

Parents and Friends Inc.
July 2016 Annual Outcomes Reports
Goals, Results, and Plans

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Parents and Friends, Inc.
Outcomes Results
July 1, 2015-June 30, 2016

Parents and Friends, Inc.

Parents and Friends, Inc.

2015/2016 Strategic Plan Outcomes

July 2016

Parents & Friends, Inc.'s mission statement is to provide opportunities for persons with developmental challenges and similar needs to participate fully in our community. With this mission firmly in mind, Parents and Friends, Inc. focused on and planned and budgeted for the following objectives in 2015-2016 fiscal year:

1. **Maintain financial stability and predictability.**
2. Budget for profitability, stressing quality of services and products offered and organizational efficiency.
 - a. Responsibility: Exec. Dir.
 - b. Monitor State and Dept. of Dev. Disabilities budgets and plan contingencies as appropriate for review, discussion and action by the Board of Directors in case of changes in state funding or regulations. Responsibility: Exec. Dir.

Outcome: Accomplished. PFI has had its most profitable year so far. This is primarily due to substantial growth in SLS (24-7) and Community Connection one on one licensed day activity program. This growth has created a shortage in support staff. Hiring, training and retaining staff has been a challenge, so current staff is working longer hours until needed positions can be filled. This creates short term peaks in profitability as infrastructure is added to support the new level of demand.

Attract and keep dedicated, talented, caring and experienced staff.

1. Conduct a wage and salary survey annually which establishes prevailing wages for management, supervisors and direct service personnel. Responsibility: Exec. Dir.
2. Conduct performance reviews for all personnel at least annually. Responsibility: Exec. Dir. And all Managers.
3. Keep job descriptions updated and communicate clearly what expectations are and how performance will be measured. Responsibility: Exec. Dir. And all Managers.
4. Continually refine the in house training program stressing both universal training subjects for all employees and job/task specific training topics within each department and discipline utilizing the College of Direct Services on line educational

courses, purchased DVD training lessons and RCRC scheduled training for service providers. Responsibility: Exec. Dir. And all Managers.

Outcome: Accomplished. The salary strategy used for the past few years has been to give incentive bonuses after the annual audit is complete. This helps offset low wages and increases retention while maintaining financial flexibility and the ability to control expense in a volatile funding environment. The last two years bonuses have been 10% of an employee's annual paid wages plus 2% to an employer paid retirement account.

Create and maintain open and honest two way communications

1. Continue at least quarterly newsletter mailings. Responsibility: IT Mgr. /Board Volunteer.
2. Conduct surveys of all stakeholders, employees and consumers annually. Responsibility: All Managers.
3. Sponsor, through the board of directors, two fund raising events annually.
Responsibility: Fund Raising Mgr. /Board fundraising committee.
4. Keep the web page, face book, etc. current and relevant. Responsibility: IT Mgr.
5. Maintain open door policy for all employees, clients, stakeholders and community members. Responsibility: All mgrs. Exec. Dir.

Outcome: Accomplished. All open door policies are working well and being taken advantage of by employees and stakeholders. Board meetings are public with input from the community an agenda item. Client, employee and stakeholder (community member) input and comments are also an agenda item at the weekly manager's meetings.

Expand Client population by receiving authorizations for and in taking at least ten additional clients into various programs.

1. Work closely with Regional Center coordinators and TLC staff to be the agency of preference for new clients to the area and graduating high school clients.
2. Expand programs to include a weekend/off hour's community integration program and client in school respite program to get to know clients and their families who will be matriculating into adult services in the future.
3. Work with other agencies to explore possibilities of absorbing some of their existing clientele.

Responsibility: Exec. Director/Management team.

Outcome: Accomplished. PFI approached another agency about purchasing them and after discussion they decided to decline. We have added seven new clients to the Day program and five 24-7 SLS clients.

Enhance staff development and training in a comprehensive and measurable way.

1. Improve new staff orientation through a formalized, time spaced process including specific initial training, presentations by managers on their specific programs and a history of PFI, Title 17 and past and current industry standards and best practices policies and procedures.
2. Develop a specific curriculum for new employees and an ongoing training program through College of Direct Supports for more in depth general topics and department/program in depth trainings on specific program topics.
3. Develop a compensation plan with specific pay scales based on job title and the current Northern California Wage and Salary Survey.
4. Develop a personnel review policy that rates employees within their pay scale based equally on performance and their percentage of completion of the ongoing training curriculum for PFI and their specific program.
5. Explore the possibility of creating certificate requirements for completion of varying levels of college of direct supports curricula.
6. Explore the possibility of partnering with ROP or similar organizations to provide CNA training for interested SLS staff.

Responsibility: Exec. Director/Management team.

Outcome: Partially Accomplished. Appropriate classes have been assigned to staff and a second pro-act trainer has been trained. Training is going slower than anticipated due to an influx of new employees and continuing staff shortages. Overtime has been authorized but scheduling is difficult, especially for 24-7 staff. Progress continues, however. CNA training is still being explored.

July 2015-June 2016 Coastal Support Services Outcomes

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Establish Consumer ISP Goals	Percentage of consumers with up to date ISPs	All consumers	Biannual	ISP Files	CSS Manager	95%	57%	75%
Maximize Progress on ISP Goals	Percentage of consumer goals showing positive progress	All consumer goals	Biannual	ISP Files	CSS Manager	90%	80%	78%
Efficiency								
Maximize Consumer Services	Percentage of authorized support hours delivered	All consumers	Annual	Billing Forms	CSS Manager	90%	85%	79%
Maximize Consumer Retention	Percentage of consumers who have received services and are continuing to receive services	All referrals	Biannual	Case files	CSS Manager	100%	98%	99%
Satisfaction								
Increase Consumer Satisfaction	Percentage of consumers who give a satisfaction rating that averages 4 on a scale of 1 to 5	All consumers responding to survey	Annual	Survey results	CSS Manager	98%	80%	96%
Increase Stakeholder Satisfaction	Percentage of stakeholders who give a satisfaction rating that averages 4 on a scale of 1 to 5	All stakeholders responding to survey	Annual	Survey results	CSS Manager	100%	91%	100%

July 2015-June 2016 The Community Connection Outcomes

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Maximize Progress on ISP Goals	Percentage of participants goals achieved or making positive progress	All participants goals	Bi-annually	ISPs and Case Files	TCC Manager	90%	90%	90%
Maximize # of online training courses taken	Percentage of employees who have completed or have made progress in 1 online courses	All TCC employees	Annually	online site or employee schedules	TCC manager	95%	95%	New Goals
Efficiency								
Maximize staff attendance	Percentage of days staff worked when scheduled	All employees	Bi-Annually	ADP/ schedules and	TCC Manager	90%	94%	93%
Maximize progress on employee goals	Percentage of employee goals achieved or making progress	All employee goals	Bi-Annually	log books / evaluations	TCC Manager	90%	90%	90%
Maximize client attendance	Percentage of days clients attend per days authorized	All TCC participants	Bi-Annually	billing forms/ schedule	TCC Manager	95%	93.5 %	97%
Service Access								
Maximize Participants Retention	Percentage of participants who have and continue to receive services	All TCC participants	Bi-Annually	Billing Forms	TCC Manager	100%	93%	New Goals
Increase amount of time spent outside the facility	Percentage of authorized time clients spend outside the facility	All TCC Participants	Bi-Annually	Schedule and log books	TCC Manager	65%	65%	65%
Satisfaction								
Maximize staff satisfaction	Percentage of staff members who give a satisfaction rating average of 8 on a 1 to 10 scale	All TCC staff members	Annually	Survey Results	TCC Manager	90%	90%	New Goals
Maximize client participation in surveys	Percentage of clients who participate in the satisfaction survey	All TCC staff and participants	Annually	Survey Results	TCC Manager	100%	59%	New Goals
Maximize stakeholder satisfaction	Percentage of stakeholders who give a satisfaction rating average of 4 on a 1 to 5 scale	All TCC stakeholders	Annually	Survey Results	TCC Manager	95%	100%	89%

The Community Connection Outcomes Results Detailed
July 2015 – June 2016

Effectiveness

Maximize Progress on ISP Goals

Goal 90% **Outcome: 90 %** **Achieved**

TCC has 12 participants that we provide support for. Out of the 12 participants they have a total of 42 goals set. Out of the 42 goals, 38 have been achieved or making positive progress. For an outcome of 90%.

Maximize # of online training courses taken

Goal 95% **Outcome: 95%** **Achieved**

The Community Connection has twelve employees at this time. Out of the twelve employees, all but one of them have completed at least two online courses for the year. The one employee who has not done training is new and has only been with us for about 2 weeks. This is an outcome of 95%. This is the first time we have met this goal. I am hoping we can continue to achieve this goal from here on.

