



Quality Assurance Report
June 1, 2008 – June 30, 2009

Agency Report

QA Table of Contents

In order to determine the quality of its services, Krysilis compiles data each year that measures the effectiveness and efficiency of its services, service accessibility, and stakeholder satisfaction.

Effectiveness Outcomes

Efficiency Outcomes

I. Access Outcomes

II. Stakeholder Input/Satisfaction

III. Demographic Information

IV. Organizational Planning for Krysilis

*** Please Note: This report only reflects data from the Clarion and Forest City Areas. Nevada did not provide adequate data for this report.**

EFFECTIVENESS OUTCOMES

1. To engage employees through orientation, internal trainings, and communication.

- Krysilis continues to provide orientation training to new employees and to those changing service locations. Each service area continues to offer a yearly calendar of mandatory in-service trainings for all staff. Krysilis sends out 3 external newsletters per year (Krys Konnections), and a minimum of 4 internal newsletters (Krys Kronicles) per year. By offering better training opportunities and increasing communication with its employees, Krysilis hopes to see its employee retention increase and our turnover rate decrease.

- **GOAL: *80% of new employees will complete the Residential Attendant orientation training within 12 months of their hire date. 10% of eligible employees will complete the Certified Medication Aide (CMA) certification training.***

The Forest City service area was the only data received for this outcome. In Forest City, 15 employees completed the RA program and 0 completed CMA course.

Insufficient data to determine outcome.

- **GOAL: *Employee turnover rate will not exceed 35% (Applies to full-time employees)***
As of June 2009, Krysilis employed 279 full-time staff. Of those, 77 have one year or less experience with Krysilis, being hired within the last year. 113 full-time staff were hired during the year, with 36 terminations occurring during that time period.

77 Position turning over during this year equates to 28%. However, with 113 hires during that time frame equaling 40.5%, it shows that depending on how this goal is calculated will determine if the Outcome is Met or Not Met.

2. To increase/maintain outcome attainment during the year of persons supported.

- The intent of this outcome is to measure the effectiveness of Krysilis' services provided to the people supported. Each person served participates in developing his or her own Individual Service Plan (ISP) that clearly identifies the outcomes they would like to achieve to meet their personal needs, desires, and preferences. This outcome was applied to all persons supported through Vocational Services, Waiver Residential Services, and the Waiver Day Habilitation Services. The data that was measured to determine effectiveness was a comparison of the total number of outcomes set in each person's ISP compared to how many of those outcomes were met. The results are based on a final outcome attainment percentage for all persons served in each service area.

GOAL DATA: (Target goal expectancy = 85%)

- Pre-vocational/Non-Waiver Work Services: **69%** (Wright County/Forest City)
- Day Habilitation Services: **91%** (Wright County)
- Residential Supported Community Living (SCL) Services: **85%** (Wright County/Forest City)
- School-to Work Transition Services: **100%** (Wright County)
- Supported Employment Services: **60%** (Wright County, with only 3 people in program)

- **Goal Met for 3 of 5 services measured.** It is recommended by the team that each service closely analyze monthly data to ensure accurate reporting, set goals that are attainable within a 12 month period, and to better identify which service plans may need

addendums made in an effort to increase outcome attainment. One service area reduced the number of goals to make the overall plan more attainable.

3. To reduce the number of restrictive measures used.

- This outcome applies to services provided in Intermediate Care Facilities for the Mentally Retarded (ICF/MR). By teaching people better coping skills and providing less restrictive alternatives, Krysilis hopes to see the necessary number of restrictive measures reduced and replaced with more proactive approaches to protect an individual's health and safety. Outcome results are based on a monthly average of reductions for the reporting period for all persons served in each service area.

GOAL DATA: *(Target goal expectancy 15% for Belmond homes; 5% for Clarion homes; 5% for Nevada area; 15% for Forest City area)*

- Belmond Homes: 4% - Goal NOT MET
- Clarion Homes: 4% - Goal NOT MET
- Forest City Homes: 15% - Goal MET

Restrictions are reduced each year based upon individual needs. It becomes more difficult to reduce restrictions further if the Interdisciplinary Team feels it may jeopardize a person's health or safety.

4. To provide opportunities to access the community.

- This outcome was applied to the Day Habilitation Service, ICF/MR, and Waiver SCL Residential Services. The intent of this outcome is to measure the total number of community-based training opportunities that are offered to the persons supported by Krysilis to teach them how to access and participate more in the community.

