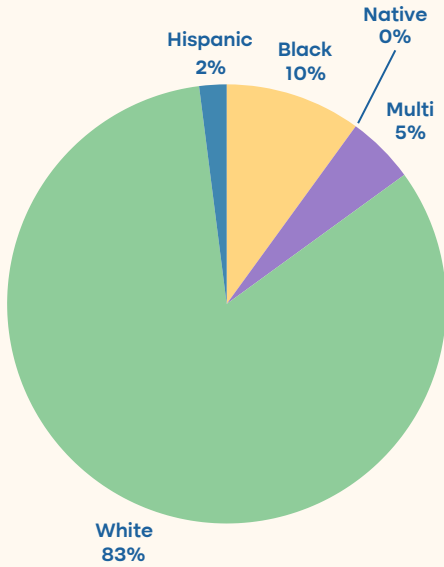
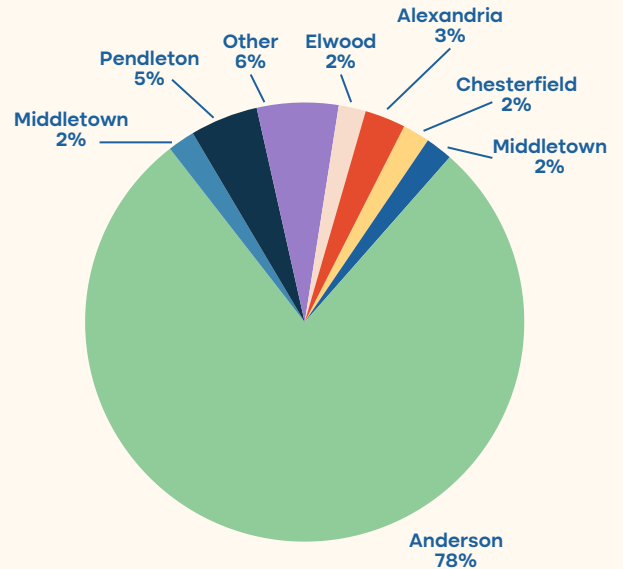


FY 2020 Demographics

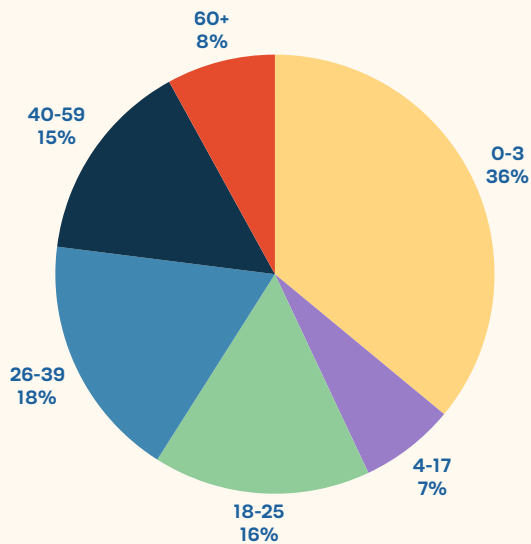
DIVERSITY



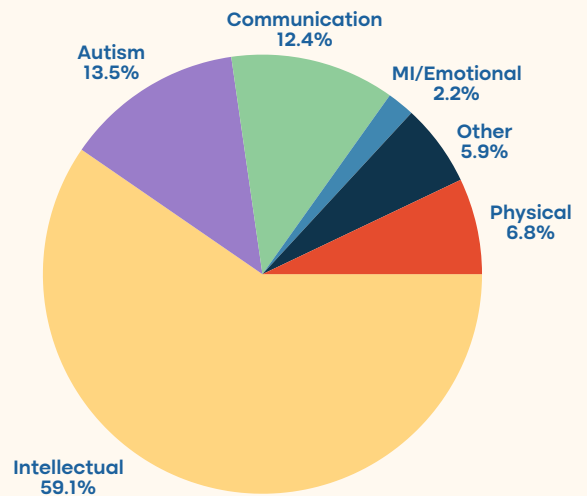
CITY



AGE DISTRIBUTION

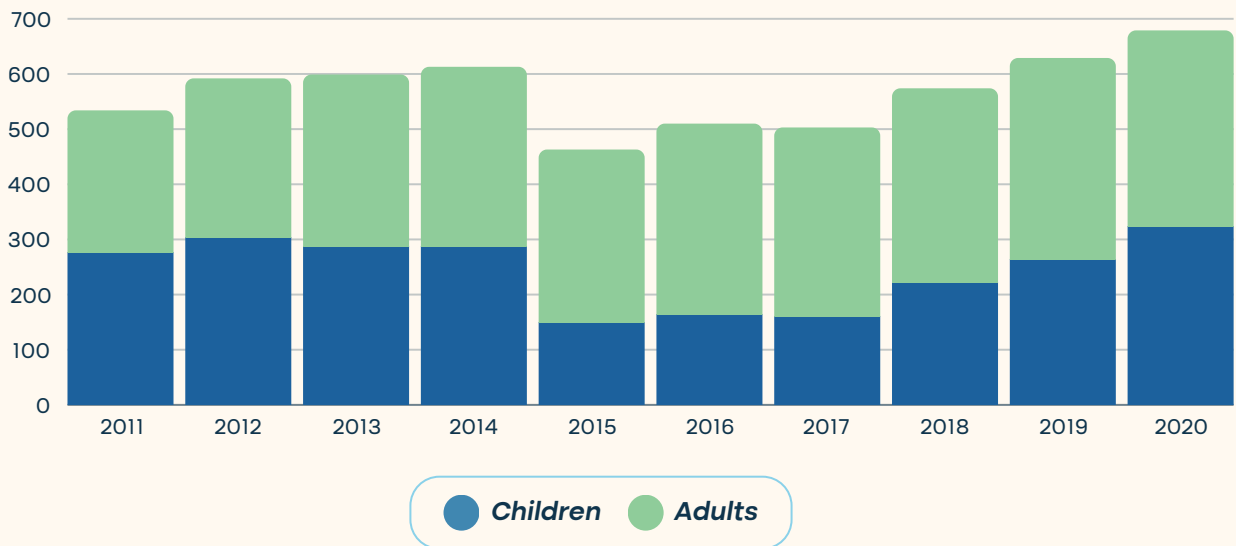


DISABILITY

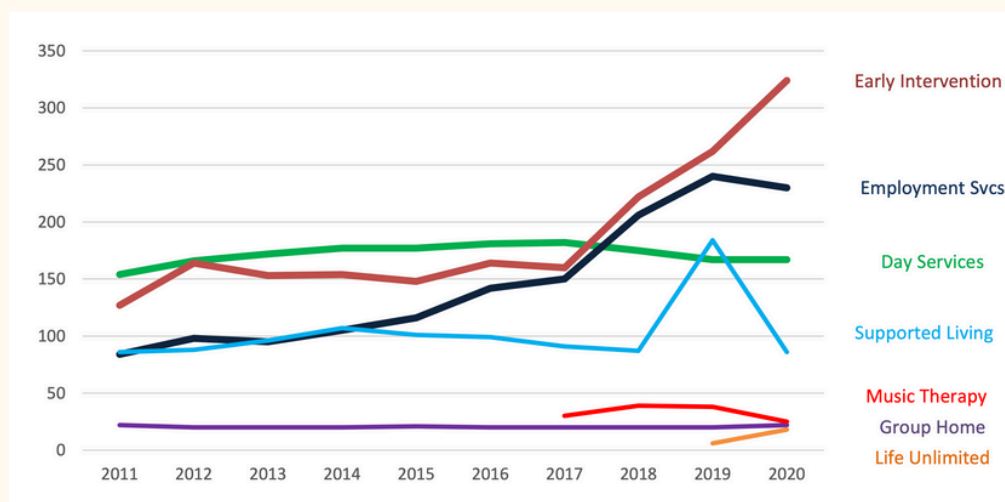


Program Evaluation Summary (FY2019)

TOTAL PERSONS SERVED



PROGRAM PARTICIPATION



PROGRAM EVALUATION FY 2020 ANNUAL MANAGEMENT REPORT

Day Services

Prepared by: Reina C. Shelton

INTRODUCTION

This report covers the Day Service Programs, including the Work Center, AIM and Life Unlimited during the report period July 1, 2019 through June 30, 2020. Program effectiveness, efficiency and development along with client descriptors will be presented in this report. This report is submitted by Reina Shelton, Director of Day Services, with contributions from the Life Unlimited Coordinator, Mary Griffith.

