

Parents and Friends Inc.
July 2017 Annual Outcomes Reports
Goals, Results, and Plans

Outcomes Results.....	2
2016/2017 Strategic Plan Outcomes	3
July 2016-June 2017 Coastal Support Services Outcome Results.....	6
July 2016-June 2017 The Community Connection Outcome Results	9
July 2016-June 2017 The Job Connection Outcome Results.....	12
July 2016-June 2017 L.I.F.E. on the Coast Outcome Results	15
July 2016-June 2017 Places to Go Outcome Results.....	18
Outcomes Goals	21
2017/2018 Strategic Plan Goals	22
July 2017-June 2018 Coastal Support Services Outcome Goals	25
July 2017-June 2018 The Community Connection Outcome Goals	26
July 2017-June 2018 The Job Connection Outcome Goals	27
July 2017-June 2018 L.I.F.E. on the Coast Outcome Goals.....	28
July 2017-June 2018 Places to Go Outcome Goals	29
Plans and Reports.....	30
Accessibility Plan.....	31
Critical Incident Analysis	39
Client Demographic Data	53
Corporate Compliance Report	54
Cultural Competence and Diversity Plan.....	55
Employee Retention Rate Analysis	57
Risk Management Controls System.....	58
Technology and Systems Report	61

Parents and Friends, Inc.
Outcomes Results
July 1, 2016-June 30, 2017

Parents and Friends, Inc.

2016/2017 Strategic Plan Outcomes

July 2017

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:

1. **Maintain financial stability and predictability.**
2. Budget for profitability, stressing quality of services and products offered and organizational efficiency.
 - a. Responsibility: CEO
 - 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: CEO

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 are 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: CEO
2. Conduct performance reviews for all personnel at least annually. Responsibility: CEO And all Managers.
3. Keep job descriptions updated and communicate clearly what expectations are and how performance will be measured. Responsibility: CEO 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: CEO 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 year's bonus was 12% and for the previous two years were 10% of an employee's annual paid wages plus 2% to an employer paid retirement account for eligible employees.

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: Executive Admin Assistant.
3. Sponsor, through the board of directors, two fund raising events annually.
Responsibility: Fund Raising Mgr. /Board fundraising committee.
4. Keep the web page, Facebook, etc. current and relevant. Responsibility: IT Mgr.
5. Maintain open door policy for all employees, clients, stakeholders and community members. Responsibility: all mgrs. CEO

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: CEO/Management team.

Outcome: Accomplished. PFI has implemented Places To Go a new evening and weekend program with which we have gained fifteen new clients. We acquired more hours with already existing clients when another local agency closed its doors. Community Connection has added eight new clients three of which are

shared with SLS. Including the shared clients, SLS has added five new clients. Job Connection has added fourteen new clients. Along with the clients new to PFI, SLS has added additional clients that were previously in other PFI programs.

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: CEO/Management team.

Outcome: Partially Accomplished. Appropriate classes have been assigned to staff and a second pro-act trainer has been trained. Sixty One employees have completed the Pro-ACT training over the past year. 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 2016-June 2017 Coastal Support Services Outcome Results

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%	98%	57%
Maximize Progress on ISP Goals	Percentage of consumer goals showing positive progress	All consumer goals	Biannual	ISP Files	CSS Manager	85%	97%	80%
Efficiency								
Maximize Consumer Services	Percentage of authorized support hours delivered	All consumers	Annual	Billing Forms	CSS Manager	90%	85%	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%	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%	94%	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%	98%	91%

2016/2017 Coastal Support Services Outcome Results Detail
July 2016-June 2017

Effectiveness:

Establish Client ISP Goals

Goal: 75%	Outcome: 98%	Achieved
-----------	---------------------	----------

2 ISP out of 42 SLS were not completed timely or have not been completed.

1 ISP out of 15 ILS were not completed timely or have not been completed.

The department has greatly improved in this area due to the creation of a new position. In this position the individual manages all ISP/IPP functions in addition to other duties.

Maximize Progress on ISP Goals

Goal: 85%	Outcome: 97%	Achieved
-----------	---------------------	----------

This goal has been met due to the department's ability to adequately track and support our clients in their efforts to achieve their goals. Each client's House Manager also plays a significant role in this accomplishment.

Efficiency:

Maximize Client Services

Goal: 90%	Outcome: 85%	Not Achieved
-----------	---------------------	--------------

In this case the numbers are a little misleading. It appears that progress has not been made in this area when in fact the department has progressed, but there has been an increase in clients that the department serves flat lining the appears of efficiency. The department exceeded or met the goal of 85% 6 months out of 12 months.

Service Access:

Maximize Client Retention

Goal: 100%	Outcome: 100%	Achieved
------------	----------------------	----------

Satisfaction

Increase participants satisfaction

Goal 95%	Outcome: 94%	Not Achieved
----------	---------------------	--------------

37 participants out of 42 were surveyed. On a scale with 5 - rated as excellent, 4 - rated as very good, and 3 - rated as average, 14 clients rated their level of satisfaction as a 5, 16 rated their level of satisfaction as a 4, 9 rated their level of satisfaction as a 3, and none rated their level of satisfaction beyond the given levels.

Increase stakeholders satisfaction

Goal 100%	Outcome: 98%	Not Achieved
-----------	---------------------	--------------

The 8 surveyed individuals rated their satisfaction on a scale of 1 to 5. It was refreshing to review the comments of stakeholders/family members and to hear their echoes of support and appreciation for the SLS team.

July 2016-June 2017 The Community Connection Outcome Results

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%	96%	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%	91%	95%
Efficiency								
Maximize staff attendance	Percentage of days staff worked when scheduled	All employees	Bi-Annually	ADP/ schedules and	TCC Manager	95%	96%	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%	92%	90%
Maximize client attendance	Percentage of days clients attend per days authorized	All TCC participants	Bi-Annually	billing forms/ schedule	TCC Manager	95%	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%	95%	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%	71%	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%	88%	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%	95%	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%	95%	100%

2016/2017 The Community Connection Outcome Results Detail
July 2016-June 2017

Effectiveness:

Maximize Progress on ISP Goals

Goal: 90% **Outcome: 96%** Achieved

2 Goals out of 55 have not been achieved, one is an employment goal and the other is shopping out in the community. The shopping goal has not been achieved due to funds, client health and behaviors.

Maximize # of online training courses taken

Goal: 95 % **Outcome: 91%** Not Achieved

This is an area that requires continues support and monitoring, as there are many variations that change the outcomes in this category such as, change in schedules and new hires. 20 out of 22 staff have participated in online training, the two staff have just started working for Community Connection.

Efficiency:

Maximize Staff Attendance

Goal: 95% **Outcome: 96%** Achieved

Out of 22135.89 hours staff were scheduled to work, they worked 21,287.39 hours missing 848.5 hrs. We met our goal despite the fact that the program was hit hard with various illnesses throughout the year, especially the last few months.

Maximize progress on employee goals

Goal: 95% **Outcome: 92%** Not Achieved

We have hired 7 new staff, some of whom have not yet had their 90 day evaluation, therefore, no goals. They are not figured into the equation. Out of 50 goals progress has been made on 46.

Maximize client Attendance:

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

We have served clients 3275 day out of a possible 3461 day, which brings us to 95%. This year the program was hit hard with various illnesses, medication changes, week long vacations and 1 client visiting family for over a month. However, due to the influx of clients the numbers still stayed high.

Client Retention

Goal: 100% **Outcome: 95%** Not Achieved

One client moved to Ukiah to live in a group home. We currently serve 22 clients.

