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**Program Evaluation**

**2024-2025**

*Horizons Unlimited of Palo Alto County, Inc.*



***Horizons Unlimited of Palo Alto County, Inc.***

*Mission: Providing opportunities for our Horizons family to develop their full potential in a positive atmosphere.*

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**Executive Director**

Carla Firkins



***Horizons Unlimited of Palo Alto, Inc.  
“Providing opportunities for our Horizons family to develop their full potential in a positive atmosphere.”***

## **History of Horizons Unlimited**

**1966:** The Palo Alto Association for Retarded Citizens began a program for Adults with disabilities.

**1968**: The program moved to the Palo Alto County Home where a few rooms were remodeled to allow the individuals to work on piecework for Pamline Manufacturing.

**1970:** The program moved to the "Open Door School" building on 16th Street in Emmetsburg. In this setting, the men worked on Pamline Contracts and woodworking while the women learned sewing and rug-making skills. The ladies packaged sample products for Style-Craft Furniture of Milford.

**1975**: A new building was constructed at King and Seventh Streets in Emmetsburg and the program was moved there. Ceramics and providing congregate meals to senior citizens were the main activities at this time.

**1982:** In July, the program almost doubled in size as Willing Workers merged with Project Learning, a program at Iowa Lakes Community College. On November 17, the name was officially changed to Horizons Unlimited of Palo Alto County, Inc.

**1983:** Horizons Unlimited received accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF)

**1985:** Horizons opened their first group home at 2201 21st Street, providing housing for eight individuals.

**1988:** In April, Horizons purchased a new building (3104 Main) which was remodeled to serve as our Can and Bottle Redemption Center.

**1990:** Horizons rented the former convent in West Bend to house five men in a Group Home setting. CARF gave full approval to Horizons with the highest accreditation renewal of three years. The Supported Employment Program was added to our service base.

**1991:** Horizons received a recycling grant from the DNR. The Recycling Center moved to the newly acquired building along Highway 4 South (3826 460th Avenue) in Emmetsburg. Two new group homes were built (1 5th & 19th Street) and occupied by April 1st.

**1993:** The INCH (Independent Community Housing) expanded to include clients living in privately rented apartments

**1994:** In April, the Recycling Center began receiving materials from the Kossuth and Pocahontas Counties, in addition to Palo Alto County. An expansion was necessary to accommodate the increased volume of recyclables; this was funded by a grant from the DNR.

**1996:** Horizons received a three-year certification from CARF. In July, Horizons completed an OSHA Safety and Health Consultation.

**1998:** Horizons became the first facility of its kind nationally to win OSHA's Voluntary Protection Program/Star Award.

**2000:** In December, Horizons received a no-interest loan from the DNR to be used for the expansion of the workshop area.

**2001:** In August, the construction of a 6,600 sq. ft. addition was completed. In September, Horizons was selected as the winner of the Iowa Recycling Association's 2001 Recycling Facility of the Year.

**2006:** In April, Horizons received a one-year accreditation from CARF.

**2007:** In May, Ronald C. Ludwig resigned after 19 years. In August, Eddie M. Hannagan is hired as the new CEO. In October, Horizons received a one-year accreditation (probationary).

**2008:** In October, Horizons received a 3-year accreditation from CARF

**2009:** In February, Horizons received a grant from the Palo Alto County Gaming and Development Commission, to be used for remodeling the workshop restrooms and Day Habilitation Program. In March, Horizons received a three-year accreditation from DIA. In April, the Day Habilitation Program opened at the Workshop. In August, Ron Askland accepted the CEO position. In November, Laurie Schneider accepted the CFO position.

**2011:** In October, Horizons received a three-year accreditation from CARF. Horizons received a grant from the DNR for a skid loader.

**2012:** Horizons received two grants from the Palo Alto County Gaming and Development Commission for a new van and new phone system. In October, Kathy Jackson accepted the new position of Job Placement Specialist.

**2013:** Horizons received two grants from the Palo Alto County Gaming Development Commission for new computers with system backup and new egress windows for the King Street Apartments. Horizons also received a new van courtesy of the Variety Club and Wild Rose Casino.

**2016:** Horizons closed the can redemption center and recycling programs. Horizons also sold the building and moved to 2107 Main Street.

**2016:** Horizons Unlimited started a community-based program, Day Hab Without Walls. This program is entirely based in the community. With the workshop now closed, Job Development has worked diligently to find jobs for members in the community.

**2020:** Received two grants from the Palo Alto County Gaming Development Commission for (3) dual driver, motor assisted bicycles and a new lawn mower. We also received a 3-year Accreditation from our CARF review in the fall. Ron Askland left as CEO in April. Carla Firkins was named Executive Director of the agency in September.

**2020 – 2021:** The Covid 19 epidemic caused many restrictions in our services. The Day Habilitation Program was placed on hold and is still on hold until restrictions are lifted. The group homes went on "lock down" for close to a year. Most restrictions have been lifted at this time. Vaccinations were offered to all members and staff. All staff worked diligently during our outbreak in November to ensure services to our members were continued, often at their own peril.

