

HOPE HAVEN, INC.
AGENCY MEASUREMENT AND MANAGEMENT PLAN
FY 2024

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Report Period: 7-1-2024 to 6-30-2024

This report summarizes highlights identified by Hope Haven Managers and Directors in management reports written to describe their programs' outcomes. Upon request, a comprehensive report of all services/programs is available from Hope Haven's Director of Quality Improvement.

AGENCY-WIDE DATA

- € Hope Haven served 912 individuals in FY'24 compared to 877 in FY'23. Of these individuals, 92 were under 18, 755 were 18-64, and 65 were over 65. The youngest person served by staff was 7 years old and the oldest was 79. The number of Iowa members was 742 while Minnesota supported 170.
- € Hope Haven has approximately 615 employees, including Double HH and Hope Haven International. The number of service employees is around 548 of which 292 are full-time.
- € Hope Haven continues to serve a very homogenous population with around 87% of the people falling into the White/Caucasian population. This is consistent with past years.
- € Hope Haven's only Intermediate Care Facility (ICF) in Storm Lake was transitioned to children's waiver services. The program was closed on 2/29/24.
- € A program breakout includes:
 - ⊘ Employment Services: = 469 (171-MN; 298-IA)
 - ⊘ Mental Health & Recovery Services
 - KTS=46
 - Peer Support=115
 - ⊘ My Day (Day Habilitation) Services=264
 - ⊘ IA Community Living (Daily)=199
 - ⊘ IA Supported Community Living (Hourly SCL & Respite) =280/85 respectively
 - ⊘ MN Community Living =18 (2 of these are respite individuals)
 - ⊘ Residential Care Facility (RCF)- (Adult Svc.) =11
 - ⊘ Intermediate Care Facility/ID (ICF/ID) (Children Svc.) =19 (closed 2/29/24)
 - ⊘ Residential-Based Supported Community Living (Children Svc.) = 25

Referral Summary

In FY 2024, 119 people were referred to Hope Haven. The largest groups of referrals were in the following categories: 59 for Community Living Services (26 SCL hourly referrals, 25 Daily SCL referrals, 8 respite referrals), and for Employment Services 56 referrals.

Hope Haven also transitioned out of Intermediate Care Facility (ICF) services on 2/29/2024. As a result, we transitioned 1 of these children into RBSCCL and discharged 2 to other facilities who could provide the needed higher level of care.

Satisfaction Survey Outcomes: (Scale is 1: Very Unsatisfied to 5: Very Satisfied.)

- € **Guardian/Family:** 122 satisfaction surveys were collected relating to HCBS services. The scores averaged an outcome of 4.2 on a 5.0 scale.

- € **Members:** There were 154 surveys collected regarding HCBS services with the average score being 4.0 on a 5.0 scale.
- € **Agency Wide Survey Results:** We collected 356 surveys agency-wide, which averaged 4.1 on a 5.0 scale.
- € **Accessibility and Barriers Survey:** 32 Guardians or Caretakers responded to a survey about this issue. 53% noted no barriers. Transportation, Communication and Community Integration were rated the 3 highest barriers with 22%, 19%, and 16% respectively. No surveys indicated a request for follow-up.
- € **Employee Exit Surveys:** Thirty-nine exit surveys were collected in FY24. 51% noted that they strongly agreed or agreed with the question: Would you recommend this workplace to others. 18% Disagreed or Strongly Disagreed with that statement. Approximately 68% strongly agreed or agreed when asked if adequate training was provided.