Increase amount of time spent outside the facility

Goal: 65% **Outcome: 71%** Achieved

We did not include 4 clients in the mathematics. One client never leaves the facility due to health, 2 more clients are offered opportunities to go out in the community however they decline the offer due to the weather, age and health. 1 client just started the program.

Satisfaction

Maximize staff satisfaction

Goal 95%

Outcome: 88%

Not Achieved

This year the program has gone through a growth spurt and many changes have been made. Not all staff were satisfied with the changes, such as documentation and client schedules. There is also a small group who are not satisfied with the lack of time to complete online training and wages.

Maximize client participation in surveys

Goal 60%

Outcome: 95%

Achieved

This year PFI changed to way we conduct client surveys. We now have the clients participate in the satisfaction survey at their annual Individual Service Plan (ISP).

Maximize stakeholder satisfaction

Goal 100%

Outcome: 95%

Not Achieved

Out of 11 family members that received the survey, 11 were returned with an outcome of 95%. 8 family members were very satisfied with a rating of 5, and 3 family members were satisfied with a rating of 4.

July 2016-June 2017 The Job Connection Outcome Results

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%	62%	53%
Maximize Progress on IHSP Goals	% of client goals achieved	Individual And Group	Bi-annually	IHSPs and Case Files	TJC Manager	SEP: 65%	74%	59%
						GROUP: 52%	82%	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%	100%	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%	100%	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%	100%	75%
Service Access								
Maximize client retention	% of clients who began services and continue or have successfully completed services in this period	All clients referred July - June	Bi-annually	Case files	TJC Manager	80%	100%	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%	92%	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%	91%	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%	92% 91%	88% 88%

The Job Connection Outcome Report 6.30.016
JULY 2016 to JUNE 2017

EFFECTIVENESS:

STATUS:

Maximize Placement: % of people referred for indiv job development placed in jobs

Goal: 55%

Outcome: 62%

ACHIEVED

21 referred/ 13 placed

TJC performed intake, discovery and employment preparation services for 21 clients this year.

Most not yet placed have been in assessment or training on specific skills and have good prospects for placement within the next period. Two clients were referred but discontinued before services began.

Maximize Progress on IHSP Goals: % of client goals achieved

Goal: 65% Individual

Outcome: 74%

ACHIEVED

28 out of 38 goals were achieved during this period: others were continued to encourage success

Goal: 52% Group Clients

Outcome: 82%

ACHIEVED

14 out of 17 goals were achieved during this period; others were continued to encourage success

EFFICIENCY:

Complete 3 assigned training courses per year, per staff: all staff/ manager to assign and review

Goal: 80%

Outcome: 100%

ACHIEVED

5 out of 5 staff completed 3 assigned training courses during this year

Expedite Placement Progress w/in 6 months of referral date: % of placements made

Goal 60%

Outcome: 100%

ACHIEVED

The 13 clients who were placed within this year period, were all placed in jobs within 6 months of the qualifying referral date.

Maximize Job Retention (3 months or more): % of clients placed for whom Retention was billed

Goal: 80%

Outcome: 100%

ACHIEVED

Eight of the 13 clients placed this year have reached Retention of 3 months. The other 5 have not yet reached that retention date: thus, 8 out of 8 qualified this year.

SERVICE ACCESS:

Maximize Client Retention: % of people begin services & continue or successfully completed services

Goal: 90%

Outcome: 115%

ACHIEVED

TJC began with 41 clients, lost 4, gained 10; thus ended the year with 47.

Maximize Authorized Service Hours: % authorized service hours performed excluding Group client services, but including all other billable services Job Coaching, PVSA , SA, WAT

Goal: 90%

Outcome: 92%

ACHIEVED

We served 3743.75 hours out of a total of 3843.75 authorized service hours (RCRC and DOR.) Despite some client absence, holidays, and June fiscal year authorization finalization, we were able to meet our goal.

SATISFACTION: July 2016 –June 2017

Increase participants satisfaction: % of clients who give a rating of 4 or more on scale of 1 to 5

Goal 88%

Outcome: 91%

ACHIEVED

31 clients out of 34 rated a score of 4 or above on the IHSP meeting form during this year.

Increase stakeholders satisfaction: % of stakeholders who give a rating of 4 or more on scale of 1 to 5

Family/Community Goal 88%

Outcome: 92%

ACHIEVED

Employment Partners Goal 88%

Outcome: 91%

ACHIEVED

TJC appreciated the feed-back, especially from Community Employment Partners. We will strive to communicate with our partners on more specific employment related aspects of performance.

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

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%	75.5%	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%	71%	70%
Meet safety training/drill requirements	Percentage of client participation in safety training/drills	All people served	Bi-annually	Training Logs	LIFE Manager	100%	77%	New Goal
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	100%	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%	73%	45%
Maximize staff goal progress	Percentage of employee goals achieved	All goals	Bi-annually	Personnel Files	LIFE Manager	92%	66%	75%
Service Access								
Maximize Attendance	Percentage of authorized days attended	All clients	Bi-annually	Billing and authorizations	LIFE Manager	76%	74%	73%
Satisfaction								
Achieve Satisfaction of People Served	% of participants who give a satisfaction rating of 4 or higher on a 1 to 5 scale	All people served	Annually	Survey Results	LIFE Manager	100%	80%	99%
Achieve Stakeholder Satisfaction	% of participants who give a satisfaction rating of 4 or higher on a 1 to 5 scale	All LIFE stakeholders	Annually	Survey Results	LIFE Manager	80%	100%	75%
Maximize Staff Survey Participation	Percentage of completed surveys received	LIFE staff members	Annually	Survey Results	LIFE Manager	100%	100%	80%
Maximize Client Survey Participation	Percentage of completed surveys received	All people served	Annually	Survey Results	LIFE Manager & Program Assistants	100%	100%	94%

2017 LIFE on the Coast Outcome Results Detailed **July 2016-June 2017**

Effectiveness

Maximize Progress on ISP goals:

Goal: 80%	Outcome: 75.5%	Not Achieved
July 2016-December 2016: 75%		
January 2017-June 2017: 76%		
Increase of 1%		
From Previous Year Outcomes: Increased .5%		

Increase community employment/full time enrollment:

Goal: 80%	Outcome: 71%	Not Achieved
July 2016-December 2016: 70%		
January 2017-June 2017: 72%		
Increase of 2%		
From Previous Year Outcomes: Increased 1%		

Meet safety training/drill requirements

Goal: 90%	Outcome: 77%	Not Achieved
July 2016-December 2016: 70%		
January 2017-June 2017: 84%		
Increase of 14%		
From Previous Year Outcomes: Increased 7%		

Efficiency

Minimize waiting period for services:

Goal: <5 working days (equals 100%)	Outcome: 100%	Achieved
July 2016-December 2016: 100%		
January 2017-June 2017: 100%		
Stayed the same.		
From Previous Year Outcomes: Stayed the same.		

Increase Staff Training:

Goal: 100%	Outcome: 73%	Achieved
July 2016-December 2016: 45%		
January 2017-June 2017: 100%		
Increase of 55%		
From Previous Year Outcomes: Increase 55%		

Maximize progress on employee goals:

Goal: 92%	Outcome: 66%	Not Achieved
July 2016-December 2016: 75%		
January 2017-June 2017: 56%		
Decrease of 9%		
From Previous Year Outcomes: Increase 9%		

Service Access

Maximize attendance:

Goal: 76%	Outcome: 74%	Not Achieved
July 2016-December 2016: 73%		
January 2017-June 2017: 75%		
Increase of 1%		
From Previous Year Outcomes: Increase 1%		

Increase participants satisfaction

Goal 100%	Outcome: 80%	Not Achieved
Of 30 survey participants, 24 rated their satisfaction as an average of 4 (on a scale of 1 to 5) or higher.		