We recognize our "Heroes."

**2021:** Received a grant from the Palo Alto County Gaming Development Commission to reface the office building and replace the awning.

**2021 - 2022:** New floors and cabinets installed in office/med rooms in the group homes. 21st Street home also received new flooring throughout. Palmer Group Home had a new entry door installed. We received a 3-year accreditation with excellence from HCBS in June. All activities are now completely integrated into the community. Established a Community Foundation.

**2022 - 2023:** New floor installed, and all bathrooms received new bathroom vanities and floors at 15th and 19th Street Group Homes. New carpet was installed in all group home bedrooms if they were needed. 21st Street Residential Care Facility was transformed into a HCBS home on May 1st. Four new vehicles were purchased this year with 2 of them being paid for by ARPA grants. Windows at King Street and 3 member laptops were purchased with a PACGD grant. Sidewalks were repaired at 15th Street and Lawler and a new driveway at King Street with Care Connections grant money. Starting September 1st, we switched over to new documentation software and a new Med Support software on October 1st. Also, with the ARPA grant, new showers in the bathrooms at Lawler and King Street were replaced.

**2023 – 2024**: In November 2023 we received another 3-Year CARF Accreditation. 15th Street got new doors and windows, new carpet was installed in 3 members bedrooms and the entryway was painted. At 19th Street a new front door was installed, new flooring was installed in 3 members bedrooms and 1 members bedroom was painted. King Street windows are all now installed. 21st Street new carpet was installed in 4 member bedrooms; 3 members bedrooms and the back room were painted, and a new dishwasher was installed in February. 1 new vehicle was purchased this year for the 19th Street group home. All roofs that were needing to be replaced due to the hailstorm have been completed. In March we received a PACGD grant for new Low-E office windows that were more energy efficient and were installed in April and make a huge difference with noise and heat control. In April a new washing machine was installed at 15th Street, new flooring was installed at one Lawler apartment and new flooring was updated at 1 apartment at King Street. In May we received the $300k ARPA Grant and started the process for a new HCBS home by our current 15th Street location.

**2024-2025:** At 19th Street new windows and window coverings were installed and a cement pad was finished. At 21st Street new gutters were installed. At our Lawler apartments 3 member vanities and new cupboards were installed. The hallways at King Street Apartments were painted and 1 apartment was cleaned and remodeled for new member. The new HCBS home is finally finished and 4 members moved in on December 16th. We did receive a grant from Gordon Flesch which was used for new cupboards and countertop for 1 Lawler apartment. 15th Street got a new stove and a stand-up freezer. We did receive a grant from Authur & Audrey Smith Foundation which purchased 2 new grills for our members to use at their homes. In April 2025 we received a 3-Year HCBS Accreditation from our On-site Review. We did also receive a grant from PACGD for the purchase of a new vehicle for our new HCBS home.

**Demographics of Our Member Population**

We provided services to 46 individuals in the 2024-2025 fiscal year. We had 4 RCF members transfer to our new HCBS home, admitted 1 SCL member from living at home into one of our group homes, admitted another SCL member from living on their own to one of our apartment buildings, admitted a new member into one of our group homes and two discharges (both needed higher level of care). Our new admission was in the younger 18-39 age group.

Age breakdown:

|  |  |
| --- | --- |
| 18-39 years old | 12 members |
| 40-50 years old | 10 members |
| 51-60 years old | 7 members |
| 61-70 years old | 11 members |
| 71-80 years old | 6 members |
|  |  |

11 of our members are older than the retirement age of 62. This aging population provides challenges for our job support services as many members are no longer looking for employment. It also adds the extra challenge of assuring continued quality of life through meaningful activities and community involvement for the aging non-working members as well as meeting the increasing medical needs.

Racial makeup:

We have 44 white, one Native American, and one undefined. All have an Iowan background, most from Palo Alto County or the surrounding counties.

Types of Waiver Services: As of 6-19-24

33 members are on the Intellectual Disability Waiver

9 members are on the Habilitation (Mental Health) Waiver

2 members are Private Pay for their services

2 member receives County services

3 IVRS (Supported Employment only)

Trends:

Categories have remained stable this last year. We have noted an increase in applications for Habilitation services and requests for HCBS home settings and most inquiries require extensive psychiatric support which is not available in this area. Admittance to our group homes requires an Intellectual Disability Diagnosis, this limits our pool of candidates meeting our admission criteria for the group home vacancies. We have had an increase for IVRS services for supported employment this year.

# SATISFACTION SURVEYS

All categories of satisfaction surveys were done with manual methods again this year. Member surveys were completed with staff assistance. Staff surveys were delivered to staff by their managers and turned into Jess Haffner for confidentiality. Family/Guardian surveys were mailed with a self-addressed stamped envelope for return. Graphs on the next 15 pages will show Satisfaction Percentages from those surveys from Community Job Development, Employee, Job Placement, Residential and Member.