Quality Improvement Outcomes

- We met 5 of the 8 HCBS established outcomes which included those around incident reports, medication error rates, HCBS settings, response to grievances, and agency satisfaction. Documentation error rates, service record completion, and personnel orientation training record maintenance fell below desired outcomes.
 - During fiscal year 24, we implemented a new EHR system. This has assisted in reducing the number of medication errors down to 0.1%.
 - Hope also met the HCBS settings rules at 85% efficiency. The area that needs the most improvement relating to community living services relates to management and handling of member funds. Ongoing QA and oversight continue to take place. Day Habilitation service reviews also showed a strong outcome relating to HCBS rules meeting all 4 criteria levels (Settings, Health and Safety, Privacy, and Rights and Dignity) at 85%, 93%, 100%, and 85% respectively.
 - The Quality Improvement Plan includes remediation steps to improve upon the 3 areas that didn't meet outcomes which includes documentation error rates, personnel training and orientation tracking, and service record completion. The latter of these areas was partially impacted by the transition to a new EHR.
- Critical incident reports (those needing to be reported to external funders) made up only 9% of all incident reports.
- Additional staff were added to the Quality Improvement team to assist in documentation tracking and review. New processes have been created to assist in monitoring documentation effectiveness and efficiency.
- Safety meetings are held monthly wherein the team reviews all Emergency Drills and Safety checklists submitted by staff. Any noted areas of concern are reviewed with site managers and/or maintenance.

Person Centered Services:

1. Person-Centered principles guide the service planning process.
2. It is the decision of the person supported as to who is on the Support team and where the support team meetings occur. Persons supported invite their support team members to their support team meetings.
3. Support teams use strengths-based assessments, begin with the desired outcomes and preferences of the person served, and emphasize informed choice making.

Additional Ministry Services

- Wheelchairs manufacture and/or refurbish in 10 different workshops. Throughout the year, workers logged 32,439 volunteer hours. Volunteer hours included community service completed by in-mates and court-ordered service.
- Hope Haven has 2 pastors on-staff that provide support to those served and staff through organizing agency religious retreats (see next bullet), providing regular spiritual devotional messages through emails and agency website, overseeing prayer requests, and by providing direct support to staff or individuals supported through face-to-face engagement throughout needed situations.
- From July 2023 to June 2024, we held nine spiritual retreats. Youth events attracted 20 youth from Sioux County, the Lakes area and Storm Lake. Adult events attracted 271 adults in the fall and the spring events.
- In October 2023 and January 2024, we also concluded our last two formal meetings with the five churches (20 people) gathering in Sioux Center, learning together to become more welcoming and inclusive. We are planning for a new cohort of churches in Storm Lake to begin their journey of learning together in the coming year.

Communication/Networking:

- Copies of the Hope Haven Annual Report and the Agency Measurement and Management Plan (AMMP) are given to individuals supported and/or reviewed in group settings. Additionally, these reports are available on Hope Haven's website.
- Around 7000 *Horizon* newsletters are sent out four times each year.
- Hope Haven's website at www.hopehaven.org communicates about available services, fundraising events, employment opportunities, agency outcomes, etc. Hope Haven employees have access to an employee portal that offers information on training schedules, policies and procedures, and compliance reports.
- Hope Haven utilizes social media platforms such as Facebook, Instagram, and LinkedIn to communicate news and updates happening within the organization.
- Hope Haven uses its email system, HR software, to communicate internal messages to employees. As part of this HR software, a section of it referred to as the HUB is a specific resource of information to all employees. This contains updates, compliance information, staff recognitions announcements, and more.

EMPLOYMENT SERVICES

Facility Based Employment

Total Served: 39

- ✓ *Key Outcome:* 96% of people in this program spent time in paid work, an improvement from 85% fiscal year 23.
- ✓ *Key Stat:* Around 46% of members served have some type of mental health diagnosis.
- ✓ *Key Deficit:* There are no new admissions as this program is being phased out due to regulations.

Integrated Community Employment

Total Supported: 298

- ✓ *Key Outcome:* The average hourly wage increased to \$12.98 from \$11.21 last fiscal year. An increase has occurred every year for the past 3 years.
- ✓ *Key Stat:* The number of integrated community employment sites was 286. This is a decrease of 15 sites from the last fiscal year. The number of group sites also reduced by 3, coming in at 21.
- ✓ *Key Deficit:* The average hours worked per week did not increase but stayed very close to the last fiscal year, being at 14.7 versus 14.8.

Job Placement Services

Total Supported: 183

- ✓ *Key Outcome:* 79% of members obtained a job during this fiscal year. This equated to 146 people.
- ✓ *Key Stat:* Average starting rate of pay was \$12.98.
- ✓ *Key Deficit:* The average hours worked per week at point of placement reduced this fiscal to 14.70 from 16.53.

