

**Access, Effectiveness, Satisfaction, and Efficiency Outcomes for Organizational Employment Services (OES),  
Supported Employment (SE), Community Integration, and Respite (Adult Care Services)  
Annual Outcomes Report July 2018-June 2019**

**Organizational Employment Services (OES):**

- Access:** Percentage utilization of OES hours on an annual basis. **Goal: 85%**  
Annual Results: HCBS-SLS – **84%** HCBS-DD – **86%**  
Data Source: Utilization Reports  
Management Plan: The goal for HCBS-DD was met. HCBS-SLS did not meet the goal, but showed an increase in utilization from the last reporting period. Staff continue to monitor utilization and encourage individuals to only request the number of units they feel they will use. Staff continue to review utilization on a monthly basis. It appears staff are doing a better job of supporting individuals to identify their desired rate of attendance. We will continue to keep the goal at 85% for both service categories.
- Effectiveness:** Average Prevocational contract revenue per month. **Goal: \$15,000 per month for FY19**  
Annual Average Monthly Results: **\$18,092.50**  
Data Source: Contract billing sheet  
Management Plan: The monthly goal of \$15,000 in Prevocational contract revenue was met and exceeded, which was likely impacted by the increase in minimum wage. Giving individuals alternatives for their prevocational activities will impact our monthly revenue for contracts. We also anticipate that increasing numbers of individuals will continue to opt out of Prevoc services to more integrated employment services. This, along with other extenuating factors, could impact our ability to produce at the current average monthly rate.
- Satisfaction:** Percentage of families satisfied with OES. **Goal: 95%**  
Annual Results: HCBS-SLS –**85%** HCBS-DD – **99%**  
Data Source: Family Satisfaction Surveys  
Management Plan: HCBS-DD satisfaction with OES increased from the previous year. HCBS-SLS satisfaction decreased from last year's total. Prevoc staff should continue to strive to keep all caregivers informed about the Prevoc Program, regardless of whether those people attend meetings regularly, so they can become more knowledgeable about prevocational services. Staff continue to do regular check-in's with families and caregivers throughout the year. It was difficult to ascertain specific information that would explain why there was a decrease in SLS satisfaction, so staff will need to continue to place an emphasis on their quarterly check-in's with this group to see if they can gather more information. We feel 95% is still a realistic goal and will strive to improve in all areas

**Efficiency:** Percentage of individuals who work on three or more jobs during a quarter. Goal: HCBS-DD **82%** HCBS-SLS **65%**  
Annual Results: HCBS-SLS – **74%** HCBS-DD – **85.75%**  
Data Source: Payroll  
Management Plan: Percentages for both groups improved during FY19, even as we continued efforts to get people out into the community for prevocational activities. Several of our ongoing contract jobs have had continued increased volume during the past year, so variety of jobs available could have been impacted. We have also been providing Prevoc classes. We will continue to strive to assure that individuals have access to a variety of jobs, and staff will increase their efforts to encourage people to try different things when they are available. Many individuals in HCBS-SLS have been opting for one or two-day Prevoc schedules, as they try other programs and services during the week.

### **Supported Employment (SE)**

**Access:** Number of new job placements. Goal: **12 total**  
Corrected Annual Results: HCBS-SLS – 6, HCBS-DD – 4, Wait List- 1 **FY19 Total: 11 placements**  
Data Source: Employment Application  
Management Plan: Marketing materials were distributed to potential employers to educate them on benefits and resources around hiring individuals with disabilities. Training was provided by the Larimer County Workforce Center to job coaches on how to write an effective resume to improve the quality and consistency of resumes submitted on behalf of individuals in services. Division of Vocational Rehabilitation continued to attend SE monthly meetings to improve communication and provide training. SE Coordinator attended a Business Networking International meeting to help secure assessments. SE Coordinator and Senior Career Consultant attended Business After Hours event through the Chamber of Commerce to connect with local businesses. SE Coordinator is participating on the Larimer County Long Range Strategic Planning Committee to increase job placement rates for individuals with disabilities by 5% over the next 5 years.

**Effectiveness:** Percentage of individuals employed for at least six months. Goal: **90%**  
Annual Results: HCBS-SLS – **77%** HCBS-DD – **84.5%**  
Data Source: Employment Application  
Management Plan: Goal was not met for HCBS-DD and HCBS-SLS participants. Employer training and resources are made available to employers to provide them with resources for hiring individuals with disabilities. Periodic assessments are completed to ensure individuals are satisfied with their job and their services. Job coaches complete an extensive intake questionnaire to ensure individuals are placed in appropriate work settings.

**Satisfaction:** Percentage employed who are satisfied with their jobs. **Goal: 95%**  
Annual Results: HCBS-SLS – **94%** HCBS-DD – **93.75%**  
Data Source: Family Satisfaction Surveys  
Management Plan: The goal of 95% satisfaction was not met. Monitoring takes place at regular intervals throughout the year to identify any areas of potential dissatisfaction. To gain more in-depth knowledge of an individual's satisfaction with work, SE staff has added space for guardian feedback (when applicable) on the survey. Waiver funds have been utilized to immediately assist individuals interested in changing jobs in an effort to find them additional and/or different employment while Division of Vocational Rehabilitation is determining eligibility.