All members also completed a Quality-of-Life Assessment. These are reviewed in their annual staffing meeting to assure that individual needs are met.

**Total of Surveys Evaluated - 11**

**Comments: None**

**Total of Surveys Evaluated – 39**

**Comments:**

* My supervisor goes above and beyond for members and staff!
* I love it here 100%.
* My supervisor is the best!
* I can’t imagine working for a better supervisor!

**Total of Surveys Evaluated - 8**

**Comments: None**

**Total of Surveys Evaluated - 12**

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Comments:

* Excellent Care!
* This is the Best Place!
* My impression is very good overall for residential services for my family member.
* Maybe encourage members to participate in more games or activities so not so much time is spent on electronic devices.

**Total of Surveys Evaluated - 45**

**Comments: None**

Horizons Unlimited 2024-2025 Outcome Measurement System-Key Performance Indictors

**HCBS: SUPPORTED COMMUNITY LIVING (SCL)**

Outcomes:

1. Members receiving SCL supports maintain their independence and mental and physical health (Effectiveness measure)

2. SCL staff provide monthly budgeted units for members (Efficiency measure)

3. Members receiving SCL services receive daily living skills development necessary to live as independently as possible. (Access measure)

4. Members self-report they are satisfied with their services. (Satisfaction)

5. Billing will increase to build sustainability for SCL Services. (Business Function)

**Assessment: Was 22 members receiving SCL services , but switched to 21 members January 2025 as 1 moved to a group home.**

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| **Categories of Measures** | **Applied To** | **Data Collected by:** | **1st Quarter** | **2nd Quarter** | **3rd Quarter** | **4th Quarter** | **2025 Goal** | **2025 Results** | **2024 Actual** |
| 1. % of SCL members who didn’t require a hospital admission per quarter. Annual goal based on quarterly average. | All members receiving SCL services | QA Coordinator-  Monthly totals reported by quarter | **July** – 100%  **Aug –** 100%  **Sept –** 100%  ***Avg – 100%*** | **Oct –** 100%  **Nov –** 96%  **Dec –** 96%  ***Avg – 97%*** | **Jan –** 100%  **Feb –** 100%  **Mar –** 100%  ***Avg – 100%*** | **Apr –**%  **May –**%  **June** –%  ***Avg –%*** |  |  | **99.5%** |
| 2. SCL members receives 90% or more towards their monthly budgeted units - averaged monthly | All members receiving SCL services | QA Coordinator Executive Director-  Quarterly Average | **July -** 87% **Aug -** 82% **Sept** - 69%  ***Avg - 79%*** | **Oct -** 91% **Nov -** 55% **Dec -** 73%  ***Avg - 73%*** | **Jan -** 67% **Feb -** 60% **Mar** - 70%  ***Avg - 94%*** | **Apr** - % **May -** % **June -** %  ***Avg - %*** | **50%** |  | **66.5%**  Changed Process from 2023 |
| 3. % of members in SCL services who participate in daily skills development. Quarterly average/census  **22/21 members** | All members receiving SCL services | Leadership and QA teams. Reported monthly as average/census | **July –** 100%  **Aug** – 100%  **Sept** – 100%  ***Avg – 100%***  **# of members - 22** | **Oct –** 100%  **Nov –** 100%  **Dec –** 100%  ***Avg – 100%***  **# of members - 22** | **Jan –** 100%  **Feb** – 100%  **Mar** – 100%  ***Avg – 100%***  **# of members - 21** | **Apr –**%  **May –**%  **June** –%  ***Avg –%***  **# of members - 21** |  |  | **100%** |
| 4. % of members receiving SCL services who would rate their service as good or very good. | All members receiving SCL services | QA Coordinator Annually | **N/A** | **N/A** | **N/A** | **N/A** | **90%** | **95%** | **100%** |
| 5. MCO billing meets expenses reviewed monthly for quarterly averages. | All members receiving SCL services | QA Coordinator & CFO | **July -** Profit  **Aug** - Profit  **Sept -** Profit  ***Avg - Profit*** | **Oct -** Profit  **Nov –** Profit  **Dec -** Profit  ***Avg - Profit*** | **Jan -** Loss  **Feb** – Profit  **Mar -** Profit  ***Avg - Profit*** | **Apr -**  **May -**  **June -**  ***Avg -*** | **No Loss on Income Stmt** |  | **Profit Each Quarter** |

Horizons Unlimited 2024-2025 Outcome Measurement System-Key Performance Indicators

**HCBS: Community Employment Services: Job Placement (Development, Training and Support)**

Outcomes:

