

Parents and Friends, Inc.

Outcomes Reports

Goals Results and Plans

July 2018

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Parents and Friends, Inc.
Outcomes Results
July 1, 2017-June 30, 2018

Parents and Friends, Inc.

2017/2018 Strategic Plan Outcomes July 2018

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.

1. 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

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, 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.

Outcome: Partially Accomplished. The salary strategy used for the past few years has been to give incentive bonuses after the annual audit is complete. This helps offset low wages and increases retention while maintaining financial flexibility and the ability to control expense in a volatile funding environment. The last two year's bonuses were 12% and for the previous three years were 10% of an employee's annual paid wages plus 2% to an employer paid retirement account for eligible employees. This alone, however, has not relieved the shortage of staff. Other incentives are being considered.

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: Administration Office Staff.
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

Outcome: Partially 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. Some staff still feel communication is lacking between management and direct service. Management is exploring ways to increase informational meeting at all levels, specifically in SLS.

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.

Outcome: Accomplished. PFI has implemented Places To Go an evening and weekend program with which at the beginning of the 2017/2018 year had a total of 30 clients now has 55 clients for a total gain of 25 clients. Community Connection has added eight new clients. SLS/ILS has added three new clients. Job Connection has added fourteen new clients. A residential care facility for the elderly for four clients is now in State licensing and scheduled to begin receiving clients in October 2018.

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/HR/Management team.

Outcome: Partially Accomplished. Appropriate classes have been assigned to staff and a second pro-act trainer has been trained. Forty 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. PFI has begun the process of certifying staff to be CPR trainers, the staff have completed the online segment of the training and are currently awaiting the hands on portion. CNA training is still being explored.

We are now exploring ways to streamline employee intake and maximizing initial training.

July 2017-June 2018 Coastal Support Services Outcomes

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Establish Consumer ISP Goals	Percentage of consumers with up to date ISPs	All consumers	Biannual	ISP Files	CSS Manager	98%	93%	98%
Maximize Progress on ISP Goals	Percentage of consumer goals showing positive progress	All consumer goals	Biannual	ISP Files	CSS Manager	90%	46%	97%
Efficiency								
Maximize Consumer Services	Percentage of authorized support hours delivered	All consumers	Annual	Billing Forms	CSS Manager	90%	87%	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%	95%	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%	79%	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%	87%	91%

2017/2018 Coastal Support Services Outcome Results Detail
July 2017-June 2018

Effectiveness:

Establish Client ISP Goals

Goal: 98% **Outcome: 93%** Not Achieved

3 ISP out of 36 SLS were not completed timely or have not been completed.

3 ISP out of 11 ILS were not completed timely or have not been completed.

The department continues to improve in this area, however our goal was not achieved. 1) client has been away on vacation with his family 2) the other client is a new Parents and Friends client and the information needed to complete his ISP was not gathered timely and 3) the final client has become extremely independent and finds himself very busy with work and his family; therefore it is difficult for him to find time to sit down with the clinical coordinator complete his ISP.

The ILS Coordinator is new in her role as the ILS Coordinator and she is in the process of establishing rapport with clients to complete the ISP process.

Maximize Progress on ISP Goals

Goal: 90% **Outcome: 46%** Not Achieved

This area is of great concern for the department. The coordinators have not effectively gathered information to complete semi-annual ISP to gauge or document SLS/ILS clients ISP progress. The department will be taking 3 proactive steps to ensure that this matter is effectively addressed 1) the CSS Program Manager will meet with each coordinator to review semi-annual ISP's monthly 2) the CSS Program Director will audit client files quarterly to ensure semi-annual ISP are completed 3) the coordinators will develop tracking systems to monitor their own progress.

Efficiency:

Maximize Client Services

Goal: 90% **Outcome: 87%** Not Achieved

This percentage continues to be misleading as hours are not used when clients are on vacation, visiting with family members, or hospitalized all of which have been factors during this review period.

Service Access:

Maximize Client Retention

Goal: 99% **Outcome: 95%** Not Achieved

Satisfaction

Increase participants satisfaction

Goal 95%

Outcome: 79%

Not Achieved

37 participants out of 47 were surveyed. On a scale with 5 - rated as excellent, 4 - rated as very good, and 3 - rated as average, 31 clients rated their level of satisfaction as a 5, 5 rated their level of satisfaction as a 4, 1 rated their level of satisfaction as a 3, and none rated their level of satisfaction below the level of 3, however 10 clients have no rating.

