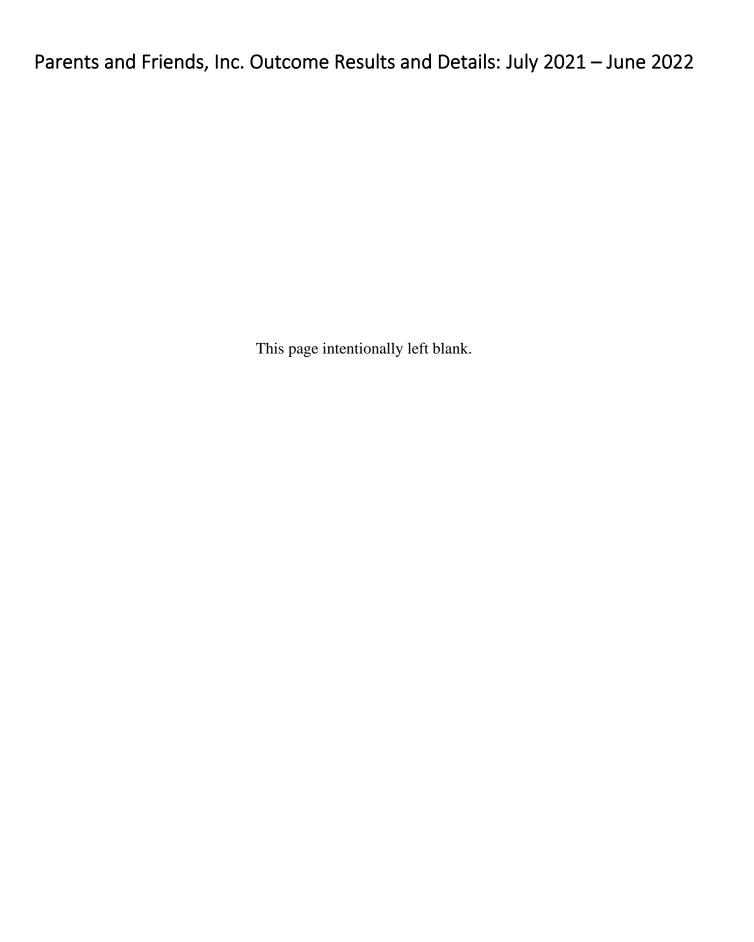
# Parents and Friends Inc. July 2022 Annual Outcomes Reports Goals, Results, and Plans

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Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
			Effectiver	ness				
Establish Participant ISP Goals	Percentage of participants with up to date ISPs	All participants	Biannual	ISP Files	CSS Manager	90%	73%	87%
Maximize Progress on ISP Goals	Percentage of participant goals showing positive progress	All participant goals	Biannual	ISP Files	CSS Manager	85%	88%	82%
			Efficienc	y				
Maximize Participant Services	Percentage of authorized support hours delivered	All participants	Annual	Billing Forms	CSS Manager	90%	85%	88%
			Service Acc	cess				
Maximize Participant Retention	Percentage of participants who have received services and are continuing to receive services	All referrals	Biannual	Case files	CSS Manager	95%	95%	95%
	1		Satisfaction	on				
Increase Consumer Satisfaction	Percentage of participants who give a satisfaction rating that averages 4 on a scale of 1 to 5	All participants responding to survey	Annual	Survey results	CSS Manager	90%	92%	90%
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	85%	88%	95%
Increase Employee Satisfaction	Percentage of employees who give a satisfaction rating that averages 4 on a scale of 1 to 5	All employees responding to survey	Annual	Survey results	CSS Manager	80%	97%	95%

Coastal Support Services Outcomes Results: Detailed July 2021 – June 2022

# **Effectiveness:**

**Establish Participant ISP Goals** 

Goal: 90% Outcome: 71% Not Achieved

Out of 64 total participants, 46 had established goals between July 2021 and June 2022. Many ISPs have been delayed due to availability to meet and initiate Individual Service Plans. In particular, newly referred participants may have been authorized for services, but have not yet met with the Program Manager or Program Coordinator to develop a plan.

#### **Action to be taken:**

- Coastal Support Services will meet with participants annually and semiannually to complete Individual Service Plans.
- A schedule and checklist will be used to determine due Individual Service Plans.
- Newly referred participants will meet with program manager to develop a service plan within 1 calendar month of beginning of services.
- SLS Manager, and RCFE Administrator will develop Person Centered Individual Service plans using various methods including meeting with an individual's Circle of Support, reviewing all pertinent information and changes in the last 6 months to a year, releases of information, rights, grievance procedure, and goals the participant strives to meet in the coming year.
- Individuals who are not available in person will be given the option to meet virtually, or over the phone. Service Plans can be mailed, emailed, or faxed for review and approval by participants and or conservators if needed.

Maximize Progress on ISP Goals

Goal: 85% Outcome: 88% Achieved

Out of 138 total participant goals, 122 goals have been achieved, or progress has been made in achieving these goals. 16 of the total 138 goals have not been achieved. Many Goals are ongoing and continued depending upon participant choice. The Department is committed to supporting individuals in meeting their personal goals and ensuring all opportunities to meet these goals are presented.

# **Efficiency:**

**Maximize Participant Services** 

Goal: 90 % Outcome: 85% Not Achieved

Out of 157,773.9 total hours authorized between July 2021 and July 2022, Coastal Support Services served a total of 134,546.9 hours. This total does not reflect the services provided at the RCFE Azalea House.

# Action to be taken:

Coastal Support Services will review authorized hours for all persons served.

- Many Participants have authorized hours that they consistently do not require. This has prompted the
  department to evaluate hours served, budgeted hours, and ultimately permanent adjustments to
  authorized hours to establish appropriate budgeted hours and thus increase efficiency. The Department
  will make the appropriate adjustments by working with both the Person Served and the Redwood Coast
  Regional Center to make these changes as appropriate.
- The Department strives to provide all services authorized to meet participant goals and provide essential support. In addition to authorization adjustments, The Department will constantly review staffing needs. It is clear that all programs are in desperate need of additional staff. The Department plans to recruit additional staff to provide services for the increasing needs of those we serve.

# **Service Access:**

Maximize Participant Retention

Goal: 95% Outcome: 95% Achieved

Out of 64 total Participants authorized for Services in July 2021, 61 are still authorized for Coastal Support Services. Several Participants (3) are now deceased reviewing the period between July 2021 and June 2022. The Department continues to accept referrals from the Redwood Coast Regional Center to explore potential placement in Supported Living Services, Independent living Services, and RCFE Programs.

# **Satisfaction**

**Increase Participant Satisfaction** 

Goal 90% Outcome: 92% Achieved

Out of 37 Participants responding to the satisfaction Survey, 34 of participants gave a score of 4 or more. The Department strives to provide services that meets Participant Goals and meet the Parents and Friends' Mission of assisting those we serve in participating fully in the community.

Increase Stakeholder Satisfaction

Goal: 85% Outcome: 88% Achieved

Out of 18 total Stakeholders responding to the satisfaction survey, 16 gave an average score of 4 or more. The surveys received brought valuable feedback this year and the department will continue to strive for increasing stakeholder satisfaction.

**Increase Employee Satisfaction** 

Goal: 80% Outcome: 97% Achieved

Out of 46 total employees surveyed in Supported living Services, Independent Living Services, and the RCFE, 45 Employees gave an average satisfaction rating of 4 or more. The surveys received provided valuable feedback. The Department continues to strive to provide a positive and meaningful employment experience.

The Job Connection Outcomes Results: June 2021 – July 2022

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
		Ef	fectiveness		·			
1.Maximize Placement	% of participants with Intake who are placed in jobs this year	Authorizations for Intake/Placement	Bi-annually	Case Files DOR Billing	TJC Manager	60%	60%	75%
2.Maximize Job Retention	% of participants placed who keep their jobs for 3+ months	Individually placed participants w/Retention	Bi-annually	Case Files DOR Billing	TJC Manager	80%	67%	0%
3.Maximize Progress on IHSP Goals	% of new and/or continued participant goals achieved	Individual	Bi-annually	IHSPs and Case Files	TJC Manager	70%	35%	50%
		E	Efficiency					
4.Make Progress in Regular Staff Training	Complete at least 3 assigned training courses per staff	TJC staff members	Bi-annually	CDS Reports & Training Rosters	TJC Manager	75%	100%	100%
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%	100%
		Ser	vice Access					
6.Maximize enrollment retention	% of New participants who begin services this year still enrolled or successfully completed services	All <b>New Participants</b> referred	Annually	Case files and Billing	TJC Manager	77%	100%	100%
7.Maximize enrollment retention	Number of participants enrolled at the <b>beginning of the year</b> still enrolled or successfully completed	Total number of participants at begin of year compared to end of year	Annually	Case files and Billing	TJC Manager	90%	96%	92%
8.Maximize authorized service	Percentage of all authorized <b>Job Coaching</b> hours served for  Supported participants	% Job Coaching Hours Adjusted COVID-19	Monthly	Billing Forms	TJC Manager	95% 90%	54%	82% 73%
		Sa	tisfaction				•	
9.Maintain Participant Satisfaction	Percentage of participants who give a satisfaction rating average of 4 or 5 (1 to 5)	All TJC Participants	Annually	Survey Results	TJC Manager	90%	100%	95%
10.Maintain Stakeholder Satisfaction	Percentage of stakeholders who give a satisfaction rating average of 4 on a 1 to 5 scale	Stakeholders & family Employment partners	Annually	Survey Results	TJC Manager	90%	83%	100%

# The Job Connection Outcomes Results: Detailed July 2021 – June 2022

# **EFFECTIVENESS:**

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

**Goal: 60% Outcome: 60%** 

TJC to have billed for intake, possibly long after the initial referral date and then client placed. 6 out of 10 participants with Intake have been placed in jobs in the community during the time period July 2021-June 2022.