1. The number of members working in integrated competitive employment increases annually (Effectiveness measure)

2. SE staff provides monthly budgeted units for members. (Efficiency measure)

3. The number of new job placements increases annually. (Access measure)

4. Members receiving job services self-report they are satisfied with their services. (Satisfaction)

5. Billing will increase to build sustainability for Job Placement services. (Business Function)

**Assessment: Will continue current plan next year.**

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| **Categories of Measures** | **Applied To** | **Data Collected by:** | **1st Quarter** | **2nd Quarter** | **3rd Quarter** | **4th Quarter** | **2025 Goal** | **2025 Actual** | **2024 Actual** |
| 1. All members receiving community employment services | All members working competitively and receiving ongoing supports. | Job Development Coordinator and Executive Director | **July** - 25 **Aug** – 25  **Sept** - 24  ***Avg - 25*** | **Oct** – 26  **Nov** – 25  **Dec** - 26  ***Avg - 26*** | **Jan** – 26  **Feb** - 25 **Mar** - 25  ***Avg - 26*** | **Apr** –  **May** –  **June** -  ***Avg -*** | **Increase by one member per quarter** |  | **On Average 23 – Goal was met** |
| 2. SE team meets their monthly budgeted units | All members receiving Employment services | QA Coordinator and Executive Director | **July** – 100% **Aug** – 87%  **Sept** – 100%  ***Avg – 96%*** | **Oct** – 100%  **Nov** – 100%  **Dec** – 100%  ***Avg – 100%*** | **Jan** – 96%  **Feb** – 96% **Mar** - 100%  ***Avg - 98%*** | **Apr** –%  **May** –%  **June** - %  ***Avg –%*** |  |  | **97%** |
| 3. The number of new job placements/quarter for an annual total | All members receiving Employment services | Job Development Coordinator and Executive Director | **July** - 1 **Aug** - 0 **Sept** - 0  ***Total - 1*** | **Oct** – 1  **Nov** - 1 **Dec** - 1  ***Total - 3*** | **Jan** - 3 **Feb** - 1 **Mar** - 0  ***Total - 4*** | **Apr** - 1 **May** - 2 **June** - 1  **Total - 4** | **Increase by one per quarter** |  | **Goal is met on average** |
| 4. % of members receiving job services who would rate their service as good or very good. | All members receiving Employment services | QA Coordinator Annually | **N/A** | **N/A** | **N/A** | **N/A** | **90%** | **100%** | **85%** |
| 5. MCO billing meets expenses reviewed monthly for quarterly averages. | All members receiving SCL services | QA Coordinator & CFO | **July -** Profit  **Aug** -Loss  **Sept -** Profit  ***Avg - Profit*** | **Oct -** Profit  **Nov -** Profit  **Dec -** Profit  ***Avg - Profit*** | **Jan -** Loss  **Feb** – Profit  **Mar -** Profit  ***Avg - Profit*** | **Apr -**  **May -**  **June -**  ***Avg -*** | **No Loss on Income Stmt** |  | **Loss each Quarter** |

Horizons Unlimited 2024-2025 Outcome Measurement System-Key Performance Indicators

**HCBS: RCF Group Homes**

Outcomes:

1. Members receiving RCF supports maintain their independence and mental and physical health (Effectiveness measure)

2. RCF staff meet monthly budgeted daily units for members (Efficiency measure)

3. Members receiving RCF services receive the daily living skills development that allows them to live as independently as possible. (Access measure)