Efficiency

Maximize Staff Attendance

Goal 90% **Outcome: 94%** **Achieved**

Out of the 2762 days staff was scheduled to work, they worked 2601 days for a difference of 161 days, or an outcome of 94%. This is the first time we have met this ongoing goal.

Maximize Progress on Employee Goals

Goal 90% **Outcome: 90%** **Achieved**

The Community Connection has Twelve employees. Six of the employees have only been with us for a couple of months, so they are just now working on goals for the first time. Out of the remaining 6 employees there were 18 goals set. Out of the 18 goals, 16 were achieved or making positive progress towards meeting. For an outcome of 90%.

Maximize Participant Attendance

Goal 95% **Outcome: 93 ½ %** **Not Achieved**

Out of 2837 days participants were authorized, they attended 2652 days for a difference of 185 days or an outcome of 93 ½ %. Out of the 185 days, 110 days were due to illness, 41 days were due to vacation, 10 days due to medical appointments and 24 days participants were out due to family things. This was the worst season ever for illness. Many clients out for long periods of time.

Service Access

Maximize Participants Retention

Goal 100% **Outcome: 93%** **Not Achieved**

All but one of our participants continue to receive services for an outcome of 93%. The one that is not receiving services is out due to medical reasons. She may or may not return. The family is waiting for a clean bill of health before allowing her to return to program.

July 2015-June 2016 The Job Connection Outcomes

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Maximize Placement	Percentage of people referred for individual job development placed in jobs	Authorizations for Job Development	Bi-annually	Case Files	TJC Manager	60%	53%	55%
Maximize Progress on IHSP Goals	Percentage of client goals achieved	Individual And Group	Bi-annually	IHSPs and Case Files	TJC Manager	SEP: 65%	59%	68%
						GROUP: 50%	57%	43%
Efficiency								
Complete 4 training courses per year, per staff	Complete 4 training courses per year per staff member	TJC staff members	Bi-annually	CDS Reports & Training Rosters	TJC Manager	100%	50% (midyear)	100%
Expedite placement process	Percentage of placements made within 90 days of Placement Authorization	All Clients referred and placed	Bi-annually	Case Files	TJC Manager	90%	82%	83%
Maximize Job Retention	Percentage of clients maintaining jobs for more than 3 months	Individually placed clients this year	Annually	Case Files	TJC Manager	85%	75%	83%
Service Access								
Maximize client retention	Percentage of clients who begin services and are continuing or have successfully completed services	All individual placement referrals	Bi-annually	Case files	TJC Manager	90%	102%	100%
Maximize authorized service	Percentage of authorized services hours (incld PVSA) for individually placed clients	All individual job coach hrs provided	Monthly	Billing forms	TJC Manager	90%	91% (with PVSA)	90% (w/o PVSA)
Satisfaction								
Maintain Client Satisfaction	Percentage of clients who give a satisfaction rating average of 4 on a 1 to 5 scale	All TJC clients	Annually	Survey Results	TJC Manager	90%	89%	88%
Maintain Stakeholder Satisfaction	Percentage of stakeholders who give a satisfaction rating average of 4 on a 1 to 5 scale	stake-holders family/community empl partners	Annually	Survey Results	TJC Manager	90%	98% 88%	100%

2015/2016 The Job Connection Outcome Results Detailed (7/13/2016)
July 2015 - June 2016

Effectiveness

Status

Maximize Placement

Goal: 60% **Outcome: 53%** **NOT ACHIEVED**

10 out of 19 placed

Even though these results are disappointing, the number of client services we performed was greatly increased. We had many clients who needed more preparation for eligibility for community employment. .

Maximize Progress on IHSP Goals

Goal: 65% Individual **Outcome: 59%** **NOT ACHIEVED**

Individual Employment clients: 75 goals (31 of which were continued); 44 Achieved

Goal: 50% **Outcome: 57%** **ACHIEVED**

Group Employment clients: 65goals (28 of which were continued); 37 Achieved

Efficiency

Complete 4 training courses per year, per staff

Goal: 100% **Outcome: 50%** **NOT ACHIEVED**

4 staff of 8 completed 4 training courses within the year: I have recently implemented a mandatory course list with discussions to be held during staff meetings so that we can monitor participation and learn as a group.

Expedite Placement Progress w/in 90 days of Referral/Intake

Goal 90% **Outcome: 82%** **NOT ACHIEVED**

9 out of 11 clients placed w/in 90 days:

This goal of 90% is too ambitious: Situational Assessments before actual job placement efforts can begin.

Maximize Job Retention (3 months or more)

Goal: 100% **Outcome: 75%** **NOT ACHIEVED**

6 out of 8 clients maintained job retention 3 months or more:

3 lost job before 3 months; 2 yet to meet duration of 3 months

Service Access:

Maximize Client Retention

Goal: 90% Individually Employed **Outcome: 102%** **ACHIEVED**

Began with 52 clients, ended with 53 clients continuing or successfully completed services

Maximize Authorized Service Hours (excludes groups)

Goal: 90% **Outcome: 91%** **ACHIEVED**

3397.25 hours served out of 3749.25 hours authorized

(includes PVSA/WAT/Situational Assessment hours)

Satisfaction: July 2015 – June 2016

Increase participants satisfaction

Goal 90% **Outcome: 89%** **Not Achieved**

Survey results: 91,88,89,88,90 = average 89%

Increase stakeholders satisfaction

Goal 90% **Outcome: 98%** **Achieved**

Survey results: Family/Community 98,95,100,98,100 = average 98%

Goal 90% **Outcome: 88%** **Not Achieved**

Survey results: Employment Partners = average 98

July 2015-June 2016 L.I.F.E. on the Coast Outcomes

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Maximize ISP goal progress	Percentage of goals achieved	All goals	Bi-annually	ISPs and Case Files	LIFE Manager	75%	75%	45.5%
Increase community employment/full time enrollment	Percentage of people served employed in community jobs, enrolled in college or voc training	All people served	Bi-annually	Case Files	LIFE Manager	85%	70%	83%
Increase client training	Number of training sessions Offered per Quarter	All people served	Bi-annually	Training Logs	LIFE Manager	90%	70%	83%
Efficiency								
Minimize waiting periods for services	Average days between referral and first day of services	All people referred	Bi-annually	Referrals and Billing	LIFE Manager	< 5 days	100%	0%
Increase staff training	Complete 2 training courses per Quarter, per full time staff member	LIFE full time staff members	Bi-annually	CDS Reports	LIFE Manager	100%	45%	80%
Maximize staff goal progress	Percentage of employee goals achieved	All goals	Bi-annually	Personnel Files	LIFE Manager	92%	75%	87%
Service Access								
Maximize Attendance	Percentage of authorized days attended	All clients	Bi-annually	Billing and authorizations	LIFE Manager	76%	73%	68%
Satisfaction								
Achieve Satisfaction of People Served	% of participants who give a satisfaction rating of 4 on a 1 to 5 scale	All people served	Annually	Survey Results	LIFE Manager	80%	99%	76%
Achieve Stakeholder Satisfaction	% of participants who give a satisfaction rating of 4 on a 1 to 5 scale	All LIFE stakeholders	Annually	Survey Results	LIFE Manager	90%	75%	86%
Maximize Client Survey Participation	Percentage of completed surveys received	All people served	Annually	Survey Results	LIFE Manager & Program Assistants	100%	94%	100%

2016 LIFE on the Coast Outcome Results Detailed
July 2015-June 2016

Effectiveness

Maximize Progress on ISP goals:

Goal: 75% **Outcome: 75%** **Achieved**
There were 72 client goals set. 54 of these goals were met.

Increase community employment/full time enrollment:

Goal: 85% **Outcome: 70%** **Not Achieved**
23 /33 clients had community employment. **0** of these clients were enrolled full time into college.
11 clients were in group employment. **12** clients were direct hire.

Increase Client Training:

Goal: 90% **Outcome: 70 %** **Not Achieved**
LIFE on the Coast held seven client trainings. Out of these trainings 23/33 clients were trained.

Efficiency

Minimize waiting period for services:

Goal: <5 working days **Outcome: 100%** **Achieved**
This goal was achieved. L.I.F.E. had two new clients. L.I.F.E. on the Coast was able to serve both clients upon receiving authorization.

Increase Staff Training:

Goal: 92% **Outcome: 45%** **Not Achieved**
Each staff to complete 2 courses per FT employee, per quarter, 4 full time staff have completed a total of 8 out of 20 College of Direct Support courses. This goal will be modified in July 2016.

Maximize progress on employee goals:

Goal: 92% **Outcome: 75%** **Not Achieved**
12/16 employee goals were achieved.

Service Access

Maximize attendance:

Goal: 76% **Outcome: 73%** **Not Achieved**
Out of **7432** days authorized **5439** days were attended.