GOAL DATA: *Day Hab – a yearly average of 12 opportunities per person.*
SCL – a yearly average of 12 opportunities per person.
ICF/MR – yearly average of 10 opportunities per person.

- Day Habilitation Service: This program served 28 people (in Wright County service area).
 - *Average number of opportunities per person: 99 (average) GOAL MET*
 - *Lowest #: 4; Highest #: 325 (People that did not meet the overall goal did not receive services for entire year.)*
- Residential Supported Community Living Service: This program served 37 people (in Wright County and Forest City service areas)
 - *Average number of opportunities per person: 459 (average) GOAL MET*
 - *Lowest #: 4; Highest #: 560 (One person didn't meet the goal.)*
- ICFs/MR: This program served 66 people (in Forest City and Wright County service areas).
 - *Average number of opportunities per person: 141 (average) GOAL MET*
 - *Lowest #: 11 Highest # 224 (Each person met the overall goal.)*

5. To reduce the number of medication errors.

- This outcome was applied to Work Services, Day Habilitation, SCL Waiver Residential services, and ICF/MR services. The intent of this outcome is to provide healthy and safe medication administration services to those supported by Krysilis.

GOAL DATA: *Target Goal: Less than 25 errors (Waiver), Less than 50 (ICF/MR)*

Total # of Medication Errors WAIVER services: 19

Total # of Medication Errors ICFs/MR: 64

GOAL MET in Waiver Services, GOAL NOT MET in ICF/MR Services

Please Note: No errors resulted in adverse effects for the person supported by the agency.

EFFICIENCY OUTCOMES

1. Maintain administrative costs in support of services.

- The Agency set a goal of maintaining FY08 administrative costs at 18% or less. Krysilis exceeded this goal by maintaining the administrative costs at 9%. (Allowable maximums shall not exceed 18%-ICF/MR, and 20%-Waiver services)

OUTCOME MET

HOW KRYSILIS SPENDS EACH DOLLAR:

- Staff Wages 66%
- Staff Benefits 15%
- Purchased Services 4%
- Occupancy 7%
- Food & Supplies 4.5%
- Transportation 1.5%
- Equipment & Repairs 1.25%
- Interest Expense 0.5%
- Miscellaneous 0.25%

2. To increase the knowledge base of Krysilis employees.

- The intent of this outcome was to measure and improve the number of educational opportunities accessed outside the agency by Krysilis staff.

GOAL DATA: *The Target Goal for this outcome is to provide 3 training opportunities per year/per department. The departments to which this outcome was applied: Vocational program staff, Residential program staff (SCL&ICF/MR), Personal and Community Support program staff, and Administrative staff.*

OUTCOME RESULTS:

- Vocational: 0 – Direct Support Staff 4 – Supervisory Staff 2- Admin/Indirect Staff
 - Residential: 7 – Direct Support Staff 24 - Supervisory 9 – Admin/Indirect. Staff
 - Personal and Community Supports: 1 – Direct Support Staff 4– Supervisory Staff
6 – Admin/Indirect Staff
 - Indirect (Does not provide service): 0 – Supervisory Staff
22 – Admin/Indirect Staff

Goal MET for all departments.

ACCESS OUTCOMES

1. Identify the barriers of providing service.

- The intent of this outcome is to identify Krysilis' service barriers and measure the number of referrals that were not accepted due to various barriers. By identifying barriers to service, Krysilis can become more aware of the needs it is unable to support and what actions the organization needs to take to help meet these needs.

GOAL DATA: *(Krysilis will accept 30% of total referrals received – No openings N/A)*

- 83 new referrals for services received.

- Summary of the referrals:

ICF/MR Services –68
Facility Worksite Assessment – 0
Supported Employment Services – 0
Prevocational/Work Services - 8
School Transition Services – 0
SCL/Respite Children – 2
SCL/Respite Adults – 6
Non-Waiver Respite – 0
Respite BI - 0

- The Admissions Committee approved 23 Applicants (in Wright County & Forest City).
- The Admissions Committee did not approve 60 Applicants due to the barriers listed below. **Barriers identified:**

43 - Behavioral concerns (relating to diagnosis)
1 – Not enough space/staff for 1:1 ratio or required nursing staff
2 – Safety/Health related concerns
4 - Other (Age/Gender)

Goal NOT MET! = 28% Acceptance rate

2. Increase the knowledge base of the services Krysilis offers.

- The intent of this goal is to try to increase community awareness about Krysilis' mission, goals, and the services the organization provides.