Increase stakeholders satisfaction

Goal 80%	Outcome: 100%	Achieved
Of 5 survey participants, 5 rated their satisfaction as an average of 4 (on a scale of 1 to 5) or higher.		

Maximize Staff Survey Participation

Goal 100%	Outcome: 100%	Achieved
Of 8 survey participants, 8 Participated		

Maximize Client Survey Participation

Goal 100%	Outcome: 100%	Achieved
All 30 Clients participated.		

July2016-June 2017 Places to Go Outcome Results

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%	66%	N/A
Efficiency								
Maximize Participant Services	Percentage of Authorized support hours delivered	All Participants	Bi-Annually	Billing Forms/ schedules	Places To Go Manager	90%	19%	N/A
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%	100%	N/A
Service Access								
Maximize client participation	Percentage of Clients that participated in scheduled activities	All Participants	Bi-Annually	Billing/ authorizations	Places To Go Manager	90%	96%	N/A
Satisfaction								
Increase Participant Satisfaction	% of consumers who give a satisfaction rating that averages 4 on a scale of 1 to 5	All clients responding to survey	Annually	Survey Results	Places to Go Manager	90%	90%	N/A
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%	Not Yet Measured	N/A

2017 Places To Go Outcome Results Detailed
July 2016-June 2017

Effectiveness:

Maximize Participant Goals:

Percentage of goals achieved or making positive progress

Goal: 85%

Outcome: 66%

Not Achieved

There were 66 client goals set. 38 Goals were met, 5 goals are making progress and 23 Goals were not met. The goals that were not met, were from clients that have participated very little or not at all in the program. We are finding that the families are one of our biggest challenges. Clients come to us wanting to do things and the family members do not allow it to happen. This is a new program that has only been up and running since January. We will continue to work hard on helping clients to achieve their goals.

Efficiency:

Maximize Participant services:

Percentage of authorized support hours delivered

Goal: 90%

Outcome: 19%

Not Achieved

The way Places to Go is set up and the way we have to bill for clients at this time, makes and made it impossible to meet this goal, or, as you can see even come close to meeting this goal. Currently we have to split up hours that clients are supported by the number of clients that participate in an activity. For example: We go bowling in Ukiah, which normally is an 8 hour day. We take 4 clients with us. We are only allowed to bill for 2 hours for each client, instead of being able to bill 8 hours for each. The difference is 8 hours billable compared to 40 hours billable. As you can see that is quite the difference just for one activity. Had we been able to bill for each client this outcome would still not have been met, but it would have been a much better outcome. Hopefully in the near future this will change.

Maximize Participant Retention:

Percentage of Consumers who have received and continue to receive services

Goal: 100%

Outcome: 100%

Achieved

Places to Go is currently supporting 33 clients, with 4 more authorized for this month. This will bring the total number of supported clients to 37. All clients that are authorized for the program continue to receive services.

Service Access:

Maximize Client Participation

Percentage of Clients that participated in scheduled activities

Goal: 90%

Outcome: 95%

Achieved

There were 183 different activities From February through June. Although Places to Go was doing Intakes in January, we did not start supporting anyone until February. There we 10 activities that were cancelled by participants for an outcome of 95%. This goal was Achieved.

Satisfaction:

Increase Participant Satisfaction

Percentage of consumers who give a satisfaction rating that averages a 4 on a scale of 1 to 5

Goal: 90%

Outcome: 90%

Achieved

Of 33 survey participants, all but 4 rated Places to go a 4 or 5 on a scale of 1 to 5. 22 gave us a rating of 5 which is an “excellent” rating, 7 gave us a rating of 4 which is a “very good” rating and 4 gave us a rating of 3 which is “average” rating. I am hoping that next time we don’t get an average ratings, and that we get all 4 or 5’s. Time will tell.

Increase stakeholders satisfaction

Percentage of Stakeholders who give a satisfaction rating that averages a 4 on a scale of 1 to 5

Goal: 90%

Outcome: Not Yet Measured

Parents and Friends, Inc.

Outcomes Goals

July 1 2017- June 30 2018

Parents and Friends, Inc.

2017/2018 Strategic Plan Goals

July 2017

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 2017-2018 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. 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 throughout the Regional Centers geographic area. 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 rapid growth and include:

1. Building infrastructure to support an organization which has grown from \$1.7M revenue in 2011-12 to a projected \$6.1M in 2017-18.
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: CEO
 - 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: CEO

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: CEO
2. Conduct performance reviews for all personnel at least annually. Responsibility: CEO, all Managers.
3. Keep job descriptions updated and communicate clearly what expectations are and how performance will be measured. Responsibility: CEO, all Managers.
4. Continue annual cash incentive bonus to staff (10% of annual salary past three years 12% in the last year) 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 (SEP IRA, 2% of annual salary last year) for qualifying employees.
6. Continue to pay for performance in salary administration. Raise average salary for direct service to new survey levels 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 worker's comp. claims.
9. Continue employee of quarter program with \$250.00 reward.
10. Paying a bonus for the referral of new staff for the Community Connection and Supported Living Services.

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. CEO

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. Continue and expand upon adhering to 2019 medi-cal funding requirements for DDS.
3. Open and accept clients for a new licensed group home for the aging DD population.
4. Establish a time phased plan for opening an additional three licensed home for the aging DD client.

Responsibility: CEO/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 seminars, in service trainings and 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 including hourly stipends for working with established acuities for each client and department and monthly stipends for house managers 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 reliability, flexibility in hours and clients served, willingness to take on additional hours/shifts, percentage of completion of the ongoing training curriculum for PFI and their specific program, ability to work cooperatively as a team member and attention to detail and accuracy in documentation and the ADP time and billing system.

Responsibility: CEO/Management team.

July 2017-June 2018 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	98%		98%
Maximize Progress on ISP Goals	Percentage of consumer goals showing positive progress	All consumer goals	Biannual	ISP Files	CSS Manager	90%		97%
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	99%		100%
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%		94%
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	98%		91%

July 2017-June 2018 The Community Connection Outcome Goals

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	100%		96%
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%		91%
Efficiency								
Maximize staff attendance	Percentage of days staff worked when scheduled	All employees	Bi-Annually	ADP/ schedules and	TCC Manager	95%		96%
Maximize progress on employee goals	Percentage of employee goals achieved or making progress	All employee goals	Bi-Annually	log books / evaluations	TCC Manager	95%		92%
Maximize client attendance	Percentage of days clients attend per days authorized	All TCC participants	Bi-Annually	billing forms/ schedule	TCC Manager	95%		95%
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%		95%
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	70%		71%
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%		88%
Maximize client participation in surveys	Percentage of clients who participate in the satisfaction survey	All TCC staff and participants	Annually	Survey Results	TCC Manager	95%		95%
Maximize stakeholder satisfaction	Percentage of stakeholders who give a satisfaction rating average of 4 on a 1 to 5 scale	All TCC stake-holders	Annually	Survey Results	TCC Manager	100%		95%