Increase stakeholders satisfaction

Goal 98%

Outcome: 87%

Not Achieved

The 5 surveys returned 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 2017-June 2018 The Community Connection Outcomes

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Maximize Progress on ISP Goals	Percentage of participants goals achieved or making positive progress	All participants goals	Bi-annually	ISPs and Case Files	TCC Manager	100%	98%	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%	100%	99%
Efficiency								
Maximize staff attendance	Percentage of days staff worked when scheduled	All employees	Bi-Annually	ADP/ schedules and	TCC Manager	95%	91%	93%
Maximize progress on employee goals	Percentage of employee goals achieved or making progress	All employee goals	Bi-Annually	log books / evaluations	TCC Manager	95%	97%	96%
Maximize client attendance	Percentage of days clients attend per days authorized	All TCC participants	Bi-Annually	billing forms/ schedule	TCC Manager	95%	88%	91%
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%	92%	91%
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%	79%	69%
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%	93%	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%	96%	95%
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%	99%	95%

2018 The Community Connection Outcome Results Detail
July 2017-June 2018

Effectiveness:

Maximize Progress on ISP Goals

Goal: 100% **Outcome: 97%** Not Achieved

2 Goals out of 61 have not been achieved. One is an Employment goal and the other is a Community Integration goal not being met due to his wheelchair and health issues.

Maximize # of online training courses taken

Goal: 95 % **Outcome: 100%** 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.

Efficiency:

Maximize Staff Attendance

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

Out of 33,295.78 hours staff were scheduled to work, they worked 29,516.00 hours missing 3,779,78 hrs. We did not meet our goal due to the fact that the program was hit hard with various illnesses, pregnancies, and vacations throughout the year.

Maximize progress on employee goals

Goal: 95% **Outcome: 97%** Achieved

We have hired 4 new staff some of whom have not yet had their 90 day evaluation, therefore, no goals have been set as of yet. They are not figured into the equation. Out of 94 goals, 61 goals have been achieved and progress is being made on 30, totaling 91goals, making it 97%.

Maximize client Attendance:

Goal: 95% **Outcome: 88%** Not Achieved

We have served clients 4137 days out of a possible 4765 days, which brings us to 87%. In the last year the program was hit hard with various illnesses. Two clients were out for two months due to illness. One client was out for three months after having surgery. These three clients normally attend program five days a week, which affected attended days.

Client Retention

Goal: 100% **Outcome: 92%** Not Achieved

Two clients moved, one to Willits with family and the other to Sacramento to live in a group home. Very sad to say that one of our clients passed away this year. We currently serve 24 clients.

Increase amount of time spent outside the facility

Goal: 70% **Outcome: 79%** Achieved

We did not include 8 clients in the mathematics. Three clients very seldom leave the facility due to health, weather and wheelchair issues. Four new clients have only been in program 2 months. One client has been out 2 months due to illness. By not including the 8 clients, this brought the total up to 79%. However, if the 8 clients were added the total, the total would have been 68%.

Satisfaction

Maximize staff satisfaction

Goal 95%

Outcome: 93% Not Achieved

Out of 9 questions asked of 18 staff members, the average answer was 9.3. However, 17 out 18 all answered satisfied.

Maximize client participation in surveys

Goal 95%

Outcome: 96% Achieved

One client refused to answer the survey.

Maximize stakeholder satisfaction

Goal 100%

Outcome: 99% Achieved

6 out of 23 surveys were returned. Out of the 6, 5 stakeholders responded with a 5 and the last with a 4.

July 2017-June 2018 The Job Connection Outcomes

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
1.Maximize Placement	% of clients with intake who are placed in jobs this year	Authorizations for Intake/Placement	Bi-annually	Case Files	TJC Manager	60%	71%	62%
2.Maximize Job Retention	% of clients placed who keep their jobs for 3+ months	Individually placed clients	Annually	Case Files	TJC Manager	80%	80%	100%
3.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%	69%	74%
						GRP:55%	46%	82%
Efficiency								
4.Make Progress in Regular Staff Training	Complete at least 4 assigned training courses per staff	TJC staff members	Bi-annually	CDS Reports & Training Rosters	TJC Manager	85%	85%	100%
5.Increase Employment Partners	Add at least one new (100%) Community Employment Partner during this year	Job Development	Bi-Annually	Case Files	TJC Manager	100%	100%	n/a
Service Access								
6.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	75%	82%	n/a
7.Maximize client enrollment retention	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%	92%	100%
8.Maximize authorized service	Percentage of authorized services hours served (PVSA,etc) for individually supported clients	All individual support hours provided	Monthly	Billing forms	TJC Manager	92%	84%	n/a
Satisfaction								
9.Maintain Client Satisfaction	Percentage of clients who give a satisfaction rating average of 4 or 5 (1 to 5)	All TJC clients	Annually	Survey Results	TJC Manager	89%	100%	91%
10.Maintain Stakeholder Satisfaction	Percentage of stakeholders who give a satisfaction rating average of 4 on a 1 to 5 scale	Stake-holders family/communityEmplymt partners	Annually	Survey Results	TJC Manager	90%	95.2%	92%
						90%	92%	91%