CLIENT DESCRIPTORS

Day Services served a total of 168 individuals between July 2019 and June 2020. Of the 168, 7 individuals participated exclusively in the Life Unlimited Program and 27 in AIM. There were 2 individuals in AIM and 11 individuals in Life Unlimited who also received services from the Work Center.

The majority of Day Services participants in all programs reside in Anderson (83%) although we also served individuals from outlying areas such as Frankton, Elwood, Middletown, Summitville and Alexandria. Our continued partnership with the County transportation TRAM allows many of our individuals who reside outside the Anderson city limits to attend services. We also served individuals from 3 other counties in addition to Madison – Hamilton, Hancock and Henry counties. Of the 168 that were served this year, 59% are males. Approximately 38% have multiple disabilities and all consumers received funding through Medicaid. 31% of individuals served received funding through their CIH Waiver, 36% from Family Support Waiver and 35% from Supported Group Living (group homes). These demographics are very similar to previous years.

Of significance this report period are the effects of the Corona Virus Pandemic which has swept most of the State. In March 2020, all of services in the Work Center, AIM and LU were suspended due to the pandemic. During the closure, Day services staff from programs, including those for the Industrial Division were furloughed.

Day Services re-opened on June 1, 2020 with a very select group of individuals – mostly those who lived together. The re-opening was slow and deliberate, with the safety of staff and consumers as the highest priority. Day services served 22 individuals in the first 2 weeks of June 2020. By the end of June, we were serving 80.

PRIMARY OBJECTIVES and DISCUSSION

- 1. 50% of consumers will participate in community activities of choice with individualized support**

64% of Day Services participants participated

Of the 168 consumers who participated in Day Services, 65% went on at least one community based activity between January and June 2020. Surprisingly, despite the weather, decreased availability of community sites during this time and the suspension of services, a significant portion of consumers were still able to participate in outings. (One of the supplemental measures in this report reflect the limited number of sites that were utilized.) We are very pleased with this and is reflective of Day Services' commitment to promoting community integration. The activities included trips to the church lunch, bowling, going out to eat, shopping, volunteering, visiting the community library, etc. 100% of the consumers who received funding for community based activities participated in activities of their choice. This would include consumers participating in both Life Unlimited and AIM. The Work Center's Community Activity Coordinator worked very closely with consumers, their families and community partners to schedule and coordinate meaningful opportunities for consumers.

January through June 2020 saw limited community based activities due to the weather and the fact that services were suspended in April and May. In addition, community based services were the first to be cancelled when concerns related to the Pandemic became significant. In June, when services resumed, only facility based services were offered to ensure limited exposure of consumers to COVID-19. To date, all services are still delivered exclusively on Hopewell's campus.

2. 25% of Day Services consumers are choosing and participating in meaningful community activities independent of Hopewell

36% of Day service consumer are choosing and participating in meaningful community activities independent of Hopewell

An average of 36% of the consumers served during report period reported participated in meaningful community activities without supports from Hopewell Day services staff. This objective is new and has only been measured for 12 months. Based on our verbal survey of individuals about their activities outside of Day Services, 36% reported activities with family members and friends not associated with Hopewell Center. Some of the examples given were going out to eat, shopping, exercising, going to sporting events, parties, etc. Surprisingly, in the second half of this report period, the percentage went up from 30% between July and December 2019 to 41% between January and June 2020. This despite most everyone's efforts to stay home and be safe. It is hypothesized that the increase is due to improved techniques for gathering data. Staff have become better at recognizing non-Hopewell activities consumers casually talk about during the course of the day, deliberately asking consumers if they did something fun over the holiday or weekend, etc.

Still, this objective has been somewhat challenging to measure. While we are easily able to determine when activities are community based and supported by family and peers, it has been difficult for staff to determine who among the program participants are in fact choosing these activities and are these truly meaningful to them. For example, a consumer might relate going to an Uncle's party over the weekend with the rest of the family but reports that they were bored and was compelled to go by their mother. Would this activity be considered

meaningful and of the individual's choosing and therefore meet the criteria? Regardless, the intent of this measure clear - for folks to have more opportunities for integration in the community they live in.

3. 90% of clients will demonstrate progress in at least 2 outcomes.

93% of clients demonstrated progress in at least 2 outcomes in the past 6 months.

93% of Day Services consumers served between January and June 2020 demonstrated progress in at least 2 outcomes in the past six months. This is a small drop for the previous' report period's percentage of 95% but overall consistent with figures from previous years. As before, there were individuals who far exceeded their goals and advanced through many steps across several objectives while there were some who made minimal progress.

Of significance in the past 6 months, is the suspension of services for about 10 weeks during the last six months. None of the consumers attended any of the Day services programs nor was there any training during this period. Despite the shortened time to implement goals and collect data, the majority of consumers still made significant progress on achieving their desired outcomes.

When services re-opened in June 2020 with many new safety protocol, staff also went to work writing and implementing goals for consumers to learn and practice safety measures. Such programs such as appropriate handwashing, wearing face coverings correctly, social distancing and general education on the spread of germs and cleanliness were implemented.

4. Subcontract revenue will meet or exceed budgeted amount.

69%% of budget met.

Not surprisingly, the goal for subcontract revenue in the Work Center was not met this year. While we were below target at 78% in December 2019, only 41% of targeted revenues were met in the past six months, resulting in a 64% deficit for the year. This is primarily attributed to the suspension of subcontract work since March 2020. The Work Center has not seen any earnings from any of our industrial contracts since then. Subcontract work revenues were at 86% of targeted revenues just before the shutdown.

While the suspension of activities in the Industrial Division was detrimental to subcontract revenues, it also brought an opportunity to closely evaluate how these activities fit Hopewell's mission. In June 2020, our Board of Directors voted to discontinue payment of subminimum wages to all consumers, thereby eliminating all activity with our business customers. This major change brings both significant challenges and exciting opportunities for the Program in the following years.

5. Paid funding levels will meet or exceed budgeted amount.

66% % of budget met

Day Services includes the AIM and Life Unlimited Programs and the Work Center. Consumers in all three programs have one of three funding sources – Family Supports Waiver, Community Integration and Habilitation Waiver or Supported Group Living. Funding levels for all 3 programs were at 66% of budgeted amounts at the end of FY20. The figure is a significant drop from last report period' 94%.

Again, the most significant contributing factor to the shortfall was the closure of services for 2.5 months and then a slow recovery in June. No services were offered or delivered and no revenues were collected in April and May. In June, when the program re-opened, only a few consumers started and limited services were delivered. At the end of the report period, Day services was serving less than 20% of the program participants before the closure.

Day services was on track to meet targeted revenues in March 2020, with the exception of Life Unlimited. At the end of March 2020, revenues from the Work Center and AIM were at 93% of target (while Life Unlimited was at 34%). The cumulative revenues across the Work Center, AIM and Life Unlimited programs were at 88% of targets at this time.

COVID-19 has changed the face of services in the Program - limited numbers of consumers are being served and new restrictions implemented; all community based and industrial activities are suspended; environmental changes have been implemented. It will be interesting and challenging to see what services will look like in the coming weeks and months.

6. 100% of clients surveyed will rate work activities as good or excellent.

79% of clients surveyed will rate work activities as good or excellent.

The consumer satisfaction survey is completed with each program participant at the time of their annual conference. Of those who were able to respond, 79% rated work activities as good or excellent. This is a decrease of previous years, despite the availability of work this year. There seems to be a growing trend, especially with younger consumers, where working and earning a paycheck is no longer the main motivator for attending services. Many have expressed their desire to engage and further their hobbies, make friends and go on outings during their time at Hopewell. On the other hand, there continues to be some consumers whose goal is to "make money". We continue to encourage these individuals to work in the community if they are not.

7. 100% of clients receiving habilitation training will rate service as good or excellent.

96% of clients receiving habilitation training will rate services as good or excellent.

A significant number of individuals in Day Services receive facility and community services in addition to or instead of Prevocational raining. These are delivered either in small groups

or individually. These continue to be very valuable and coveted services for consumers, especially for those seeking opportunities for socialization and integration. This year, many consumers had facility and community based services in their plans. Consumers enjoyed various activities at the facility including gardening, art, cooking, games and exercise. Staff also provided supports during community activities this year such as volunteering, going to local fairs and festivals, swimming, etc.