July 2017-June 2018 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 clients with intake who are placed in jobs this year	Authorizations for Intake	Bi-annually	Case Files	TJC Manager	60%		62%
Maximize Progress on IHSP Goals	% of new and/or continued client goals achieved	Individual And Group	Bi-annually	IHSPs and Case Files	TJC Manager	SEP: 68%		74%
						GRP:55%		82%
Efficiency								
Make Progress in Regular Staff Training	Complete at least 4 assigned training courses per year per each staff	TJC staff members	Bi-annually	CDS Reports & Training Rosters	TJC Manager	85%		100%
Maximize Job Retention	% of clients placed who keep their jobs for 3+ months	Individually placed clients	Annually	Case Files	TJC Manager	80%		100%
Increase number of Employment Partners	Add at least one new (100%) Community Employment Partner during this year	Job Development	Bi-Annually	Case Files	TJC Manager	100%		n/a
Service Access								
Maximize client enrollment retention	% of New clients who begin services this year who are still enrolled or successfully completed services	All new clients referred	Annually	Case files and Billing	TJC Manager	New: 75%		n/a
	Number of clients enrolled at the beginning of the year who are still enrolled or successfully completed	Total number of clients at begin of year compared to end of year	Annually	Case files and Billing	TJC Manager	Enrolled: 90%		115%
Maximize authorized service	Percentage of authorized services hours served (incld PVSA,etc) for individually supported clients	All individual support hrs provided	Monthly	Billing forms	TJC Manager	92%		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	89%		91%
Maintain Stakeholder Satisfaction	Percentage of stakeholders who give a satisfaction rating average of 4 on a 1 to 5 scale	Stake-holders family/community	Annually	Survey Results	TJC Manager	90%		92%
		Emplymt partners				90%		91%

July 2017-June 2018 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%		75.5%
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	75%		71%
Meet safety training/drill requirements	Percentage of client participation in safety training/drills	All people served	Bi-annually	Training Logs	LIFE Manager	90%		77%
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%
Increase staff training	Percentage of staff who participate in both in CDS online training and department trainings.	LIFE full time staff members	Bi-annually	CDS Reports	LIFE Manager	100%		New Goal
Maximize staff goal progress	Percentage of staff who have made progress on their goals	All goals	Bi-annually	Personnel Files	LIFE Manager	100%		New Goal
Service Access								
Maximize Attendance	Percentage of authorized days attended	All clients	Bi-annually	Billing/auth orizations	LIFE Manager	76%		74%
Satisfaction								
Achieve Satisfaction of People Served	% of participants who give a satisfaction rating of 4 or higher on a 1 to 5 scale	All people served	Annually	Survey Results	LIFE Manager	90%		80%
Achieve Stakeholder Satisfaction	% of participants who give a satisfaction rating of 4 or higher on a 1 to 5 scale	All LIFE stakeholders	Annually	Survey Results	LIFE Manager	100%		100%
Maximize Staff Survey Participation	Percentage of completed surveys received	LIFE staff members	Annually	Survey Results	LIFE Manager	100%		100%

July 2017-June 2018 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%		66%
Establish Participants ISP's	Percentage of participants with up to date ISP's	All Participants	Bi- Annually	Case Files	Places To Go Manager	100%		New Goal
Efficiency								
Maximize the # of online training courses taken	Percentage of Employees who have completed or have made progress in 3 online training courses	All Staff	Bi-Annually	ADP/College of Direct support web	Places To Go Manager	100%		New Goal
Maximize Participant Retention	Percentage of Participants who have received and continue to receive services	All Referrals	Bi-Annually	Case Files/ authorizations	Places To Go Manager	100%		100%
Service Access								
Maximize client participation	Percentage of Participants that participated in scheduled activities	All Participants	Bi-Annually	Billing/ authorizations	Places To Go Manager	95%		96%
Satisfaction								
Maximize Participant Satisfaction	% of Participants who give a satisfaction rating that averages 4 on a scale of 1 to 5	All clients responding to survey	Annually	Survey Results	Places To Go Manager	90%		90%
Maximize Staff Satisfaction	% of Staff who give a satisfaction rating that averages 4 on a scale of 1 to 5	All Staff Members	Annually	Survey Results	Places To Go Manager	90%		New Goal
Maximize 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%		Had Not yet been measured

Parents and Friends, Inc.

Plans and Reports

July 2017

Parents and Friends, Inc.

Accessibility Plan

July 2017-June 2018

Purpose

The purpose of this report is to describe measures that Parents and Friends took during 2016/2017 and will take during 2017/2018 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. Parents and Friends employs a staff of 160 employees. 34 of Parents and Friends Employees are Client Employees. Parents and Friends provides services to 101 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, Chief Executive Officer, 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 308 E. Redwood Ave.:

- PFI Administrative Offices including PFI Fundraising and Technology Director, Coastal Support Services Program Manager, Medication coordinator, Clinical Coordinator, ILS Coordinator, House Managers, and Safety Chair.

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 Chief Executive Officer.

- 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 bi-monthly 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.

2016/2017 Accessibility Report:

350 Cypress St. continues to be in use. Both buildings are being used for client activities through the L.I.F.E. on the Coast program.

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 2016-June 2017 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/308 E. Redwood Ave., Chestnut: 521 E. Chestnut St.

Items Continuing for 2017/2018:

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 07/2017-06/2018: 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 07/2017-06/2018: 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 07/2017-06/2018: 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. The Front doors at 306 E. Redwood Ave. and 308E. Redwood Ave. are too heavy and close too fast.

Current Status: ADA compliant door openers are in the process of being purchased and installed to the front of both office buildings.

Short Term Plan 07/2017-06/2018: Continue to provide 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 now ADA compliant.

Current Status: Completed 08/2016: The bathroom faucets at all facilities are now ADA compliant.

6. Thresholds at 521 E. Chestnut St. need modification to be wheelchair accessible.

Current Status: 2 thresholds upon entrance of the building that adjoin a newly build ADA compliant ramp need to be replaced to provide ease of access to the building.

Short Term Plan 07/2017-06/2018: Purchase custom thresholds to meet ADA requirements.

Long Term Plan: See short term plan.

7. Environmental Barriers

None Identified

8. Attitudinal Barriers

Potential Employer preconceived bias about developmental disabilities

Current Status: Continuing item: 19 Community Employment Partnerships were maintained this year. 6 New Employment Partnerships were formed this year. 26 Clients working individually in the community. 13 Clients working in Group Employment at Paul Bunyan Thrift Store. The Job Connection was involved with the Chamber of Commerce, Kiwanis Club, Soroptomist Club, and PFI fundraising and PR activities.

In the Parents and Friends newsletter "Progress!" The Job Connection was featured several times and a staff member was featured as Employee of the Quarter. The Job Connection developed an introductory letter to employers not yet acquainted with supported employment or our Community Employment Partnerships. In it we emphasize the wide range of skills and interests offered by our job candidates. TJC has embraced the tenets of the California Interagency Community Integrated Employment plan.

Short Term Plan 07/2017-06/2018: The Job Connection will maintain strong relationships with current

Employment Partners.

Long Term

Plan: The Job Connection will continue to build new relationships with community businesses and strive to increase awareness of our supported employment and talented pool of job candidates among employers not yet involved.

Person Responsible:

The Job Connection Manager

9. 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 07/2017-06/2018: Maintain strong relationship with current supporters and stakeholders.

Long Term Plan: See short term

Person Responsible: Board of Directors, Chief Executive Officer.

10. 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. Additional training will include, 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 07/2017-06/2018: Continue to train existing and new staff according to the existing training.

Long Term Plan: See short term

Person Responsible: Chief Executive Officer

11. Financial Barriers

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

Current Status: Continuing item: Continued- Maintained all current fundraising events. Full time staff person on board specializing in Technology and Development. This staff member continues to grow existing fundraising events, seeks grant opportunities, as well as opportunities for development of additional fundraising and diversified income streams benefitting Parents and Friends, Inc.