4. Members self-report they are satisfied with their services. (Satisfaction)

5. Billing will increase to build sustainability for RCF Services. (Business Function)

**Assessment: 4 RCF Members moved to the new HCBS home December 2024**

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|  |  |  |  |  |  |  |  |  |  |
| **Categories of Measures** | **Applied To** | **Data Collected by:** | **1st Quarter** | **2nd Quarter** | **3rd Quarter** | **4th Quarter** | **2025 Goal** | **2025 Actual** | **2024 actual** |
| 1. % of RCF members who didn’t require a hospital admission per quarter. Annual goal based on quarterly average. | All members receiving RCF services | QA Coordinator-Monthly totals reported by quarter | **July** -100% **Aug** - 100% **Sept** - 100%  ***Avg - 100%*** | **Oct** - 100% **Nov** - 100% **Dec** -100%  ***Avg - 100%*** | **Jan** - 100% **Feb** - 100% **Mar** - 93%  ***Avg - 98%*** | **Apr** - % **May** - % **June** – %  **Avg - %** |  |  | **100%** |
| 2. RCF teams maintains 100% occupancy rate average over group homes based on quarterly averages.  **16 is base occupancy** | All members receiving RCF services | QA coordinator Executive Director Quarterly Average | **July** – 16=100%  **Aug** – 16=100%  **Sept** – 16=100%  ***Avg – 100%***  ***# of members - 16*** | **Oct** – 16=100%  **Nov** – 16=100%  **Dec –** 12=75%  ***Avg – 92%***  ***# of members – 16/12*** | **Jan** – 13=82%  **Feb** – 13=82%  **Mar** – 14=88%  ***Avg - 84%***  ***# of members – 13/14*** | **Apr** –%  **May** –%  **June –** %  ***Avg – 100%***  ***# of members - 14*** |  |  | **99.5%** |
| 3. % of members in RCF services receiving daily skills development. Quarterly average/census | All members receiving RCF services | Leadership and QA teams | **July** – 100%  **Aug** – 100%  **Sept** – 100%  ***Avg – 100%*** | **Oct** – 100%  **Nov** – 100%  **Dec** – 100%  ***Avg – 100%*** | **Jan** – 100%  **Feb** – 100%  **Mar**- 100%  ***Avg – 100%*** | **Apr** –%  **May** –%  **June** –%  ***Avg –%*** |  |  | **100%** |
| 4. % of members receiving RCF services who would rate their service as good or very good. | All members receiving RCF services | QA coordinator Annually | **N/A** | **N/A** | **N/A** | **N/A** |  |  | **100%** |
| 5. MCO billing meets expenses reviewed monthly for quarterly averages. | All members receiving SCL services | QA Coordinator & CFO | **July -** Loss  **Aug** - Loss  **Sept -** Profit  ***Avg - Loss*** | **Oct -** Profit  **Nov -** Profit  **Dec -** Profit  ***Avg - Profit*** | **Jan -** Loss  **Feb** – Profit  **Mar -** Profit  ***Avg - Profit*** | **April -**  **May -**  **June -**  ***Avg -*** |  |  | **Overall Profit on Average** |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Horizons Unlimited 2024-2025 Outcome Measurement System-Key Performance Indicators  HCBS: **HCBS** Homes  Outcomes:  1. Members receiving HCBS supports maintain their independence and mental and physical health (Effectiveness measure)  2. HCBS staff meet monthly budgeted daily units for members (Efficiency measure)  3. Members receiving HCBS services receive the daily living skills development that allows them to live as independently as possible. (Access measure)  4. Members self-report they are satisfied with their services. (Satisfaction)  5. Billing will increase to build sustainability for HCBS Services. (Business Function)  **Assessment: Added a new 4-bedroom HCBS home in December 2024 when members moved in.**   |  | | --- | |  | |  |  |  |  |  |  |  |  |  |
| **Categories of Measures** | **Applied To** | **Data Collected by:** | **1st Quarter** | **2nd Quarter** | **3rd Quarter** | **4th Quarter** | **2025 Goal** | **2025 Actual** | **2024 actual** |
| 1. % of HCBS members who didn’t require a hospital admission per quarter. Annual goal based on quarterly average. | All members receiving HCBS services | QA Coordinator- totals reported quarterly | **July** - 100% **Aug** - 100% **Sept** - 100%  ***Avg - 100%*** | **Oct** - 100% **Nov** - 100% **Dec** - 100%  ***Avg - 100%*** | **Jan** - 100% **Feb** - 100% **Mar** - 100%  ***Avg - 100%*** | **Apr** - % **May** -% **June** –%  ***Avg –%*** |  |  | **100%** |
| 2. HCBS teams maintain 100% occupancy rate average over group homes based on quarterly averages.  **5 was maximum occupancy & 9 is base occupancy as of 12/2024** | All members receiving HCBS services | QA coordinator Executive Director Quarterly Average | **July** -4=80% **Aug** -4=80% **Sept** -4=80%  ***Avg - 80%***  **# of members - 4** | **Oct** – 4=80% **Nov** - 4=80% **Dec** – 8=89%  ***Avg - 83%***  **# of members – 4/8** | **Jan** – 8=89% **Feb** – 9=100% **Mar** – 9=100%  ***Avg - 100%***  **# of members – 8/9** | **Apr** –% **May** –% **June** –%  ***Avg –%***  **# of members - 8** |  |  | **100%** |
| 3. % of members in HCBS services receiving daily skills development. Quarterly average/census | All members receiving HCBS services | Leadership and QA teams | **July** - 100% **Aug** - 100% **Sept** - 100%  ***Avg - 100%*** | **Oct** - 100% **Nov** - 100% **Dec** - 100%  ***Avg - 100%*** | **Jan** - 100% **Feb** - 100% **Mar** - 100%  ***Avg - 100%*** | **Apr** –% **May** - % **June** –%  ***Avg –%*** |  |  | **100%** |
| 4. % of members receiving HCBS services who would rate their service as good or very good. | All members receiving HCBS services | QA coordinator Annually | **N/A** | **N/A** | **N/A** | **N/A** |  |  | **80% - as 1 member not able to answer** |
| 5. MCO billing meets expenses reviewed monthly for quarterly averages. | All members receiving HCBS services | QA Coordinator & CFO | **July -** Profit  **Aug** -Loss  **Sept -** Profit  ***Avg - Profit*** | **Oct -** Profit  **Nov -** Profit  **Dec -** Loss  ***Avg - Profit*** | **Jan -** Loss  **Feb** – Profit  **Mar -** Profit  ***Avg - Profit*** | **April -**  **May -**  **June -**  ***Avg -*** | **No Loss on Income Stmt** |  | **Profit Each Quarter** |