Satisfaction

Achieve Satisfaction of Persons Served

Goal: 90% **Outcome: 99%** **Achieved**
Of 31 survey participants, 30 rated their satisfaction as an average of 4 (on a scale of 1 to 5) or higher.

Increase stakeholders satisfaction

Goal: 90%

Outcome: 75%

Not Achieved

Of 12 survey participants, 9 rated their satisfaction as an average of 4 (on a scale of 1 to 5) or higher.

Maximize Client Survey Participation

Goal: 100%

Outcome: 94%

Not Achieved

Of 37 clients authorized for services, 31 participated in the survey. 6 clients no longer participate in the LIFE program although they still have open authorizations, the process to exit the program has been started.

Parents and Friends, Inc.

Outcomes Goals

July 1 2016- June 30 2017

Parents and Friends, Inc.

2016/2017 Strategic Plan Goals

July 2016

Parents & Friends, Inc.'s mission statement is to provide opportunities for persons with developmental challenges and similar needs to participate fully in our community. With this mission firmly in mind, Parents and Friends, Inc. focused on and planned and budgeted for the following objectives in 2016-2017 fiscal year:

Background

Over the past several years PFI has been focused on strategies to successfully navigate the financial and organizational challenges created by the recession, diminishing State and Federal budgets and the reduction of rates and cut backs in services. Prior to this PFI was in fiscal crisis, which caused a different, but similar set of challenges.

PFI has been successful in managing through these issues and now finds itself in a fiscally strong position. Over time, the management team has been augmented with talented managers who have brought additional expertise and experience to the organization. The fiscal controls and policies which allowed for recovery and survival in a volatile environment are now institutionalized and standard operating procedures. Despite reductions in funding by the State PFI has been able to expand the services offered through the addition of new programs and upgrading of existing programs.

Because of this, PFI has become the “go to” agency for funders looking for services for their clients on the Coast. PFI continues to receive most of the available new referrals both from local funders and from funders outside the area.

PFI's success over the past several years has solved many problems, but it has also created problems of a different nature, which must be addressed. These problems are as a result of fairly rapid growth and include:

1. Building infrastructure to support an organization which has grown from \$1.7M revenue in 2011-12 to a projected \$4.6M in 2016-17.
2. Attracting and keeping enough qualified staff to provide services to the increasing client load.
3. Continue to make strategic investments with available resources to achieve PFI strategic goals, update and expand services to clients through new and existing programs and seek alternate means of revenue as a hedge against future recessions and potential State funding cuts.

These new issues do not supplant our previous goals of maintaining financial stability, attracting and keeping talented staff, maintaining open communications, expanding services to clients and developing staff. We must continue to focus on these as well.

Maintain financial stability and predictability.

3. Budget for profitability, stressing quality of services, products offered and organizational efficiency.
 - a. Responsibility: Exec. Dir.
 - b. Monitor State and Dept. of Dev. Disabilities budgets and plan contingencies as appropriate for review, discussion and action by the Board of Directors in case of changes in state funding or regulations. Responsibility: Exec. Dir.

Attract and keep dedicated, talented, caring and experienced staff.

1. Conduct a wage and salary survey annually which establishes prevailing wages for management, supervisors and direct service personnel. Responsibility: Exec. Dir.
2. Conduct performance reviews for all personnel at least annually. Responsibility: Exec. Dir. And all Managers.
3. Keep job descriptions updated and communicate clearly what expectations are and how performance will be measured. Responsibility: Exec. Dir. And all Managers.
4. Continue annual cash incentive bonus to staff (10% of annual salary past two years) as finances allow, reviewed and approved annually by the Board of Directors.
5. Continue to offer pre-tax savings plan (403B) and an employer paid retirement plan (2% of annual salary last year).
6. Continue to pay for performance in salary administration. Raise average salary for direct service to \$14.00 per hour in 2017.
7. Continue to fully pay health, dental, vision and life insurance for full time employees.
8. Start an incentive program for zero occurrence of workman's comp. claims.
9. Continue employee of quarter program with \$250.00 reward.

Create and maintain open and honest two way communications

1. Continue at least quarterly newsletter mailings. Responsibility: IT Mgr. /Board Volunteer.
2. Conduct surveys of all stakeholders, employees and consumers annually. Responsibility: All Managers.
3. Sponsor, through the board of directors, two fund raising events annually.
Responsibility: Fund Raising Mgr. /Board fundraising committee.
4. Keep the web page, face book, etc. current and relevant. Responsibility: IT Mgr.

5. Maintain open door policy for all employees, clients, stakeholders and community members. Responsibility: All mgrs. Exec. Dir.

Expand Client population.

1. Work closely with Regional Center coordinators and TLC staff to be the agency of preference for new clients to the area and graduating high school clients.
2. Expand programs to include a weekend/off hour's community integration program. Continue and expand upon adhering to 2019 medi-cal funding requirements for DDS
3. Work with the Regional Center to apply for grants to provide group homes for the aging DD population.
4. Become the agency of choice for 24-7 support and aging support disciplines including Alzheimer's and dementia.

Responsibility: Exec. Director/Management team.

Enhance staff development and training in a comprehensive and measurable way.

1. Improve new staff orientation through a formalized, time spaced process including specific initial training, presentations by managers on their specific programs and a history of PFI, Title 17 and past and current industry standards and best practices policies and procedures.
2. Develop a specific curriculum for new employees and an ongoing training program through College of Direct Supports for more in depth general topics and department/program in depth trainings on specific program topics.
3. Develop a compensation plan with specific pay scales based on job title and the current Northern California Wage and Salary Survey.
4. Develop a personnel review policy that rates employees within their pay scale based on performance, including their percentage of completion of the ongoing training curriculum for PFI and their specific program.

Responsibility: Exec. Director/Management team.

July 2016-June 2017 L.I.F.E. on the Coast Outcome Goals

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Maximize ISP goal progress	Percentage of goals achieved	All goals	Bi-annually	ISPs and Case Files	LIFE Manager	80%		75%
Increase community employment/full time enrollment	Percentage of people served employed in community jobs, enrolled in college or vocational training	All people served	Bi-annually	Case Files	LIFE Manager	80%		70%
Meet safety training/drill requirements	Percentage of client participation in safety training/drills	All people served	Bi-annually	Training Logs	LIFE Manager	100%		New Goal
Efficiency								
Minimize waiting periods for services	Average days between referral and first day of services < 5 days	All people referred	Bi-annually	Referrals and Billing	LIFE Manager	100%		100%
Increase staff training	Complete 2 training courses per Quarter, per full time staff member	LIFE full time staff members	Bi-annually	CDS Reports	LIFE Manager	65%		45%
Maximize staff goal progress	Percentage of employee goals achieved	All goals	Bi-annually	Personnel Files	LIFE Manager	92%		75%
Service Access								
Maximize Attendance	Percentage of authorized days attended	All clients	Bi-annually	Billing and authorizations	LIFE Manager	76%		73%
Satisfaction								
Achieve Satisfaction of People Served	% of participants who give a satisfaction rating of 4 on a 1 to 5 scale	All people served	Annually	Survey Results	LIFE Manager	100%		99%
Achieve Stakeholder Satisfaction	% of participants who give a satisfaction rating of 4 on a 1 to 5 scale	All LIFE stakeholders	Annually	Survey Results	LIFE Manager	80%		75%
Maximize Staff Survey Participation	Percentage of completed surveys received	LIFE staff members	Annually	Survey Results	LIFE Manager	100%		80%
Maximize Client Survey Participation	Percentage of completed surveys received	All people served	Annually	Survey Results	LIFE Manager & Program Assistants	100%		94%

July 2016-June 2017 Coastal Support Services Outcome Goals

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Establish Consumer ISP Goals	Percentage of consumers with up to date ISPs	All consumers	Biannual	ISP Files	CSS Manager	75%		57%
Maximize Progress on ISP Goals	Percentage of consumer goals showing positive progress	All consumer goals	Biannual	ISP Files	CSS Manager	85%		80%
Efficiency								
Maximize Consumer Services	Percentage of authorized support hours delivered	All consumers	Annual	Billing Forms	CSS Manager	90%		85%
Service Access								
Maximize Consumer Retention	Percentage of consumers who have received services and are continuing to receive services	All referrals	Biannual	Case files	CSS Manager	100%		98%
Satisfaction								
Increase Consumer Satisfaction	Percentage of consumers who give a satisfaction rating that averages 4 on a scale of 1 to 5	All consumers responding to survey	Annual	Survey results	CSS Manager	95%		80%
Increase Stakeholder Satisfaction	Percentage of stakeholders who give a satisfaction rating that averages 4 on a scale of 1 to 5	All stakeholders responding to survey	Annual	Survey results	CSS Manager	100%		91%