Short Term Plan: 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. Address client financial barriers through IPP process, and use of Medicaid and other funding solutions on an individual and collective basis.

Long Term Plan: See short term

Person Responsible: Technology and Development Manager, Chief Executive Officer, Board of Directors

12. Communication Barriers

Parents and Friends recognizes that both staff and clients may experience various personal barriers to communication be they visual, auditory, cognitive, behavioral, or mechanical. In some cases these barriers can be addressed with an appropriate solution. In some cases, a financial barrier may exist.

Current Status: Technology and Development Manager is a full time staff person specializing in Augmentative and Alternative Communication (AAC). This staff member has identified and addressed in 2016-17 the needs of 10 clients through various communication challenges and provided alternative communication access solutions through both high and low tech solutions, and, continues to seek alternative funding opportunities to educate staff and provide appropriate solutions.

Short Term Plan: Continue to proactively identify communication barriers to communication at all levels of the organization and address communication challenges with appropriate solutions, and alternative funding to support these solutions when necessary.

Long Term Plan: See short term plan.

Person Responsible: Technology and Development Manager, Managers, Chief Executive Officer, Board of Directors.

13. Technological Barriers

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, as well as a full time technology Manager to provide application support for new or inexperienced users. 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 (07/2017-06/2018): Keep current computers up to date with software updates. Continue to provide cell phones to all staff and seek computers at reasonable costs. Provide accommodations where necessary to provide access to technology. 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: Technology and Development Manager, Chief Executive Officer, Board of Directors.

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 a technology demonstration library has been developed at Parents and Friends to model tablet,

phone, and application solutions. Additionally, our licensed day program has purchased tablets for client use. Some clients have been able to purchase tablets and other devices to assist with their communication.

Short Term Plan (07/2017-06/2018):

A full time staff person is responsible for assistive technology for clients. Continue to identify and address access challenges for clients, including financial. Seek to develop a multidisciplinary program with the Regional Center that will address visual, auditory, cognitive, behavioral, mechanical, and other barriers requiring low and high technology solutions.

Long Term Plan: See short term

Person

Responsible: Technology and Development Manager, Chief Executive Officer, Board of Directors.

14. Transportation Barriers

Limited Public transportation: MTA only runs during business hours and on a limited route, Dial A Ride can be used as available but does not run on holidays.

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 07/2017 PFI has five passenger vans, with three being wheel chair accessible.

Short Term Plan (07/2017-06/2018): Continue to supplement public transportation with staff and company vehicles

Long Term Plan: See short term

Person Responsible: Chief Executive Officer

Parents and Friends, Inc.
Critical Incident Analysis
2016/2017

July 2016- June 2017 Incident Summary:

Date	Location	Result	Description	Type of Incident
07/2/2016	Community	Injury/First Aid	A client tripped and fell while walking with staff.- Injury, First Aid administered.	Trip/Fall
07/3/2016	Client Home	911/E.R. Visit	A client had a severe seizure.	Seizure
07/3/2016	Client Home	No Injury	Medication error-meds refused.	Medication Error
07/10/2016	Client Home	No Injury	Medication error-Wrong meds given.	Medication Error
07/10/2016	Client Home	No Injury	Medication error.-Wrong meds given.	Medication Error
07/10/2016	Client Home	No Injury	Medication error.-Meds not given.	Medication Error
07/11/2016	Chestnut St.	Injury/First Aid	A client was found to be bleeding on his tail bone.	Trip/Fall
07/11/2016	Client Home	No Injury	A client complained of abdominal pain.	Other
07/16/2016	Client Home	911/E.R. Visit	A client had a seizure.	Seizure
07/18/2016	Client Home	Injury/First Aid	Staff reported that a client seemed to have some sort of burn on her right thigh.	Burn/Sore
07/18/2016	CSC	Injury/First Aid	A client said his knee was hurt. An ice pack was administered.	Other
7/27/2016	Community	Injury/First Aid	Injury, a client claimed he was scratched by another client. (First Aid Required.)	Cut/Scrape

7/27/2016	Client Home	No Injury	Seizure, client had a seizure in their home.	Seizure
7/28/2016	Community	Injury/Dr. Visit	Accident, staff member fell while playing tennis.	Trip/Fall
7/28/2016	Client Home	Injury/First Aid	Injury with unknown cause, client had bleeding scratches on both ankles in their home.	Cut/Scrape
7/30/2016	Client Home	911/E.R. Visit	Seizure, a client had a seizure in their home and was taken to the hospital by Ambulance.	Major Seizure
8/2/2016	Client Home	No Injury	Medication Error, meds not given.	Medication Error
8/3/2016	Client Home	No Injury	Medication Error, meds not given.	Medication Error
8/3/2016	Client Home	911/E.R. Visit	Seizure, a client had a seizure in their home and was taken to the hospital by Ambulance.	Major Seizure
8/4/2016	Client Home	No Injury	Seizure, a client had a seizure in their home.	Minor Seizure
8/9/2016	Client Home	No Injury	Medication Error, wrong meds given.	Medication Error
8/10/2016	Community	Injury/Dr. visit	A staff member allegedly injured her knee while putting an item in her car.	Other
8/13/2016	Client Home	Injury/First Aid	Other, a client had blood coming from her back privates.	Other
8/16/2016	Client Home	Injury/First Aid	Injury (unknown cause), a client had a fairly deep scratch on her lower back.	Cut/Scrape

8/17/2016	Client Home	911/E.R. Visit	Client had a seizure and was taken to the hospital by Ambulance.	Major Seizure
8/18/2016	Client Home	911/E.R. Visit	Client had a seizure and was taken to the hospital by Ambulance.	Major Seizure
8/19/2016	Client Home	No Injury	Seizure, a client had a seizure.	Seizure
8/21/2016	Client Home	No Injury	Seizure, a client had a seizure in his home.	Seizure
8/22/2016	Community	No Injury	Seizure, a client had a seizure while in a vehicle with staff.	Seizure
8/22/2016	Client Home	No Injury	Other, staff noticed a small blister on a client's inner thigh.	Other
8/25/2016	Client Home	No Injury	Seizure, client had a seizure.	Seizure
8/25/2016	Client Home	No Injury	Medication Error, meds not given.	Medication Error
8/25/2016	Client Home	No Injury	Seizure, a client had a seizure.	Seizure
8/26/2016	Client Home	No Injury	Medication Error, meds not given.	Medication Error
8/30/2016	Client Home	Med Error	Medication Error, meds not given.	Minor
8/28/2016	Client Home	Injury/E.R. Visit	A client allegedly hit a staff member on the arms and face.	Aggressive/violent behavior.
9/1/2016	Client Home	No Injury	Seizure, a client had a seizure.	Minor
9/1/2016	R.O.C.	No Injury	Seizure, a client had a seizure.	Minor
9/3/2016	Client Home	No Injury	Seizure, a client had a seizure.	Seizure
9/4/2016	Client Home	911/E.R. Visit	Seizure, a client had a seizure and was taken to	Major Seizure

			the hospital by Ambulance.	
9/9/2016	Client Home	No Injury	Other, a client was found on the floor with clenched fists	Other
9/9/2016	Client Home	No Injury	Seizure, a client had a seizure.	Seizure
9/10/2016	Client Home	No Injury	A client got up to go to the restroom and went to the floor.	Other
9/12/2016	Client Home	No Injury	Seizure, a client had a seizure.	Seizure
9/13/2016	CSC	Injury/First Aid	Injury, a client fell out of a chair while coughing and sneezing Injuring pinky finger.	Trip/Fall
9/13/2016	Client Home	No Injury	A client had a seizure.	Seizure
9/14/2016	Community	Injury/First Aid	A client fell off his motorized bicycle.	Trip/Fall
9/14/2016	Client Home	No Injury	A client had an event.	Other
9/18/2016	Client Home	Injury/First Aid	A client hit his head on a door knob.	Bump/Bruise
9/19/2016	Community	No Injury	A staff member was grabbed by a client.	Other
9/20/2016	Community	Injury/No First Aid	A staff member claimed they strained their back while transferring a client from one wheelchair to another.	Strain
9/25/2016	Client Home	No Injury	Medication not given.	Medication Error
9/27/2016	Client Home	Injury/No First Aid	A client had a bruise on the back of their knee and shoulder blade from an unknown cause.	Bump/Bruise
9/28/2016	Community	Injury/No First Aid	A client elbowed staff in a vehicle.	Aggressive Behavior