**2024-2025 Quality Improvement Plans**

**#1 Need for HCBS homes**

Specific and Measurable Goal: Turn the 3 RCF Group homes into HCBS homes with 4-5 members in each home and purchase 2-3 homes to house the rest of the HCBS members.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **QA Issue** | **Date Implemented** | **Person Responsible** | **Steps and Progress** | **Date Completed** |
| Develop a quality improvement team for this goal | 7-17-20 | Janell Lindell  Carla Firkins | Team consists of members of the leadership team and residential managers | 8-12-20 |
| Contact HUD for requirements | 7-17-20 | Janell Lindell  Carla Firkins | We are authorized for 16 slots. They have no requirement if we divide into smaller homes | 11-1-20 |
| Contact HCBS for requirements | 7-17-20 | Janell Lindell  Carla Firkins | No special requirements or licenses needed | 11-1-20 |
| Contact Realtors for appropriate homes in the area | 7-17-20 | Janell Lindell  Carla Firkins | 1-14-21 Continues. Realtors aware of our price range and requirements  12-30-22 Continues. | On-going |
| Board decision on merger | 8-12-20 | Janell Lindell  Carla Firkins | No merger.  12-20-Need home that costs 150,00 or less | 10-5-20 |
| Check with DIA on regulations for changing type of service |  | Deb Hughes | We can leave RCF status anytime we fall below 5 members and change to HCBS or HAB home. DIA just requires notification. | 10-13-20 |

**4-8-21** Plan on hold. No houses seen in proper price range. Not actively looking at this time.

**7-13-21** Plan on hold. Continue to look for homes in the area that would meet our needs and financial situation.

**10-7-21** Still watching for appropriate homes. May be able to change a group home into a 5 bed HCBS home due to attrition of members.

**1-21-22** Continues on hold. 21st Street group home down to 6 members. Staffing issues are now our biggest concern. We are having problems hiring new staff to replace those retiring. A home would require additional staff.

**4-8-22** Housing market remains tight with no appropriate houses seen this quarter. Staffing issues for expansion also remain an issue. Will continue to look for appropriate homes and address staffing if we find a home. Also looking at turning group homes into HCBS homes if we are unable to find members to keep census up.

**7-28-22** Continue with same problems. No appropriate houses have been seen on the market. Staffing continues to be an issue. Census has remained stable at the group homes, but several members are close to needing a higher level of care.

**10-13-22** Continue with same barriers-no suitable homes available and staff shortage. 30-day notice given to a member at 19th Group Home. Plan to invite a member of 21st group home to move there when room is vacated. Then we would begin proceedings to make 21st Street group home into an HCBS home.

**12-30-22** Member that was given her 30-day notice is staying at 19th street. Member is also being discharged from 19th street due to needing a higher level of care and she has been in the hospital since 12/16/22. She will be moving to Lakeside Lutheran Home in Emmetsburg. There is now another opening at 19th street, the one person who could move from 21st street does not want to move. So, we are looking for a female referral to fill that bed. Did have a referral that we are looking into. Still continue to try and make 21st street our first HCBS home. Continue to work on staffing, looking for suitable houses to buy and continues to review referrals.

**1-1-23 to 3-31-23** Member was given a 30 day notice again and she moved out to another facility on March 6th, 2023. Another member plans on moving from 21st street to 19th street. This will make 21st Street suitable for an HCBS home with the number of members. Carla to be in contact with our HCBS specialist for further details. She will also contact DIA. Plans are moving forward.

**4-1-23 to 6-30-23** On May 1st, 21st Street group home became an HCBS home.

**7-1-23 to 7-31-23** Accessibility Plan 2023 created. Managers met with CEO to review on July 19th. Continue to seek for contractor to install windows and doors with grant money. Discussed limited houses to purchase or sites to build with ARPA grant money.

**8-1-23 to 8-31-23** Discussed building or buy with ARPA money, possibly sell 16 HUD slots and be full HCBS services. One contractor has agreed to replace windows for one group home and will consider doing another group home next year. Another contractor has agreed to replace the doors on two group homes.

**9-1-23 to 9-30-23** Plan in place to replace windows and doors before winter at 15th Street, look into new window shades, and replacing roof due to hail damage. Next season, planning to do the same for 19th Street group home. King St-next season planning to replace windows and roof, and currently working on repairing showers. Lawler apartments, the garage roof will be replaced. 21st wants paint updated for the front and back room.

**10-1-23** **to 12-31-23** ARPA grant update: plan to build on property donated by a community member, will contact Green Acres Homes and Buhrow Construction. To qualify GH can only have 4 or less people living there within the next 2 years, otherwise it is considered congregated living. 15th Street new doors and windows were installed. 19th St new front door installed. King St showers all installed and windows to be delivered. Started roofs at 15th and 19th Street GHs-roofs dip in same location-contractor aware. Possibly receive ARPA grant to purchase or build home(s). HUD contract renewed to 2031.

