doing work trials in the community (21 served).
10 new families will attend the 2011 adult transition series.	10 new families attended the SALT series in the fall, 2011. (10 new families this quarter + 41 new families first half of 2011 = 51 new families have attended at least one session in 2011.)

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

How we will measure success:	3rd Quarter Update
At least one training that addresses cultural sensitivities and knowledge will occur this year. Post survey will indicate positive satisfaction and effective application of information.	Not met: Staff Development position vacant since July 2011.

<p>At least one training per quarter for current and potential supervisors.</p> <p>Post survey will indicate positive satisfaction and effective application of information.</p>	<p>Supervisors received training titled “Dealing with Problem Employees” and “Building a Discipline Case That You Can Win”</p> <p>Post survey indicated high satisfaction with the content of the training and usefulness/application.</p>
<p>100% staff compliance of mandated training.</p>	<p>Currently we are at 98 % compliance for the year. Deficiencies are due to staff on leave of absence.</p>
<p>Two online training modules will be added for staff.</p>	<p>Completed.</p>
<p>95% of all employees will have a current (within 12 months) evaluation on file.</p> <p>100% of probationary employees will receive at least one evaluation before completing probation.</p>	<p>Currently we are at 97.5% in 12 months and 98% in 13 months. Supervisors have been notified of deficiencies and in most cases, the evaluations are in process.</p> <p>Two probationary employees received mid- point evaluations.</p>
<p>Successfully negotiate 2 PGO contracts by the end of the year.</p>	<p>The EI contract has been completed.</p>
<p>Voluntary turnover will be 10% or less, annualized and excluding retirements. 100% of voluntary terminations will have an exit interview.</p>	<p>There was one voluntary resignation in the third quarter. This translates to an annualized rate of 3.9%. An exit interview was conducted.</p>

100% of all new hires will complete all phases of orientation within 90 days of date of hire.	We are at 100% compliance.
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Annual Goal 13: Individuals will be supported by people (non BCBDD providers) with specialized training, experience, and knowledge about disabilities and appropriate strategies to support success.

<u>How we will measure success:</u>	<u>3rd Quarter Update</u>
The Provider Relations Specialist will have fewer office visits and shorter phone calls from prospective providers.	Information added to the BCBDD website on 2/17/11. There has initially a decrease in calls and office visits, but there has since been an increase in office visits in the 2 nd half of the year due to recertification requirements being changed by DODD.
Increase in attendance from 2010 at Coffee Break trainings for middle managers of outside providers.	There has been an average attendance of 18 people the Coffee Break trainings this year which is higher than the average 2010 attendance.
Offer at least 2 trainings for providers in 2011. Increase in participation by provider staff in 2011. Hold one joint provider certification training in 2011.	Providers have been offered 4 trainings in addition to the regularly offered monthly training. Continues to be an increase in participation by provider staff. The COG has met to discuss holding joint trainings and that is being planned for the 4 th quarter.

Baseline data for Problematic Sexual Behavior team will be collected in 2011.	Referrals and services continue to be tracked. 5 individuals currently receiving home visits; home visit reports in process.
Each provider will identify 2 staff to be identified as trainers.	Goal needs revision due to Staff Development vacancy.
Decrease in number of concerns expressed by individuals who receive supports from provider staff of different ethnicities.	No concerns reported.

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.

<u>How we will measure success:</u>	<u>3rd Quarter Update</u>
Year end revenues and expenditures will be within 2% of projected 2011 budget.	So far, through Sept, we are right on target with both revenues and expenditures. We have had 12 people apply for the Early Retirement Incentive, 5 which will not be replaced.
Move West Chester Team to Janet Clemmons Center by July 1, 2011. Middletown Enrichment Center program will relocate to Liberty Center by July 1, 2011.	Completed. As of 9/30/11 there were 14 individuals still being served at MC. The building should be vacated by 11/1/11, marking the consolidation of Board operated day habilitation out of Liberty Center.

Transition to Adult Services transportation to be completed by 6/30/11.	Completed.
Enrollment will stay within 2% of cap (150).	9/30/11 enrollment is 133, maintained a decrease of 12% since beginning of year Note: As of 9/30/11 - 21% (28 of 133) of the current enrollment requires staffing at a higher level than acuity indicates (1% increase from mid year)
Gap between adult day program costs to reimbursable rate will be 20% or lower.	Will re-evaluate closer to the end of the year.
After 6 months of making changes and of implementing the Primary Service Provider approach, the Early Intervention/Help me Grow program will show a reduction of costs.	The role of the Service Coordinator in the PSP model of service has been clearly defined as well as the role of Primary Service Provider chosen by the team. This has eliminated “duplication of services”.
Summary and recommendation on Early Retirement Incentive to Board 1 st quarter.	Completed.
New tracking method for waiver costs will be in place by the end of 2011.	We are working with Primary Solutions to modify reports to accurately report cost projections. So far this is not working. It appears the only option will be to keep this in an Excel spreadsheet or write our own data base in access. This will be fairly time consuming but very necessary to have up to date information on all waivers.