10/01/2016	Client Home	Injury/E.R. Visit	A client hit her head on a doorframe leaving a bruise.	Bump/Bruise
10/5/2016	Client Home	No Injury	Medication not given.	Medication Error
10/5/2016	Client Home	Injury/E.R. Visit	A staff member claimed they hurt their back while working with a client.	Strain
10/6/2016	CSC	No Injury	A client accused another client of assault.	Other
10/8/2016	Community	Injury/First Aid	A client scratched her arm on a fence.	Cut/Scrape
10/9/2016	Client Home	No Injury	A client got into an argument and called the police.	Other
10/12/2016	Client Home	E.R. Visit	A client was taken to the hospital because there was no bowel movement in her colostomy bag for 48 hrs.	Other
10/12/2016	Client Home	No Injury	Medication not given	Medication Error
10/13/2016	Client Home	E.R. Visit	A client returned to the hospital because there had still been no bowel movement.	Other
10/16/2016	Client Home	No Injuries	A client had two seizures back to back.	Seizure
10/17/2016	CSC	Injury/First Aid	A client pinched a finger while using a wheel barrow. Frist Aid required.	Cut/Scrape
10/21/2016	Client Home	Injury/E.R. Visit	A client foot was injured while in a wheel chair.	Bump/Bruise
11/1/2016	Client Home	Injury/First Aid	A client hit their thigh on a fire hydrant. - First aid required.	Bump/Bruise
11/2/2016	Client Home	No Injury	Medication not given.	Medication Error

11/2/2016	Client Home	No Injury	Medication not given.	Medication Error
11/6/2016	Client Home	No Injury	A client had a seizure.	Seizure
11/7/2016	Client Home	No Injury	Medication not given.	Medication Error
11/7/2016	PBST	Injury/No First Aid	A Staff Member strained back while setting down a sofa.	Strain
11/7/2016	Client Home	No Injury	Medication not given.	Medication Error
11/8/2016	Client Home	Injury/No First Aid	A staff member removed a long eyebrow hair from a client's face.	Other
11/14/2016	Client Home	No Injury	Medication not given.	Medication Error
11/20/2016	Client Home	Injury/E.R. Visit	A Client was found unresponsive in their home and was taken to the hospital.	Major
11/24/2016	Community	Injury/E.R. Visit	A client slammed their fingers in a car door and was taken to the hospital.	Bump/Bruise
11/25/2016	Client Home	Injury/No First Aid	A Client Allegedly hit a staff member.	Violence/ Aggressive Behavior
11/25/2016	Client Home	No Injury	Meds not given in a client's home.	Medication Error
12/01/2016	Client Home	Injury/Dr. Visit	A client had a rash on his face and was taken to Immediate care.	Other
12/10/2016	Client Home	Injury/First Aid	A client had a longer than normal seizure and bit tongue and scratched staff.	Cut/Scrape
12/12/2016	PBTS	Injury/No First Aid	A Staff Member Tripped and Fell at PBTS.	Trip/Fall
12/12/2016	Chestnut	No Injury	A Client Ran away from staff while at 521 E. Chestnut.	Other
12/12/2016	Clients Home	No Injury	Medication not given.	Medication Error
12/15/2016	Chestnut	Injury/First Aid	A Staff member cut their finger while doing dishes	Cut/Scrape
12/15/2016	Client Home	No Injury	A client was yelling at a roommate.	Violence/ Aggressive Behavior

12/16/2016	Client Home	No Injury	A client was yelling at a staff member.	Violence/ Aggressive Behavior
12/19/2016	Chestnut	Injury/First Aid	A client fell while walking with staff.	Trip/Fall
12/19/2016	Client Home	Injury/First Aid	A client Cut himself while opening a package with a knife.	Cut Scrape
12/20/2016	PBTS	Injury/First Aid	A client complained of pain in his hand.	Other
12/20/2016	Client Home	No Injury	A client yelled at staff member	Violence/ Aggressive Behavior
12/20/2016	Client Home	No Injury	A clients Microwave caught fire. The fire was extinguished with no injuries.	Kitchen Fire
12/23/2016	Chestnut	No Injury	Light were flickering and PG&E Fixed the problem	Power Failure
12/27/2016	PBTS	Medical Emergency No Injury	A staff member felt dizzy and an ambulance was called. No Injuries.	Other
12/29/2016	Community	Injury/First Aid	A client trip and fell in the community.	Trip/Fall
1/2/2017	Client Home	No Injury	A client had a seizure.	Seizure
1/3/2017	Client Home	Injury/First Aid	A client had blisters on her body	Other
1/4/2017	Client Home	Injury/First Aid	A client had blisters on her body	Other
1/6/2017	Client Home	Injury/E.R. Visit	A staff member was allegedly assaulted and taken to the hospital	Violence/ Aggressive Behavior
1/6/2017	Community	Injury/No First Aid	A client fell out of their seat while in the community.	Trip/Fall
1/12/2017	Client Home	No Injury	A Client noticed change was missing.	Other
1/13/2017	Chestnut	Injury/First Aid	A staff member cut finger while removing a cover on a slicer	Cut/Scrape
1/16/2017	Chestnut	Injury/No First Aid	A staff member heard a pop and felt a pain in her right leg	Strain
1/17/2017	Community	911/E.R. Visit	A client had a seizure in the community. 911 was	Major Seizure

			called and he was taken to the hospital.	
1/26/2017	ROC	Injury/First Aid	A client complained of wrist pain	Other
1/27/2017	Client Home	No Injury	A client kept falling asleep in her home.	Other
2/2/2017	PBTS	No Injury	A Staff member found a 44 caliber pistol in a donated bag.	Other
2/5/2017	Client Home	Injury/No first Aid	A client had an insect bite on his thigh.	Other
2/11/2017	Client Home	Injury/E.R. Visit	A Staff Member cut herself while pushing trash down in trash can.	Cut/Scrape
2/12/2017	Client Home	No Injury	A client had a bump on his back.	Other
2/13/2017	Client Home	No Injury	Meds given at wrong time	Medication Error
2/16/2017	Client Home	No Injury	A client refused his medication	Medication Error
2/17/2017	Client Home	No Injury	A client had a cyst on his back	Other
2/12/2017	PBTS	Injury/No First Aid	A Thrift Store Customer dropped a night stand on their foot.	Bump/Bruise
2/20/2017	CSC	Injury/First Aid	A Staff Member tripped and fell on a rug while moving a chair at CSC.	Trip/Fall
2/22/2017	Community	No Injury	A client was walking in the community when people in a car called him names.	Other
2/26/2017	Client Home	Injury/First Aid	A client had a bruise on her hand	Bump/Bruise
2/28/2017	Client Home	No Injury	A staff member was talking with a client.	Other
3/2/2017	Client Home	Injury/No First Aid	A client had a seizure causing him to bruise his eyelid	Seizure
3/7/2017	Community	No Injury	A staff member called police to remove a man from the sidewalk.	Other
3/9/2017	PBTS	Injury/First Aid	A client tripped over a safety cone outside PBTS.	Trip/Fall