Employment Planning Services

Total Supported: 32

- ✓ *Key Outcome:* 90% of people completing employment planning were engaged in job placement or integrated community services within 90 days. This is an increase from 85 last fiscal year.
- ✓ *Key Stat:* 63% of the members served are between the ages of 18 and 21.
- ✓ *Key Deficit:* All outcomes were met this fiscal year.

MY DAY (DAY HABILITATION) SERVICES

Day Habilitation (ID)

Total Supported: 230

- ✓ *Key Outcome:* Access to services is met within the 30-day acceptance window.
- ✓ *Key Stat:* The age group with the most members is those between the ages of 40 and 54, this is 27%. Additionally, those aged 22 to 29 make up another 21%.
- ✓ *Key Deficit:* The goal is to have 80% of the individuals in this program have a meaningful community connection in at least 80% of service days. This was met at 52% (below outcome improvement from last fiscal year by 11%).

Day Habilitation (MI)

Total Supported: 34

- ✓ *Key Outcome:* 85% of members met their objectives at least 65% of the months in the program.
- ✓ *Key Stat:* 88% of members remained free of any mental health hospitalization. (30 of 34)
- ✓ *Key Deficit:* The goal is to have 80% of the individuals in this program have a meaningful community connection in at least 80% of service days. This was met at 76%.
- ✓

COMMUNITY LIVING SERVICES

Residential-Based Supported Community Living

Total Supported: 25

- ✓ *Key Outcome:* 100% of the 13 newly enrolled individuals had contact with their family within the first 60 days of enrollment.
- ✓ *Key Stat:* Of the 13 new referrals, all of them accessed RBSCCL services in under 60 days from acceptance.
- ✓ *Key Deficit:* Expenses were 109% of the budget.

RCF/ID Group Homes

Total Supported: 11

- ✓ *Key Outcome:* All residents in this service are being transitioned to Waiver services by 9/30/24.
- ✓ *Key Stat:* 64% of the members served were between the ages of 50 and 65.
- ✓ *Key Deficit:* The income to expenses ratio was 118%. An improvement from the 133% the previous fiscal year, but still below expectations.

Daily SCL / HAB Homes

Total Served: 199

- ✓ Key Outcome: Expense to income percentage was met at 96%.
- ✓ Key Stat: 68% of people served in this program are funded through the ID waiver and approximately 28% are funded by Habilitation, 3% are funded through the Brain Injury Waiver.
- ✓ Key Deficit: *Employee retention percentage was 64%, when the goal is 80%. This is a slight drop from last fiscal year, which was at 68% retention.*

Supported Community Living / Hourly & Respite

Total Supported: SCL-Hourly-288, Respite Individual-79, Respite Group-27

Unduplicated Total: 310 Unduplicated Respite: 85

- ✓ Key Outcome: Employees were retained for 2 years or more at a rate of 82%.
- ✓ Key Stat: 159 individuals are funded through ID funds and 123 were served through Habilitation services.
- ✓ Key Deficit: Expenses to income were at 145% for Hourly and 125% for Respite.

Minnesota Services

Total Supported: 16

- ✓ Key Outcome: 87% of employees were retained for 2 or more years.
- ✓ Key Stat: The population being supported is ageing with 9 being over 50, 4 of which are over 65 years old.
- ✓ Key Deficit: The expenses to income ratio was 107% instead of the desired 97%. Although, a deficit, it is an improvement from the 119% last fiscal year.

MENTAL HEALTH & RECOVERY SERVICES

Intensive Psychiatric Rehabilitation

Total Supported: 46

- ✓ Key Outcome: The percentage of people in vocational, and social environments exceeded the 30% outcome expectation to maintain or increase the level of support needed or interaction amount reported at time of enrollment. Each met this outcome at 50%.
- ✓ Key Stat: Persons dealing with some type of anxiety disorder make up 50% of the members served.
- ✓ Key Deficit: None of the members working toward increasing their employment or educational status met this outcome.

Peer Support

Total Supported: 115

- ✓ Key Outcome: 98% of the members in this program remain hospital free this fiscal year.
- ✓ Key Stat: 59 new people were enrolled into this program. In FY 23 there were only 24.
- ✓ Key Deficit: Expenses were 126% of income, this is an improvement from 175% last fiscal year.