**Plan of Action to Improve Placement:** The Job Connection team will continue to assist participants with searching for employment and applying for jobs. 6 additional participants are pending due to authorizations to be sent from DOR to enable intake billing.

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

**Goal: 80% Outcome: 67%** 

Percentage of participants placed during this period for whom Retention was billed.

4/6 participants placed TJC billed for retention for July 2021-June 2022.

**Plan of Action to Improve Placement:** The Job Connection team will continue to request retention authorizations from DOR in a timely manner; 2/6 participants placed are waiting for their retention authorization to enable billing.

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

**Goal: 70% Outcome: 35%** 

Percentage of new and/or continued goals successfully achieved during the period.

14 out of 40 total goals scored were ACHIEVED July 2021-June 2022. 20 goals were continued, 22 New goals were made, 2 were discontinued.

**Plan of Action to Improve Placement:** Continuing goals are prominent due to re-occurring goals, and goals not yet achieved yet recommended to continue by employers. Two goals were continued due to irrelevancy. The Job Connection team will continue to assist participants with creating tangible goals to help further support growth of their skills, proficiency and confidence in the workplace.

# **EFFICIENCY:**

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

**Goal: 75% Outcome: 100%** 

All staff pro-rated for length of employment. Manager to assign and review and track. 4 out 4 Staff completed at least 4 trainings for July 2021-June 2022.

# 5. Increase number of Community Employment Partners (at least 3 = 100%):

Goal: 100% Outcome: 100%

Add at least three new (100%) Community Employment Partners during this year.

*TJC has added 3 new employment partners for July 2021-June 2022.* 

# **SERVICE ACCESS:**

# **Maximize Participant Retention:**

# 6. New Participants: % of people who begin services this year who are still enrolled in program

**Goal: 77% Outcome: 100%** 

Percentage of new participants this year still enrolled in the program or have successfully completed services. 6 out of 6 new Participants enrolled in the program are still enrolled.

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

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

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

Of 24 Participants enrolled July 2021-June 2022, 23 are still participating, or have successfully completed services. 1 Participant has been unreachable despite having an active authorization.

# 8. Maximize Authorized Service Hours: all billable services:

a. % Job Coaching Goal 95% Outcome: 68%

TJC served 2,093.1 out of 3,081 total hours authorized for July 2021-June 2022. Many of the authorized hours were unmet due to participant vacations, sick time, and layoffs due to the COVID 19 pandemic. The Job Connection has strived to meet all authorized hours to the best of our ability.

# b. % PVSA, SA, WAT Goal 75% Outcome: 17%

TJC served 124.2 hours out of 745 authorized for July 2021-June 2022. Unfortunately, the Job Connection was unable to meet many of the authorized DOR Service Hours mainly due to problems with receiving authorizations in a timely manner, individual participation in the discovery phase of Job Development, attendance and vacations.

# c. % Program Total Goal 88% Outcome: 54%

Percentage of authorized service hours performed: Job Coaching / PVSA, SA, WAT / TOTAL. *TJC served 1891.9 out of 3541 total authorized hours for July 2021-June 2022.* 

**Plan of Action to Maximize Authorized Hours July 2022- June 2023:** The Job Connection manager is working closely with DOR leadership to demonstrate and proceed with a more efficient way for PFI to submit its authorization and on-boarding requests directly into the DOR system with the ability to view status, this was implemented on 6/22/2022.

The Job Connection Manager will continue to calculate exact number of hours needed by individuals to request hours only as needed Job Connection Manager and Staff will serve all possible hours each month considering participant availability.

# SATISFACTION: July 2021 –June 2022

# $\underline{\text{Increase participant satisfaction: \% of participants who give a rating of 4 or more on scale of 1 to 5}\\$

**Goal 90% Outcome: 100%** 

Percentage of participants who gave a rating of 4 or more.

Of 16 Participants participating July 2021-June 2022, 16 gave a rating of 4 or more

# Increase stakeholders' satisfaction: % of stakeholders who give a rating of 4 or more on scale of 1 to 5 Family/Community/ Employment Partners Goal 91% Outcome: 83%

Percentage of stakeholders who have returned surveys that gave a rating of 4 or more.

Of 6 stakeholders in July 2021-June 2022, 5 gave a rating of 4 or more.

Places to Go Outcomes Results: July 2021 – June 2022

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Report's
Guais		10	Wieasure		Бу			Outcome
			Effectivene	SS				
Maximize Participant	Percentage of active participant goals achieved or making	All Participants	Bi-Annually	ISP's/ Case Files	Places To Go	85%	86%	86%
Goals	positive progress	A 11		C	Manager			
Establish Participants ISP's	Percentage of participants with up to date ISP's	All Participants	Bi-Annually	Case Files	Places To Go Manager	100%	86%	100%
		T		I			T	
Maximize the # of trainings taken	Percentage Of Employees who have completed or made progress in 3 online or other outside trainings	All Staff	Bi-Annually	ADP/College of Direct Support web	Places To Go Manager	100%	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	90%	93%	89%
Maximize Participants participation	Percentage of Participants that participated in scheduled activities	All Participants	Bi-Annually	Billing / Authorizations	Places To Go Manager	95%	83%	64%
Maximize Participant Satisfaction	% of Active Participants who give a satisfaction rating that averages 4 on a scale of 1 to 5	All participants responding to survey	Annually	ISP's	Places To Go Manager	90%	100%	74%
Maximize Staff Satisfaction	% of staff who gave a satisfaction rating that averages 8 on a scale of 1 to 10	All Staff Members	Annually	Survey Results	Places To Go Manager	90%	100%	100%
Maximize Stakeholders Satisfaction	% of Stakeholders that responded to survey who gave a satisfaction rating that averages 8 on a scale of 1 to 10	All Stakeholder Responding to survey	Annually	Survey Results	Places To Go Manager	90%	100%	50%

Since March 14, 2020, Places To Go has been serving participants who have requested Alternative Services as well as those a limited amount of Traditional Services. At the end of the fiscal year there are 42 Places To Go participants. The breakdown is as follows: 34 receiving alternatively and traditional services, and 8 receiving only traditional services. The information below reflects Places To Go's utilization of Alternative Services and limited Traditional Services activities.

# **Effectiveness:**

# **Maximize Participant Goals:**

Percentage of active participants goals achieved or making positive progress

**Achieved Goal: 85%** Outcome: 86%

Of the 42 authorizations, Places to Go has 36 active participants. Each of those have 1 goal set, for a total of 36 goals. Out of those 36 goals, 31 have been achieved or making progress, for an outcome of 86%.

# **Action Plan:**

Management will continue to work with participants on developing new goals that keep them safe, happy and healthy. The plan is, with staff assistance, to complete ISPs with the participant that will benefit the participant's involvement within the community. Management will also review the list of inactive participants with Redwood Coast Regional Center to update the participants' desire to take part in the program.

# Establish Participants ISP's

Percentage of Participants with up to date ISP's

Goal: 100% Outcome: 86% **Not Achieved** 

Out of the 42 Places To Go authorized participants, there are 6 inactive participants who, despite numerous attempts to communicate via telephone, email, and/or snail mail, have never participated in program, including ISP goal setting. Of the remaining 36 active Places To Go participants, 31 have up-to-date annual or six month ISP's.

#### **Action Plan:**

Program management, with the help of staff, will strive to have all ISP done in a timely manner.

# **Efficiency:**

# **Maximize the # of Trainings Taken**

Percentage of Employees who have completed or have made progress in 3 online or other outside trainings **Achieved** 

**Goal: 100%** Outcome: 100%

Driver safety, CPR, Customized Employment, and client rights training, webinar trainings and College of Direct Support Training are some that were done. Staff has completed online and outside trainings.