Fiber optics to Liberty Center and wiring for terminal services will be outlined with timelines for implementation by July 2011.	Fiber optics line is in and rooms are currently being wired for terminals.
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Annual Goal 15: The Board will inform the public about the effectiveness of services and the accomplishments toward its Mission.

<u>How we will measure success:</u>	<u>3rd Quarter Update</u>
At least 6 published communications will be completed.	Goal met for third quarter update – 4 publications printed to date.
Annual report will be published and distributed in the first quarter.	Goal met, annual report published.
Survey users of our web site to indicate ease of usage, popular pages and updates that need to be made.	<u>Usage statistics</u> Web site: On average in the third quarter, the web received 7,788 visits per month, which was more than the previous quarter. A survey will be completed either at the end of 2011 or beginning of 2012 seeking user input on the usability of the site.
A quarter of all initiated stories will appear in print.	No media coverage during third quarter.
More communities will be visited to present awareness theme than previous year.	Goal not met, however, six communities were visited: Fairfield Township, Fairfield City, Liberty Township, Middletown City, West Chester Township and Madison Township as well as the Butler County Commissioners (In 2010, nine communities were visited.)

<p>The Annual Action Plan results for 2010, the Annual Action Plan and measures for 2011 and the Annual Report will be available in copy and on the website.</p>	<p>Goal met; materials available on web site.</p>
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Annual Goal 16: The Board will maximize Medicaid revenues.

How we will measure success:	3rd Quarter Update
<p>Community Team Secretaries will bill MAC in 2011 in addition to current billers.</p>	<p>Completed.</p>
<p>Maintain facility attendance at 90%.</p>	<p>As of 9/30/11, we have maintained enrollee attendance at 90%</p>
<p>There will be fewer individuals who apply for prior authorization than in 2010.</p>	<p>Actually, Prior Authorizations are up for 2011. A wide variety of reasons from: new or reoccurring medical conditions, no adult program, behavior issues, lack of roommate (this could be for a variety of reasons) or change in work schedule for one or more people in the home.</p>
<p>Decrease number of individuals who are disenrolled due to lack of follow-up in redetermination process.</p>	<p>We had 8 PLOM's (Possible Loss of Medicaid) resolved last quarter with no loss of Medicaid.</p>
<p>100% of MAC (Medicaid Administrative Claiming) billers will complete their Random Moment of Time within 5 days.</p> <p>100% of all TCM (Targeted Case Management) billers will bill at least 60% of all hours worked.</p>	<p>MAC– 100% of all Random Moments were completed for billing.</p> <p>The Business Office has completed the first half of the year efficiencies. 35 of 46 (76%) billers met the goal of 60% efficiency.</p>

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 2012/2013.

<u>How we will measure success:</u>	<u>3rd Quarter Update</u>
Send out survey in 3 rd quarter to assess effectiveness of key messages.	We decided to tie this to our marketing survey which will be done in 2012.
A web site for the PAC, Friends of Citizens, will be developed by end of 2 nd quarter. The PAC will raise \$30,000.00 in 2011.	Goal met, web site is online. The PAC has raised \$341 in the third quarter for a total of \$3,751 raised during the year. A major fundraiser is planned for November.

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.

<u>How we will measure success:</u>	<u>3rd Quarter Update</u>
Increase in number of referrals and collaboration through the START program.	2 additional individuals referred to START this quarter.
Increase in appropriate referrals to Family Focus. Staff and families will express satisfaction with supports.	12 New Referrals in 3 rd quarter. 100% appropriate. Family Focus moved 13 Individuals to Inactive Status in 3 rd quarter. 8 Satisfaction Surveys returned; 100% "Very Satisfied". 3 Satisfaction Surveys were returned from the Sib Shop; 100% "very satisfied".

	8 Satisfaction Surveys returned after the August Respite day; 100% “very satisfied”- only request was for more respite days.
Report on effectiveness of Ancillary services available to the Board by end of 2011.	To be provided January 2012.
Research will provide cost comparison and efficacy of two models of support for dealing with problematic sexual behavior.	Project continues; coordinator has met with mentor from Wright State for input into type of info needed. Spread sheet completed, data being compiled for cost comparison of 2 models of support.
Findings and recommendations by the SSA Work Group will be shared with peers 2 times per year.	The Workgroup met five times during this quarter. They have updated the SCs twice.
Summary of analysis of data for trends for individuals on the autism spectrum and recommendations for action will occur 3 rd quarter as part of the planning process.	Still updating and analyzing data.
Reduce residential vacancies in 2011 by 10%.	The 3rd quarter had an increase of 3 people living alone and 1 additional vacancy. There are a total of 22 people living alone and 52 vacancies. Has increased so far in 2011.

SSA = Service and Support Administration
AS = Adult Services
COMM = Communications
HR = Human Resources
OIR = Office of Incident Review/Quality Assurance

ANC = Ancillary
EI = Early Intervention
BO = Business Office
Admin = Administration