3/9/2017	Client Home	Injury/First Aid	A client had an inch long cut on his forehead from falling in the shower	Trip/Fall
3/13/2017	Client Home	Injury/E.R. Visit	A client choked on a piece of watermelon.	Choking
3/20/2017	Client Home	No Injury	Medication not given.	Medication Error
3/20/2017	Chestnut	No Injury	A client left a hair tie/bow on her wrist leaving as red mark.	Other
3/21/2017	Client Home	Injury/No First Aid	Staff noticed as bruise on a client's left ankle	Bump/Bruise
3/22/2017	Client Home	Injury/First Aid	A client attacked a Staff Member.	Violence or Aggression.
3/23/2017	Client Home	E.R. Visit	A client had a seizure and was taken to the Hospital by Ambulance	Seizure
3/28/2017	PBTS	No Injury	A client lost his Hearing Aid.	Other
3/29/2017	PBTS	No Injury	A Thrift store employee almost hit another employee with a broom.	Violence or Aggression
3/29/2017	Client Home	E.R. Visit	A Client had a seizure in his home and was taken to the hospital by ambulance.	Seizure
3/31/2017	Community	Injury/First Aid	A client tripped and fell while getting out of a staff vehicle.	Trip/Fall
4/2/2017	Community	No Injury	A client tripped and fell while in a restaurant.	Trip/Fall
4/6/2017	Chestnut	Injury/No First Aid	A client struck a staff members back while staff was cleaning the client's shirt.	Violence or Aggression
4/6/2017	Chestnut	No Injury	A client Struck a Staff Member on the back.	Violence or Aggression
4/7/2017	Chestnut	Injury/No First Aid	A Client Struck a Staff Member in the Stomach	Violence or Aggression
4/9/2017	Client Home	No Injury	A Client refused Medication	Medication Error
4/9/2017	Client Home	No Injury	A Client took a double dose of medication	Medication Error
4/10/2017	Client Home	No Injury	Medication not given	Medication Error
4/10/2017	Community	No Injury	A client was attacked by a friend	Violence or Aggression

4/12/2017	Community	Injury/No First Aid	A Client Struck a Staff Member on the back.	Violence or Aggression
4/13/2017	CSC	Injury/First Aid	A Staff Member scraped her finger.	Cut/Scrape
4/13/2017	Client Home	No Injury	Client Refused Medication	Medication Error
4/14/2017	Community	Injury/No First Aid	A Client struck a Staff Member on the right shoulder blade.	Violence or aggression
4/14/2017	Community	No Injury	A Client stumbled off a curb	Trip/Fall
4/14/2017	Client Home	No Injury	A Client was unable to move his leg.	Other
4/16/2017	Client Home	Injury/E.R. Visit	A client tripped and fell in his home and was taken to the Emergency Room.	Trip/Fall
4/19/2017	Community	Injury/First Aid	A Staff Member closed a car door on a client's thumb	Bump/Bruise
4/19/2017	Chestnut	No Injury	A Client blocked a doorway preventing people from leaving the room for approximately 45 minutes.	Violence or Aggression
4/21/2017	Chestnut	No Injury	A Client was using threatening language.	Violence or Aggression
4/26/2017	Community	No Injury	A Client was in a store and someone was staring at her.	Other
4/28/2017	Chestnut	No Injury	A Staff Member accidentally hit another Staff's neck.	Other
4/28/2017	Chestnut	Injury/No First Aid	A Client attacked two Staff Members.	Violence or Aggression
4/29/2017	Client Home	Injury/First Aid	A Staff Member noticed blisters on a Client and Applied Medicated Cream.	Other
5/3/2017	Client Home	Injury/No First Aid	A Client had a bruise on her left hip.	Bump/Bruise
5/5/2017	Client Home	No Injury	A Client left his medications at home when leaving for the weekend.	Medication Error
5/7/2017	Community	No Injury	An unknown driver was driving recklessly in the community	Other

5/8/2017	Community	No Injury	A Staff Members car was hit by another vehicle.	Auto Accident
5/11/2017	Client Home	No Injury	Medication not given.	Medication Error
5/12/2017	Community	Injury/No First Aid	A Client struck a staff member on the neck and arm in a staff vehicle.	Violence or Aggression
5/14/2017	Client Home	No Injury	A Client was complaining of a neighbor trying to get her evicted.	Other
5/15/2017	Chestnut	Injury/First Aid	A Client ran into a staff's ankle with a wheelchair	Bump/Bruise.
5/15/2017	Chestnut	Injury/First Aid	A Client Tripped and fell between a vehicle and a curb.	Trip/Fall
5/15/2017	Client Home	No Injury	Medication not given.	Medication Error
5/17/2017	Client Home	No Injury	A Client became ill and stayed home for the day	Other
5/23/2017	Chestnut	Injury/No First Aid	A Client attacked a Staff Member.	Violence or Aggression
5/24/2017	Client Home	No Injury	Medication given at the wrong time	Medication Error
5/26/2017	PBTS	No Injury	A Staff Member found a BB gun. The gun was taken by the Police Department.	Other
6/4/2017	Client Home	Injury/First Aid	A Client had a seizure in her home causing her to fall resulting in injury to her face.	Seizure
6/5/2017	Client Home	No Injury	A Clients power was shut off due to no payment from the client's payee.	Other
6/7/2017	PBTS	Injury/Dr. Visit	An employee at Paul Bunyan Thrift Store claimed she hurt her rib on a shelf while plugging in a fan	Bump/Bruise
6/7/2017	Client Home	No Injury	A Client became upset at Staff because Staff talked to her neighbor	Other
6/7/2017	Client Home	Injury/First Aid	A Staff Noticed a bed sore on a Client.	Other
6/8/2017	Client Home	No Injury	A client had a seizure in his home.	Seizure

6/10/2017	Chestnut	No Injury	A Client struck a staff Member on her leg.	Violence or Aggression
6/11/2017	Client Home	Injury/No First Aid	A client Struck a Staff Member on her left shoulder.	Violence or Aggression
6/11/2017	Client Home	Injury/First Aid	A client was cleaning his teeth with a water pick and cut his lip.	Cut/Scrape
6/12/2017	Community	Injury/First Aid	A Client's fingers were slammed in a car door.	Bump/Bruise
6/12/2017	Chestnut	Injury/Dr. Visit	A Client Attacked a Staff Member.	Violence or Aggression
6/13/2017	Chestnut	Injury/No First Aid	A Client attacked a Staff Member with her lunch pail and hands.	Violence or Aggression
6/15/2017	Chestnut	E.R. Visit	A Client was taken to the Emergency Room	Other
6/10/2017	Client Home	Injury/Dr. Visit	A Staff member strained her back while moving a client without help.	Strain
6/17/2017	Community	No Injury	A community member made an obscene gesture toward a client.	Other
6/17/2017	Client Home	Injury/First Aid	A client cut his hand while playing with a knife.	Cut/Scrape
6/19/2017	Client Home	No Injury	Spilled Medications.	Medication Error.
6/23/2017	Community	No Injury	A client grabbed a staff member's gear shifter.	Violence or Aggression
6/20/2017	Community	Injury/First Aid	A client scratched a staff member.	Violence or Aggression
6/24/2017	Client Home	No Injury/Police took person away	A Strange person came into a client's home and would not leave.	Other
6/26/2017	Client Home	Injury/No First Aid	A Client strained her back.	Strain
6/26/2017	Client Home	No Injury	Medication not given.	Medication Error
6/28/2017	Chestnut	Injury/E.R. Visit	A client went to the E.R.(blood found in briefs)	Other
6/29/2017	Client Home	Injury/First Aid	A client bit his hand.	Other