# **Maximize Participant Retention:**

Percentage of Participants who have received and continue to receive services

Goal: 90% Outcome: 93% Achieved

Places to Go started off the fiscal year with 45 participants. During the year, 6 participants decided that they did not want to continue services with the program. The ones that cancelled did not participate in the program. Places To Go received three new enrollments. To date Places to Go currently has 42 participants.

# **Service Access:**

# **Maximize Participants Participation**

Percentage of Participants that participated in scheduled activities

Goal: 95% Outcome: 83% Not Achieved

Due to understaffing and limited community activities due to COVID-19, Places To Go has yet to be fully operational. Places To Go participants continue to have access to services and activities offered through the Alternative Services Program for those who choose to participate. 30 out of 36 participants have been participating in Alternative Services and/or limited Traditional services at least once a month for an outcome of 83%.

# **Action Plan:**

The Program Manager will regularly reach out to the Places To Go participants to clarify what community interests and opportunities the participants enjoy. Based on the information provided, Management will continue to develop curriculum and online activities, as well as, seek out safe and engaging community activities for people to participate in.

# **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: 100% Achieved

Of the participants who have attended program at least twice a month, all have given a satisfaction rating of at least 4 (very good) and higher.

# **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

All staff filled out and returned their surveys. The staff ratings were 4.95 and above.

# **Maximize Stakeholders Satisfaction**

Percentage of Stakeholders who responded to the survey giving a satisfaction rating that averages a 4 on a scale of 1 to 5

Goal: 90% Outcome: 100% Achieved

13 stakeholders responded to the survey. The average rating was 4.8 out of a possible 5.

The Community Connection Outcomes Results: July 2021 – June 2022

		Applied	Time of	Data	Obtained			Previous
<b>Outcome Goals</b>	Categories of Measures	То	Measure	Source	By	Goal	Outcome	Outcome
			Effectivene					3 444 5 2 2 2 2
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%	91%	98%
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%	90%
			Efficiency	7				
Maximize staff attendance	Percentage of days staff worked when scheduled	All employees	Bi- Annually	ADP/ schedules and	TCC Manager	90%	86%	86%
Maximize progress on employee goals	Percentage of employee goals achieved or making progress	All employee goals	Bi- Annually	logbooks / evaluations	TCC Manager	95%	95%	95%
Maximize Participant Attendance	Percentage of days participants attend per days authorized	All TCC participants	Bi- Annually	billing forms/ schedule	TCC Manager	85%	89%	93%
		S	Service Acc	ess				
Maximize Participant Retention	Percentage of participants who have and continue to receive services	All TCC participants	Bi- Annually	Billing Forms	TCC Manager	90%	100%	100%
Increase Community Employment, Vocational Training/Discovery or Volunteering	Percentage of active participants served that are employed in Community Employment, Vocational Training/Discovery or Volunteering	All TCC Participants	Bi- Annually	Schedules, logbooks and ISP's	TCC Manager	50%	64%	64%
			Satisfactio	n				
Maximize staff satisfaction	Percentage of staff members who give a satisfaction rating average of 4 on a 1 to 5 scale	All TCC staff members	Annually	Survey Results	TCC Manager	90%	100%	91%
Maximize client participation in surveys	Percentage of participants who participate in the satisfaction survey	All TCC staff and participants	Annually	Survey Results	TCC Manager	95%	100%	96%
Maximize stakeholder satisfaction	Percentage of stakeholders who give a satisfaction rating average of 4 on a 1 to 5 scale	All TCC stakeholders	Annually	Survey Results	TCC Manager	100%	100%	100%

The Community Connection Outcome Results Detailed: July 2021 – June 2022

# **Effectiveness:**

Maximize Progress on ISP Goals

Goal: 100% Outcome: 91% Not Achieved

49 out of 54 participant goals have been completed or have made progress. Participants who are being served traditionally have 23 goals and Alternative participants have 31 goals for a combined total of 54.

#### **Action Plan**

We will continue to work on participant goals, identify the barriers keeping people from achieving their goals and make adjustments to their Individualized Service Plan.

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: 86 % Not Achieved

During this pandemic staff are being more cautious and working on being safe while following all COVID-19 protocols.

# **Action Plan**

During this pandemic it is still very difficult for some of the employees to continue working because of day care and medical issues. Still trying to hire more staff members.

Maximize progress on employee goals

Goal: 95% Outcome: 95% Achieved

We have hired 2 new staff, some of whom have not yet had their 90 day evaluation, therefore, no goals. They are not figured into the equation. Out of 57 goals progress has been made on 54 and 2 staff have not had their review.

# Maximize client Attendance:

Goal: 85% Outcome: 89% Achieved

Participants continue to receive Alternative services at home or participating by zoom and other activities, we did not include these services in our data. The program served 1733.5 Days out of a possible 1954 Days traditionally with an outcome of 89%

**Client Retention** 

Goal: 100% Outcome: 100% Achieved

We currently serve 26 clients.

Increase Community Employment, Vocational Training/ Discovery or Volunteering

Goal: 50% Outcome: 64% Achieved

7 out of the 11 participants worked on community employment, vocational training and Discovery the other 17 participants were alternative and wanted to stay home, safe, happy and healthy.

# **Satisfaction**

# Maximize staff satisfaction

Goal 90% **Outcome:** 100%

Staff that returned the survey were very satisfied with Community Connection and PFI with and average response of 4.8.

# Maximize client participation in surveys

Goal 95% **Outcome:** 100%

Individuals participating in the satisfaction survey at their annual Individual Service Plan (ISP) were satisfied with a rating of 5 and 4.

# Maximize stakeholder satisfaction

Goal 100% **Outcome:** 100%

Out of 10 stakeholders that returned the survey, the average response was 4.8.

L.I.F.E. on the Coast Outcomes Results: July 2021 – June 2022

	1		1	D-4-		- <u>-</u>		D .
<b>Outcome Goals</b>	Categories of Measures	<b>Applied To</b>	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
			Effective					
Maximize ISP goal progress	Percentage of goals achieved or making positive progress.	All goals	Bi-annually	ISPs and Case Files	LIFE Manager	80%	83%	83%
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%	83%	91%
Meet safety training/drill requirements	Percentage of client participation in safety training/drills	All people served	Bi-annually	Training Logs	LIFE Manager	95%	83%	100%
			Efficier	ncy				
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 training.	LIFE full time staff members	Bi-annually	CDS Reports and Training Logs	LIFE Manager	100%	64%	88%
Maximize staff goal progress	Percentage of staff who have made progress on their goals	All goals	Bi-annually	Personnel Files	LIFE Manager	100%	88%	38%
			Service A	ccess				
Maximize Participant Attendance: Scheduled vs Authorized	Percentage of <i>scheduled</i> days attended/ Percentage of <i>authorized</i> days attended.	All clients	Bi-annually	Billing and authorization	LIFE Manager	76% 76%	68% 68%	71% 71%
			Satisfact	tion				
Maximize 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%	86%	100%
Maximize Stakeholder Satisfaction	% of stakeholders who give a satisfaction rating of 8 or higher on a 1 to 10 scale	All LIFE stakeholders	Annually	Survey Results	LIFE Manager	100%	100%	100%
Maximize Staff Survey Participation	Percentage of completed surveys received	LIFE staff members	Annually	Survey Results	LIFE Manager	100%	63%	100%

# **Effectiveness**

Maximize Progress on ISP goals

Goal: 80% Outcome: 83% Achieved

There are currently 31 participants who combined have 54 goals. Out of the 54 goals, 45 goals have made progress or have been met. 3 goals have been discontinued, the remaining 6 are new or have not been worked on.

# Increase community employment/full time enrollment:

Goal: 60% Outcome: 83% Achieved

15 out of 18 traditionally served participants have community involvement through volunteering, employment and/or vocational training. 12 out of the 16 work for Parents and Friends, either at the Paul Bunyan Thrift Store or with the Cleaning Crew, which we are considering vocational training. The remaining 4 volunteer and are working through the Job Club Curriculum. 13 participants are served Alternatively and continue to stay at home until they feel safe doing otherwise.

Meet safety training/drill requirements

Goal: 90% Outcome: 83% Not Achieved

15 out of 18 participants who are participating traditionally attended monthly safety training from July 2021 to June 2022.

# Action Plan

The LIFE program will schedule additional training sessions making sure to schedule them on different days and at different times providing more individualized opportunities for participants using a variety of mediums to meet individual needs.