**1-1-24 to 3-31-24** Plan in place to install new vanities at Lawler apartments that was approved by the board. Waiting to hear back about the supposed lien regarding receiving the $300k ARPA Grant. We weren’t approved for the $150k PACGD Grant. 15th Street new carpet was installed in 3 members bedrooms and the entryway was painted. 19th Street new flooring was installed in 3 members bedrooms and 1 members bedroom was painted. 21st Street new carpet was installed in 4 members bedrooms; 3 members bedrooms and the back room were painted, and a new dishwasher was installed in February.

**4-1-24 to 6-30-24** New member washing machine was installed at 15th Street. New flooring was installed at one Lawler apartment. New flooring was updated at 1 apartment at our King Street location. We received the $300k ARPA Grant and started the process for new HCBS home by our current 15th Street location. Cement has been poured so we are waiting for that to cure before proceeding.

**2024-2025 Quality Improvement Plans**

**#7 Staff recruitment and Retention**

Problem: Dwindling staff numbers. Few apply for openings. Fewer will come for interviews. Nationwide and local manpower shortage has been noted for last year.

Specific and Measurable Goal: Staffing levels will remain stable with any staff members leaving being replaced within 30 days.

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| **QA Issue** | **Date Implemented** | **Person Responsible** | **Steps and Progress** | **Date Completed** |
| Develop a quality improvement team for this goal | 7-13-21 | Janell Lindell  Carla Firkins | Team consists of members of the leadership team and residential managers | Ongoing |
| Explore all avenues of advertising to attract staff | 6-28-21 | Leadership Team | 7-13-21 Utilizing Facebook, newspaper, and Iowa Workforce. | Ongoing |
| Raise starting salary for DSP and corresponding rate increase for current staff | 6-28-21 |  | Board discussions & approval each year on raises & starting wages | Ongoing |
| Possible further wage increases when MCO rate increases in effect | 7-13-21 | Leadership Team | Staff Bonus in December - $100 each staff – Continues every year for Christmas | Ongoing |

**6-28-21** Board approved raising the hiring rate to $11.00/hr. All staff received a $.75 raise.

**10-7-21** Staffing is at full strength at the end of the 3rd quarter. We continue to look at any applications for suitable staff. Plan bonuses at the end of the year.

**1-21-22** 4th Quarter 2021- Year End appreciation bonus given to all staff based on years of service. Base rate of pay for hiring raised to $12.00/hour.

**4-8-22** Awaiting ARPA grant determinations for wage increases and/or bonuses. ED will begin attending team meetings for each site once a quarter.

**7-1-22** Starting wage Increased to $13.00

**7-28-22** Received ARPA bonuses in April. Inservice for direct care staff by Brenda Clark on “Stress and Body Language” was held in July. Managers are adjusting staff schedules to accommodate staff requests and better meet the staff needs while still assuring member needs are met.

**10-13-22** Inservice by Brenda Hamilton Clark was held in July. DSP appreciation week was held in September. Staff were presented with Tee-shirts and other gifts. A picnic was held in their honor. Drawings were held on Friday of that week for monetary gift cards and a free day of PTO. We currently need 2 full-time staff at 19th Street Home and a part-time job coach. Projected loss of a part-time employee at 19th Street home in this next quarter due to a move. A new nurse has been hired to replace the current Nurse/QA/Compliance who is retiring. She will begin 10-24-22.

**12-30-22** Full-time DSP that was planning on resigning was moved to an SCL position in June/July. Hired at full-time DSP at 19th Street. Still needing a full-time DSP at 19th Street and a part-time job coach. There is a $500 sign on bonus for referrals. We did have applicants from Indeed but none of them showed up for the interview they set up. We have taken applications off Indeed and the local newspaper. Now it is just on Facebook, Iowa Workforce and our local Roll-up. Carla is starting Above and Beyond recognition and will hand out gift cards. Continuing to work on wages, hiring, etc. In December, gave a $100 Christmas bonus, approved by the board.

**1-1-23 to 3-31-23** Hired part-time job coach and part-time DSP at 15th Street. There are still two part-time DSP openings at 15th and 19th Street. Have not received any recent applications. Continuing to look at increasing wages as allows.

**4-1-23 to 6-30-23** 1 full-time and 2 part-time DSP positions open, 1 potential SCL position, depending on recruitment. Positions currently on Iowa Workforce, posted on Facebook (we encourage staff to “share”), advertised on local cable channel, posted in front office window, HR at ILCC contacted to see about college students and word of mouth. We are having weekly DSP appreciation drawings for a gift card to a random staff member.

