Wastrofrancesco AFC Inc Performance Improvement Report Annual Report

♦ Consumer and Other Stakeholder Satisfaction

Consumer/family member satisfaction surveys and professional satisfaction surveys were distributed at the end of the second quarter and logged in the third quarter. This year we sent out 50 satisfaction surveys, half of the surveys were consumer/family, and the other half were professional surveys. Out of the 25 consumer surveys, 21 were received with 14 being very satisfied and 7 being satisfied. Out of the 20 professional surveys, 6 were received with 5 being very satisfied and 1 being satisfied.

♦ Community Integration

All locations continue to offer many opportunities for consumers to access the community. An average of **1097 group** outings occurred during the year. Group outings decreased in the first quarter and second quarter due to the pandemic and picked back up again when covid numbers decreased in the third and fourth quarter. We are pleased with the results of the objectives. See the Performance Indicator Report for details.

♦ Consumer Achievement of Personal Goals

This indicator is measured through satisfaction surveys, which are distributed at the end of the second quarter and received in the third quarter. The survey results showed that the consumers feel safe in their homes, they are learning new skills and goals, they feel they are being treated with dignity and respect by the staff and provider and they are in control of how they spend their time.

♦ Staff Retention

This indicator measures how many staff has been employed at the program sites for more than twelve months. This indicator includes staff employed more than 24 months. Of the 66 staff employed during the year, 75% have been employed with our agency for more than twenty-four months. We will continue to recruit qualified staff as needed and seek ways to retain, such as offering hiring bonuses, retention bonuses and hazard pay for all staff. At this time, staff turnover is the highest we have seen since the beginning of the covid 19 pandemic.

♦ Access to Service

Our agency began measuring how long it takes an individual to come into the program once referred and authorized by the funding agency to begin services. Five individuals were referred and placed into Mastrofrancesco programs during this reporting period. The average number of days to placement was 15 days. This exceeds the optimum expectancy of fifteen days or less.

♦ Staff Orientation and Training

At the end of the fourth quarter all employees have completed medication administration training. This training is reviewed annually. All employees are currently CPR trained and First Aid Certified. The Staff that work with children continue to receive the nationally recognized CPI training from Community Mental Health. Training will continue to include all supervisors to implement the Technology and System Plan. This has included taking the Zeguro technology training for all supervisors along with the Microsoft 365.

♦ Staff Credentialing and Competency Assessment

Employee job descriptions and evaluations have been reviewed and revised to be in conformance with contract requirements and CARF standards. Program Managers will have completed annual competency evaluations by the end of the fiscal year.

Consumer Incident Reports

There were four incident reports for this reporting period.

E-Scores are current at all licensed sites.

- Internal safety reviews, including inspections of emergency supplies and evacuation kits are completed at all locations owned, leased, or operated by the agency per contract requirements.
- Emergency drills are conducted per agency requirements. Drills have been added to conform to CARF standards.
- External site reviews are performed by each program's associated contracting agency including Recipient Rights, fire safety and infection control inspections. The past quarter's site visits have been scored at 100% for most of the programs.

Results of this data have been closely examined. All areas of concern have been addressed by individual programs. We have continuous safety monitoring in the homes to address any falls. Safety measures are in place to ensure unobstructed safe walkways and flooring.

An apparent increase in aggression of one consumer resulted in immediate intervention from all concerned parties. Medical conditions were ruled out and additional staffing was authorized. Medication changes were also made.

Recipient Rights and Grievances

There were grievances filed this fiscal year and they were all responded to and dealt with in a timely manner.

Notable Comments

With the numbers of the Covid 19 virus fluctuating, at the beginning of the year we were keeping consumers in home for activities as much as possible. During the second quarter, consumers were able to go on more outings with the appropriate PPE precautions.

General Comments: The Performance Improvement Committee continues to monitor progress toward performance indicators, make recommendations for corrective action when goals are not met, and to modify the plan as needed. Two of the seven objectives regard data from satisfaction surveys, which were distributed and reported in the second quarter. No corrective action is needed at this time. We are pleased with the fourth quarter results. Following are summaries and charts of results for each objective measured.

| | | 1 | Access to Service | /ice | | | |
|-----------|-----------|-----------|--|-----------|---------|------|---------|
| | Quarter 1 | Quarter 2 | Quarter 3 | Quarter 4 | Average | Goal | Optimum |
| CLS | 0.0 | 0.0 | 0 | 3 | 1 | 30 | 15 |
| Binkley | 0.0 | 0.0 | 0 | 15 | 4 | 30 | 15 |
| Harbor | 0.0 | 0.0 | 0 | 0 | | 30 | 15 |
| Lewis | 0.0 | 30.0 | 0 | 0 | 8 | 30 | 15 |
| Rav | 0.0 | 0.0 | 20 | 0 | 5 | 30 | 15 |
| Stratford | 0.0 | 0.0 | 0 | 0 | 0 | 30 | 15 |
| Respite | 0.0 | 0.0 | 0 | 0 | 0 | 30 | 15 |
| | | | ************************************** | | | | |