# **Efficiency**

# Minimize waiting period for services:

Goal: <5 working days (equals 100%) Outcome: 100% Achieved

There are 3 new authorizations, however the participants want to wait until the new year to meet with the manager for intake. Contact was made via phone within 5 days of receiving their Authorizations.

# Action Plan

The Program Manager will continue to reach out to the new participants, encouraging them to start/finish the intake process and participate in the program either traditionally or alternatively.

# Increase Staff Training:

Goal: 100% Outcome: 64% Not Achieved

7 out of 11 Staff participated in both CDS online training and department training during this outcome period.

# Action Plan

We plan to continue serving participants at the highest level of service and exceed expectations by continuing to stay up to date with training. We will email staff who work Alternatively the monthly training for them to complete and schedule time for all new hires to complete the department training within the first week of working in the program.

# Maximize progress on employee goals:

Goal: 100% Outcome: 88% Not Achieved

7 out of 8 staff made progress on or achieved their assigned goals not including the 2 staff who are new and have not had their 90-day evaluation.

# Action Plan

Evaluations are scheduled for the new year. Management will send out the evaluations with a due date and a scheduled 1:1 appointment. New hires have not had their 90 day review and were not counted in this outcome.

# **Service Access**

# **Maximize attendance:**

Goal: 76% Outcome: 68% Not Achieved

2502.2 days attended (includes hourly) out of 3701 days they were *scheduled and authorized* to attend the LIFE program.

# **Action Plan:**

The program will continue to offer activities of interest and work with individuals to discover more activities that they want to try, find interesting and want to learn more about. If requested, the individual goals may be updated in the Individual Service Plan.

# **Maximize Participant Satisfaction**

Goal 90% Outcome: 86% Not Achieved

12 out of 14 participants gave a satisfaction of 4 or higher.

# Action Plan

The program will continue to offer activities of interest and implement person-centered planning activities with individuals to explore more activities that they want to try, find interesting and want to learn more about. If requested, the individual goals may be updated in the Individual Service Plan.

# Increase stakeholders satisfaction

Goal 80% Outcome: 100% Achieved

100% of stakeholders responded with a satisfaction rating of 8 or higher, meeting the department goal. Managers and staff will continue to listen for and solicit feedback from stakeholders to support continuing satisfaction.

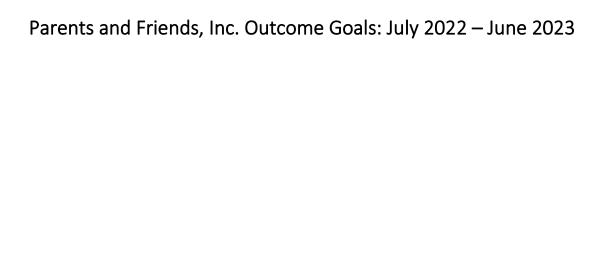
# **Maximize Staff Survey Participation**

Goal 100% Outcome: 63% Not Achieved

5 out of 8 LIFE staff participated in the satisfaction survey.

#### Action Plan

Management will support staff to participate in future survey activities by scheduling time for this specific activity in the workday.



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# Coastal Support Services Outcome Goals: July 2022 – June 2023

<b>Outcome Goals</b>	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
		1	Effectiver	iess			1	1
Establish Participant ISP Goals	Percentage of participants with up to date ISPs	All Participants	Biannual	ISP Files	CSS Manager	90%	-	73%
Maximize Progress on ISP Goals	Percentage of consumer goals showing positive progress	All participant goals	Biannual	ISP Files	CSS Manager	85%	-	88%
			Efficienc	y				
Maximize Participant Services	Percentage of authorized support hours delivered	All Participants	Annual	Billing Forms	CSS Manager	90%	-	85%
			Service Acc	ess				
Maximize Participant Retention	Percentage of participants who have received services and are continuing to receive services	All referrals	Biannual	Case files	CSS Manager	95%	-	95%
			Satisfaction	n			•	
Increase Participant Satisfaction	Percentage of participants who give a satisfaction rating that averages 4.5 on a scale of 1 to 5	All participants responding to survey	Annual	Survey results	CSS Manager	90%	-	92%
Increase Stakeholder Satisfaction	Percentage of stakeholders who give a satisfaction rating that averages 9 on a scale of 1 to 10	All stakeholders responding to survey	Annual	Survey results	CSS Manager	90%	-	88%
Increase Employee Satisfaction	Percentage of Employees with a satisfaction that averages 8 on a scale of 1 to 10	All Employees responding to Survey	Annual	Survey Results	CSS Manager	90%	-	97%

The Job Connection Outcome Goals: July 2022 – June 2023

Outcome		Annlind To	Time of	Data Source	Obtained	Cool	Ovetoomo	Previous
Goals	Categories of Measures	Applied To	Measure	Data Source	By	Goal	Outcome	Outcome
		Ef	fectiveness					
1.Maximize Placement	% of participants with Intake who are placed in jobs this year	Authorizations for Intake/Placement	Bi-annually	Case Files DOR Billing	TJC Manager	60%		60%
2.Maximize Job Retention	% of participants placed who keep their jobs for 3+ months	Individually placed participants w/Retention	Bi-annually	Case Files DOR Billing	TJC Manager	80%		67%
3.Maximize Progress on IHSP Goals	% of new and/or continued participant goals achieved	Individual	Bi-annually	IHSPs and Case Files	TJC Manager	70%		35%
		E	Efficiency					
4.Make Progress in Regular Staff Training	Complete at least 3 assigned training courses per staff	TJC staff members	Bi-annually	CDS Reports & Training Rosters	TJC Manager	75%		100%
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%
		Ser	vice Access					
6.Maximize enrollment retention	% of New participants who begin services this year still enrolled or successfully completed services	All <b>new participants</b> referred	Annually	Case files and Billing	TJC Manager	77%		100%
7.Maximize enrollment retention	Number of participants enrolled at the <b>beginning of the year</b> still enrolled or successfully completed	Total number of participants at begin of year compared to end of year	Annually	Case files and Billing	TJC Manager	90%		96%
8.Maximize authorized service	Percentage of all authorized <b>Job Coaching</b> hours served for  Supported participants	% Job Coaching Hours Adjusted COVID-19	Monthly	Billing Forms	TJC Manager	95% 90%		68% 17%
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, and the second	atisfaction				1	
9.Maintain Participant Satisfaction	Percentage of participants who give a satisfaction rating average of 4 or 5 (1 to 5)	All TJC participants	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	Stakeholders & family Employment partners	Annually	Survey Results	TJC Manager	90%		83%

# Places To Go Outcome Goals: July 2022 – June 2023

Outcome Goals	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Report's
30415		10	1,104,541,0		23			Outcome
			Effectivene	ess				
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	90%		86%
Establish Participants ISP's	Percentage of participants with up to date ISP's	All Participants	Bi-Annually	Case Files	Places To Go Manager	100%		86%
Maximize the # of trainings taken	Percentage Of Employees who have completed or made progress in 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	90%		100%
Maximize ParticipantP Participation	Percentage of Participants that participated in scheduled activities	All Participants	Bi-Annually	Billing / Authorizations	Places To Go Manager	90%		83%
Maximize Participant Satisfaction	% of Active Participants who give a satisfaction rating that averages 4 on a scale of 1 to 5	All participants responding to survey	Annually	ISP's	Places To Go Manager	100%		100%
Maximize Staff Satisfaction	% of staff who gave a satisfaction rating that averages 8 on a scale of 1 to 10	All Staff Members	Annually	Survey Results	Places To Go Manager	100%		100%
Maximize Stakeholders Satisfaction	% of Stakeholders that responded to survey who gave a satisfaction rating that averages 8 on a scale of 1 to 10	All Stakeholder Responding to survey	Annually	Survey Results	Places To Go Manager	100%		100%

# The Community Connection Outcome Goals: July 2022 – June 2023

<b>Outcome Goals</b>	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
		10	Effectivene		25			Outcome
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%		91%
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%
			Efficiency	7				
Maximize staff attendance	Percentage of days staff worked when scheduled	All employees	Bi- Annually	ADP/ schedules and	TCC Manager	90%		86%
Maximize progress on employee goals	Percentage of employee goals achieved or making progress	All employee goals	Bi- Annually	logbooks / evaluations	TCC Manager	95%		95%
Maximize Participant attendance	Percentage of days participants attend per days authorized	All TCC participants	Bi- Annually	billing forms/ schedule	TCC Manager	85%		89%
		\$	Service Acc	ess				
Maximize Participant Retention	Percentage of participants who have and continue to receive services	All TCC participants	Bi- Annually	Billing Forms	TCC Manager	90%		100%
Increase Community Employment, Vocational Training/Discovery or Volunteering	Percentage of active participants served that are employed in Community Employment, Vocational Training/Discovery or Volunteering	All TCC Participants	Bi- Annually	Schedules, logbooks and ISP's	TCC Manager	50%		64%
			Satisfactio	n				
Maximize staff satisfaction	Percentage of staff members who give a satisfaction rating average of 4 on a 1 to 5 scale	All TCC staff members	Annually	Survey Results	TCC Manager	90%		100%
Maximize client participation in surveys	Percentage of participants who participate in the satisfaction survey	All TCC staff and participants	Annually	Survey Results	TCC Manager	95%		100%
Maximize stakeholder satisfaction	Percentage of stakeholders who give a satisfaction rating average of 4 on a 1 to 5 scale	All TCC stakeholders	Annually	Survey Results	TCC Manager	100%		100%