8. 100% of Group Home providers and Waiver Case Managers residential providers will rate individual consumer programming as good or excellent.

100% of residential providers and Case managers will rate consumer programming as good or excellent

The provider satisfaction survey was distributed to group home QMRP's and Waiver Case Managers. Of those who responded to the survey, 100% rated overall Work Center services as good or excellent and that goals and objectives are appropriate. The survey also indicated that providers are happy with the coordination between themselves and Day Services staff. Day Service's staff's timely communication with the Individual Service teams was identified as one of our strongest points. One of the respondents commented that there was "great response" to the Pandemic. No areas of improvement were noted.

9. 90% of business customers will rate services as good or excellent.

This goal was not measures this year. All activity with all our business customers ceased in March 2020.

10. 100% of staff will receive at least 10 hours of training

22% of staff received at least 10 hours of training

Only 6 of the 27 (22%) Day Services staff received at least 10 hours of training this report period. This is one of the lowest numbers seen in many years. The number of staff in Day Services were reduced when the program reopened in June 2020. Typically, the months of April and May are heavy with training sessions.

SUPPLEMENTAL MEASURES

1. Number of Day Service participants referred to OVR.

- 4 individuals were referred to the Office of Vocational Rehabilitation between July 2019 and June 2020. There were no new referrals in the last 6 months.
- There were 9 Day Services participants receiving Supported Employment services in June 2020

2. % of Consumers funded for Community Activity

- 58% of consumers in Day Services is funded for community activities
- Specific funding is either included in the consumer's budget or plan
- Individuals with the CIH Waiver typically participate in community based activities through their residential provider
- Changes to Day Habilitation services are anticipated and will expand opportunities to more individuals
- Community based activities have been suspended since March 2020 due to the pandemic

3. Number of Community – based sites used

- 41 community sites were used in the last 6 months
- About half of the sites were used this report period compared to the initial 6 months (88 sites between July and December 2019)
- An average of 45 sites were used this year
- All community based activities have been suspended since mid-March 2020 due to the pandemic

4. Number of individuals participating in paid Work

- 50 of 110 individuals eligible to work participated in paid work
- With the exception of shredding, there has been paid work activity in the Work Center since the middle of March 2020
- Individuals participating exclusively in AIM and Life Unlimited do not participate in paid work

Hopewell Center, Inc.
Program Evaluation Management Report
Fiscal Year 2020

Program: Day Services

Program Supervisor: Reina Shelton

Report Date: 8/25/2020

Report Period: 7/1/2019 – 6/30/2020

<i>Supplemental Measures</i>	First Six Month Period	Second Six Month Period	Cumulative Period
1. % of consumers who participated in a community based activity	63%	65%	64%
2. Number of community sites utilized in the last 6 months	88	45	67
3. Number of Day Services Participants referred to OVR	4	0	4
4. Number of individuals in prevocational services Participating in paid work	103 of 111	50 of 110	-
5. Percentage of individuals funded for community based activity	56%	59%	58%

Exceptions/Comments:

- 1) Subcontract revenue will meet or exceed budgeted amount – Recommend discontinuing measure.
- 2) Paid funding levels will meet or exceed budgeted amount. – Consumers plans are in the process of being adjusted to ensure reimbursement of services being delivered.
- 3) 100% of staff will receive at least 10 hours of training - Training opportunities will continue to be coordinated by professional staff and provided to staff.

Hopewell Center, Inc.
Program Evaluation Management Report
Fiscal Year 2020

Program: Day Services

Program Supervisor: Reina Shelton

Report Date : 8/25/2020

Report Period: 7/1/2019 – 6/30/2020

Primary Measures	First Six Month Period	Second Six Month Period	Cumulative Period
1. 50% on consumers will participate in community activities of choice with individualized support	63%	65%	64%
2. 25% of Day Service consumers are choosing and participating in meaningful community activities independent of Hopewell Center	30%	41%	36%
3. 90% of clients will demonstrate progress in at least 2 outcomes	96%	93%	95%
4. Subcontract revenue will meet or exceed budgeted amount	78%	-	69%
5. paid funding levels will meet or exceed budgeted amount.	94%	-	66%
6. 100% of clients surveyed will rate work activities as good or excellent	annual	-	79%
7. 100% of clients receiving habilitation training will rate services as good or excellent	annual	-	96%
8. 100% of group home providers and Case Managers will rate individual consumer programming as good or excellent	annual	-	100%
9. 100% of business customers will rate services as good or excellent	annual	Not rated	-
10. 100% of staff will receive at least 10 hours of training	54%	22%	38%

Program Evaluation Management Report

Program Name: Life Unlimited

This report covers: 7/1/2019 through 6/30/2020

City	Count	Percentage
ANDERSON	15	83.33%
Pendleton	2	11.11%
ALEXANDRIA	1	5.56%
Total	18	

Disability	Count	Percentage
INTELLECTUAL	12	66.67%
AUTISM	5	27.78%
SEIZURE	1	5.56%
Total	18	

Ethnic Group	Count	Percentage
Black	3	16.67%
White	15	83.33%
Total	18	

Gender	Count	Percentage
M	14	77.78%
F	4	22.22%
Total	18	

Living Arrangement	Count	Percentage
Natural Home	11	61.11%
Supported Apt/Home	4	22.22%
Relative Home	1	5.56%
Group Home	2	11.11%
Total	18	

Medicaid	Count	Percentage
No	1	5.56%
Yes	17	94.44%
Total	18	

Program Evaluation Management Report

Program Name: Life Unlimited

This report covers: 7/1/2019 through 6/30/2020

Multiply Disabled	Count	Percentage
Yes	5	27.78%
No	13	72.22%
Total	18	

County	Count	Percentage
MADISON	17	94.44%
	1	5.56%
Total	18	

Primary Funder	Count	Percentage
MCD-SGL	2	11.11%
WVR-FS	10	55.56%
	1	5.56%
WVR-CI&H	5	27.78%
Total	18	

Age in years (as of 6/30/2020):

Oldest:	37
Youngest:	18
Average Age of currently enrolled:	25.1

Program Evaluation Management Report

Program Name: Workshop

This report covers: 7/1/2019 through 6/30/2020

City	Count	Percentage
Anders	1	0.60%
LAPEL	1	0.60%
Greenfield	2	1.19%
Frankton	1	0.60%
Elwood	3	1.79%
Chesterfield	1	0.60%
Summitville	3	1.79%
ANDERSON	139	82.74%
Markleville	1	0.60%
ALEXANDRIA	2	1.19%
	1	0.60%
Middletown	5	2.98%
Noblesville	1	0.60%
PENDLETON	5	2.98%
Atlanta	2	1.19%
Total	168	

Disability	Count	Percentage
INTELLECTUAL	141	83.93%
SEIZURE	2	1.19%
HEARING	2	1.19%
MI/EMOTIONAL	1	0.60%
AUTISM	21	12.50%
OTHER	1	0.60%
Total	168	

Ethnic Group	Count	Percentage
Black	26	15.48%
Native Am /Alaskan	1	0.60%
White	140	83.33%
Hispanic/Lat Origin	1	0.60%
Total	168	

Program Evaluation Management Report

Program Name: Workshop

This report covers: 7/1/2019 through 6/30/2020

Gender	Count	Percentage
	1	0.60%
F	68	40.48%
M	99	58.93%
Total	168	

Living Arrangement	Count	Percentage
Supported Apt/Home	38	22.62%
Group Home	60	35.71%
Independent	2	1.19%
Natural Home	64	38.10%
Relative Home	4	2.38%
Total	168	

Medicaid	Count	Percentage
No	1	0.60%
Yes	167	99.40%
Total	168	

Multiply Disabled	Count	Percentage
No	105	62.50%
Yes	63	37.50%
Total	168	

County	Count	Percentage
	2	1.19%
Hamilton	3	1.79%
Hancock	2	1.19%
Henry	5	2.98%
Madison	156	92.86%
Total	168	

Program Evaluation Management Report

Program Name: Workshop

This report covers: 7/1/2019 through 6/30/2020

Primary Funder	Count	Percentage
WVR-FS	59	35.12%
	1	0.60%
MCD-SGL	56	33.33%
WVR-CI&H	52	30.95%
Total	168	

Age in years (as of 6/30/2020):

Oldest:	78
Youngest:	18
Average Age of currently enrolled:	41.3

Program Evaluation FY20 Annual Management Report Supported Living Program

Prepared By: Kathie Wright, Residential Services Director
Autumn Cunningham, Quality Assurance Coordinator

INTRODUCTION

This report covers the Supported Living Program during the time period beginning July 1, 2019 and ending June 30, 2020. This report summarizes the effectiveness, efficiency, and satisfaction of the individuals being served, as well as program development measures.