The Job Connection Outcome Report:
JULY 2017 to JUNE 2018

EFFECTIVENESS:

1. Maximize Placement: % of clients with intake billed who are placed in jobs

Goal: 60%

Outcome: 71%

TJC to have billed for intake, possibly long after the initial referral date and then client placed.
15 out of 21 clients with Intake have been placed in jobs during July 2017– June 2018.

2. Maximize Job Retention (3 months or more):

Goal: 80%

Outcome: 80%

Percentage of clients placed during this period for whom Retention was billed
12 out of 15 clients placed have retained their jobs; 3 clients placed recently have retention pending

3. Maximize Progress on IHSP Goals: % of client goals achieved

Goal: 68% Individual

Outcome: 69%

Percentage of new and/or continued goals successfully achieved during the period
61 out of 88 goals were ACHIEVED July 2017 - June 2018

Goal: 55% Group Clients

Outcome: 46%

Percentage of new and/or continued goals successfully achieved during the period
7 out of 15 goals were ACHIEVED July – October 2017: Group Employment under TJC discontinued 2017

EFFICIENCY:

4. Make progress in Regular Staff Training: Complete 4 assigned training courses/ year/each staff

Goal: 85%

Outcome: 85%

All staff pro-rated for length of employment. Manager to assign and review and track.
5 out of 6 staff have completed at least 4 courses during July 2017 – June 2018

5. Increase number of Community Employment Partners (one = 100%):

Goal: 100%

Outcome: 1000%

Add at least one new (100%) Community Employment Partner during this year
TJC has added 10 new employers from July 2017 to June 2018.... We will adjust this goal for next year!

SERVICE ACCESS:

Maximize Client Retention:

6. New Clients: % of people who begin services who are still enrolled in program

Goal: 75%

Outcome: 82%

Percentage of new clients this year still enrolled in the program or have successfully completed services.
Out of 17 new clients during this year, 14 are still enrolled: 2 moved away, and 1 discontinued job services

7. Enrolled Clients: % of people enrolled in services at the beginning of the year still enrolled

Goal: 90%

Outcome: 92%

Percentage of total number of clients enrolled at beginning of the year who are still enrolled in the program or have successfully completed services.

This relates to the total number of clients from beginning of the year to the end of the year.

22 clients (not including Group) enrolled in July 2017 out of 24 are still participating

8. Maximize Authorized Service Hours: (excluding Group client services) but including all other billable services Job Coaching, PVSA , SA, WAT

Goal: 92%

Outcome: 84%

Percentage of authorized service hours performed (excluding Group client services) but including all other billable services Job Coaching, PVSA , SA, WAT TJC served 4116.25 hours out of 4799.5 authorized service hours. The reduced percentage is primarily due to so many DOR service authorizations: we over-estimated the number of hours we would need for our new clients and these hours do not carry over into the new fiscal year; however, many of those hours will be renewed into the new fiscal year.

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 89%

Outcome:100%

42 clients out of 42 rated a score of approval of 4 or above on the IHSP meetings forms 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 90% Outcome: 95.2%

Employment Partners Goal 90% Outcome: 92%

TJC appreciated the feed-back, especially from Community Employment Partners. We have already taken action to more regularly communicate with employers for whom our clients work without any or many natural support persons close by to be sure the tasks are completed to meet employer expectations... and as always, to check in with employers regularly about performance and possible employment goals they deem necessary

July 2017-June 2018 L.I.F.E on the Coast Outcomes

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Maximize ISP goal progress	Percentage of goals achieved	All goals	Bi-annually	ISPs and Case Files	LIFE Manager	80%	82.5%	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%	60%	71%
Meet safety training/drill requirements	Percentage of client participation in safety training/drills	All people served	Bi-annually	Training Logs	LIFE Manager	90%	93%	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 (equals 100%)	100%	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%	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%	100%	New Goal
Service Access								
Maximize Attendance	Percentage of authorized days attended	All clients	Bi-annually	Billing and authorizations	LIFE Manager	76%	67.5%	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%	89%	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%	94%	100%
Maximize Staff Survey Participation	Percentage of completed surveys received	LIFE staff members	Annually	Survey Results	LIFE Manager	100%	100%	100%

Outcome Results-Detailed July 2017-June 2018

Effectiveness

Maximize Progress on ISP goals

Goal: 80%

Outcome: 82.5 %

Achieved

84 goals achieved out of 102 goals.