L.I.F.E. on the Coast Outcome Goals: July 2022 – June 2023

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<b>Outcome Goals</b>	Categories of Measures	Applied To	Time of Measure	Data Source	Obtained By	Goal	Outcome	Previous Outcome
			Effective	ness				
Maximize ISP goal progress	Percentage of goals achieved or making positive progress.	All goals	Bi-annually	ISPs and Case Files	LIFE Manager	80%		83%
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%		83%
Meet safety training/drill requirements	Percentage of client participation in safety training/drills	All people served	Bi-annually	Training Logs	LIFE Manager	95%		83%
			Efficien	ıcy				
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 training.	LIFE full time staff members	Bi-annually	CDS Reports and Training Logs	LIFE Manager	100%		64%
Maximize staff goal progress	Percentage of staff who have made progress on their goals	All goals	Bi-annually	Personnel Files	LIFE Manager	100%		88%
			Service A	ccess				
Maximize Attendance:	Percentage of <i>scheduled</i> days attended/	All clients	Bi-annually	Billing and	LIFE	76%		68%
Scheduled vs Authorized	Percentage of <i>authorized</i> days attended.		·	authorization	Manager	76%		68%
			Satisfact	tion				
Maximize Participant Satisfaction	% 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%		86%
Achieve Stakeholder Satisfaction	% of stakeholders who give a satisfaction rating of 8 or higher on a 1 to 10 scale	All LIFE stakeholders	Annually	Survey Results	LIFE Manager	100%		100%
Maximize Staff Survey Participation	Percentage of completed surveys received	LIFE staff members	Annually	Survey Results	LIFE Manager	100%		63%

Person-Centered Services Outcome Goals: July 2022 – June 2023

	Categories of Measures	Centered Service	Time of	,				Previous
Outcome	Categories of Measures	Applied To	Measure	Data Source	Obtained By	Goal	Percentage	Percentage
			Effectivenes	SS				
The Person Centered Process is Maximized	The percentage of people who have worked on their goal(s).	All participants active in the program.	Bi-annually	Therap/ Individual Service Plan Data	Person Centered Services	100%		100%
			Efficiency					
The waiting period for receiving services is Maximized	The average days between the first day that the Authorization is received and the first day of contact.	All new Authorizations	Bi-annually	Billing	Person Centered Services	>6 days (Equals 100%)		100%
			Service Acce	ess				
Services provided are Maximized	The Percentage of provided scheduled hours.	All participants active in the program.	Bi-annually	Billing	Person Centered Services	100%		100%
			Satisfaction	n				
Participant participation in the Survey is Maximized	The percentage of participants who participate in the satisfaction survey.	All participants	Annually	Individual Service Plan	Person Centered Services	100%		100%
Stakeholder participation in the Satisfaction Survey is Maximized	The percentage of stakeholders who participate in the satisfaction survey.	All stakeholders	Annually	Survey	Person Centered Services	100%		100%

# Parents and Friends, Inc., Plans and Reports: July 2022

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# Parents and Friends, Inc.

# Accessibility Plan July 2022-June 2022

# **Purpose**

The purpose of this report is to describe measures that Parents and Friends took during 2022/2022 and will take during 2022/2023 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 sixty 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 Fifty Two employees. Seven of Parents and Friends Employees are Client Employees. Parents and Friends provides services to One Hundred and Twenty-three Clients. Parents and Friends' businesses support client centered programs and services:

# Located at 521 E. Chestnut St.:

• The Community Connection is a state-licensed day activity program offering services to individuals with severe disabilities.

# 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, Human Resources, IT, Development and Special Projects, Person-Centered Services, and meeting spaces for Board, Managers, Safety Committee, and various other meetings.

# Located at 308 E. Redwood Ave.:

• Coastal Support Services Program Director, Program Manager, Program Coordinator, Medical Coordinator, Independent Living Services Coordinator, House Managers.

# Located at Located at 310 Redwood Ave.:

- 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. Prior to the Covid-19 pandemic, some client activities were located at 521 E. Chestnut Street.
- The Job Connection provides organizational employment services, job coaching to Supported Employers and Supported Employees through the Regional Center and Dept. Of Rehabilitation.
- The Places to Go program provides recreational, leisure and social activities after hours and weekends to promote exploration of individual interests and developing new relationships in the community.

# **Located at 209 Azalea Circle:**

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

# Located at 365 Cypress St.:

• Community Connection outgrew its Chestnut St. facility and has opened an additional facility on Cypress St. The Community Connection #2 is a state-licensed day activity program offering services to individuals with severe disabilities.

# **Located at 350 Cypress St.:**

• 350 Cypress St. has been unused since the relocation of the Parents and Friends Learning Garden. The site has been vacated and the construction of a new home has begun that will be utilized as a Residential Care Facility for the Elderly.

#### **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 Chairperson for the Safety and Accessibility Committee is appointed responsible to organize bimonthly 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 ongoing 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 Managers and Chief Executive Officer.

• Safety and Accessibility Committee Meetings

Bi-Monthly Committee meetings attended by a participant representative and a representative from each program address any current accessibility action items.

ADA Checklist

The ADA Checklist is completed annually by the safety committee representative 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 Directors' Meeting.

# Communication of the plan

Copies of this plan are available at all PFI sites.

# 2022/2022 Accessibility Report:

350 Cypress St. is no longer in use. The site is in the beginning stages of construction of a new Residential Care Facility for the Elderly.

Following is a list of items that were identified in July 2021-June 2022 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: 521Chestnut Street, Admin: 306 E. Redwood Ave. / 308 E. Redwood Ave. / 310 Redwood Ave., RCFE: 209 Azalea St., TCC#2, 365 Cypress Street.

# **Items Continuing for 2022/2023:**

# **Architectural Barriers**

• 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:** Thrift Shop staff are aware and courteously providing a consumer-level ADA surface, on demand. We have new counters to install during the month of July (estimate of completion before August), and this will include a permanent ADA approved check-writing installation, which is a kit that is purchased and installed.

• Aisles and walkways in the Thrift Store should be 36 inches wide.

**Current Status: Continuing item:** Furniture and clothing displays have been arranged to meet the 36" width with limited exceptions, within the ADA approved guidelines.

**Person Responsible:** Management and Staff at the Thrift Store.

• 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 (07/2022-06/2023):** 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.

Environmental Barriers
 None Identified

# • Attitudinal Barriers

Potential Employer preconceived bias about developmental disabilities

# **Current Status: Continuing item:**

- 24 Community Employment Partnerships were maintained this year.
- 3 New Employment Partnerships were formed this year.
- 6 Participants were placed into 6 jobs this year.

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

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

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

Of 24 Participants enrolled July 2021-June 2022, 23 are still participating, or have successfully completed services. 1 Client has been unreachable despite having an active authorization

- •Job Developer was involved with the Pop-Up Business Fair. The Job Connection and Job Developer participated in PFI fundraising and public relations activities.
- •Job Developer has identified 169 companies, 178 separate contacts and identified within the past year 195 employment opportunities in Fort Bragg and surrounding areas. Job Developer has introduced PFI as an organization with qualified candidates with unique skills.
- •The Job Developer and Job Connection has increased the number of employment partners by 3 this year. We are very excited to have these new relationships and look forward to new ones this coming year.
- •Job Developer has continued to submit 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.
- •The Job Connection has participated in the Competitive Integrative Employment Incentive Program through Redwood Coast Regional Center. We have been successful in assisting 2 individuals in gaining Competitive Integrative Employment.

**Short Term Plan (07/2022-06/2023):** The Job Connection will continue to maintain strong relationships with current Employment Partners as well as meeting with new businesses and developing relationships. **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, Job Developer, and PFI Staff.

# Lack of Sensitivity by Community Members

**Current Status: Continuing item:** This year we maintained and continued to grow all programs. With the Covid-19 restrictions, Places to Go was suspended temporarily due to limited staff and to ensure the safety of both staff and participants during the Covid-19 pandemic. PFI continued the newsletter distribution, maintenance of our website, and social media. Staff participate in the Chamber of Commerce, various committees, as well as fundraising and public relations activities. We also have board members that reside on multiple community boards.