July 2016-June 2017 The Community Connection Outcome Goals

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
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Maximize # of online training courses taken	Percentage of employees who have completed or have made progress in 1 online courses	All TCC employees	Annually	online site or employee schedules	TCC manager	95%		95%
Efficiency								
Maximize staff attendance	Percentage of days staff worked when scheduled	All employees	Bi-Annually	ADP/ schedules and	TCC Manager	95%		94%
Maximize progress on employee goals	Percentage of employee goals achieved or making progress	All employee goals	Bi-Annually	log books / evaluations	TCC Manager	95%		90%
Maximize client attendance	Percentage of days clients attend per days authorized	All TCC participants	Bi-Annually	billing forms/ schedule	TCC Manager	95%		93.5%
Service Access								
Maximize Participants Retention	Percentage of participants who have and continue to receive services	All TCC participants	Bi-Annually	Billing Forms	TCC Manager	100%		93%
Increase amount of time spent outside the facility	Percentage of authorized time clients spend outside the facility	All TCC Participants	Bi-Annually	Schedule and log books	TCC Manager	65%		65%
Satisfaction								
Maximize staff satisfaction	Percentage of staff members who give a satisfaction rating average of 8 on a 1 to 10 scale	All TCC staff members	Annually	Survey Results	TCC Manager	95%		90%
Maximize client participation in surveys	Percentage of clients who participate in the satisfaction survey	All TCC staff and participants	Annually	Survey Results	TCC Manager	60%		59%
Maximize stakeholder satisfaction	Percentage of stakeholders who give a satisfaction rating average of 4 on a 1 to 5 scale	All TCC stakeholders	Annually	Survey Results	TCC Manager	100%		100%

July 2016-June 2017 The Job Connection Outcome Goals

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Maximize Placement	% of people referred for individual job development placed in jobs	Authorizations for Job Development	Bi-annually	Case Files	TJC Manager	55%		53%
Maximize Progress on IHSP Goals	% of client goals achieved	Individual And Group	Bi-annually	IHSPs and Case Files	TJC Manager	SEP: 65%		59%
						GROUP: 52%		57%
Efficiency								
Complete 3 training courses per year, per staff	Complete 3 assigned training courses per year per each staff	TJC staff members	Bi-annually	CDS Reports & Training Rosters	TJC Manager	80%		50%
Expedite placement process	% of placements made within 6 months of Referral Date	All Clients referred and placed	Bi-annually	Case Files	TJC Manager	60%		n/a
Maximize Job Retention	% of clients placed who keep their jobs for 3 months	Individually placed clients this year	Annually	Case Files	TJC Manager	80%		75%
Service Access								
Maximize client retention	% of clients who begin services and continue or have successfully completed services in this period	All clients referred July - June	Bi-annually	Case files	TJC Manager	80%		n/a
Maximize authorized service	Percentage of authorized services hours (incld PVSA,etc) for individually supported clients	All individual support hrs provided	Monthly	Billing forms	TJC Manager	90%		90%
Satisfaction								
Maintain Client Satisfaction	Percentage of clients who give a satisfaction rating average of 4 on a 1 to 5 scale	All TJC clients	Annually	Survey Results	TJC Manager	88%		89%
Maintain Stakeholder Satisfaction	Percentage of stakeholders who give a satisfaction rating average of 4 on a 1 to 5 scale	Stake-holders family/community Emplymt partners	Annually	Survey Results	TJC Manager	88% 88%		98% 88%

July2016–June 2017 Places to Go Outcome Goals

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Report's Outcome
Effectiveness								
Maximize Participant Goals	Percentage of goals achieved or making positive progress	All Participants	Bi-Annually	ISP's/ Case Files	Places To Go Manager	85%		
Efficiency								
Maximize Participant Services	Percentage of Authorized support hours delivered	All Participants	Bi-Annually	Billing Forms/ schedules	Places To Go Manager	90%		
Maximize Participant Retention	Percentage of Consumers who have received and continue to receive services	All Referrals	Bi-Annually	Case Files/ authorizations	Places To Go Manager	100%		
Service Access								
Maximize Attendance	Percentage of authorized support hours delivered	All Participants	Bi-Annually	Billing/ authorizations	Places To Go Manager	90%		
Satisfaction								
Increase Participant Satisfaction	% of consumers who give a satisfaction rating that averages 4 on a scale of 1 to 5	All consumers responding to survey	Annually	Survey Results	Places to Go Manager	90%		
Increase Stakeholders Satisfaction	% of stakeholders who give a satisfaction rating that averages 4 on a scale of 1 to 5	All stakeholder Responding to survey	Annually	Survey Results	Places To Go Manager	90%		

Parents and Friends, Inc.

Plans and Reports

July 2016

Parents and Friends, Inc.

Accessibility Plan

July 2016-June 2017

Purpose

The purpose of this report is to describe measures that Parents and Friends took during 2015/2016 and will take during 2016/2017 to identify, remove and prevent barriers to all individuals in accessing PFI's facilities and services, including staff, consumers, customers, and other members of the community, etc., as required by the ADA and in compliance with CARF Standards.

Aim

Desired Outcomes for integrating PFI'S Accessibility plan into our regular business practices.

- Services, policies, procedures and practices will meet the needs of more people.
- More people will have access to PFI's buildings and facilities.
- More people will have access to PFI's information resources.
- Staff will better meet the needs of employees, visitors and customers.
- PFI will better meet the needs of *all* people.

Organization's Profile

Parents & Friends, Inc. (PFI) a CARF accredited organization is the Mendocino coast's public benefit corporation serving the needs of adults with developmental disabilities for over fifty years. PFI provides programs and services which extend to all aspects of an individual's life: recreational, employment, independent living and day to day activities. A staff of 136 serves 80 clients. Parents and Friends' businesses support client centered programs and services:

Located at 521 Chestnut St.:

- The Community Connection is a state licensed day activity program offering services to individuals with severe disabilities.
- L.I.F.E on the Coast is an individualized community based program providing support to people in numerous aspects of their life including employment, supported living, and recreation. Some client activities are located at 521 E. Chestnut St.

Located at 350 S. Main St.:

- The Paul Bunyan Thrift Shop generates revenue by offering bargain prices on donated clothing and household items. The Paul Bunyan Thrift Shop provides an Individual and Group Supported employment site for people receiving services from The Job Connection.

Located at 306 E. Redwood Ave:

- PFI Administrative offices including Bookkeeping, Executive Director, and meeting spaces for Board, Managers, Safety Committee, and various other meetings.
- The Job Connection provides organizational employment services, group employment services, and job coaching to Supported Employers and Supported Employees through Regional Center and Dept. Of Rehabilitation.
- Coastal Support Services is a supported living program providing support for individuals to live independently in their own homes.
- L.I.F.E on the Coast is an individualized community based program providing support to people in numerous aspects of their life including employment, supported living, and recreation. The office is located at 306 E. Redwood Ave.

Located at 350 Cypress St.:

- L.I.F.E on the Coast is an individualized community based program providing support to people in numerous aspects of their life including employment, supported living, and recreation. Some client activities are located at 350 Cypress St.

How PFI Defines a Barrier

A "barrier" is anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including: physical, financial, behavioral, architectural, and informational or communications, attitudinal, technological, policy or a practice.

The Accessibility Committee was tasked with setting priorities and developing strategies to address barrier removal and prevention.

The Process Used to Form the Accessibility Plan

1. Establishment of a Safety and Accessibility committee
2. On-going commitment to accessibility planning.
3. Reviewed recent successes in identifying, removing and preventing barriers within our organization.
4. Identified (list/categorize) barriers that will be addressed in the coming year.
5. Set priorities and developed strategies to address barrier removal and prevention.
6. Specified how and when progress is to be monitored.
7. Update, approve, endorse, submit, publish and communicate the plan.
8. Ongoing protocols for review and monitor the plan.

How the Safety and Accessibility Committee Functions

- A Chair Person for the Safety and Accessibility Committee is appointed responsible to organize bi-monthly committee meetings and coordinate all reports.
- The Safety and Accessibility Committee consists of a representative from each program of Parents and Friends, a consumer representative, and a Chairperson.
- Members appointed to the Safety and Accessibility committee assist the Chairperson in the development, review, implementation and evaluation of the accessibility plan. In continuing the on-going development of the Accessibility Plan, the accessibility committee will work to identify barriers, and plan for as well as implement their removal through bi-monthly committee meetings.

Barrier Identification Methodologies

- Consumers, Staff, Board of Directors, and Other Input
All input is noted and directed to the Safety and Accessibility Committee meeting for review bi-monthly. All employees are informed upon hire and annually of the Safety and Accessibility Committee and its functions. Employees are also made aware of how to report safety concerns, and safety topics are regularly discussed at all types of meetings.
- Safety inspections
Regular quarterly bi-annual inspections completed by the Committee result in action items and plans of action towards removal of hazards and barriers.
- Manager's Meetings
The Office Manager will be responsible for attending weekly Manager's Meetings, and communicating with the chairperson any safety concerns brought to his/her attention by the Program Manager's and Executive Director.
- Safety and Accessibility Committee Meetings
Bi-Monthly Committee meetings attended by a client representative and a representative from each program address any current accessibility action items.