Increase community employment/full time enrollment:

Goal: 75%

Outcome: 60%

Not Achieved

38/63 Clients have community involvement through employment, work, or volunteering.

Meet safety training/drill requirements

Goal: 90%

Outcome: 93%

Achieved

256 trainings completed out of 275 trainings offered.

Efficiency

Minimize waiting period for services:

Goal: <5 working days (equals 100%)

Outcome: 100%

Achieved

6 new clients met with, and created a plan based on their needs as soon as clients were available and ready.

Increase Staff Training:

Goal: 100%

Outcome: 100 %

Achieved

18/18 Staff participated in both CDS online training and department trainings.

Maximize progress on employee goals:

Goal: 100%

Outcome: 100 %

Achieved

18/18 staff made progress on their goals.

Service Access

Maximize attendance:

Goal: 76%

Outcome: 67.5%

Not Achieved

6810.57 days attended out of 10118.63 days authorized.

Increase participants satisfaction

Goal 90%

Outcome: 89%

Not Achieved

Of 25 survey participants, 28 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 6 survey participants, 6 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 9 survey participants, 8 Participated

July 2017-June 2018 Places to Go Outcomes

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 client goals achieved or making positive progress	All Participants	Bi-Annually	ISP's/ Case Files	Places To Go Manager	85%	76%	70%
Establish Participants ISP's	Percentage of participants with up to date ISP's	All Participants	Bi-Annually	Case Files	Places to Go Manager	100%	100%	100%
Efficiency								
Maximize the # of trainings taken	Percentage Of Employees who have completed or have made progress in 2 online or other trainings	All Staff	Bi-Annually	ADP/College of Direct Support web	Places To Go Manager	100%	100%	50%
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%	89%	98%
Service Access								
Maximize Participants participation	Percentage of Participants that participated in scheduled activities	All Participants	Bi-Annually	Billing/ authorizations	Places To Go Manager	95%	96%	94%
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%	95%	Had Not Yet Measured
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%	100%	Had Not Yet Measured
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%	100%	Had not yet been measure

2018 Places To Go Outcome Results Detailed
July 2017-June 2018

Effectiveness:

Maximize Participant Goals:

Percentage of Participants goals achieved or making positive progress

Goal: 85%

Outcome: 76%

Not Achieved

There are 51 participants authorized for Places to Go. Out of those 51, 6 are very new to the program, so they have not yet had the opportunity to work on the goals set for themselves. That leaves 45 participants. Each person has 2 goals, for a total of 90 goals. Out of the 90 goals, 69 goals have been met and 21 have not been met for an outcome of 76%. The people who have not met goals are ones that live out of town (there are 3 people, which means 6 out of the 21 goals), and others who have not participated at all or very little. On an average, Places to Go supports about 25 people per month. These are the “regulars” who participate quite often. The majority of them 23 out of 25 have met their goals. So this shows, that when they do participate in the program, they are achieving their goals. We did improve from our outcomes that we reported on in December. We will work hard in the coming year to reach the goal we set. This goal was not achieved.

Establish Participants ISP's

Percentage of Participants with up to date ISP's

Goal: 100%

Outcome: 100 %

Achieved

There are 51 clients that are authorized for Places to Go. Out of the 51 participants, all 51 have up to date ISP's, and updated intakes for the new ones. All six month reviews are also up to date. This goal was achieved

Efficiency:

Maximize the # of Trainings Taken

Percentage of Employees who have completed or have made progress in 2 online or other training courses

Goal: 100%

Outcome: 100%

Achieved

Last time I reported on this, the staff of Places to Go had not completed any courses on the College of Direct Support. Although they had done some in house trainings. I am happy to report that each staff person has completed at least 3 courses on online training. They will continue to work hard on completing many more in the coming months. This goal was achieved.

Maximize Participant Retention:

Percentage of Participants who have received and continue to receive services

Goal: 100%

Outcome: 89%

Not Achieved

Places to Go lost six clients this year for various reasons. 3 moved away, 2 passed away and one decided that she really did not want to be part of the program. She had not participated in over 6 months. The program was brought up at her annual IPP, and she decided for now she would drop the program. She was told if, in the future she changes her mind, she could then sign up again. We started this year off with 51 participants we are now down to 45. This goal was not achieved.