Short Term Plan (07/2022-06/2023): Maintain strong relationship with current supporters and stakeholders.

Long Term Plan: See short term

**Person Responsible:** Board of Directors, Chief Executive Officer.

# • 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 their First Aid and CPR. Pro-Act training, and Person-Centered Thinking Training certifications. Covid-19 Certificate program and Sexual Harassment certificate, as well as additional universal precautions and infection control training will include consultation with professionals who can provide specific information regarding participant needs, Diabetes management training, Dementia training, and others to be determined as needed.

**Short Term Plan (07/2022-06/2023)** Continue to train existing and new staff according to the existing training protocol.

Long Term Plan: See short term

**Person Responsible:** Program Managers

# 9. Financial Barriers.

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

**Current Status: Continuing item:** The Development and Special Projects Director continues to seek grant opportunities, as well as opportunities for development of additional fundraising and diversified income streams benefitting Parents and Friends, Inc.

Short Term Plan: (07/2022-06/2023) Continue to integrate the use of adaptive technologies in programs. 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 the Individual Program Plan (IPP) process, and use of Medicaid and other funding solutions on an individual and collective basis. A new Residential Care Facility for the Elderly is expected to be operational in 2023.

Long Term Plan: See short term plan.

**Person Responsible:** Development and Special Projects Director, Chief Executive Officer, Board of Directors.

# 10. Communication Barriers.

Parents and Friends recognizes that both staff and program participants 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 organization has full time staff members who are certified in Augmentative and Alternative Communication (AAC). These staff members work with program staff to identify and address the needs of multiple participants through various communication challenges and provide alternative communication access solutions through both high- and low-tech solutions. A new program, Alternative Services, supports alternative methods to deliver person-centered services and is expected to continue through 2023. These solutions enhance client and staff participation, positive behaviors, and support appropriateness.

Short Term Plan: (07/2022-06/2023) IT Technician will support AAC implementation, 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, as documented in the individual service plan. The organization has embarked on the translation of internal policy, procedure, training, and communication materials to accommodate Spanish speaking staff and participants. Our leadership staff who are bilingual are identified as such on our online Contact page and avail themselves to support individuals and their families to participate in their preferred language. Language and communication preferences are considered in service delivery with appropriate staff matching the individual participant needs.

Long Term Plan: Continue to document in ISP process any specific communication barriers.

**Person Responsible:** AAC certified staff, IT Technician, Human Resources, Program Managers, Chief Executive Officer, Board of Directors.

# 11. 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. Training computers have been updated to Windows 10 Pro and are managed centrally by the full-time IT Technician and remain suitable options for staff to utilize. The IT Technician continues to be available to provide application support for new or inexperienced users. All staff are provided with cellular smart phones that also have access to Wi-Fi at PFI locations. These devices have access to Google services, such as email, calendar, and tools to create/access documents and shared storage. All staff are provided with one-on-one, documented training in the use of their smartphone. PFI works to update computers and other devices as needed and acquire devices at a reasonable cost whenever possible. There are always new technologies available that could improve efficiency. The organization maintains a fleet of Cellular 'Hot Spots' to support remote access for staff, participants, and board members as needed. See the technology plan for more detail.

Short Term Plan (07/2022-06/2023): Keep current devices up to date with software updates. Continue to provide cellular smart phones to all staff and seek devices at reasonable costs. Provide accommodations where necessary to provide access to technology, including cellular "Hot Spots." The IT Technician will continue to assess staff needs and remain 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 plan.

**Person Responsible:** IT Technician, Chief Executive Officer, Board of Directors.

# 12. Ineffective data backup infrastructure.

**Current Status: Continuing item:** PFI's full-time IT Technician is responsible for all security, troubleshooting and software solutions. Computers are prevented from running unauthorized applications without administrator approval to minimize the risk of unwanted software, including ransomware that may affect PFI data. Routers and firmware updates are kept current at all locations. All PFI data storage has been transferred to Google Drive, with files segmented into shared drives according to purpose/department and needed levels of access, and staff are encouraged to use the Google Docs suite of applications for new documents in order to maximize availability of previous versions in the event of unintended changes.

Short Term Plan (07/2022-06/2023): Continue training staff in the use of the Google Docs suite of online document editing services. Continue to investigate cost-effective and low-maintenance solutions for versioned backups of PFI data. Continue updating network devices at PFI locations to maintain oversight and security.

**Long Term Plan:** See short term plan.

**Person Responsible:** IT Technician, Chief Executive Officer.

# 13. Limited access to technology for participants.

Current Status: Continuing item: Many participants could benefit from assistive technology and greater access to computers. There are some computers available for participants to use, and a technology demonstration library has been developed at Parents and Friends to model tablet, phone, and application solutions. We have acquired peripherals to assist low-vision users. Additionally, our licensed day program has purchased tablets for client use. Some participants have been able to purchase tablets and other devices to assist with their communication. Parents and Friends office locations 306, 308, and 310 E. Redwood Ave. offer guest access to wireless internet. Participants may receive a tablet device issued by the Redwood Coast Regional Center that is setup, maintained and user training is provided by Parents and Friends to facilitate program participation in meaningful ways relative to each individual participant plan. Cellular "Hot Spots" and/or assistance with enrolling in low-cost internet service at home is provided for each participant as needed.

Short Term Plan (07/2022-06/2023): Continue to identify and address technology access challenges for participants, including financial. Seek to advocate for each individual client to the Regional Center when financial barriers exist to solutions that will address visual, auditory, cognitive, behavioral, mechanical, and other barriers requiring low and high technology solutions in each program. Program staff continue to advocate for and facilitate enrollment in low-cost in-home broadband access programs when desired by the participant.

Long Term Plan: See short term plan.

Person Responsible: IT Technician, Program Managers, Chief Executive Officer, Board of Directors.

# 14. Transportation Barriers

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

**Current Status: Continuing item:** The Regional Center has discontinued much of the funding for public transportation leaving only limited free bus passes for certain activities. PFI continues to hire staff who can provide transportation support and to reimburse staff for mileage.

In addition, PFI has maintained previously owned vehicles, as of 06/2022 PFI has six passenger vans, with four being wheelchair accessible. A pickup truck is used in transporting trash or property from one location to another. A grant was used to partially fund a new ADA van that was purchased in 2022 to support employment activities.

**Short Term Plan (07/2022-06/2023):** Continue to supplement public transportation with staff and company vehicles. Pursue additional funding to purchase future ADA fleet vehicles; there is one current outstanding proposal.

Long Term Plan: See short term

**Person Responsible:** Chief Executive Officer, Development and Special Projects Director, Board of Directors.

# Parents and Friends, Inc. <a href="#">Critical Incident Analysis</a> July 2021 to June 2022

# **Parents and Friends Critical Incident Analysis**

# July 2021- June 2022 Incident Summary

Note: Due to HIPAA requirements, incidents involving persons served are confidential, are reported to the appropriate authority when necessary, and are not described herein as to prevent any link to those we serve. Parents and Friends Inc. has a person-centered approach and philosophy. Persons served have the right to confidentiality and control over the release of specific information.

There were a total 11 documented Critical Incidents involving employees this year. Of 11 total incidents reported:

# **Incidents by Type:**

- 5 (46 %) resulted from Trips or Falls.
- 2 (18 %) resulted from Cuts or Scrapes.
- 4 (36 %) resulted from Vehicle Accidents.

# **Incidents by Location:**

- 0 (0%) happened at Administrative Offices.
- 2 (18%) happened at our Retail Location.
- 5 (46%) happened in Persons Served Homes.
- 4 (36 %) happened in the Community.

# **Incidents by Severity:**

- 5 (46%) required no First Aid.
  - 4 (36%) required First Aid.
- 2 (18%) required Doctor's visits.

# July 2021- June 2022 Causes/Trends:

- There were an equal number of Trips or Falls this year as last year (5). Trip and Fall Prevention Training is provided to all staff on a semiannual basis. Additional training on being aware of your surroundings in the workplace and good housekeeping practices is also provided.
- There was a decrease in Cuts or Scrapes this year (2) compared to last year (4).
- There was an increase in Vehicle Accidents this year (4) compared to last year (2). Driver Training is provided to staff on a biannual basis.

# **Actions for Improvement:**

- Continue training all staff in First Aid and CPR including seizure procedures.
- Continue to provide Pro-Act training to staff to provide tools for dealing with violence and aggressive behaviors while maintaining safety for staff and persons served.

- Continue to provide annual training on avoiding Trip and Fall Accidents and good housekeeping. Continue biannual safety inspections, annual review of all safety postings and procedures, quarterly safety committee meetings, and regular training for all staff.
- Continue to provide Drivers Training to avoid distractions during driving and maintaining focus while transporting participants.