6/29/2017	Client Home	Injury/No First Aid	A client struck a Staff Member on her left shoulder and left leg.	Violence or Aggression
-----------	-------------	---------------------	-------------------------------------------------------------------	------------------------

Parents and Friends Critical Incident Analysis

July 2016- June 2017 Incident Summary

Of 193 total incidents documented only 96 resulted in any injury. We will be summarizing only incidents that resulted in injury:

- 19 (20%) happened in the community
 - 14 (15%) happened at Chestnut St
 - 51 (53%) happened in client's homes
 - 6 (6%) happened at the Thrift Store
 - 5 (5%) happened at Cypress Street
 - 1 (1%) happened at Redwood Ave.
-
- 44 (46%) required 1st Aid
 - 29 (30%) required Doctor's or E.R visits
 - 23 (24%) required no 1st Aid

July 2016- June 2017 Causes/Trends:

- There was an increase of medication errors this year from last year but a decrease in overall percentage of reported incidents. Coastal Support Services has served 7 new clients since June of 2016.
- There was a high amount of incidents involving violent or aggressive behavior. (23)
- There was an increase of trip and fall incidents this year. (16)

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 (7/16):

- 32 incidents of the 193 total reported incidents (17%) 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 an increase of staffing challenges. To address the increase in incidences, the department will conduct additional mandatory medication training to all support staff who are involved in a medication error.
- 23 of the total 193 incidents reported (12%) resulted from violent or aggressive behaviors. Staff are continuing to receive Pro-Act Training to help meet the needs of clients and reduce these behaviors. For all targeted clients, the Redwood Coast Regional Center has authorized a behaviorist to support clients and offer additional educational tools to staff.
- 16 incidents of the total 193 incidents reported (8%) resulted from trip and fall accidents. This is an ongoing issue considering the number of people who have ambulatory challenges. Training to prevent trips and falls is given to staff on a semiannual basis.
- **Necessary Education and Training of Personnel:**
 - Continued Pro-Act Training for staff.
 - 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, medication error, violence or aggressive behavior, doctor or emergency room visits, 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.
Client Demographic Data
June 30, 2017

Race	PFI	Mendocino	California
White persons, percent	93%	66%	38%
Black or African American persons, percent	6%	1%	6%
Native American and Alaska Native persons, percent	1%	3%	1.7%
Asian persons, percent	4%	3%	14.7%
Native Hawaiian and Other Pacific Islander, percent	1%	0%	.5%
Persons reporting two or more races, percent	0%	3%	3.8%
Persons of Hispanic or Latino origin, percent	17%	25%	38.8%
Age/Gender	PFI	Mendocino	California
Persons 65 years old and over, percent	6%	20%	13.3%
Female persons, percent	38%	50%	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 June 2017.

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, 2016 – June 2017

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 Chief Executive Officer, 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 2016-June 2017 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 September 2016

Department Specific Policies and Procedures were last reviewed and approved in February 2017

Board of Directors Bylaws and Handbook were last reviewed and approved in August 2016

Program Manager's Policies and Procedures were last reviewed and approved in June 2017

July 2016-June 2017 Committee Members:

Corporate Compliance Officer: Raphaelle Gruys

Committee Member: Rick Moon, Chief Executive Officer

Committee Member: Brad Gardner, Board President

Committee Member: Daphne Haney, Accountant

Parents and Friends Inc.
Cultural Competence and Diversity Plan
2017/2018

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 2017/2018 goals:

Goal: Provide Cultural Competence training to all staff by June 2018

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 2018.

Status (06/2017): **In Progress, Continuing for 2017/2018** 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, 2016 – June 30, 2017

As of July 1, 2017 Parents and Friends, Inc. was employing 155 full and part time employees not counting Vocational Services consumers and Job Connection consumers.

Between July 1, 2016 and June 30, 2017 net employment at PFI increased from 136 to 159 employees, including a decrease from 32 to 30 client employees. PFI had 5 new Client Employees and lost 1 transferring from being a client employee to being a direct employee, 1 moved away and 1 stopped working due to medical issues. During this same time 62 employees left employment at PFI for a number of reasons. 85 new employees were hired at PFI during the year, 62 to replace employees who had left and 23 due to expanded needs to support services. The 62 employees who left PFI left for a number of reasons. Those reasons are:

Unknown/Found Another Job	Personal/Not Job Related	Temporary Client Employees	Relocated	Medical	Poor Performance	Total
22	7	4	12	1	16	62

The chart above shows that from July 1, 2016 through June 30, 2017 PFI experienced a 14% turnover rate of staff for unknown/found another job and 10% for involuntary reasons.

Taking unknown/found another job as possible loss of employees because of poor job satisfaction. This can be compared to the 2016 non-profit employment survey study which showed an average turnover rate with non-profit companies with over 100 employees to be 13% for employees for voluntary reasons and 1% for employees for involuntary reasons. The survey notes that nonprofits report that Direct Service employees are the most difficult area to retain employees.

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 or an employee appreciation event as well as other unscheduled events as appropriate.
5. Continue the employee appreciation reception or Holiday food gift cards in November/December and have department Holiday parties in December.
6. Maintain an open door and open communications policy.
7. Have CEO attend each department staff meeting at least quarterly.
8. Offer 403b retirement program to all staff
9. Continue to offer a \$100.00 initial referral bonus with a \$250.00 bonus after a year of employment.

Parents and Friends, Inc.
Risk Management Controls System
July 2017

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.	Chief Executive Officer	Philadelphia Indemnity Ins. Policy 9/25/16 – 9/25/17	August annually
	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.	Chief Executive Officer	Same as General Liability	August annually
<u>Property Loss</u>	Maintain current Insurance Policy. Annual review of policy w/ insurance broker prior to renewal.	Chief Executive Officer	Same as General Liability	August annually
<u>Vehicle Loss</u>	Maintain current Insurance Policy. Annual review of policy w/ insurance broker prior to renewal.	Chief Executive Officer	Same as General Liability	August annually
<u>Business Loss/Interruption</u>	Maintain appropriate accreditation for each of PFI's programs.	Chief Executive Officer	Annually	Annually
	Maintain relationships with bank.	Chief Executive Officer	Monthly	Monthly
	Maintain open communication with funding agencies.	Chief Executive Officer & Program Managers	On Going	On Going

	Use existing assets. Maintain Budget/ Cash Flow	Chief Executive Officer Chief Executive Officer	On Going Weekly	On Going 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, CEO, 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 Chief Executive Officer Safety Committee, All PFI staff Management Team / Board Of Directors Program Managers	Ongoing Same as General Liability Annually Annually Annually	Ongoing August annually 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.	Chief Executive Officer Board of Directors / Chief Executive Officer Chief Executive Officer	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	Chief Executive Officer 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 / CEO CEO CEO CEO/ Board of Directors CEO/ Board of Directors CEO/ 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 2017

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 at 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 for the 306 E. Redwood location and the larger leased Xerox has been relocated to 308 E. Redwood Ave.
 - 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