CLIENT DESCRIPTORS

The Supported Living Department served 86 individuals during this evaluation period. This is a decrease of 3 individual from last year's annual report. These individuals ranged in age from 2 to 75 years old. Seventy percent of the individuals served were male and 30% female. Eighty-four percent of the individuals served live in Anderson; however, the department also served individuals in Alexandria, Summitville, Frankton, Chesterfield, Fortville, Pendleton, Muncie and Fishers. Seventy-five percent of the individuals served have a primary diagnosis of Intellectual Disabilities, 20% of individuals have a primary diagnosis of Autism and 1 with physical disabilities. The majority of the individuals served are Caucasian (91.86%), 6.98% are African American and 1% is Multi-Racial. Forty eight percent lived in their natural home/with family, 46.51% lived in their own house or apartment with staff support, 3.49% lived independently. Thirty-two individuals received 24-hour support.

PRIMARY OBJECTIVES

Program Effectiveness Measures:

- 1) 90% of all clients will receive necessary support to allow them to remain with family or independent living apartment.**

99.5% of clients received the necessary support to allow them to remain with family or in their own apartment.

The objective was met at 99.5%. During the first half of this report period, a consumer, age 61 moved to a nursing facility. This consumer had multiple surgeries following a broken ankle, then was diagnosed with dementia. Despite increased staffing, adaptive equipment, and therapy, this individual required nursing care.

Supported Living staff continue to monitor and support individuals with many diverse health and safety issues. Some issues include Alzheimer's/dementia, diabetes, epilepsy, cancer and heart disease.

2) 20% of consumers will have community connections that interact with regularly.

11% of consumer had community connections that they interact with regularly.

This goal was developed to track progress of consumers have or establishing natural support with their community. The department is working toward each consumer having a person driven community goal that will increase the opportunity for meeting non-paid staff in the community who share similar interest.

The COVID 19 pandemic impacted this goal due to the quarantine which meant not being able to participate in community activities for the last half of this report period. Many consumers were introduced to virtual communication with friends and services. While some embraced this technology, some chose to continue phone calls with friends and family. Staff were creative with exploring without leaving home and spreading kindness to neighbors. One of the 24 hour sites learned about several different countries by learning about their culture, watching movies, and preparing common dishes from the country. At another 24 hour site, clients painted rocks with kind words and placed them around their apartment complex.

3) 90% of participants will demonstrate progress on at least one objective.

98% of participants demonstrated progress on at least one objective.

The department did meet this objective at 98%. The PCISP (Person Centered Individual Support Plan) is utilized for all consumers. The industry has made the shift over the past couple of years to this format using the Lifecourse Tools. This process helps the team focus their efforts on supporting individuals and families in designing meaningful plans to encourage effective supports and services to get individuals closer to their definition of a good life.

One resident has a goal of cooking a meal independently. She has been participating and progressing with the goal. Recently, she spent the evening at her Mother's and prepared taco salad independently. Her Mother was thrilled to see her daughter's progress and confidence. Another consumer who has dementia is using technology to work on cognitive skills. This consumer is newer to tablets and computers, but is progressing in her independence of navigating the device and engaging in these valuable activities.

Program Efficiency Measures:

4) Personnel costs will not exceed 70% of revenue.

Personnel costs were 76% of the revenue during this report period.

We did not meet this objective at 76%.

The COVID 19 pandemic directly affected this number. Day services stopped mid March therefore those who normally attended day services were at home which required additional staffing hours. Staffing schedules have been maximized to staff's availability while trying to keep the majority of staff under thirty hours per week. There is a small percentage of staff who have consistently worked several hours in addition to their master schedule to assure individuals receive the care needed. We continue to monitor service hours and work with individuals and their teams to assure that we are efficiently utilizing approved services to meet the needs of each individual. Additionally and most significantly, we have been unable to be fully staffed during this report period which has resulted in many hours of overtime as well. During FY19, 34 new staff were hired and 31 resigned or were terminated while FY 20 reflects 24 new staff hired and 39 resigning or terminated. The last 3 report periods indicate a downward trend in number hired while the resignations have remained relatively steady. There have been a minimum of 15 open schedules throughout this report period.

There was a decrease in consumers served during the last 3 months of this report period (fluctuating from 16-30%). Some of the employees who worked one on one with those not being served, chose not to work rather than working with a different consumer. Some staff were staffing the sites normally attending day services. There was less cross training done due to attempting to have the least amount of staff in various environments to prevent the spread of the virus. Additionally, COVID procedures require that staff be off for the period of time recommended by the CDC (up to 14 days) if experiencing symptoms, have been exposed to COVID or have COVID also impacted staff costs.

5) Program will be reimbursed at least 97% of projected revenue.

The department was reimbursed 96% of projected revenue during this report period.

This objective was not met at 96%. This was a decrease from last year's annual report 102%. Again, this decrease was directly affected by the COVID 19 pandemic. Due to family preference, closure of day services, loss of employment, and spending some of the quarantine with family, the follow change in services occurred:

March we served 93% of client.
April we served 70% of clients
May we served 76% of clients

June we served 84% of clients

One impactful example is that we were not able to capture \$ 15,077.04 of daily rate billing because two 24 hour clients quarantined 88 days with their families.

During this time we worked with the case managers to adjust the NOA services to capture and be reimbursed for the additional services we provided during the quarantine. We are pleased to be steadily resuming pre-COVID services. We continue to monitor funding as well as service hours provided for individuals on a monthly basis to assure that we are maximizing services without exceeding the approved amount.

Program Satisfaction Measures:

6) 95% of clients surveyed will rate services as good or excellent.

98% of clients rated services as good or excellent.

We are pleased that 98% of clients rated services as good or excellent, however, there were several suggestions for improvement. Requests for improvement include improving new staff training. There were also several comments of liking things/happy with things the way they are. One hundred percent of parents/guardians rated services as good or excellent as well. One client request that we train his house manager more. A guardian stated that we still need more staff trained to cover shifts.

7) 85% of case managers / ancillary service providers will rate services as good or excellent.

100% of case managers and ancillary service providers rated services as good or excellent.

Supported Living staff work hard at building effective, professional relationships with case managers and ancillary service providers. We are pleased that we were able to meet this objective at 100%. One case manager commented, "We should keep the great degree of communication and follow thru! I appreciate QIDP, KS and QIDP MM and their consistent efforts".

Program Development Measures

8) 75% of CLA's will receive 2 hours of in-service training each 6 months.

56.5% of CLA's received 2 hours of inservice training during this report period.

This objective was not met at 56.5%, however the department did improve from 36% during PE FY19. The pandemic has forced us to provide several of our trainings virtually. Some have been interactive with Zoom and others pre-recorded with competency questions. For the first time, the department's Annual Training was done virtually. We have had good response from the staff. Being able to train off site and at a time that best fits their individual schedule has proven to be successful. While we plan to re-introduce in-person training, we will continue to virtually train as well. The Supported Living trainer efficiently trains and has embraced the virtual learning. Training topics include; Safety Care (Crisis Intervention), Fall/Lift, hygiene, professional boundaries, nutrition and Aging in IDD.

9) 90% of clients will receive an average of 2 observations each 6 months.

69% of clients received at least 2 observations during this report period.

This objective was not met at 69% which is an increase from FY19 of 57.25%. This objective helps us to assure that we are providing oversight in client homes, support to direct care staff that we may not see on a regular basis and provides the supervisor the opportunity to evaluate staff skill level and training needs.

We have been focusing on improvement in this area over the past several years. The first half of this report period was at 78%. While the last half of this report period was slightly lower, we are pleased with the results considering the pandemic and quarantine. The focus will continue to be in person observations, however, we will add virtual observations as well. (The number indicated in the goal is in person). The QIDP Coordinator will continue to work with the QIDP's to meet this goal.

Supplemental Measures

1) Average number of training hours provided to newly hired CLA's within their introductory period.

An average of 31 hours of training was received by newly hired CLA's in their introductory period for this report period.