GOAL DATA: Provide at least 2 training opportunities per year/per service to spread awareness in Krysilis' communities. Trainings provided by Communications Coordinator or Development Director.

Nevada Service Area:

Residential based Services (Waiver & ICF)

1 training

Work Services (Work Activity, Prevocational, Supported Employment)

10 trainings

Community Based Services (Day Habilitation, School Transition, Therapy based)

3 trainings

General Information - 22 trainings

Forest City Service Area:

Residential based Services (Waiver & ICF)

1 training

Work Services (Work Activity, Prevocational, Supported Employment)

7 trainings

Community Based Services (Day Habilitation, School Transition, Therapy based)

3 trainings

General Information - 20 trainings

Wright County Service Area:

Residential based Services (Waiver & ICF)

1 training

Work Services (Work Activity, Prevocational, Supported Employment)

7 trainings

Community Based Services (Day Habilitation, School Transition, Therapy based)

3 trainings

General Information - 19 trainings

GOAL MET!

STAKEHOLDER INPUT/SATISFACTION

Each year we ask our stakeholders to complete an annual satisfaction survey to help Krysilis measure overall satisfaction, gather input regarding the quality of our services, and determine the areas in which our services may need improvement. The following are the results of those surveys. *Comments from these surveys can be seen upon request.*

- **GOAL DATA:** *(Target goal expectancy = 90% for all stakeholders.)*

<u>PERSONS SUPPORTED</u>	<u>YES</u>	<u>NO</u>	<u>UNDECIDED</u>	
<i>108 Total surveys were completed</i>				
1. Do you like your staff?	108	0	0	= 100%
2. Does staff listen to your concerns/problems?	108	0	0	= 100%
3. Do you get the help that you need?	108	0	0	= 100%
4. Do you feel safe at work/home/in the community?	106	1	1	= 98%
5. Are you encouraged to make choices for yourself?	105	1	2	= 97%
6. Overall are you happy with your services through Krysilis?	106	1	1	= 98%

Summary of "No" Responses: Person who was not satisfied in areas 4,5,6 was a minor who lives in an ICF/MR home and has a guardian. One of his issues was occurring at school where he did not feel safe because kids were picking on him – he was told the teachers/principal deal with the situations as they occur. He also felt he didn't get to do everything he wanted when he wanted like everyone else does, including seeing his girlfriend, and never gets to do things on his own. He was reminded of his age, that he has a guardian, and that he lives in an ICF/MR home and there are regulations that he has to live within. The Interdisciplinary Team was also meeting to see if girlfriend could come visit him

PROFESSIONAL/OTHER BUSINESSES:

- A total of 64 surveys were sent and 31 were returned for a return rate of 48%.
- **Overall, are you satisfied with the services that we provide to the individuals that you serve?**
of YES responses: 31
of NO responses: 0 = **100% satisfaction rating**

CASE MANAGER/SOCIAL WORKER/OTHER SERVICE PROVIDER:

- A total of 30 surveys were sent and 17 were returned for a return rate of 57%.
- **Overall, are you satisfied with the services of the individuals that you serve at Krysilis?**
of YES responses: 16
of NO responses: 1 = **94% satisfaction rating**

FAMILY/CONCERNED OTHERS:

- A total of 105 surveys were sent and 54 were returned for a return rate of 51%.
- **Overall, are you satisfied with the services accessed by your family member/loved one at Krysilis?**
of YES responses: 53

of NO responses: 1 = **98% satisfaction rating**

FUNDERS:

- A total of 17 surveys were sent & 6 were returned for a return rate of 35%.
- **Overall, are you satisfied with the services that you contract for and fund through Krysilis?**
of YES responses: 6
of NO responses: 0
=100% satisfaction rating

CONTRACTORS:

A total of 13 surveys were sent and 8 were returned for a return rate of 62%.