# Results since last report (7/20):

• 5 incidents of the total 21 incidents reported (24 %) resulted from trip and fall accidents. 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.
- Maintain advanced Safety Culture training (STAR University) which created heightened awareness of the need for interactive reinforcement and early assessment/investigation to mitigate recurrence.

# **Prevention of Recurrence:**

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

# **Internal and External Reporting Requirements**

- Incidents involving persons served will be kept confidential and thus will not be reported publicly but only to necessary parties.
- 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 Special Incident Report (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., Participant Demographic Report: July 2021 – June 2022

Race	PFI	Mendocino	California
White alone	45%	72.52%	36.5%
Black or African American alone	5%	.91%	6.5%
American Indian and Alaska Native alone	0%	4.98%	1.6%
Asian alone	0%	2.18%	15.5%
Native Hawaiian and Other Pacific Islander alone	0%	.18%	.5%
Persons reporting two or more races	11%	14.15%	4%
Persons of Hispanic or Latino origin	15%	25.6%	35.4%
Unknown	24%		
Age/Gender	PFI	Mendocino	California
Persons 65 years old and over	10%	23.1%	14.8%
Female persons	28%	50.4%	50.3%

The Mendocino County and California demographic data is from the US Census Bureau web site and based on 2019 Census data. PFI data was collected in July 2022.

PFI's statistics on race and gender only generally fall within Mendocino County parameters in a few categories. This is primarily due to the American Indian population in Mendocino County being predominantly inland, and there being many persons of mixed race in all categories but PFI is not specifically noting or reporting all mixed-race people; many individuals reflect unknown ethnic background. Developmental disabilities tend to be more common in the male population and, while the PFI population base is growing in age, twelve people have reached sixty-five years of age.

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, 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. However, since most Participants served who are engaged in paid work earn minimum wage, this would seem to indicate that the population is generally low income, however household incomes may vary dramatically from Client to Client.

Parents & 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. 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, Development & Special Projects Director, a contracted third party with financial and policy compliance experience if possible, and members of the Board of Directors.

# **Summary of Allegations, Investigations, Complaints:**

- 1. Allegation filed with Board of Labor Relations alleging termination irregularities by PFI. Acknowledged irregularities were remedied. Follow-on allegations were dismissed by the Board of Labor Relations.
- 2. Allegation by an ex-employee of wrongful termination. Notification of the allegation sent to PFI by an internet law firm. PFI denied the allegation and denied settlement and sent supporting documentation. Nothing further has been heard from the employee or law firm.

# **Policy and Procedure Recommendations:**

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

- Personnel Policy and Procedure Manual were last reviewed and approved in May 2022
- Department Specific Policy and Procedure Manuals were last reviewed and approved in September 2019; in progress August 2022
- Board of Directors Bylaws and Policy Manual were last reviewed and approved in May 2022
- Program Manager's Policy and Procedure Manual were last reviewed and approved in August 2022

#### **July 2021-June 2022 Committee Members:**

Corporate Compliance Officer: Erica Early, Business Office Director Committee Member: Rick Moon, Chief Executive Officer

Committee Member: Mike Hall, Board Member

Committee Member: Laurel Ellen, Board Vice President Committee Member: Amanda Venett, Board Secretary

Committee Member: Kristy Tanguay, Development and Special Projects Director

Cultural competence includes obtaining 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 Parents and Friends, Inc. (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 identity.
- PFI 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.
- Provide opportunities to take ESL classes for Spanish speakers and Conversational Spanish for English speakers.
- Provide staff surveys to gauge company diversity and inclusion status and strategies for improvement.
- Provide education and awareness opportunities to promote inclusion and in the workplace.
- 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 of PFI's goals for 2022/2023:

Goal: Provide Cultural Competence training to all employees

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

Timeframe: All staff on track to complete by December 2022

Status: One third of the employees have completed the course.

Goal: ADP serves as a current database of skills that staff possess including those who have completed training in Cultural Competence, and those who could serve as an interpreter including ASL.

Action: HR staff will develop and maintain a database; staff will be surveyed to gather information about current skills and training needed. Google Form survey in progress to identify skills training still needed and delivery method.

Timeframe: Survey of all employees is ongoing; progress is being recorded.

Status: The database has been created and is being populated. Ongoing progress is being recorded.

As of June 30, 2022, PFI had 155 full-time and part-time employees not counting Vocational Services participants and Job Connection consumers.

Between July 1, 2021 and June 30, 2022, net employment at PFI decreased from 163 to 155 employees. During the fiscal year, 51 new employees were hired, of which 37 are still active employees. 54 employees left employment for a variety of reasons which are summarized below:

Misconduct/Poor Performance	Personal/ Voluntary Quit	Retirement	Abandon Job	ed Total
 23	29	0	2	54

The chart above shows that from 07/01/2021 to 06/30/2022, PFI experienced a 34.8% turnover rate. Voluntary quits were due to COVID-19 mandates, relocation, compensation and/or job satisfaction. That leaves an effective turnover we may have been able to influence of 2, or 53.7%.

#### Strategies for Maintaining or Lowering Turn-Over Rate.

- 1. Continue with employer paid insurances including medical, dental, vision and life. The expense is over 20% of gross payroll.
- 2. Improve annual reviews, establishing meaningful goals based on performance and current wage and salary surveys.
- 3. Empower effective leadership with Manager training to provide mentorship.
- 4. Have an employee appreciation event as well as other seasonal, multiple events when appropriate after COVID-19 crisis is over.
- 5. Continue the employee appreciation reception or Holiday food gift cards in November/December and have department Holiday parties in December if appropriate.
- 6. Maintain an open door and open communications culture and policy.
- 7. Increase transparency and invitation to participate in company direction thorough opportunities including open board meetings, a suggestion box, scheduled quarterly open forums with the CEO.
- 8. Have the CEO attend each department staff meeting at least quarterly.
- 9. Promote discounts offered by ADP payroll service.
- 10. Continue to pay for English and Spanish classes for those employees who are interested.
- 11. Continue Hiring and Referral Incentive.

Parents and Friends, Inc., Risk Management Controls System: July 2022 – June 2023

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.

EXPOSURE	CONTROL MECHANISM	RESPONSIBILITY	SCHEDULE/REPORT	REVIEW DATE
General Liability	General Liability insurance policy	CEO	Philadelphia Indemnity	August
	in effect. Annual review of policy		Insurance, policy renews	
	w/ insurance broker prior to		September 25	
	renewal			
	Maintain Safety Committee /	Safety Committee	Monthly	Monthly
	OSHA Compliance			
<b>Professional Liability</b>	Maintain current insurance policy.	CEO	Same as General Liability	August
	Annual review of policy with			
	insurance broker prior to renewal.			
<b>Property Loss</b>	Maintain current insurance policy.	CEO	Same as General Liability	August
	Annual review of policy with			
	insurance broker prior to renewal.			
Vehicle Loss	Maintain current insurance policy.	CEO	Same as General Liability	August
	Annual review of policy with			
	insurance broker prior to renewal.			
<b>Business Loss / Interruption</b>	Maintain appropriate accreditation	CEO	Annually	Annually
	for each of PFI's programs.			
	Maintain relationships with bank.	CEO	Monthly	Monthly
	Maintain open communication	CEO & Program	On Going	On Going
	with funding agencies.	Managers		
	Use existing assets.	CEO	On Going	On Going
	Maintain Budget/ Cash Flow.	CEO	Weekly	Weekly
EXPOSURE	CONTROL MECHANISM	RESPONSIBILITY	SCHEDULE/REPORT	REVIEW DATE
Loss of Reputation	Maintain PFI Website	CEO	Semi-Annually	Semi-Annually

Liability to Employees	Maintain open communication with Consumers, Family/Guardian and the Community. Maintain annual Stakeholder, Consumer and Employee Surveys Parents & Friends Newsletter, social media Maintain viable employment	Board of Directors  Program Managers / Administration Development Director  Board of Directors	Monthly  Annually  Quarterly  Monthly	Monthly  Annually  Quarterly  Monthly
Liability to Employees	opportunities. Maintain workers compensation and general liability insurance	Board of Directors	Wollding	Wollding
Loss of Accreditation / Licensing	Dept. of Habilitation / Dept. of Rehabilitation compliance. Maintain current insurance policies Maintain Safety Committee / OSHA Compliance. CARF Survey.  Multiple licensed administrators for licensed homes and day programs.	Program Managers  CEO Safety Committee  Management Team / Board of Directors Program Administrators	Monthly Same as General Liability Monthly On Going Annually	Monthly August Monthly On Going Annually
Loss / Reduction or Interruption of Income	Match income with expenses; react quickly to changing financial situations	CEO	Monthly	Monthly
EXPOSURE	CONTROL MECHANISM	RESPONSIBILITY	SCHEDULE/REPORT	REVIEW DATE
continued:	Contingency fund.	Board of Directors /	Monthly	Monthly
Loss / Reduction or		CEO		
Interruption of Income	Weekly and monthly cash flow to match.	CEO	Weekly/Monthly	Weekly/Monthly