The average number of training hours provided during new CLA introductory period was 31 this year. In FY19 we identified that the amount of training we were providing was excessive at 47 hours. The Team Leader was instructed to schedule the appropriate/needed amount of in-home training. Quality Assurance Coordinator monitored all trainings to assure that training hours were used efficiently. Training topics

include Supported Living Orientation, CPR / First Aid certification, Core A & B Medication Administration, Safety Care, ISP training, In-service with Behavior Therapists, Staff Meetings, and training shifts with individual clients.

Corrective Action:

- 2) 20% of consumers will have community connections that they interact with regularly.**

11% consumers will have community connections that they interact with regularly.

The QIDP Coordinator is completing the Integrated Supports Star with the consumers. This is specifically designed to have a conversation about returning to community activities. This completed star will be given to the QIDP's to assist with programming and planning for each consumer.

- 4) Personnel costs will not exceed 70% of revenue.**

Personnel costs were 76% of the revenue during this report period.

We recently made the QIDP-D positions full time. We are looking to make 6 overnight positions full time as well to cover more nights and for retaining purposes.

- 5) Program will be reimbursed at least 97% of projected revenue.**

Program was reimbursed 96% of projected revenue.

We will continue to work with case managers to assure the NOA's are up to date considering some changes have been made due to COVID 19. Quality Assurance Coordinator will monitor NOAs and weekly schedule to attempt to capture revenue. Additionally, we are currently working to increase the Algo level of 2 of our consumers in 24 hour sites who live together.

- 8) 75% of CLA's will 2 hours of in-service training each 6 months.**

56.5% of CLA's received 2 hours of in-service training each 6 months.

The Supported Living Trainer will continue to work with virtual trainings while re-introducing some in-person trainings in a safe manner. The Trainer has developed solid core trainings which will continue, introduce new as appropriate, and continue to focus on EVV training as this system will be implemented January 2021.

9) 90% of clients will receive 2 observations each 6 months.

69% of client received 2 observations each 6 months.

QIDP Coordinator will work with the QIDP's to develop a mix of in person and virtual observations and report the count monthly to Residential Services Director.

Hopewell Center, Inc.
Program Evaluation Management Report
 Fiscal Year 2020

Program: Supported Living

Program Supervisor: Kathie Wright

Report Date: 8/25/20

Report Period: 7/1/19-6/30/20

Primary Measures	First Six Month Period	Second Six Month Period	Cumulative Period
1.) 90% of clients will receive necessary support to allow them to remain in family or independent living arrangements.	99%	See Cumulative	99.5%
2.) 20% of consumers will have community connections that they interact with regularly	10%	12%	11%
3.) 90% of clients will demonstrate progress towards two outcomes.	82%	98%	98%
4.) Personnel costs will not exceed 70% of revenue	73%	See Cumulative	76%
5.) Program will be reimbursed at least 97% of projected revenue.	99%	See Cumulative	96%
6.) 95% of clients surveyed will rate S.L. services good or excellent.	Measured Annually		98%
7.) 85% of case-managers/ancillary service providers will rate services good or excellent.	Measured Annually		100%
8.) 75% of CLA's will receive 2 hours of in-service training each 6 months.	43%	70%	56.5%
9.) 90% of clients will receive 2 observations each 6 months.	78%	60%	69%

Program Evaluation Management Report

Program Name: Waiver/Supported Living Program

This report covers: 7/1/2019 through 6/30/2020

City	Count	Percentage
FORTVILLE	1	1.16%
Frankton	1	1.16%
KNIGHTSTOWN	1	1.16%
Muncie	2	2.33%
PENDLETON	1	1.16%
Summitville	1	1.16%
ALEXANDRIA	3	3.49%
ANDERSON	73	84.88%
CHESTERFIELD	3	3.49%
Total	86	

Disability	Count	Percentage
AUTISM	18	20.93%
PHYSICAL	1	1.16%
OTHER	2	2.33%
INTELLECTUAL	65	75.58%
Total	86	

Ethnic Group	Count	Percentage
White	79	91.86%
Multi-Racial	1	1.16%
Black	6	6.98%
Total	86	

Gender	Count	Percentage
M	60	69.77%
F	26	30.23%
Total	86	

Living Arrangement	Count	Percentage
Group Home	1	1.16%
Supported Apt/Home	40	46.51%
Independent	3	3.49%
Natural Home	42	48.84%
Total	86	

Program Evaluation Management Report

Program Name: Waiver/Supported Living Program

This report covers: 7/1/2019 through 6/30/2020

Medicaid	Count	Percentage
Yes	85	98.84%
No	1	1.16%
Total	86	

Multiply Disabled	Count	Percentage
No	36	41.86%
Yes	50	58.14%
Total	86	

County	Count	Percentage
Mad.	1	1.16%
madison	80	93.02%
Delaware	2	2.33%
Henry	1	1.16%
Hancock	1	1.16%
MAD	1	1.16%
Total	86	

Primary Funder	Count	Percentage
WVR-CI&H	59	68.60%
	1	1.16%
FS	1	1.16%
WVR-FS	25	29.07%
Total	86	

Age in years (as of 6/30/2020):

Oldest:	75
Youngest:	2
Average Age of currently enrolled:	42.3

**PROGRAM EVALUATION
ANNUAL MANAGEMENT REPORT FY20
August 25th 2020**

EMPLOYMENT SERVICES PROGRAM

Prepared by: Tammy Holland, Community Employment Services Director

INTRODUCTION

This report evaluates the Community Employment Services Program for the period of July 1, 2019 through June 30th 2020. This report will summarize the effectiveness and efficiency of the program and the satisfaction of the clients and the other stakeholders served by Employment Services.

CLIENT DESCRIPTORS

During this report period a total of 168 individuals were served, reflecting a decrease from 184 individuals during the same report period FY19. One-hundred and twenty-four individuals participated in Supported Employment and 44 participated in Supported Employment Follow Along, (Seven individuals participated in both programs at some point throughout the report period).

Supported Employment served 77 males and 47 females. One hundred individuals served in this program lived independently or with family, 9 received residential support and 15 lived in group homes. Fifty individuals served were diagnosed with Intellectual Disabilities, 13 with MI/Emotional disabilities, 32 with Autism, 2 with hearing impairment, 13 with physical Impairments, 5 with a visual impairment, 3 with seizure disorder, 1 with communication barrier and the remaining 5 in the “other” category representing those with Traumatic Brain Injury. Of these individuals, 112 are Caucasian, 7 African American, 4 Hispanic and 1 Multi-Racial.

Supported Employment Follow Along served 31 males and 13 females. Twenty-eight individuals in this program live independently or in their natural homes, 14 receive residential support and 2 live in group homes. Thirty individuals served are diagnosed with Intellectual Disabilities, 11 with Autism, 2 with hearing impairments and 1 with physical limitations. Thirty-five individuals were Caucasian, 7 African American, 1 Hispanic and 1 Multi-Racial.

Pre-Employment Transition Services (Pre-ETS) is a contracted Vocational Rehabilitation program and Hopewell is part of the “North Central Collaborative” providing pre-employment services in the Madison and Henry County High Schools. During this report period we have served 62 students which is an increase of one student compared to last year. (One class we didn’t count this year because of not being able to benefit from services, and several students dropped out or moved away). We served 18 at Pendleton Heights H.S., 3 at Alexandria H.S., 9 at Frankton H.S., 3 at Lapel H.S., 3 at Lapel Middle School, 2 at Lapel Alternative School, 10 at Shenandoah H.S., and 14 at Blue River Valley H.S. The Pre-ETS program continues to provide vocational needs in 5 core areas of: Job Exploration, Work-based Learning Experience, Counseling on Post-Secondary Education, Workplace Readiness, Self-Advocacy and Group Activities that encompass all 5 cores.

Due to the onset of Covid-19, changes were needed in order to continue to supply services to students as well as teachers.

In March, the face of teaching, as well as delivery of Pre-Ets services changed...drastically . In-school, face-to-face services ceased immediately. Pre-Ets services were faced with changing as well, or close up shop. Staff worked with teachers to investigate and implement new ways to work with the students and render services. A few teachers were very helpful in aiding (Pre-ETS staff) by setting up conduits for them, such as Google Classroom and zoom conferences in order to better communicate with students. This allowed the Pre-ETS staff, the teacher and student, (all three) to keep in communication, delivering assignments and discussing ideas.

Virtual meetings (Zooming) began to take place, in addition to facetime, FB Messenger, e-mails, as well as phone calls and texting. Pre-ETS staff was also able to, (in many cases), assist in keeping in touch with high-risk (behavioral students) and to report to the TOR as to the wellness of the student, when communication was absent. Three new students were admitted virtually, which seemed a little awkward at first, but worked out in the end.