- **ADA Checklist**
Is completed annually by the Office Manager with the assistance of the safety committee chairperson and is used to generate new action items.

Review and monitoring process

The Safety and Accessibility Committee will meet quarterly to review progress. At each meeting, The Committee will remind staff, either through personal contact or by email, about their roles in implementing the plan. The Board of Directors will review the status of the Accessibility Plan annually at the Board of Director's Meeting.

Communication of the plan

Copies of this plan are available on PFI's Portal and PFI's website.

2015/2016 Accessibility Report:

350 Cypress St. continues to be in use. One building is providing office and meeting space for staff, another building is being used as a workshop for client activities through the L.I.F.E. on the Coast program. Recently, PFI has installed a community garden in the outdoor space at 350 Cypress St. providing clients and community members with a space to learn about organic gardening and nutrition. The garden produce and flowers are sold at the local Farmer's Market and will provide ingredients to be used in the Learning Kitchen that has been installed at 521 E. Chestnut St.

350 Cypress St. is PFI's oldest location and as of this report, all of the possible improvements have been made to bring Cypress Street Center as close to ADA compliant as is practical. It will not be possible to make the location completely ADA compliant. Our strategy has been to minimize activities and Cypress Street Center and provide alternate locations for staff and clients to meet and participate in activities.

Following is a list of items that were identified in July 2014-June 2015 and carried over from previous reports and the current status of each:

Location Acronyms are: PBTS: Paul Bunyan Thrift Store, CSC: Cypress Street Center, TCC: The Community Connection, Admin: 306 E. Redwood Ave, ChSt.: 521 E. Chestnut St.

Items Continuing for 2016/2017:

Architectural Barriers

1. Thrift Store Checkout Counter Accessibility: A check-writing surface should be provided at a height of no more than 34 inches that a wheelchair can pull up to. The accessible checkout counter should be labeled with signage if both counters are not accessible. (ADA Checklist: 2.72-2.80)

Current Status: Continuing Item: Because both checkout counters are glass they can't be modified easily.

Short Term Plan 07/2016-06/2017: Seek a table or shelf that would meet ADA requirements for a check writing surface. Direct staff to provide assistance to people who need it until a solution can be put in place.

Long Term Plan: When it becomes necessary to replace one of the counters, purchase one that meets ADA requirements.

- Person Responsible:** Thrift Store Manager
2. Aisles and walkways in the thrift store should be 36 inches wide.

Current Status: Continuing item: because merchandise is always fluctuating and being rearranged, 36 inch clearance is not always maintained between all items.

Short Term Plan 07/2016-06/2017: Staff will work to make sure that an accessible path is maintained to the extent possible.

Long Term Plan: See short term plan.

Person Responsible: Management and staff at the Thrift Store.
 3. Clearance in front of light switches: all buildings.

Current Status: Continuing item: this is an ongoing item. In some spaces it is not possible to maintain clearance in front of light switches because of the shape and requirements of the space. Staff should be aware and make every attempt to maintain clearance in front of light switches in all buildings.

Short Term Plan 07/2016-06/2017: Staff will work to make sure that clearance is maintained in front of light switches.

Long Term Plan: See short term plan.

Person Responsible: Management and staff at all locations.
 4. Front door at Redwood Ave. is too heavy and closes too fast.

Current Status: Completed 01/2016: the front door is too heavy to be opened easily by someone using a wheelchair or who has other challenges. (ADA Checklist: 1.46)

Short Term Plan 07/2015-06/2016: Installed a door bell so that someone can ring for assistance if necessary.

Long Term Plan: Install an automatic door opener, or identify a permanent building that can be renovated to make the entrance meet ADA requirements.

Person Responsible: Safety and accessibility committee.
 5. Sink Faucets at all facilities are not ADA compliant

Current Status: Continuing item: The bathroom faucets at all facilities are not ADA compliant they require a twisting and tight grasping motion.

Short Term Plan 07/2016-06/2017: Replace bathroom sink faucets in all facilities

Long Term Plan: See short term plan

Person Responsible: Safety and accessibility committee

Environmental Barriers

None Identified

Attitudinal Barriers

6. Potential Employer preconceived bias about developmental disabilities

Current Status: Continuing item: Employer relationships were maintained this year. Seven new employers were found this year. Involvement with the Chamber of Commerce, Soroptomist Club, fundraising and PR activities

Short Term Plan 07/2016-06/2017: Maintain strong relationships with current employers.

Long Term Plan: Continue to work to increase awareness of employers not yet involved with supported employment.

Person Responsible: TJC Manager
7. Lack of sensitivity by community members

Current Status: Continuing item: This year we maintained and continued to grow all programs, as well as reintroducing the program “Places To Go”. PFI continued the quarterly newsletter distribution, maintenance of our website, and Facebook. Staff participate in both Soroptomist and Chamber of Commerce, as well as fundraising and PR activities. We also have board members that reside on multiple community boards.

Short Term Plan 07/2016-06/2017: Maintain strong relationship with current supporters and stakeholders.

Long Term Plan: See short term

Person Responsible: Board of Directors, Executive Director

8. Education/Training level of PFI Staff

Current Status: Continuing item: All employees begin employment with initial training videos, are enrolled in the College of Direct Support, and are current in First Aid and CPR as well as Pro-Act training. PFI has been awarded a grant from the Regional Center in order to fund additional training for staff for the 16/17 fiscal year. Additional training will include, NADD DSP certification training, consultation with professionals who can provide specific information regarding client’s needs, diabetes management training, and others to be determined as needed.

Short Term Plan 07/2016-06/2017: Continue to train existing and new staff according to the existing training plan and use all opportunities for staff training allowed in the RCRC grant.

Long Term Plan: See short term

Person Responsible: Executive Director

Financial Barriers

9. Budget cuts: Potential future budget cuts may result in future cuts to funding

Current Status: Continuing item: Continued- Maintained all current fundraising events. Created a position for a full time staff person to specialize in Technology and Fundraising. This staff member will work to grow existing events and also look into grant writing and additional opportunities for fundraising.

Short Term Plan: 07/2016-06/2017 Research alternate sources of income including fundraising and grants, work with specialized staff to maximize alternate sources of revenue not dependent on the state budget.

Long Term Plan: See short term

Person Responsible: Fundraiser/Grant writer, Executive Director, Board of Directors

Employment/Service Access Barriers

10. Not all authorized services are provided: some people served choose not to receive authorized services.

Current Status: Continuing item: Management continues to report weekly to Executive Director the percentage of authorized services provided and monthly to the board of directors. Annual outcomes goals in each program address percentage of authorized services provided. This year the Supported Living Services Department has been vendorized to provide specialized supports to aging populations and also individuals with specific support needs including visual and hearing impairment. Two new clients were referred for SLS support this year, one new client was referred to the LIFE program, five new clients have been referred to TCC, and 15 new clients were served by TJC.

Short Term Plan (07/2016-06/2017): Continue to expand services provided by seeking new vendorizations, new authorizations, and a wider variety of staff to provide those services.

Long Term Plan: See short term

Person Responsible: Executive Director, All Managers

Communication Barriers

None Identified

Technological Barriers

11. Limited access to equipment for staff:

Current Status: Continuing item: All of the staff who regularly use computers have computers that meet their needs. There are also suitable computers available for staff to use who do not regularly use computers. All staff are provided with cell phones. PFI works to update computers as needed and acquire computers at a reasonable cost whenever possible. There are always new technologies available that could improve efficiency. See the technology plan for more detail.

Short Term Plan (07/2016-06/2017): keep current computers up to date with software updates. Continue to provide cell phones to all staff and seek computers at reasonable costs. A full time staff person is now responsible for Internal Technology for staff and clients. This person is available for application support in order to make sure that staff are accessing features available through existing software and make recommendations on upgrades as well as addressing other technological needs.

Long Term Plan: See short term

Person Responsible: I.T. Staff, Executive Director, All Managers

12. Limited access to technology for clients.

Current Status: Continuing item: Many clients could benefit from assistive technology and greater access to computers. There are some computers available for clients to use and some clients have been able to purchase tablets and other devices to assist with communication.

Short Term Plan (07/2016-06/2017): A grant has been provided by the Regional Center to provide for more assistive technology over the 2016/2017 year. Also, a full time staff person is now responsible for assistive technology for clients. The RCRC grant is being used to fund this staff person to become certified as an assistive technologist and there are additional grant funds that will be available to fund devices and applications to be used by clients.