Service Access:

Maximize Participants Participation

Percentage of Participants that participated in scheduled activities

Goal: 95%

Outcome: 96%

Achieved

There were 693 different scheduled activities from July 2017 through June 2018. Out of those 693, 28 were cancelled, for a total of 665 scheduled activities that people participated in. Out of the 28 that were cancelled, 5 were due to holidays, 6 due to weather, 8 for Dr./Sick, 5 out of town, and 4 misc, for an outcome of 96%. This goal was achieved.

Satisfaction:

Maximize Participant Satisfaction

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

Goal: 90%

Outcome: 95%

Achieved

Of 45 survey participants, all but 2 rated Places to Go a 4 or 5 on a scale of 1 to 5. 32 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 2 gave us a rating of 3 which is “average” rating. The participants of the program seem to be happy with the support and services that they are receiving. This goal was achieved.

Maximize Staff satisfaction

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

Goal: 90%

Outcome: 100%

Achieved

The staff seem to be happy with their job and with PFI. This goal was achieved.

Maximize Stakeholders Satisfaction

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

Goal: 90%

Outcome: 100%

Achieved

All of the stakeholders that answered and returned the surveys gave a rating above 4 on all of the questions asked. They all seem to be really pleased with the program and the things we do with all of the participants. This goal was achieved.

Parents and Friends, Inc.

Outcomes Goals

July 1 2018- June 30 2019

Parents and Friends, Inc.

2018/2019 Strategic Plan Goals July 2018

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 2018-2019 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:

4. Building infrastructure to support an organization which has grown from \$1.7M revenue in 2011-12 to a projected \$6.1M in 2018-19.
5. Attracting and keeping enough qualified staff to provide services to the increasing client load.
6. 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.

2. 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.

11. Conduct a wage and salary survey annually which establishes prevailing wages for management, supervisors and direct service personnel. Responsibility: CEO
12. Conduct performance reviews for all personnel at least annually. Responsibility: CEO, all Managers.
13. Keep job descriptions updated and communicate clearly what expectations are and how performance will be measured. Responsibility: CEO, all Managers.
14. Continue annual cash incentive bonus to staff (10% of annual salary past three years 12% in the last two years) as finances allow, reviewed and approved annually by the Board of Directors.
15. Continue to offer pre-tax savings plan (403B) and an employer paid retirement plan (SEP IRA, 2% of annual salary last two years) for qualifying employees.
16. Continue to pay for performance in salary administration. Raise average salary for direct service to new survey levels in 2019.
17. Continue to fully pay health, dental, vision and life insurance for full time employees.
18. Continue incentive program for zero occurrence of worker's comp. claims.
19. Continue employee of quarter program with \$250.00 reward.

Create and maintain open and honest two way communications

6. Continue at least quarterly newsletter mailings. Responsibility: IT Mgr. /Board Volunteer.
7. Conduct surveys of all stakeholders, employees and consumers annually. Responsibility: Admin Office.
8. Sponsor, through the board of directors, two fund raising events annually. Responsibility: Fund Raising Mgr. /Board fundraising committee.

9. Keep the web page, face book, etc. current and relevant. Responsibility: IT Mgr.
10. Maintain open door policy for all employees, clients, stakeholders and community members. Responsibility: All mgrs. CEO

Expand Client population.

5. 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.
6. Continue and expand upon adhering to 2019 medi-cal funding requirements for DDS.
7. Open and accept clients for a new licensed group home for the aging DD population.
8. 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.

5. 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.
6. 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.
7. 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.
8. 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 2018-June 2019 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	95%		93%
Maximize Progress on ISP Goals	Percentage of consumer goals showing positive progress	All consumer goals	Biannual	ISP Files	CSS Manager	90%		46%
Efficiency								
Maximize Consumer Services	Percentage of authorized support hours delivered	All consumers	Annual	Billing Forms	CSS Manager	90%		87%
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	95%		95%
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%		79%
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	95%		87%

July 2018-June 2019 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%		99%
Efficiency								
Maximize staff attendance	Percentage of days staff worked when scheduled	All employees	Bi-Annually	ADP/ schedules and	TCC Manager	95%		93%
Maximize progress on employee goals	Percentage of employee goals achieved or making progress	All employee goals	Bi-Annually	log books / evaluations	TCC Manager	95%		96%
Maximize client attendance	Percentage of days clients attend per days authorized	All TCC participants	Bi-Annually	billing forms/ schedule	TCC Manager	95%		91%
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%		91%
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%		69%
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 stakeholders	Annually	Survey Results	TCC Manager	100%		95%