**Efficiency:** Percentage of utilization of Supported Employment hours on an annual basis. **Goal: 85%**  
Annual Results: HCBS-SLS – **77 %** HCBS-DD – **73%**  
Data Source: Utilization Reports  
Management Plan: Goal was not met. SE Coordinator will conduct monthly utilization reviews and provide unit adjustments as necessary to meet 85% utilization goal.

### **Community Integration**

**Access:** Percentage of utilization of integrated activity hours on an annual basis. **Goal: 85%**  
Annual Results: HCBS-SLS – **72%** HCBS-DD – **84%**  
Data Source: Utilization Reports  
Management Plan: During FY 19, the utilization for HCBS-DD was very close to making the goal. Supervisors will be attentive to and responsive when individuals in the HCBS-DD waiver request more community time by revising their plans in a timely manner. The goal set for HCBS-SLS was not met. The utilization is monitored monthly to insure the individuals are given choices and the ability to access the community. Individuals in HCBS-SLS often have other services available to them and their attendance can be more variable. Supervisory staff will work with individuals and their families in HCBS-SLS to better outline their anticipated utilization for the Service Plan year.

**Effectiveness:** Percentage of individuals involved in volunteering. **Goal: 50%**  
Annual Results: HCBS-SLS – **60.25%** HCBS-DD – **56.5%**  
Data Source: Attendance Records  
Management Plan: The goals that were set for the HCBS-DD and HCBS-SLS were met and exceeded. The new goal will be 60% for FY20. In each individual's Service Plan and regularly throughout each week, individuals are being given choices to participate in volunteer activities.

**Satisfaction:** Percentage of satisfied families with Integrated Activities. **Goal: 95%**  
Annual Results: HCBS-SLS – **97%** HCBS-DD – **89%**  
Data Source: Family Satisfaction Surveys

Management Plan: The goal for HCBS-SLS waiver was met. The goal for the HCBS-DD waiver was not met. Supervisors continue to listen to what individuals and their families are asking for and work to provide the opportunities they want in terms of community access and specialized habilitation opportunities. Choices are provided daily, when possible, to insure that individuals feel like they are being heard. PSCS staff will continue to complete quarterly check-ins with individuals and guardians to make sure concerns are being addressed.

**Efficiency:** Percentage of programmatic paperwork turned in on time. **Goal: 95%**

Annual Results: HCBS-SLS – **75.5%** HCBS-DD – **82.75%**

Data Source: Paperwork Tracking

Management Plan: The programmatic paperwork turned in on time goal was not met for HCBS-SLS and HCBS-DD. During the past year, some of the supervisory staff changed and there has been a focus on training the new staff in the completion of programmatic paperwork duties and assuring timelines are met. The goal of 95% will remain in place for FY20.

### **Respite Services (Adult Care Services - ACS)**

**Access:** Increase access by providing respite services to at least **7 new individuals/families served** during the year.

Annual Results: **6 new individuals/families served**

Data Source: ACS Tracking

Management Plan: The goal was not met. During FY 19, ACS enrolled and began providing respite services for 6 new individuals and families. ACS will continue to work towards the goal of enrolling at least 7 new individuals and families to receive respite services from our program.

**Effectiveness:** Increase effectiveness and decrease the number of staff responsible for medication errors during the year. **Goal: 3 or less** Goal Change for FY20: 5 or less

Annual Results: **10 staff**

Data Source: Incident Report Tracking

Management Plan: The goal was not met. Efforts to meet this goal have included steps: Following the “medication check in” process upon their arrival while the family or host home provider are still present; Color coding medication times on administration records and ensuring orders are clear for staff; Receiving the most recent updates regarding any changes or additions to medications prior to the individual’s stay with ACS; Obtaining copies of medication administration records from host home providers to review with staff prior to the individual’s stay; Utilization of a white board to show med times for each day; and, Developing activity lists for each day which include reminders for medication times. The Support Services Director and ACS Assistant Supervisor will continue to work with staff to increase awareness and diligence to decrease the number of medication errors in which ACS staff are responsible. For the next reporting period, ACS will strive to decrease the number of staff responsible medication errors to 5 or lower.

**Satisfaction:** Percentage of satisfied families with respite services. **Goal: 98%**

**Annual Results: 99%**

Data Source: Family Satisfaction Survey

Management Plan: This goal was met and ACS will continue to strive to maintain 98% or higher satisfaction rate during the next reporting period.

**Efficiency:** Number of hours of respite services provided during the year. **Goal: 17000 for FY19** Goal change for FY20: 13500

**Annual Results: 12766**

Data Source: ACS Tracking

Management Plan:

The goal to provide 17,000 hours of respite services during FY 19 was not met. During FY19, ACS continued to experience challenging staffing shortages. We have continued to work with the agency's Human Resources department to increase recruiting efforts, and we have changed to more online training options for staff who are unavailable at certain times due to school or other work commitments. The lack of available staff impacts the number of hours we are able to provide respite services at ACS.

For the upcoming FY 20, ACS will change the goal to providing at least 13,500 hours of respite services.