Long Term Plan: See short term

Person Responsible: I.T. Staff, Executive Director, All Managers

Transportation Barriers

13. Limited Public transportation: MTA only runs during business hours and on a limited route, Dial A Ride can be used as available

Current Status: Continuing item: RCRC discontinued much of the funding for public transportation leaving only limited free bus passes for certain activities. PFI continues to hire staff who are capable of providing transportation support and to reimburse staff for mileage. In addition, PFI has maintained previously owned vehicles and also purchased another passenger van. As of 07/2016 PFI has four passenger vans, with two being wheel chair accessible.

Short Term Plan (07/2015-06/2016): Continue to supplement public transportation with staff and company vehicles

Long Term Plan: See short term

Person Responsible: Executive Director

Parents and Friends, Inc.
Client Demographic Data
June 30, 2016

Race	PFI	Mendocino	California
White persons, percent	74%	86.3%	72.9%
Black or African American persons, percent	5%	1%	6.5%
Native American and Alaska Native persons, percent	1%	6.3%	1.7%
Asian persons, percent	2%	2.2%	14.7%
Native Hawaiian and Other Pacific Islander, percent	1%	.2%	.5%
Persons reporting two or more races, percent	0%	3.9%	3.8%
Persons of Hispanic or Latino origin, percent	16%	24.5%	38.8%
Age/Gender	PFI	Mendocino	California
Persons 65 years old and over, percent	6%	19.8%	13.3%
Female persons, percent	43%	50.2%	50.3%

The Mendocino County and California demographic data is from the United States Census Bureau web site and based on 2015 Census data. PFI data was collected in July 2016.

PFI statistics on race and gender generally fall within Mendocino County parameters except for female persons, persons reporting two or more races, and persons aged over 65. This is primarily due to there obviously being many persons of mixed race in all categories but PFI not specifically noting or reporting mixed race people, the tendency for developmental disabilities to be more common in the male population and, while the PFI population base is growing in age, only five persons have reached sixty five years old.

It is not believed that PFI should, or for that matter could, take any actions to change its demographic profile. All people who are served are referred to PFI by either the Regional Center or the Department of Rehabilitation, PFI does not solicit for its own referrals or offer services for hire on the open market. PFI demographics, therefore, actually reflect the Regional Centers and DOR's referral demographics rather than its own generated demographics.

PFI has not reported financial demographics, such as household income, individual income and percentage above and below the poverty line because it does not have access to that information for a large part of the population it serves. To report and estimate based on best available information and innuendo would seem to be counterproductive. Intuition, however, since most Clients served earn at or below minimum wage, seems to indicate that the population is generally low income, however household incomes may vary dramatically from Client to Client.

Parents and Friends, Inc.
Corporate Compliance Report
July 1, 2015 – June 2016

Parents and Friends Inc. is committed to the observance of statutory and company regulations on lawful and responsible conduct by the company, its employees and its management. In order to ensure that the organization receives information about, and complies with all federal, state, and local laws and regulations a corporate compliance policy has been adopted, and a corporate compliance committee has been assembled. The Corporate Compliance Committee is chaired by a staff member who is also the Corporate Compliance Officer. Other members of the committee are PFI's Executive Director, a contracted third party with financial and policy compliance experience if possible, and the president of the Board of Directors.

Summary of Allegations, Investigations, Complaints:

There were no allegations

July 2015-June 2016 Policy and Procedure Recommendations:

The committee has reviewed all Policy and Procedure Manuals within the past 12 months:

Personnel Policies and Procedures were last reviewed and approved in October 2015

Department Specific Policies and Procedures were last reviewed and approved in February 2016

Board of Directors Bylaws and Handbook were last reviewed and approved in August 2015

Program Manager's Policies and Procedures were last reviewed and approved in February 2016

July 2015-June 2016 Committee Members:

Corporate Compliance Officer: Raphaelle Gruys, Business Office Manager

Committee Member: Rick Moon, Executive Director

Committee Member: Laurel Ellen, Board President

Committee Member: Daphne Haney, Accountant and HR Consultant

Parents and Friends, Inc.
Critical Incident Analysis
2015/2016

July 2015- June 2016 Incident Summary:

Date	Location	Result	Description	
7/17/15	CSC	Injury w/ First Aid	Client strained back while helping to move furniture	Minor
7/20/15	Community	Injury w/ First Aid	Client strained wrist while adjusting seat	Minor
8/05/15	Redwood	No Injury	Client fell while cleaning bathroom	Trip/fall
8/14/15	Client Home	No Injury	Clients dog nipped staff	Minor
08/16/15	Client Home	ER Med Error	Medication error	Minor
8/17/15	Client home	No injury	Client appeared to be disoriented	Minor
08/19/15	CSC	Injury w/ First Aid	Client fell while pulling weeds at the garden	Trip/fall
08/19/15	Thrift Store	First Aid w/ Dr. Visit	Staff had heart attack	Major
09/14/15	Redwood	Injury w/ First Aid	Client Punctured hand while picking up spilled thumbtacks	Minor
09/15/15	CSC	Injury w/ First Aid	Client Nail bent back	Minor
10/24/15	Thrift Store	Injury w/ First Aid	Staff tripped over furniture	Trip/fall
10/27/15	Client home	N/A	Client showed staff a bruise.	Minor
11/3/15	Client home	Med Error	Medication not Given	Minor
11/05/15	Thrift Store	Injury w/ First Aid	Staff pushed into wall while moving dumpster	Minor
11/06/15	CSC	Injury w/ First Aid	Client fell back into car while attempting to get out. Bumped head	Minor
11/16/15	Community	E.R.	Client slammed finger in car door	Major
11/23/15	Client home	Med Error	Medication Not given	Minor
11/30/15	Community	No Injury	Client wore too small of a life vest and left a rash	Minor

12/2/15	Community	Injury First Aid Dr. Visit	Client nipped by puppy	Minor
12/18/15	Community	No Injury	Client tipped over Partially on the bus	Minor
12/19/15	Client Home	Injury w/ First Aid	Client Slipped and fell	Trip/Fall
1/7/16	Community	No Injury	Client fell after getting up too fast	Trip/Fall
1/9/16	Client Home	Med Error	Medication not given	Minor
1/10/16	Client Home	No injury	Client had a seizure	Minor
1/10/16	Client Home	Med Error	Medication Not Given	Minor
1/10/16	Client Home	Med Error	Medication Not Given	Minor
1/18/16	Community	Injury w/ First Aid	Client Tripped and fell on sidewalk	Trip/Fall
1/19/16	Client Home	Med Error	Medication not given	Minor
1/29/16	Community	Injury w/ First Aid	Client fell on sidewalk	Trip/Fall
2/1/16	Redwood	First Aid	Client had nosebleed	Minor
2/4/16	Client Home	Med Error	Medication Not Given	Minor
2/4/16	Client Home	Med Error	Meds not given	Minor
2/10/16	Thrift Store	First Aid	Client Had tick on neck	Minor
2/15/16	Client Home	N/A	Client had bruised right eyelid and abrasion on right cheek from unknown cause	Minor
2/18/16	Community	Injury w/ First Aid	Clients thumb was slammed in a car door	Minor
2/22/16	Community	Injury	Client Hit foot on Pool	Minor
2/24/16	Community	No Injury	Clint Was hit in the chest by car door	Minor
2/27/16	Client Home	Med Error	Medication Not Given	Minor
2/28/16	Client Home	Med Error	Medication Not Given	Minor
3/2/16	Community	No Injury	Client hit top of their head with a trunk hatch	Minor

3/4/16	Client Home	No Injury	Client had seizure	Minor
3/4/16	Client Home	No Injury	Client Slapped a staff member	Minor
3/6/16	Client Home	Med Error	Medication Not Given	Minor
3/6/16	Client Home	Med Error	Medication Not Given	Minor
3/7/16	Community	No Injury	Client hit top of foot while swimming	Minor
3/7/16	Chestnut St.	No Injury	Client Broke Chair	Minor
3/10/16	Community	First Aid	Staff had a tick bite	Minor
3/12/16	Client Home	No Injury	Client had a violent outburst	Minor
3/15/16	Client Home	Injury w/ First Aid /E.R.	Client fell while having seizure and cut hand on bathroom door	Major
3/20/16	Client Home	Med Error	Medication Not given	Minor
4/2/16	Client Home	Med error	Wrong meds given	Minor
4/2/16	Client Home	Med Error	Medication Not given	Minor
4/3/16	Client Home	Med Error	Medication Not Given	Minor
4/6/16	Client Home	N/A	Staff Noticed Bruise on Clients arm	Minor
4/14/16	CSC	No Injury	Staff Backed Van Into Tree Breaking Window	Minor
4/21/16	Thrift Store	No Injury	Client Pulled Chair Out from Under another Client	Minor
4/23/16	Community	Injury w/ First Aid/ Dr. visit	Client Had Heart Attack	Major
4/25/16	Client Home	First Aid w/ E.R.	Client Had Major Seizure	Major
5/4/16	Client Home	No Injury	Staff Member passed out	Minor
5/7/16	Client Home	ER	Clients Stitches from a surgery opened up	Minor
5/7/16	Thrift Store	No Injury	A vehicle at Paul Bunyan thrift store bumped into staff	Minor
5/15/16	Client Home	Med Error	Med error	Minor