July 2018-June 2019 The Job Connection Outcome Goals

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
1.Maximize Placement	% of clients with intake who are placed in jobs this year	Authorizations for Intake/Placement	Bi-annually	Case Files	TJC Manager	65%		71%
2.Maximize Job Retention	% of clients placed who keep their jobs for 3+ months	Individually placed clients	Annually	Case Files	TJC Manager	80%		80%
3.Maximize Progress on IHSP Goals	% of new and/or continued client goals achieved	Individual And Group	Bi-annually	IHSPs and Case Files	TJC Manager	68%		69%
								46%
Efficiency								
4.Make Progress in Regular Staff Training	Complete at least 4 assigned training courses per staff	TJC staff members	Bi-annually	CDS Reports & Training Rosters	TJC Manager	90%		85%
5.Increase Employment Partners	Add at least 3 new (100%) Community Employment Partner during this year	Job Development	Bi-Annually	Case Files	TJC Manager	100%		100%
Service Access								
6.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	77%		82%
7.Maximize client enrollment retention	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	90%		92%
8.Maximize authorized service	Percentage of all authorized services hours served for supported clients	All individual support hours provided	Monthly	Billing forms	TJC Manager	88%		84%
Satisfaction								
9.Maintain Client Satisfaction	Percentage of clients who give a satisfaction rating average of 4 or 5 (1 to 5)	All TJC clients	Annually	Survey Results	TJC Manager	90%		100%
10.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	91%		95.2%
						91%		92%

July 2018-June 2019 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 or making positive progress.	All goals	Bi-annually	ISPs and Case Files	LIFE Manager	80%		82.5%
Increase community employment, Vocational training/discovery, or volunteering	Percentage of active participants that are employed in community employment, vocational training/discovery, or volunteering.	All people served	Bi-annually	Case Files	LIFE Manager	60%		New Goal
Meet safety training/drill requirements	Percentage of client participation in safety training/drills	All people served	Bi-annually	Training Logs	LIFE Manager	95%		93%
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 (equals 100%)		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 and Training Logs	LIFE Manager	100%		100%
Maximize staff goal progress	Percentage of staff who have made progress on their goals	All goals	Bi-annually	Personnel Files	LIFE Manager	100%		100%
Service Access								
Maximize Attendance	Percentage of authorized days attended	All clients	Bi-annually	Billing and authorizations	LIFE Manager	76%		67.5%
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%		89%
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%		94%
Maximize Staff Survey Participation	Percentage of completed surveys received	LIFE staff members	Annually	Survey Results	LIFE Manager	100%		100%

July 2018-June 2019 Places to Go Outcome Goals

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
Effectiveness								
Maximize Participant Goals	Percentage of active participant goals achieved or making positive progress	All Participants	Bi-Annually	ISP's/ Case Files	Places To Go Manager	85%		76%
Establish Participants ISP's	Percentage of participants with up to date ISP's	All Participants	Bi-Annually	Case Files	Places to Go Manager	100%		100%
Maximize the # of trainings taken	Percentage Of Employees who have completed 3 online or other outside trainings	All Staff	Bi-Annually	ADP/College of Direct Support web	Places To Go Manager	100%		100%
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%		89%
Maximize Participants participation	Percentage of Participants that participated in scheduled activities	All Participants	Bi-Annually	Billing/ authorizations	Places To Go Manager	95%		96%
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%		95%
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%		100%
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%		100%

Parents and Friends, Inc.

Plans and Reports

July 2018

Parents and Friends, Inc.

Accessibility Plan

July 2018-June 2019

Purpose

The purpose of this report is to describe measures that Parents and Friends took during 2017/2018 and will take during 2018/2019 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 One Hundred Sixty Two employees. Twenty Six of Parents and Friends Employees are Client Employees. Parents and Friends provides services to One Hundred and Fifteen 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.
- Places To Go is PFI's nights and weekends program providing clients with a variety of activities on their off time.

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.

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.

Located at 209 Azalea Circle:

- The Residential Care Facility for the Elderly (RCFE) is a four bedroom home for the elderly of the developmentally disabled population, specializing in clients with dementia and Alzheimer's.

Located at 365 Cypress St.:

- Community Connection has outgrown its Chestnut St. facility and is opening an additional facility on 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 Administration office staff 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 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.