**7-1-23 to 9-1-23** Board approved a $2.50 cost of living raise starting July 1st and the minimum wage has been increased to $15. Discussed openings and hours needed covered, how managers provide flexibility to the best of their abilities and where job postings are. DSP week celebrated; staff gave positive feedback. PTO donation from one staff to another was approved. The majority of staff gave good feedback on our pay raise in July. Negative feedback is overnight staff did not get the same pay raise amount by taking overnight shift differential away from the increase. Suggestion made to include Wellness Center discount with full-time benefits.

**10-1-23 to 10-31-23** Open positions currently advertised on Horizons Unlimited website, Workforce, Facebook, the local cable channel, flyers posted around town and in the front office window, Indeed and by word of mouth. Discussed regulations of hiring people without a high school diploma as a high school diploma or GED is required to work with people on HAB waivers, otherwise without either can work with HCBS funded people. Possible considerations in the future to implement what other organizations do (such as 24-hour weekends with a decrease in pay for “sleep hours,” hourly incentive if 100% attendance in a month, rolling calendar with a bonus for limited call-ins). Managers’ report not many people call in or are absent to move forward with these incentives.

**11-30-23** Recruitment and retention efforts remain the same. Full-time SCL coordinator hired and prior SCL Coordinator is training now.

**12-31-23** Three applications turned in, 2 interviewed and one hired. Managers are adjusting staff schedules to accommodate staff requests and better meet the staff needs while still assuring member needs are met. Some weekend hours have been decreased where possible.

**1-1-24 to 3-31-24** Full time SCL Coordinator now trained, so prior SCL Coordinator is now part-time SCL staff and both staff plan to manage all SCL members and provide all their services. 1 Applicant that was interviewed in December was hired. All DSP positions are now filled so we are fully staffed so staff recruitment is resolved for now.

**4-1-24 to 6-30-24** All DSP positions are still filled as of April. Open QA Coordinator position has been filled with staff already working for the agency. Staff member weekly drawings for gift cards continue. As of May 31st, there are now 2 DSP positions open. 6 Applications were turned in, 3 interviewed and 2 hired. As of June 30th, all DSP positions have been filled.

**2024-2025 Quality Improvement Plan**

**#9 New SETWorks Documentation Program**

Problem Identified: June 2023 – Documentation will be switching systems to SETWorks and training will need to be done for all staff for correct documentation and reporting.

Specific and Measurable: Program training for managers is to be fully implemented by September 1st. The new system fully implemented September 2023 and staff fully trained.

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| QA Steps | Date Implemented | Person Responsible | Progress | Date Completed |
| Develop a quality improvement team for this goal and training for the new program | 6/1/2023 | Carla Firkins  Residential Managers | Completed | 8/1/23 |
| Identify areas of issues with SETWorks for documentation and reporting completeness. | 7/1/2023 | Carla Firkins  Residential Managers | Still having some reporting issues. - Ongoing |  |
| Staff mandatory training on proper procedure for documenting | 8/29/23 | Holly Carter  Residential Managers | SETWorks was LIVE for all staff to use instead of EDocs | 9/5/23 |
| Staff training on log auditing | 2/1/24 | Residential Managers | Completed | 4/1/24 |
| QA will continue to do weekly audits and inform residential managers. | 9/1/23 | Julia Rust now Jessica Haffner | As of 4/15/24 still emailing managers weekly with issues - Ongoing |  |

**6-1-23 to 7-31-23** Transitioning from EDocs to SETWorks for our documentation program by next quarter and monitor from there. Holly will train managers on the new program.

**8-1-23 to 11-30-23** Holly will train all staff on the process of documentation and then each manager will work on more training with their staff. The goal is to be fully implemented and using SETWorks fully by September 5th.

**12-1-23 to 12-31-23** SetWorks is fully implemented. Staff continue to learn and grow during the transition. Areas to improve on are log audits, when, what and why to type in for narrative box, quality assurance for billing reasons and how to get activity records done within a five-day window. QA Coordinator continues to monitor missing activity records for people in daily services. No billing submitted until all activity records support the billing. We encourage staff to complete all their documentation within 24 hours rather than at the end of the shift. We continue to track all late documentation monthly and a copy is sent to managers. Compliance continues to improve.

**1-31-24 to 3-31-24** Sites log audit review- Plan in place to train log auditors how to continue their role and QA learning how to run a report to see how well they are doing to reach our monthly 90% agency goal of log auditing completion. Activity records completed, and minimal reminders sent for adding detail (such as if someone left or returned to their home) to ensure times entries were not missing or needed. Positive feedback from managers and their staff for documenting.

**4-1-24 to 6-30-24** QA still continues to monitor daily activity records weekly and emails any issues to the managers to be fixed by the end of that same week. Log auditors have now all been trained, and we have exceeded our agency goal by reaching 97% for log auditing completion for April. May was a little rough for log auditing at 71% due to new manager transition and medical leaves. June increased to 87% for log auditing but there were some issues due to errors with billing/auditing to not quite hit our 90% agency goal.