1. Did our vocational department respond quickly when contracted?
7 – YES responses 1- SOMEWHAT responses 0-No response given
2. Do you feel we did our best to offer a fair bid price?
8 – YES responses 0- No response given
3. Does the contract work or service we provide demonstrate quality work?
8- YES responses 0 –NO Reponses
4. Are we timely in serving your needs?
8- YES responses 0-NO responses
5. Are our staff friendly and helpful?
7-YES responses 1- NO response

Goal MET!

SATISFACTION OF PERSONS WHO HAVE EXITED FROM SERVICES:

Comments from these surveys can be seen upon request.

Krysilis had a total of 7 people exit from services in the past year.

- Summary of services that were exited:
 - One person who exited from Pre-Vocational (PV) services was happy with his service, however, became ineligible based on service rules.
 - person passed away, but family was very pleased with his ICF/MR services and gave wonderful comments.
 - One person chose to move and left PV services. She felt that our work program did not offer her enough opportunities.
 - One person chose to exit from Day Habilitation as he did not feel it was a service that met his individual needs. He did stress that he felt overall Krysilis has a good Day Habilitation program.
 - One person supported who left hourly SCL/Respite was pleased with services, liked the opportunities she had to do different things in the community – especially shopping and going to the movies. She didn't feel there was anything Krysilis needed to do to improve services.
 - One person left services because his parent/guardian decided to take part in consumer choice options.
 - Two were unknown as data was not reported
- Exit surveys were completed for all 7 people who left services voluntarily. No negative comments were given.
- Follow-up survey results: 3 follow-up surveys were completed via phone. 2 phone messages were left with no return and 1 person stated very positive comments about Krysilis and her new services.

KRYSILIS DEMOGRAPHICS

Not all demographic information is included as only one service area reported data.
(age data, gender data)

1. Referral Sources

- *The data below identifies the number of referrals for services received as well as the referring party.*

<u>Referring Party</u>	<u># of Referrals</u>
County	55
Private	2
Parent/Guardian	5
Other Agency (school, other provider agencies)	21

2. Years of Employment of Krysilis Staff

Under 1 year: 139

1-5: 150

6-10: 52

11-15: 44

16-20: 24

21-25: 9

26-30: 5

(Based on all active FT, PT, and sub-status employees)

3. Number of People who have Transitioned to a Less Restrictive Service/Environment

- 2 people moved from an ICF/MR setting and into 24-hour waiver services through the Money Follows the Person (MFP) grant.

4. Annual Funding Sources

<u>Funding Source</u>	<u>Percent of Total Revenue</u>
County/State	0.64%
County/Federal –ICF/MR	81.86%
County/Federal - Waiver	12.61%
Contributions/Fundraisers	1.05%
Private Pay/Outside Agencies	2.01%
Work and Store Revenue	1.83%

Krysilis 2008/2009 Organizational Goals

1. **Maintain and improve Fiscal Solvency**
 - a. **Cash Flow**
 - b. **Operational Performance – cost control, service growth**
2. **Utilize Staff Development efforts to enhance the abilities of all staff – orientation, ongoing, and opportunities for growth**
 - a. **Front Line Supervisors**
 - b. **Supervisor Support**
 - c. **Direct Support Staff**
 - d. **Desk Reference – convenient, complete reference of all things Krysilis**
3. **Focus on the reduction of Risk**
 - a. **Work Injuries – increase awareness, train, and track**
 - b. **Disaster preparedness – isolated/community-wide**
 - c. **Vehicles – training and testing**
4. **Optimize vocational opportunities for people supported by Krysilis**
 - a. **Internally created – entrepreneurial**
 - b. **Community-based**
5. **Optimize the use of Information Technology within Krysilis**
 - a. **Training – minimum competencies, JIT**
 - b. **Accessibility & Mobility**
 - c. **Access to decision making information - dashboards**
 - d. **Electronic Documentation – creation and storage**
 - e. **Social Media – connecting externally/internally**
6. **Facilitate the move from ICF/MR to HCBS-SCL for people who are prepared for the transition**
 - a. **Housing Options – affordable, accessible**
 - b. **Money Follows the Person grant funds – accessing assistance**
7. **Increase community awareness and support for Krysilis' services**
 - a. **Sharing the story – friend raising opportunities**
 - b. **Financial Support – Krys Foundation, capital campaign**
8. **Maintain compliance with Quality Framework/CARF and documentation requirements**
 - a. **Policies & Procedures**
 - b. **Discovery, Remediation & Improvement**