2017/2018 Accessibility Report:

350 Cypress St. is currently only in use for the garden located on the back of the property. 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 2017-June 2018 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., RCFE: 209 Azalea St., 365 Cypress

Items Continuing for 2018/2019:

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 (07/2018-06/2019): 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 (07/2018-06/2019): 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 (07/2018-06/2019): 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: Completed 02/2018 ADA compliant door openers have been installed in both the 306 and the 308 front doors.

5. 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 (07/2018-06/2019): Purchase custom thresholds to meet ADA requirements.

Long Term Plan: See short term plan.

6. Environmental Barriers

None Identified

7. Attitudinal Barriers

Potential Employer preconceived bias about developmental disabilities

Current Status: Continuing item:

25 Community Employment Partnerships were maintained this year.

10 New Employment Partnerships were formed this year

14 Clients placed into jobs this year.

25 Clients worked individually in the community in 34 jobs

•Job Connection was involved with the Chamber of Commerce at mixers (one placement was directly related to this participation), Pop Up Business Fair, and the Chamber Annual Dinner where PFI was a featured employer; TJC participated in PFI fundraising and PR activities

- Job Connection has been mentioned several times in the PFI newsletter “Progress!” and two clients have each been featured for having achieved their career advancement with guidance from TJC; TJC has had frequent updated mention on the PFI website.
 - Job Connection manager and staff have presented an introductory letter to many 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 in all programs.
 - Job Connection has embraced the tenets of the California Interagency Community Integrated Employment (CIE) plan
 - Job Connection has been involved in the planning of future grant funded positions for Job Developer and Job Discovery (Job Club) positions
- Short Term Plan (07/2018-06/2019):** The Job Connection will continue to 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 PFI’s community integrated employment program and the diverse, but talented, pool of job candidates PFI represents.
- Person Responsible:** The Job Connection Manager and staff

8. Lack of sensitivity by community members

Current Status: Continuing item: This year we maintained and continued to grow all programs, along with opening a new RCFE program soon. 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 (07/2018-06/2019): Maintain strong relationship with current supporters and stakeholders.

Long Term Plan: See short term

Person Responsible: Board of Directors, Chief Executive Officer.

9. 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 (07/2018-06/2019) Continue to train existing and new staff according to the existing training.

Long Term Plan: See short term

Person Responsible: Program Managers

10. Financial Barriers

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

Current Status: Continuing item: Maintained all current fundraising events. 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: (07/2018-06/2019) 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

11. 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: The Technology and Development Manager is a full time staff person specializing in Augmentative and Alternative Communication (AAC). This staff member has worked with staff to identify and address in 2017-18 the needs of 20 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. These solutions enhance client and staff participation, positive behaviors, and support appropriateness.

Short Term Plan: (07/2018-08/2019) IT Technician will be developed with AAC specialization, and the demonstration library will continue to be developed with various environmental and communication aids, both high- and low-tech in nature. 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.

12. 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 IT Technician 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 (07/2018-06/2019): 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: IT Technician, Admin Office, Chief Executive Officer, Board of Directors.

13. Ineffective data backup infrastructure

In the event of data loss, Dropbox has proven to be an ineffective system for recovery. For example, we do not have the ability to restore prior document versions past thirty days.

Current Status: PFI is now employing a full time IT Technician who will be responsible for all security, troubleshooting and software solutions, this staff member will also be transferring all PFI data storage over to a more secure solution with improved access controls.

Short Term Plan (07/2018-06/2019): Transition to Nextcloud, which will allow PFI more control over the length of time for which file versions are stored. Nextcloud will also offer improved access controls.

Long Term Plan: See short term plan

Person Responsible: IT Technician

14. 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 (07/2018-06/2019): 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. Parents and Friends office locations 306 and 308 E. Redwood Ave. will be offering guest access to wireless internet.

Long Term Plan: See short term

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

15. 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, as of 07/2018 PFI has five passenger vans, with three being wheel chair accessible.

Short Term Plan (07/2018-06/2019): 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
2017/2018

July 2017- June 2018 Incident Summary:

Parents and Friends Critical Incident Analysis

Of 269 total incidents documented only 103 resulted in any injury or incidents requiring medical treatment. We will be summarizing only incidents that resulted in injury or medical treatment:

- 33 (32%) happened in the community
- 13 (13%) happened at Chestnut St.
- 48 (47%) happened in client's homes
- 5 (4%) happened at the Thrift Store
- 2 (2%) happened at Cypress Street
- 2 (2%) happened at Redwood Ave.