With the absence of driving and waiting for appointments, staff was able to become more efficient in delivery of service and revenue was increased. VR bent the rules a little and allowed graduated seniors to continue to receive services until the beginning of the new school year.

Over the summer TS was approached by staff from two different schools about being a part of new programs. SHS is implementing a new program for Suicide Prevention called Sources of Strength. TS will be a sponsor of the program. Also, a student from the Pre-ETS program was approved as a peer mentor. He excitedly showed TS his letter of acceptance from the school. In addition, Pendleton Heights is beginning an alternative program within the school for students with behavioral concerns. Pre-ETS staff has been asked to be a part of assisting the teacher in implementing Pre-ETS to them. The self-advocacy part of what we offer will hopefully play a most significant role for these students.

A lot of school procedures are still up the air, due to the virus. Two are set up to deliver virtual services entirely. Others are still in the process of figuring out what school and Pre-ETS delivery will look like through the upcoming months. They remain supportive, but ask us to be patient with students and parents who have and are going through so much.

PRIMARY OBJECTIVES

Program Effectiveness Measures

1) 75% of clients will be employed after 6 months at the same job.

July through December- 80%

January through June- 65%

Cumulative- 71%

Objective not met

2) 90% of consumers will have friendships at work.

July through December- 91%

January through June- 92%

Cumulative- 92%

Objective met

3) 75% of consumers will reach successful closure.

July through December- 73%
January through June- 69%
Cumulative- 71%
Objective not met

Program Efficiency Measures

4) Employment Specialists will bill budgeted revenue annually.

July through June- \$311,622.92
16% above projected revenue
Objective met

5) 85% of BINS will be completed within 90 days of receipt.

July through December- 33%
January through June- 9%
Cumulative- 21%
Objective not met

Satisfaction Measures

6) 100% of employers surveyed will rate Community Employment Services as good or excellent.

July through December – 100%
January through June- 100%
Cumulative- 100%
Objective met

7) 100% of clients will rate Community Employment Services as good or excellent.

July through December – 100%
January through June- 91%
Cumulative- 95.5%
Objective not met

8) 100% of V.R. Counselors will rate Community Employment Services as good or excellent.

July through December – 100%
January through June- 100%
Cumulative- 100%
Objective met

Objective met Developmental Measures

9) 100% of Employment Specialists will attend/receive at least 8 hours of training each year.

July through June-86%
Objective not met

DISCUSSION

Program Effectiveness Measures

1) 75% of clients will be employed after 6 months.

71% of consumers maintained employment for at least 6 months. Twenty-eight consumers were employed and 20 maintained their employment. When looking at individuals who did not maintain employment, 4 resigned their positions due coping skills needed to work in the community and the other 4 were a direct result of the Covid-19 pandemic as businesses were required to shut down and positions were eliminated. Employment Specialists worked very hard assisting consumers through this difficult time who worked or returned to work during the pandemic, keeping in close touch with businesses in the community. Each Employment Specialist utilizes the Discovery Profile, Job Development and Placement Plan, and the Individual Plan for Employment that Vocational Rehabilitation (VR) provides prior to looking for employment. Together, these tools identify the responsibilities of the team and the specific needs and supports of each individual. They also ensure good job matches for the client and employer. Some new employment connections made during this report period are: Hardee's in Pendleton, Wilson's furniture, Park Place Children's Center, Onion Factory, Chick-fil-A, Golden Corral, Taco Bell in (Fishers), BI Monitoring and Little Victories Daycare. Although our goal is to place consumers into jobs, new businesses in the community have opened up, offering career information for the consumers we work with in the Discovery phase. Some of those new sites are: Key's Kanine Kountry Klub and Madison Park Kids Connection.

2) 90% of consumers will have friendships at work.

92% of consumers have work friendships at work. This is the first time this objective has been measured. Sixty-one consumers were surveyed who worked a community job for 6 months or more and 56 reported having made friendships at work. Those who reported no friendships dealt with social anxiety and preferred not to interact unless required by their job. Employment Specialists always work very hard to build natural supports on the job for each consumer working. As a result, friendships often begin, and this factor can go a long way towards fostering retention. Some consumers shared that they dance, joke and take breaks with co-workers/managers while at work.

3) 75% of consumers will reach successful closure.

71% of the consumers placed in community employment reached successful closure. Twenty-four consumers were employed during this report period and 17 reached closure. Of those 17 closures, 6 received additional hourly support. This allowed for additional coaching and support from an Employment Specialist, until stabilization was reached, thus extending the time to reach successful closure. Vocational Rehabilitation focuses on supporting consumers more intensely early on in their employment, authorizing "as needed" hourly support on an individualized basis as support needs rise. When looking at those who did not reach successful closure, 4 terminated their positions without notice, 2 resigned after finding out they were unable to keep up on the demands of having a community job and the other consumer's position ended due to loss of a contract with the business they worked for. The average number of days from placement to successful closure is 144 days.

Program Efficiency Measures

4) Employment Specialist will bill budgeted revenue annually.

Employment Services Department is currently 16% above projected revenue for this report period. Vocational Rehabilitation Services revenue increased due to the 30 placements that occurred during this report period. Employment Specialists do a great job of tracking/monitoring of billable time each month and were able to switch gears and continue providing virtual services during the Covid-19 pandemic. Although there was a reduction in services and delays in milestone payments, the Employment Specialists were able to continue providing essential services to the consumers willing to participate.

5) 85% of BINS will be completed within 90 days of receipt.

21% of Benefit Information Plans (BIN's) were completed within 90 days of receipt. Twenty-eight Benefit Plans were referred during this report period and 12 benefit plans were completed during this report period and 3 were completed within 90 days. Employment Services ceased taking new referrals on 7-1-19 and resumed on 11-5-19 when an additional BIN Liaison was hired. Those that exceeded 90 days were primarily due to delays with scheduling, guardian/client participation and changes in Work Incentive Liaison (WIL) at the SSA office, Also, new Technical Assistants (TA), and delays in sending the Benefits Planning Query (BPQY) that is needed to write a Benefits Plan along with Covid-19 pandemic challenges. Although it is always a struggle waiting on verifications in all area's when writing a Benefits Plan, the Covid-19 pandemic has delayed plans tremendously averaging 179 days to completion. Due to the pandemic, Vocational Rehabilitation has authorized BIN Liaisons to submit billing and meet with consumers over the phone, or review at a later date. Currently there are 12 BIN referrals.

Satisfaction Measures

6) 100% of employers surveyed will rate Community Employment Services as good or excellent.

100% of employers surveyed rated Community Employment Services as good or excellent. Employment Specialists always work hard to build rapport/partnerships with the employers and at addressing any issues/concerns of the employer along with advocating for our consumers who are their employees. Employers have shared numerous times of how quickly issues are addressed and get resolved. Comments mentioned: "always polite and friendly and discusses all concerns with us immediately". "Continue providing the services your providing".

7) 100% of clients will rate Community Employment Services as good or excellent.

91% of consumers surveyed rated Community Employment Services as good or excellent. Employment Specialists work very hard to meet the needs of each consumer while working with them. Consumers shared comments: "I've made friends at work, I like to talk to them about my problems" and "Nothing you can do better", one consumer rated as fair but was satisfied with services. Community Employment Services Director along with Employment Specialists work together to ensure all interests are explored during the Discovery Process and to ensure good matches between the consumer and the Employment Specialist they are assigned to. Consumers who have worked with Hopewell previously will often

choose Hopewell when going back through VR to look for other or additional employment.

8) 100% of V.R. Counselors will rate Community Employment Services as good or excellent.

100% of VR surveys received rated Community Employment Services as good or excellent. Vocational Rehabilitation Counselors expressed that Employment Specialists do a great job of communicating, giving good input regarding needs of each consumer and making good job matches. Comments shared are: "E.S. is a great communicator", "ES helped maintain and address concerns with new management and task requirements for long term employment. Great Job"!

Developmental Measures

9) 100% of Employment Specialist will attend/receive at least 8 hours of training each year.