Financial mismanagement	Financial review & report to Board	CEO	Monthly	Monthly
or malfeasance	of Directors and Financial Sub-			
	Committee.			
	Annual audit of financials by an	CPA	Annually	Annually
	independent CPA reporting to the			
	Board Of Directors.			
Inability to hire and	Employee Exemplary Performance	Program Managers /	Quarterly	On Going
maintain sufficient quantity	Certificate.	CEO		
of experienced employees				
	Performance Review.	CEO	Annually	Annually
	Employee Satisfaction Survey.	CEO	Annually	Annually
	Fully Paid Medical, Dental, Vision,	CEO / Board of	Annually	Annually
	Life insurances.	Directors		
	Open Door Management Policy.	CEO / Board of	Annually	Annually
		Directors		
	Formal Grievance Procedure.	CEO / Board of	Annually	Annually
		Directors		
Natural Disaster, Fire and	Safety Plan.	Safety Committee	Monthly	Monthly
<b>Accident Prevention</b>				

#### **July 2022**

It is the intention of Parents and Friends, Inc. (PFI) to utilize technology whenever feasible and affordable to provide better accessibility to technology for participants 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.

- Web presence PFI has a website maintained by a staff person. In 2022-2023 PFI will be completing a re-design of this website that focuses further on accessibility and security. We will implement alt-text on images to accommodate screen readers, and the website will be accessible securely via HTTPS to ensure Information integrity. We have added fillable forms for employment applications, etc.
- System management PFI has a full time IT Technician on staff for all system management, system architecture design, security and maintenance. The IT Technician is available for all technology questions and assistance. PFI now utilizes Google's G Suite for Nonprofits, available to us at no charge, to fulfill most of our productivity and collaboration needs, minimizing the overhead that would be required for in-house hosting of services. PFI's agreement with Google allows us to utilize their core services while maintaining our privacy and confidentiality obligations. PFI will continue to measure its effectiveness and seek out additional resources as needed,
- Internet Access Every manager and appropriate employee who has the need has a computer system and mobile device with access to the Internet. The Internet Service Provider is Mendocino Community Network (MCN), a non-profit local provider. Nearly all staff have a limited amount of cellular data on their smartphone and can access the Internet at any PFI location over Wi-Fi. We also have a cellular-based Wi-Fi hotspots available in the event of an outage, and smartphones can be used as hotspots when needed. A secured wireless guest network is available at our administrative offices. PFI has an arrangement with MCN as part of their high-speed wireless project, which provides us with free or discounted Internet and phone system services and higher Internet speeds at our administrative offices and other designated locations, in exchange for accommodating networking equipment and antennas on our premises.
- Communication PFI promotes effective and efficient communications through an MCN cloud-based digital phone service with extensions for department management and office staff, many of whom use desk phones linked to the service. Office lines and associated voicemail are provided by MCN, and cell phones for on-call and remote work crews through Verizon. All PFI staff have Google accounts for email and other core services. The IT Technician manages group email distribution lists to facilitate mass communication with all staff, specific departments, or workgroups. A mass texting tool has also been implemented for use over the Verizon network.
- Collaboration and organization PFI adopted Google Drive and related services for file sharing and
  collaboration. Files are sorted into shared drives according to their purpose, with special attention paid
  to access levels to minimize unintended or unwanted changes to PFI data, in addition to unnecessary
  access.

- Using the Google Docs suite, staff can work together on documents without fear of lost work or
  conflicted copies, and a full history of reversible edits is maintained. We use Google Calendar for
  reservations of rooms, vehicles, as well as to notify staff of upcoming events. Multiple calendars are
  used to allow for viewing of events by program or purpose, where applicable. Scheduling people for
  various trainings is handled via shared, collaborative registration sheets.
- PFI has implemented ADP, a Time and Attendance System that tracks employee hours and participant
  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. PFI continues to investigate online solutions for scheduling and
  timekeeping to further simplify the timekeeping process for staff and to reduce the administrative
  overhead associated with timecard corrections.
- PFI has implemented Therap, a dynamic, secure, web-based application to support planning, reporting, and positive outcomes for the individuals we serve. From healthcare activities to individual goal tracking, the tool has empowered each employee to improve communication, effectiveness and reduce errors. We will be migrating some client billing away from ADP toward Therap to separate payroll and billing activities where possible, especially where concurrent billable activities may occur. This year, a new requirement from the Department of Developmental Services, Electronic Visit Verification, was facilitated with the addition of a new module in Therap, expanding its use while facilitating PFIs compliance with the requirement.
- Security All staff have email and file sharing access via Google's G Suite for Nonprofits. Staff smartphones are PIN protected with sensitive information restricted from view until unlocked. These devices remain logged in to users' individual accounts, and the IT Technician has centralized management over devices, including the ability to track, lock, or reset devices as necessary to protect PFI property and data. Two-step verification is used to enhance account security in the event that an unauthorized party learns a user's password. PFI computers are centrally managed using a consistent VPN connection to PFI's IT server which also functions as a domain controller. System policies prevent untrusted software from running on Windows-based computers, and all computers utilize built-in firewall and antivirus technologies. Devices utilize full-disk encryption wherever possible. Routers and firewalls are managed by IT Technician, with plans to connect routers at all locations to the central VPN for ease of management and updates. The accounting system (QuickBooks Premier Non-Profit Edition) has username 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. Program directors and most managers have been trained in the use of a secure password management system (LastPass). PFI has implemented the Signal app, an end-to-end encrypted communication software for our cell phones to enhance privacy and security; it is also available as a desktop application. PFI has implemented TLS to user email encryption for messages sent over Gmail to further safeguard information.
- Backup All computers have Google Drive File Stream installed. Google Drive offers cloud storage and file synchronization and keeps files synchronized as they are modified. Staff are instructed to use Google Drive's Shared drives feature to store all important documents. Google Drive tracks changes to files and allows users to find previously saved versions of documents for 30 days, or for unlimited time with Google Docs. PFI's 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 synced to Google Drive. Additionally, all shared drives are synchronized on a nightly basis to a local server whose contents are backed up, encrypted, to an offsite server.

- Disaster Recovery PFI's email and other data are stored on Google's servers, and our data would be unaffected by failures varying in size from a single server to an entire datacenter. Also, because PFI replicates important data to Google Drive and generally does not rely on specialized locally installed software for Windows devices, a failed Windows computer would not typically result in lost data. As additional protection against ransomware and other local threats, we plan to move toward greater utilization of web applications, such as the Google Docs suite, which features unlimited version history. As noted earlier, PFI has implemented offsite encrypted backup for its IT server.
- Equipment All managers and appropriate employees who have the need have desktop or laptop computers with internet access, printers, and all other necessary accessories. Xerox multifunction copy machines are leased for the 306, 308 and 310 E. Redwood locations.
- There are enough computers available for all essential daily tasks and the occasional needs that arise. Additional computers have provided 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 are always pursued. PFI has added a fleet of Cellular Hot Spots to provide data access in times of power or internet outage, or where Wi-Fi is unavailable.
- Accessibility and Adaptive Technology Nearly all of PFI's 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.

PFI has employees who are certified Adaptive Technologists. This allows us to address communication challenges in all of our Individual Service Plans. Adoption of smartphones and increased use of technology will allow us to further increase accessibility. PFI continues to offer textual modes of communication through phone messaging and now extended to email access for all employees. Staff are able to have our personnel policy manual and other documents read aloud to them using text-to-speech features. Staff smartphones include a synchronized directory of all PFI staff. Visual schedules are used for program participants where applicable.

A large format wireless keyboard is available for sight-impaired individuals to utilize in our day programs. Increased use of projectors and speakers help to make information more accessible. Automatic door openers are available at our Redwood Avenue locations.

PFI's new Person-Centered Services program and person-centered thinking training helps to clarify the need for accommodations for staff and clients.

Should the features available with our computing devices not adequately address a specific accessibility issue with an individual participant or employee, adaptive technologies are available through the Redwood Coast Regional Center and Department of Rehabilitation.

PFI's use and implementation of technology has rapidly progressed over the past several years. Apart from the goals listed above, as we continue to move forward, it is our intention to add to our extensive set of written procedures and documentation for new and existing practices, along with providing additional user training, lifecycle plans for hardware and software, and expanded device usage policies.