- 33 (32%) required 1st Aid
- 48 (46%) required Doctor's or E.R Visits
- 23 (22%) required no 1st Aid or Doctors Visit

July 2017- June 2018 Causes/Trends:

- There was an increase of Medication Errors this year.(37)
- There was a high amount of incidents involving violent or aggressive behavior. (34)
- There was an increase of trip and fall incidents this year. (20)

Actions for Improvement:

- 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 (7/17):

- 37 (14%) incidents of the 269 total reported incidents involved medication error. Medication coordination is centralized and the responsibility of one staff person for prescriptions, documentation, and med-setting for the vast majority of clients. The increase in reported incidences are due to an increase of staffing challenges. To address the increase in incidences, the department will continue to conduct mandatory medication training to all support staff who are involved in a medication error.
- 34 (12%) of the total 269 incidents reported resulted from Client's 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.
- 20 (6%) of the total 269 incidents reported 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, 2018

Race	PFI	Mendocino	California
White persons, percent	79%	86.4%	72.7%
Black or African American persons, percent	6%	1%	6.5%
Native American and Alaska Native persons, percent	1%	6.3%	1.7%
Asian persons, percent	1%	2.1%	14.8%
Native Hawaiian and Other Pacific Islander, percent	1%	.2%	.5%
Persons reporting two or more races, percent	0%	4%	3.8%
Persons of Hispanic or Latino origin, percent	13%	25%	38.9%
Age/Gender	PFI	Mendocino	California
Persons 65 years old and over, percent	5%	20.6%	13.6%
Female persons, percent	34%	50.3%	50.3%

The Mendocino County and California demographic data is from the United States Census Bureau web site July 1, 2017 estimates which were based on the 2015 actual Census data. PFI data was collected in June 2018.

PFI statistics on race and gender only generally fall within Mendocino County parameters in a few categories. 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, 2017 – June 2018

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 2017-June 2018 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 2017

Department Specific Policies and Procedures were last reviewed and approved in February 2018

Board of Directors Bylaws and Handbook were last reviewed and approved in August 2017

Program Manager's Policies and Procedures were last reviewed and approved in May 2018

July 2017-June 2018 Committee Members:

Corporate Compliance Officer: Raphaelle Gruys

Committee Member: Rick Moon, Chief Executive Officer

Committee Member: Mike Hall, Board President

Committee Member: Daphne Haney, Accountant

Parents and Friends Inc.
Cultural Competence and Diversity Plan
 2018/2019

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 with 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 (06/2018): **In Progress, Continuing for 2018/2019** All staff have been assigned the online course.

Parents and Friends, Inc.
Employee Retention Rate Analysis
July 1, 2017 – June 30, 2018

As of July 1, 2017 Parents and Friends, Inc. was employing 158 full and part time employees not counting Vocational Services consumers and Job Connection consumers.

Between July 1, 2017 and June 30, 2018 net employment at PFI increased from 158 to 162 employees. During the year 56 employees left employment at PFI for many different reasons. 60 new employees were hired at PFI during the year 41 of which are still active employees, all 60 new hires were due to expanded needs to support services. The 56 employees who left PFI left for a number of reasons. Those reasons are:

Unknown/Found Another Job	Deceased	Personal/ Not Job Related	Temporary Client Employees	Relocated	Medical	Poor Performance	Total
15	2	3	2	9	8	17	56

The chart above shows that from July 1, 2017 through June 30, 2018 PFI experienced a 10% turnover rate of staff for unknown/found another job and 11% for involuntary reasons.

Taking unknown/found another job as possible loss of employees because of poor job satisfaction. This can be compared to the 2017 non-profit employment survey study which showed an average turnover rate with non-profit companies with over 100 employees to be 17% for employees for voluntary reasons and 4% 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

Parents and Friends, Inc.
Risk Management Controls System
July 2018

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 9/25/18 – 9/25/19	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 2018

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 has hired a full time IT Technician for all system management, system architecture design, security and maintenance. The IT Technician is available for all technology questions and assistance. Parents and Friends continues to contract with an outside contractor (Sage Statham) who provides additional offsite network services to assist with the transition to full in-house service hosting.
- Internet Access – Every manager and appropriate employee who has the need has a computer system with access to the Internet. The Internet Service 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. MCN also provides email accounts for PFI staff.
- 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 hosted by 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 and cell phone capabilities. PFI's newly hired IT Technician will be receiving training in adaptive technology to assist PFI's adaptive technologist specifically 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 Statham, PFI's maintenance support contractor, also has experience in available adaptive technologies including their installation, configuration and maintenance.