86% of Employment Specialist have attended at least 8 hours of training during this report period. All Employment Specialists have participated in at least 6 hours or more of training and as a department has 207 hours of training during this report period. Vocational Rehabilitation encourages continued yearly training each year for each Employment Specialist in order to stay up on service definitions, documentation standards, refresher courses on entitlements and further enhancement of skills in job developing. Trainings attended so far: IN-APSE Conference, Life Course Training, Employment Specialist Training Certification, Claims Portal Training, various webinars linked to Disability Inclusion, Mind your Business, Engaging in Policy, Advocacy and Reverse Job Fair, RHI training assessment tool and overview, Workone on career assessment, strategies to provide remote Employment Support and YTAC Discussion on systemic racism and support youth.

SUPPLEMENTAL OBJECTIVES

The average wage of clients placed from the Employment Services program was \$8.93 per hour, this is a .03 increase from the same report period in FY19. Five individuals obtained full-time employment and starting wages ranged from \$7.25 to \$11.54 per hour.

Number of consumers that interact with co-workers outside of work is 11. Sixty-one consumers were surveyed and 11 have friendships that go beyond just working together. Activities shared with Employment Services are: ride shares, going to the movies, hanging out, dates, going out to eat, attending races and going to festivals together. Covid-19 has limited or caused many activities outside of work to cease.

The number of placements is 29 in Madison County and 1 in Hamilton County. From referrals received, all lived in Madison County during this report period.

Number of referrals to E.S. program this report period is 62, of which 60 are from Madison County, 1 from Hancock County and 1 from Delaware County. Thirty-one less referrals from the same report period in FY19. Employment Services ceased taking on additional E.S. referrals on 9-1-19 and resumed accepting new referrals on 11-5-19. Fifteen referrals have been received since the start of Covid-19 pandemic.

The average number of days for those placed during this report period is 110, (from receiving 5th day authorization to placement). Discovery Plans and Work Experiences provided during the Discovery process have assisted in linking great workers for our community employers. We are happy to report we only increased 1 day from FY19.

The average number of hours worked per week by individuals in Employment Services is 21, four consumers obtained Full-time employment.

43% of Discovery plans submitted to VR were within 100 days from admission meeting. Twenty-three Discovery Plans were completed during this report period and 10 were submitted to VR within 100 days. Time limitations are not attached to Discovery plans to ensure all plans are individualized, based on each consumer's needs. Recently, prior to Covid-19 VR stated they would like to have Discovery Plans completed within 90 days (due to their time constraints) but understand all the scheduling involved. It is expected with Covid-19 pandemic, Discovery Plans will take additional time as we work with employers and restructure of business protocols. Employment Services received a total of 62 referrals during this report period and are happy to report the average number of days from referral to admission was 25 days.

Corrective Action

#5) 85% of BIN's will be completed within 90 days of receipt.

21% of BIN's were completed within 90 days of receipt.

Employment Services will continue to monitor the status of Covid-19 and the accessibility of verifications needed to complete BIN plans. CESD will monitor the number of BIN referrals as they are received and document all delays contributing to the extended time to complete the BIN plans for each consumer.

#9) 100% of Employment Specialist will attend/receive at least 8 hours of training each year.

86% of Employment Specialists received at least 8 hours of training

CESD will ensure time is allotted for training to those with limited weekly hours each year. With short webinars and department trainings.

Hopewell Center, Inc.
Program Evaluation Management Report
 Fiscal Year 2020

Program: Community Employment Services

Program Supervisor: Tammy Holland

Report Date: August 25th 2020

Report Period: 7-1-19 through 6-30-20

Primary Measures	First Six Month Period	Second Six Month Period	Cumulative Period
1. 75% of clients will be employed in the same job after six months.	80%	65%	71%
2. 90% of consumers will have friendships at work.	91%	92%	92%
3. 75% of consumers will reach successful closure.	73%	69%	71%
4. Employment Specialists will bill budgeted revenue annually.	Measured Annually	Measured Annually	+16%
5. 85% of BIN's will be completed within 90 days of receipt.	33%	9%	21%
6. 100% of employers surveyed will rate Community Employment Services as good or excellent.	100%	100%	100%
7. 100% of consumers surveyed will rate C.E.S. services as good or excellent.	100%	86%	91%
8. 100% of counselor surveys will rate services as good or excellent.	100%	100%	100%
9. 100% of Employment Specialist will attend/receive at least 8 hours of training each year.	Measured Annually	Measured Annually	86%

Exceptions/Comments:

#5) 85% of BIN's will be completed within 90 days of receipt.
33% of BIN's were completed within 90 days.

#9) 100% of Employment Specialist will attend/receive at least 8 hours of training each year.
86% of Employment Specialist received 8 hours of training

HOPEWELL CENTER, INC.

Program Evaluation Management Report
Fiscal Year 2020

Program: CES- Supported Employment

Program Supervisor: Tammy Holland

Report Date: August 25th, 2020

Report Period: 7-1-19 through 6-30-20

Supplemental Measures	First Six Month Period	Second Six Month Period	Cumulative Period
1. Average wage of client when placed.	\$8.58	\$9.58	\$8.93
2. Number of consumers that interact with co-workers outside of work.	10	1	11
3. Number of placements (by County)	20 Madison 1 Delaware	8 Madison	30
4. Number of referrals to program (by County)	19 Madison 1 Hancock	41 Madison 1 Delaware	62
5. Average # of days from authorization of job development to placement.	124	75	110
6. Average number of hours worked per week by consumers.	20	22	21
7. Percentage of Discovery plans submitted to VR within 100 days from admission meeting.	47%	14%	43%

Exceptions/Comments:

Program Evaluation Management Report

Program Name: Supported Employment

This report covers: 7/1/2019 through 6/30/2020

City	Count	Percentage
Frankton	1	0.81%
Greenfield	1	0.81%
Ingalls	1	0.81%
Lapel	1	0.81%
Middletown	1	0.81%
Elwood	5	4.03%
Daleville	1	0.81%
Chesterfield	2	1.61%
ANDERSON	88	70.97%
Anderso	1	0.81%
Alexandria	6	4.84%
Morristown	1	0.81%
Muncie	2	1.61%
Pendleton	9	7.26%
Summitville	3	2.42%
Andereson	1	0.81%
Total	124	

Disability	Count	Percentage
PHYSICAL	13	10.48%
HEARING	2	1.61%
INTELLECTUAL	50	40.32%
COMMUNICATION	1	0.81%
VISUAL	5	4.03%
SEIZURE	3	2.42%
MI/EMOTIONAL	13	10.48%
OTHER	5	4.03%
AUTISM	32	25.81%
Total	124	

Ethnic Group	Count	Percentage
Multi-Racial	1	0.81%
White	112	90.32%
Black	7	5.65%
Hispanic/Lat Origin	4	3.23%
Total	124	

Program Evaluation Management Report

Program Name: Supported Employment

This report covers: 7/1/2019 through 6/30/2020

Gender	Count	Percentage
F	47	37.90%
M	77	62.10%
Total	124	

Living Arrangement	Count	Percentage
Relative Home	2	1.61%
Independent	15	12.10%
Group Home	15	12.10%
Supported Apt/Home	9	7.26%
Natural Home	83	66.94%
Total	124	

Medicaid	Count	Percentage
No	29	23.39%
Yes	95	76.61%
Total	124	

Multiply Disabled	Count	Percentage
No	93	75.00%
Yes	31	25.00%
Total	124	

County	Count	Percentage
Madison	118	95.16%
Delaware	2	1.61%
Henry	2	1.61%
Hancock	2	1.61%
Total	124	

Program Evaluation Management Report

Program Name: Supported Employment

This report covers: 7/1/2019 through 6/30/2020

Primary Funder	Count	Percentage
MCD-SGL	6	4.84%
OVR	1	0.81%
SL-SEFA	2	1.61%
WVR-FS	6	4.84%
WVR-CI&H	10	8.06%
VR	97	78.23%
	2	1.61%
Total	124	

Age in years (as of 6/30/2020):

Oldest:	78
Youngest:	17
Average Age of currently enrolled:	33.5

Program Evaluation Management Report

Program Name: Supported Employment Follow Along

This report covers: 7/1/2019 through 6/30/2020

City	Count	Percentage
Chesterfield	1	2.27%
Elwood	2	4.55%
ANDERSON	38	86.36%
Alexandria	1	2.27%
Pendleton	2	4.55%
Total	44	

Disability	Count	Percentage
PHYSICAL	1	2.27%
AUTISM	11	25.00%
HEARING	2	4.55%
INTELLECTUAL	30	68.18%
Total	44	

Ethnic Group	Count	Percentage
Multi-Racial	1	2.27%
Hispanic/Lat Origin	1	2.27%
White	35	79.55%
Black	7	15.91%
Total	44	