| | | Staff | f Retention | | | |
|-----------|-----------|-----------|-------------|-----------|------|---------|
| | Quarter 1 | Quarter 2 | Quarter 3 | Quarter 4 | Goal | Optimum |
| CLS | 55% | 52.4% | 55.0% | 57.9% | 75% | 80% |
| Binkley | 75% | 100.0% | 91.7% | 84.6% | 75% | 80% |
| Harbor | 26% | %2'99 | 70.0% | 70.0% | 75% | %08 |
| Lewis | 30% | 36.4% | 54.5% | 63.6% | 75% | %08 |
| Ray | %29 | %0.09 | 63.6% | 70.0% | 75% | 80% |
| Stratford | 83% | 1.0% | 83.3% 100 | 100.0% | 75% | 80% |
| | | | | | | |

| | | | Group Outings | Sí | A STATE OF THE STA | 1000 | mital C |
|-----------|----------|-----------|--------------------|-----------|--|------|-----------|
| | Quarter1 | Quarter 2 | Quarter 3 | Quarter 4 | Average | Goal | Optiminin |
| CLS | 46 | 48 | 28 | 28 | 52.5 | 20 | 26 |
| Binkley | 20 | 15 | 22 | 22 | 19.75 | 20 | 26 |
| Harbor | 23 | 30 | 42 | 42 | 34.25 | 20 | 26 |
| Lewis | 12 | 8 | 15 | 22 | 14.25 | 20 | 26 |
| Ray | 33 | 22 | 31 | 37 | 30.75 | 20 | 26 |
| Stratford | 38 | 29 | 34 | 37 | 34.5 | 20 | 26 |
| | | <u></u> | Individual Outings | Său | - ANNA PARTY. | | Authorney |
| , | Quarter1 | Quarter 2 | Quarter 3 | Quarter 4 | Average | Goal | Optimum |
| CLS | 139.4% | 133.3% | 76.9% | 138.1% | 121.9% | %08 | %06 |
| Binkley | 250.0% | 750.0% | 129.4% | 129.4% | 314.7% | %08 | %06 |
| Harbor | 191.7% | 142.9% | 113.5% | 113.5% | 140.4% | %08 | %06 |
| Lewis | 200,0% | 266.7% | 300.0% | 275.0% | 260.4% | %08 | %06 |
| Ray | 117.9% | 115.8% | 114.8% | 132.1% | 120.2% | 80% | %06 |
| Stratford | %9.06 | 193.3% | 154.5% | 132.1% | 142.6% | %08 | %06 |
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| | | hos mod | Individual Outings | ngs | | | |
| stelltrissa sekritorasiselli fitosi Validačiti daktininini massasismusesi tekstiliski ritirilitik | Quarter1 | Quarter 2 | Quarter 3 | Quarter 4 | Average | Goal | Optimum |
| CLS | 139.4% | 133.3% | 76.9% | | 121.9% | 80% | %06 |
| Binkley | 250.0% | 750.0% | 129.4% | | 314.7% | 80% | |
| Harbor | 191.7% | 142.9% | 113.5% | | 140.4% | %08 | |
| Lewis | 200.0% | 266.7% | 300.0% | 275.0% | 260.4% | %08 | |
| Ray | 117.9% | 115.8% | 114.8% | l | 120.2% | 80% | |
| Stratford | 90.5% | 193.3% | 154.5% | | 142.6% | %08 | |

| | | e ferre a communication de la communication de | Indiv | vidual Outings | 3 | | - Landadara | | |
|-----------|----------|--|-----------|----------------|----------------|------------|-------------|------|---------|
| | Ouarter1 | Quarter 2 | Quarter 3 | | Total Provided | tal Reques | Percent | Goal | Optimum |
| CLS | 46 | | 30 | | 182 | 150 | 121% | 80% | |
| Binklev | 20 | | 22 | | 79 | | 180% | %08 | |
| Harbor | 23 | 30 | 42 | | 137 | | 128% | 80% | |
| SIME | 12 | - α | 15 | | 57 | 22 | 259% | 80% | |
| Ray | 33 | 22 | 31 | : | 123 | | 121% | %08 | %06 |
| Stratford | 38 | 29 | 34 | | 138 | 107 | 129% | %08 | |

| Ing | |
|-----------|--|
| Reporting | |
| | |
| deni | |
| Incident | |
| • | |

| | | | Sexual | | | Communica | BBP |
|-------------------------|-------|---------|-------------|----------------|------------------|----------------------|----------|
| Site/Program Abu | Abuse | Neglect | Harrassment | Sentinel Event | Medication Error | ble Disease exposure | exposure |
| STO | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Binkley | 0 | 0 | 0 | 0 | 0 | 0 | ٥ |
| Harbor | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Lewis | 0 | 0 | 0 | 0 | 0 | 0 |) |
| Ray | 0 | 0 | 0 | 0 | 0 | 0 | S |
| Stratford | 0 | | 0 | 0 | 0 | 0 | O |
| Respite Services (Harbo | 0 | 0 | 0 | 0 | 0 | 0 | ٥ |

| | | | luci | Incident Reporting | <u> </u> | | | | |
|--------------------------|-----------|------------|------------|--------------------|--|---------|------|------------|--------------|
| | | Medication | Medication | Physical | | | | | |
| Site/Program | BioHazard | Error | Refusal | Intervention | Aggression | Weapons | ULOA | Self Abuse | Misc |
| Community Living Service | | 0 | 0 | 0 | 0 | o | 0 | 0 | - |
| Binklev | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | + |
| Harbor | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 |
| Lewis | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Ray | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Strafford | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | - |
| Respite Services (Harbo | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
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