5/16/16	Client Home	N/A	Client reported that he was pinched by a family member	Minor
5/20/16	Community	Vehicle accident	A staff member hit a parked car while backing up	Minor
5/26/16	Community	First Aid	A Client Complained of heel pain from walking	Minor
5/30/16	Thrift Store	Injury w/ First Aid	A Staff member missed both steps in the lunch room and fell down	Minor
6/1/16	Community	Injury w/ First Aid	A Client Tripped over a parking curb and scraped a knee	Minor
6/4/16	Client Home	Med Error	Double Dose of Meds given	Minor
6/9/16	Community	No injury	A Client fell down in a vehicle.	Minor
6/10/16	Clients Home	Med Error	Medication not given	Minor
6/13/16	Clients home	No injury	Client with possible constipation	Minor
6/17/16	Client Home	Dr. visit	Client landed on top off staff	Minor
6/20/16	Client Home	No injury	Client bumped head on railing during a 2 person toilet transfer	Minor
6/20/16	Client Home	No Injury	Clients head touched wall during a 2 person toilet transfer.	Minor
6/20/16	Client Home	Med Error	Skipped med dose	Minor
6/21/16	Client Home	Med Error	Medication not given	Minor
6/22/16	Client Home	Dr. Visit	Staff alleged pain in shoulder	Minor
6/27/16	Client Home	No Injury	Client bit staff	Minor

Parents and Friends Critical Incident Analysis

July 2015- June 2016 Incident Summary

Of 78 total incidents documented only 28 resulted in any injury. We will be summarizing only incidents that resulted in injury:

- 11 (39%) happened in the community
 - 0 (0%) happened at Chestnut St
 - 6 (21%) happened in client's homes
 - 5 (17%) happened at the Thrift Store
 - 4 (14%) happened at Cypress Street
 - 2 (7%) happened at Redwood Ave.
-
- 23 (82%) required 1st Aid
 - 9 (32%) required Doctor's or E.R visits
 - 4 (14%) required no 1st Aid

July 2015- June 2016 Causes/Trends:

- There were a significant amount of medication errors this year.

Actions for Improvement:

- Continue training all staff in first aid and CPR including seizure procedures.
- Continue to provide medication training.
- Continue to use a centralized medication system and staff person to serve as a medication coordinator.
- Continue to provide Pro-Act training to staff in order to provide tools for dealing with aggressive behaviors
- Continue to provide annual training on avoiding trip and fall accidents and good housekeeping.
- Continue bi-annual safety inspections, annual review of all safety postings and procedures, quarterly safety committee meetings, and regular training for all staff.

Results since last report (7/15):

- 22 incidents of the 78 total incidents involved medication error. Medication coordination is centralized and the responsibility of one staff person for prescriptions, documentation, and med-setting for the vast majority of clients. The increase in reported incidences are due to a change in the departments reporting policy. To address the increase in incidences, the department will conduct mandatory medication training to all support staff. They will be required to attend a secondary medication training in the month of September 2016.
- 8 incidents resulted from trip and fall accidents. This is an ongoing issue considering the number of people who have ambulatory challenges. Trainings provided to staff in providing effective support to clients requiring assistance walking may have been helpful

in reducing the amount of accidents. These trainings will be continued regularly as there is staff turnover, and as a refresher.

Necessary Education and Training of Personnel:

- Training for all staff in assisting people to walk and preventing trip and fall accidents
- Continued CPR/First Aid training including seizure procedures

Prevention of Recurrence:

- Continue regular environmental inspections
- Provide the above training to staff.

Internal and External Reporting Requirements

- All incidents resulting in first aid will be documented with an “In House Incident Report” form.
- All special incidents resulting in Doctor’s visits involving persons served will be documented with a SIR form
- OSHA 300 forms will be completed and posted annually
- All inspections (internal and external) will be followed by a written report
- All trainings will be documented regarding who was in attendance and what subjects were covered

Parents and Friends Inc.

Cultural Competence and Diversity Plan

2016/2017

Cultural competence includes attaining the knowledge, skills, and attitudes to enable leadership and staff to provide effective services for diverse populations. Maintenance and/or growth are more likely to occur where systems, services, and staff utilize knowledge and skills that are culturally competent and compatible with the backgrounds of those individuals being served, their families, and the community. Cultural competence acknowledges and incorporates these variables into the ongoing assessment process which culminates with the Individual Service Plan implemented. Parents and Friends Inc. is committed to demonstrating an awareness of, respect for, and attention to the diversity of the people with whom it interacts (persons served, personnel, families/caregivers, and other stakeholders). We demonstrate this commitment through our organizational structure, policies, services, and training.

The overall aim of this plan is to foster culturally competent staff and therefore quality services for individuals by:

- Recognizing and honoring diversity in all forms;
- Assessing cultural competency at all organizational levels;
- Offering immediate access to culturally appropriate services for those served
- Offering continuous, comprehensive cultural competency/diversity education and training for staff.

PFI's Cultural Competence and Diversity Plan:

- Consideration for the social, cultural, traditional, or religious activities that are important to the person served is referenced in the Individual Service Plan developed in each program that the person participates in. This plan is reviewed and updated annually to ensure that it is current.
- Persons served are assisted by their support staff with accessing the worship services of their choosing.
- Persons served are assisted by their support staff with participation in the holidays of their choosing, including visits to family to participate in traditional activities important to them.
- All personnel read, sign, and abide by the PFI Code of Ethics which references respect for cultural diversity.
- Demographic information of persons served is updated annually which includes information on race and gender.
- Parents and Friends Inc. complies affirmative action requirements in our hiring practices as outlined in the Personnel Manual.
- Assurance that individuals served receive from all staff effective, understandable, and respectful services that are provided in a manner compatible with their cultural beliefs and practices and preferred method of communication.
- Providing to individuals served and their guardians both verbal and written rights information in a method they can easily understand.
- Making available easily understood materials and signage in a method that addresses the needs of the individuals served and/or other stakeholders.

- Ensuring that staff at all levels and across all disciplines receive ongoing education in culturally appropriate service implementation.
- Maintaining current demographic and cultural data of the individuals served to accurately plan for services that respond to the cultural characteristics of each individual.
- Recognizing that staff diversity also needs to be honored and ensuring that equal employment opportunities are strictly adhered to in hiring, placement, and subsequent changes in employment status.

Status PFI's 2015/2016 goals:

Goal: Provide Cultural Competence training to all staff by June 2016

Action: Using the College of Direct Support, Cultural Competence Module, provide an opportunity for each staff person to complete the training course.

Timeframe: Have staff complete the course in stages according to their priority level. All staff to complete the course by June 2016.

Status (06/2016): **In Progress, Continuing for 2016/2017** All staff have been assigned the online course and department managers are now required to train staff once a year with a Cultural Compliance video.

Parents and Friends, Inc.
Employee Retention Rate Analysis
July 1, 2015 – June 30, 2016

As of July 1, 2015 Parents and Friends, Inc. was employing 124 full and part time employees not counting Vocational Services consumers and Job Connection consumers.

Between July 1, 2015 and June 30, 2016 net employment at PFI increased from 124 to 136 employees, including an increase from 28 to 32 client employee's 5 of which were new hires and 3 decided to stop working. During this same time 51 employees left employment at PFI for a number of reasons. 69 new employees were hired at PFI during the year, 51 to replace employees who had left and 12 because of expanded needs to support services. The 51 employees who left PFI left for a number of reasons. Those reasons are:

Unknown/Found Another Job	Personal/Not Job Related	Reorganization/ Job Eliminated	Relocated	Medical	Poor Performance	Total
28	5	1	3	0	14	51

The chart above shows that PFI experienced a 26% turnover rate of staff for voluntary reasons and 11% for involuntary reasons from July 1, 2015 through June 30, 2016.

Taking personal/not job related and unknown/found another job as possible loss of employees because of poor job satisfaction. This can be compared to the 2015 non-profit employment survey study which showed an average turnover rate with non-profit companies with over 100 employees to be 14% for full time employees and 18% for part time employees for voluntary reasons and 4% for full time employees and 3% for part time employees for involuntary reasons.

Strategies for Maintaining or Lowering Turn-Over Rate.