Gender	Count	Percentage
F	13	29.55%
M	31	70.45%
Total	44	

Living Arrangement	Count	Percentage
Natural Home	27	61.36%
Independent	1	2.27%
Supported Apt/Home	14	31.82%
Group Home	2	4.55%
Total	44	

Program Evaluation Management Report

Program Name: Supported Employment Follow Along

This report covers: 7/1/2019 through 6/30/2020

Medicaid	Count	Percentage
No	9	20.45%
Yes	35	79.55%
Total	44	

Multiply Disabled	Count	Percentage
Yes	15	34.09%
No	29	65.91%
Total	44	

County	Count	Percentage
Madison	42	95.45%
MAD	1	2.27%
Mad.	1	2.27%
Total	44	

Primary Funder	Count	Percentage
MCD-SGL	3	6.82%
WVR-CI&H	15	34.09%
SL-SEFA	4	9.09%
WVR-FS	10	22.73%
VR	12	27.27%
Total	44	

Age in years (as of 6/30/2020):

Oldest:	65
Youngest:	21
Average Age of currently enrolled:	38.2

PROGRAM EVALUATION FY20
ANNUAL MANAGEMENT REPORT

MUSIC THERAPY

INTRODUCTION

This management report examines information gathered for the Music Therapy Program for the period beginning July 1, 2019 and ending June 30, 2020. This report was compiled to share the results of specific program objectives. It was created by Julianne Jarrell, Children's Services Director, from data gathered to measure these objectives. The objectives have been designed to indicate the programs effectiveness, efficiency, consumer satisfaction and future development.

CLIENT DESCRIPTORS

During the twelve month period from July 1, 2019 to June 30, 2020, 25 individuals participated in the Music Therapy Program. Individuals served in Music Therapy ranged in age from 8 to 67, with 6 individuals being under age 18. Of the 25 participants, 72% live in Anderson and 100% were Caucasian. Sixty eight percent of individuals live in their natural home. Thirty two percent of consumers served have the diagnosis of Autism.

PRIMARY OBJECTIVES

During this report period, the program's effectiveness will be measured by the following two objectives:

- 1) 75% of consumers will demonstrate progress towards their goals.
Results show that 75% of consumers showed progress towards all outcomes.

Our results show that consumers participating in music therapy are making good progress towards their outcomes. This year we hope to show that 75% of consumers are making progress towards goals for three out of the four quarters measured – data shows that 74% made progress towards outcomes three out of four quarters. Outcomes are reviewed quarterly, with updates made as needed. Music therapists work together with the consumers, family members and other service providers to ensure that outcomes are meaningful and meet the needs of the individuals. Some examples of outcomes include improving cognitive skills by correctly identifying musical symbols, improving communication by answering questions, improving behavior by following directions, improve motor skills by using both hands, and improving emotional skills by choosing a song that correlates to their mood.

PROGRAM EVALUATION FY20

Music Therapy

Page 2

- 2) Music Therapy consumers will develop Community Connections. 25% of individuals surveyed will indicate that they have used music to make connections with the community.

Typically this will be measured around annual survey time. We did not complete annual surveys this year due to the pandemic shut down.

The program's efficiency was measured by the objectives stating:

- 3) Music Therapy sessions will be attended at an average of 80%. Results show that 71% of sessions were attended (Jul-Feb).

Attendance results per month showed a range from 48-88% attendance. The music therapist continues to track the reasons for missed sessions, including those sessions that are last minute cancellations, consumers that didn't show up for sessions, and also track sessions cancelled by the therapist. We had just implemented a new tracking system to capture units missed, and try and make up sessions when possible.

- 4) The Music Therapist will average 110 hours of billing per month. The average for this period was 96 hours per month (Jul-Feb)

The Music Therapy program continues to monitor the number of hours billed per month. The average number of hours billed per music therapist was 96 hours per month for this reporting period, an increase from the first half of last years figure of 89 hours, with a range of 66 (in December) to 119 hours per month for the date range July-February. Music Therapist and Program director continue to work together to ensure consistent therapy sessions with most efficient utilization of the music therapists time.

The satisfaction of families being served will be measured with our consumer satisfaction surveys (in May) with the goal that:

- 5) 100% of families surveyed will rate music therapy services as good or excellent. Annual survey is typically conducted in May. It did not occur this year due to the pandemic shut down.

SUPPLEMENTAL MEASURES

- 1) The first supplemental measure indicates the number of consumers added to the waiting list, and the number of consumers taken off the waiting list that started music therapy.

PROGRAM EVALUATION FY20

Music Therapy

Page 3

Results show that one individual was added to the waiting list during this six month period, and one new individual started services.

The waiting list for music therapy has been stable during the past twelve months. Individuals contact Hopewell Center to be added to the list. We now have a total of 30 individuals waiting. Recruitment efforts continue.

- 2) The second measure indicates the number of consumers that participate in public performance.
25 consumers participated in the concert in December.

Our music therapist plans semi annual music therapy recitals. This is a good opportunity for the consumers to perform in public. These have been well received by families and others attending. Many consumers are understandably nervous about performing in public, and have made great strides with their confidence and ability to perform in front of a group. We did not have a concert in May due to the pandemic.

DISCUSSION

Hopewell Center has had a Music Therapy program for five years now. This has shown to be a very popular service. We currently have one staff therapist and one other therapist that utilizes space at our facility for Hopewell consumers.

Unfortunately we have recently lost our full time therapist due to resignation. Including her caseload and the waiting list we do have enough individuals to fill two full time caseloads. Recruitment efforts are underway - Local universities that offer Music Therapy degrees and certification have been contacted in hopes of recruiting more therapists. When Music Therapy resumes we will continue to track the number of consumers served, the progress made by those individuals, including their satisfaction, and will track efficiency by monitoring time utilization and attendance levels.

Program closures due to the pandemic did significantly affect the Music Therapy program. Day services, including Music Therapy, closed down in mid March. The music therapist was put on temporary lay off status and no services were provided mid-March through May. Only a few music therapy hours were provided in June before the therapist left for family leave.

Hopewell Center, Inc.
Program Evaluation Management Report
Fiscal Year 2020

Program: Music Therapy

Program Supervisor: Julianne Jarrell

Report Date: 9/15/20

Report Period: 7/1/19-6/30/20

Primary Measures	First Six Month Period	Second Six Month Period	Cumulative Period
1. Music Therapy consumers will increase their skills—75% of consumers will demonstrate progress towards goals 3 out of 4 quarters measured at annual report	80%	70%	74%
2. 25% of individuals will indicate that they have used music to make connections within the community, measured at annual survey time			
3. An average of 80% of sessions will be made during a 12 month period.	69%	78%	71%
4. Music Therapist will average 110 hours billing per month.	94 hours/month	113 hours/mo	96 hours/mo
5. Consumers will express satisfaction with services provided-- 100% of families surveyed will rate music therapy services as good or excellent.			

Program Evaluation Management Report

Program Name: Music Therapy

This report covers: 7/1/2019 through 6/30/2020

City	Count	Percentage
Atlanta	2	8.00%
Daleville	1	4.00%
Frankton	1	4.00%
PENDLETON	1	4.00%
Markleville	1	4.00%
Alexandria	1	4.00%
ANDERSON	18	72.00%
Total	25	

Disability	Count	Percentage
INTELLECTUAL	17	68.00%
AUTISM	8	32.00%
Total	25	

Ethnic Group	Count	Percentage
White	25	100.00%
Total	25	

Gender	Count	Percentage
M	17	68.00%
F	8	32.00%
Total	25	

Living Arrangement	Count	Percentage
Natural Home	17	68.00%
Supported Apt/Home	8	32.00%
Total	25	

Medicaid	Count	Percentage
Yes	25	100.00%
Total	25	

Program Evaluation Management Report

Program Name: Music Therapy

This report covers: 7/1/2019 through 6/30/2020

Multiply Disabled	Count	Percentage
No	17	68.00%
Yes	8	32.00%
Total	25	

County	Count	Percentage
Hamilton	2	8.00%
Delaware	1	4.00%
Madison	19	76.00%
	3	12.00%
Total	25	

Primary Funder	Count	Percentage
WVR-CI&H	11	44.00%
WVR-FS	14	56.00%
Total	25	

Age in years (as of 6/30/2020):

Oldest:	67
Youngest:	8
Average Age of currently enrolled:	34.1