1. Continue with full employer paid insurances including medical, dental, vision and life. This is very expensive (over 20% of gross payroll).
2. Keep current with annual reviews based on performance and current wage and salary surveys.
3. Continue an employee of the quarter program to recognize excellent performance, including a \$250.00 bonus.
4. Have an annual Bar-B-Q and other unscheduled events as appropriate to show employee appreciation.
5. Continue the employee appreciation reception or Holiday food gift cards in November/December and have a Christmas party with a pot luck luncheon in December.
6. Maintain an open door and open communications policy.
7. Have ED attend each department staff meeting at least quarterly.
8. Offer 403b retirement program to all staff

Parents and Friends, Inc.
Risk Management Controls System
July 2016

Goal: TO PROMOTE QUALITY SERVICES AND MANAGE RISK EFFECTIVELY. The Risk Management plan incorporates systems of checks and balances that clearly define accountability and monitor critical performance variables. Control systems are designed to minimize risks and prevent and detect illegal or unethical activity and or fraud, waste and abuse. Access to critical information is on a need to know basis.

Non Profit

Exposure	Control Mechanism	Responsibility	Schedule/Report	Review Date
General Liability	General Liability Insurance policy in effect. Annual review of policy w/ insurance broker prior to renewal.	Executive Director	Philadelphia Indemnity Ins. Policy 9/25/15 – 9/25/16	August 2016
	Maintain Safety Committee / OSHA Compliance.	Safety Committee	Ongoing	Ongoing
<u>Professional Liability</u>	Maintain current Insurance Policy. Annual review of policy w/ insurance broker prior to renewal.	Executive Director	Same as General Liability	August 2016
<u>Property Loss</u>	Maintain current Insurance Policy. Annual review of policy w/ insurance broker prior to renewal.	Executive Director	Same as General Liability	August 2016
<u>Vehicle Loss</u>	Maintain current Insurance Policy. Annual review of policy w/ insurance broker prior to renewal.	Executive Director	Same as General Liability	August 2016
<u>Business Loss/Interruption</u>	Maintain appropriate accreditation for each of PFI’s programs.	Executive Director	Annually	Annually
	Maintain relationships with bank.	Executive Director	Monthly	Monthly
	Maintain open communication with funding agencies.	Executive Director & Program Managers	On Going	On Going
	Use existing assets.	Executive Director	On Going	On Going

	Maintain Budget/ Cash Flow	Executive Director	Weekly	Weekly
<u>Loss of Reputation</u>	Maintain PFI Website Maintain Open Communication with Consumers, Family/ Guardian and the Community. Maintain annual Stakeholder, Consumer and Employee Surveys. Parents and Friends Newsletter	IT Staff Board of Directors, All PFI Staff Program Managers/ Administration Fundraising Staff	Ongoing Ongoing Annually Quarterly	Ongoing Ongoing Annually Quarterly
<u>Liability to Employees</u>	Maintain viable employment opportunities	Board of Directors, ED, TJC Staff	Ongoing	Ongoing
<u>Loss Of Accreditation</u>	Dept. Of Habilitation / Dept. Of Rehabilitation Maintain current Insurance Policy. Maintain Safety Committee / OSHA Compliance. CARF Survey CPR Certification	Program Managers Executive Director Safety Committee, All PFI staff Management Team / Board Of Directors Program Managers	Ongoing Same as General Liability Annually Annually Annually	Ongoing August 2016 Annually Annually Annually
<u>Loss / Reduction or Interruption of Income</u>	Match income w/ expenses- reacts quickly to changing finical situations. Contingency fund of \$100,000. Weekly and Monthly cash flow to match.	Executive Director Board of Directors / Executive Director Executive Director	Monthly Monthly Weekly/Monthly	Monthly Monthly Weekly/Monthly
<u>Financial miss management or malfeasance</u>	Financial review & report to Board of Directors and Financial Sub Committee Annual audit of financial by Independent CPA reporting to the Board Of Directors	Executive Director CPA	Monthly Annually	Monthly Annually

<u>Inability to hire and maintain sufficient Quantity of experienced employees.</u>	Employee Exemplary Performance Certificate Performance Review Employee Satisfaction Survey Fully Paid Medical, Dental, Vision Open Door Management Policy Formal Grievance Procedure	Program Manager / Executive Director Executive Director Executive Director Ex. Director/ Board of Directors Ex. Director/ Board of Directors Ex. Director/ Board of Directors	Quarterly Annually Annually Annually Annually Annually	On Going Annually Annually Annually Annually Annually
<u>Natural Disaster, Fire and Accident Prevention</u>	Safety Plan	Safety Committee	Quarterly	Quarterly

Parents and Friends, Inc.
Technology and Systems Report
July 2016

It is the intention of Parents and Friends, Inc. to utilize technology whenever feasible and affordable to provide better accessibility to technology for consumers and employees and greater efficiencies in work processes, information and communications. The confidential nature of our business, together with solid business practices, calls for safeguards to be in place which will protect against the loss of information and restrict the ability to break into our system and take confidential information. There are also basic safeguards to protect against improper disclosures of confidential information to insiders. This plan will continue to be updated as new procedures and technologies become available.

- Parents and Friends web page, which is maintained by a staff person.
- System management – Parents and Friends contracts system management to an outside technology firm (Sage’s Computer) for system architecture design, security and maintenance. The contractor is available to all departments and programs by phone and email for all technology questions, assistance and maintenance. The contractor is local and provides onsite service for which Parents and Friends is billed monthly
- Internet Access – Every manager and appropriate employee who has the need has a computer system with access to the Internet. The ISP provider is Mendocino Community Network (MCN), a non-profit local provider. MCN also provides the first level of security and spam identification.
- Communication – PFI promotes effective and efficient communications through a MCN cloud based digital phone service with extensions for each department and also individual phones. Installing this system was a goal made in previous year’s strategic plans in order to streamline incoming calls, be more consumer friendly and reduce phone lines and expenses. Phone lines are provided by MCN and cell phones for on call and remote work crews through US Cellular. Individual voice mail for each program is provided through MCN, and for cell phones through U.S. Cellular.
- PFI has implemented ADP, a Time and Attendance System that tracks employee hours and client activities. Staff log in and out using phones, and managers are able to track current payroll and billing information automatically. ADP works with QuickBooks and allows for more efficient and auditable processing of payroll and billing.
- Security – Every single user has a user name and password unique to that user, with a master list of user names and passwords kept in the accounting office. Access to email is also password protected. A Router with firewall protection is used for all internet access and every system has a current virus and spam detection system. The accounting system (QuickBooks Premier Non-Profit Edition) has user name and password protection at the program as well as computer level and security features which prevent any major reconfigurations or changes in users or security without approval of the system administrator.
- Backup – All computers have Dropbox installed. Dropbox offers cloud storage and file synchronization and keeps all computer files backed up as they are modified. Dropbox

also offers a service that tracks changes to files and allows users to find previously saved versions of a document.

- Disaster Recovery – The intranet has a redundant system to protect against national emergencies. The email system is maintained on a secure mail server located and MCN. In the event of a local disaster or fire at our offices, emails not downloaded are protected at MCN .Our accounting information is backed up via QuickBooks to a mirrored drive and an external drive locally as well as copied to a secondary computer and also synced to Dropbox.
- Equipment – All managers and appropriate employees who have the need have desktop or laptop computers with internet access, printers, and all other necessary accessories. A Xerox copy machine has been leased capable of printing 11x17 inch paper and color. It is used to print the *Progress!* Newsletter each quarter. Another copier maintained by Oce Office Solutions is also located in the administrative building.
 - There are enough computers available for all essential daily tasks and also the occasional needs that arise. However, more computers would allow for more efficient operations at the Thrift Store, easier scheduling of online training, and client activities requiring computer and internet access. Any opportunities for donated or reduced price computers should be pursued.
- Accessibility and Adaptive Technology – All computers use Microsoft Windows as their operating system. Windows includes applications and options that provide adaptive technology when and if needed. The accessibility options include:
 - Features for people who are deaf or hard of hearing.
 - Features for people who are blind or have impaired vision.
 - A text magnifier.
 - A navigator system.
 - Features for people with mobility impairment.
 - Features for using speech.
 - Setting up microphones and speakers.
 - Text to speech translation program.
 - Speech recognition to text program.

Accessibility tools available at PFI include unlimited text messaging cell phone capabilities. PFI has added an adaptive technologist, specifically trained in assessing clients with their adaptive technology needs, and providing subsequent recommendations and training support. Should the features available with Microsoft Windows or phones not adequately address a specific accessibility issue with an individual consumer or employee adaptive technologies are available through the Redwood Coast Regional Center and Department of Rehabilitation. Sage's Computer, PFI's maintenance support contractor, also has experience in available adaptive technologies including their installation, configuration and maintenance.

