



Apostolic Christian Services

Apostolic Christian Home for the Handicapped, Inc.

ANNUAL OUTCOME MEASUREMENT REPORT

July 1, 2014 – June 30, 2015

OUR MISSION

Serving According to God's Purpose

- *Believing God's promises are true*
- *Directed by Christian values*
- *Believing we are called to serve*
- *Believing all people have dignity and potential*
- *Giving our best to help others achieve their best*

APOSTOLIC CHRISTIAN HOME FOR THE HANDICAPPED, INC.

OUTCOME MEASURES ANNUAL SUMMARY

Annual Report (July 2014 - June 2015)

EFFICIENCY MEASURES

- 1. All clients in each program will have 100% of their funding (personal and agency) in place. Clients who have been in a program three months or less will not be counted in this data.**

ACTR had 100% of clients with all funding in place. Oakwood Estate had 100% of clients with all funding in place. Linden Estate had 100% of clients with all funding in place. The CILA Program had 100% of clients with all funding in place. The CRS Program had 100% of clients with all funding in place. The ACTR Day Program had 100% of clients with all funding in place. The agency had 99.9% of clients with all funding in place. Clients in multiple agency programs are counted more than once. This meets the goal for all programs. The agency goal was met.

Staff are highly aware of the importance of funding being in place and are diligent in following up.

- 2. The agency will maintain a reserve in cash and the general and trust funds equal to or greater than the projected expenses for nine months. Cash and Investments will be reduced by any outstanding loans for this calculation.**

The reserve is equal to about 15 months. This is well above the goal.

We have been blessed by donations and sound investments. Administration will continue to monitor closely.

- 3. There will be established goals for turnover for each facility and program. The large facility will have separate goals for direct care and support staff.**

		<u>Goal</u>	<u>Actual</u>	
ACTR aides	less than	60%	35%	goal met
nurses	"	15%	12%	goal met
activities	"	58%	3%	goal met
Oakwood Estate	"	40%	29%	goal met
Linden Estate	"	40%	18%	goal met
CILA	"	40%	20%	goal met
Agency total	"		22%	no combined agency goal to meet

We have been fortunate to keep turnover modest in spite of a drop in the unemployment rate.

- 4. 98% of employees will have their annual review completed by Aug. 15.**

This goal was not achieved.

Annual raises were delated and employee evaluations were also delayed. They were completed by October 31. The Goal will be set to October 31 for 2015-16.

EFFECTIVENESS

- 5. Each client is observed at his or her Day Program at least once a year by facility staff.**

All clients were observed at their Day Program site at least once in the past year.

The goal is 100% and no changes are needed.

6. **Each facility or program will meet its established goals for number of people who participated in community sponsored activities (outings, church, HISRA, CIRT, Mainstreamers, etc.) in that quarter. Three outings per quarter.**

	<u>Goal</u>	<u>Actual</u>	
ACTR -	70%	75%	goal met
Oakwood Estate -	95%	90%	goal not met
Linden Estate -	95%	100%	goal met
CILA -	95%	100%	goal met
CRS -	95%	100%	goal met

There is no combined goal for the agency.

This goal is good for accountability and will be kept.

7. **95% of clients, who have been recommended for OT, PT, or speech services, by the professional consultants, are receiving those services.**

99% of the agency's clients who have recommendations for OT, PT or speech services are receiving those services. This does meet the agency goal.

The agency has been having difficulty attaining 95%. Administration will review the issues and review the goal for next year.

8. **95% of clients who receive OT, PT, or speech consultant recommendations for adaptive/assistive technology will have it in place or in the process of being acquired by the following annual or six month staffing.**

100% of the agency's clients who have recommendations from OT, PT or speech services for adaptive/assistive technology have it in place or are in the process of acquiring it. This does meet the agency goal.

This goal is good and will be kept at 95%.

9. **100% of clients will have their annual physicals within twelve months of previous physical.**

The percent of clients who had their physicals done within twelve months is as follows:

ACTR	81%	does not meet goal
Oakwood Estate	100%	meets goal
Linden Estate	100%	meets goal
CILA	100%	meets goal
CRS	100%	meets goal
Agency total	91%	does not meet goal

Timber Ridge staff have reviewed the reasons for physicals not being completed on time. One physician frequently has to reshcedule, so we have recently scheduled his Nurse Practitioner to come twice a month to meet this requirement. This seems to be working well.

10. **100% of clients will have their annual dental examinations done within twelve months of previous exam.**

The percent of clients who had their dental exams done within twelve months is as follows:

ACTR	99%	does not meet goal
Oakwood Estate	100%	meets goal
Linden Estate	100%	meets goal
CILA	100%	meets goal
CRS	100%	meets goal
Agency total	99%	does not meet goal

The goal should remain at 100%, which is a good target. There was one individual that was late.

- 11. Each facility will have established goals for guardianship participation in the IDT process (attendance, feedback form, personal contact or phone contact).**

	<u>Goal</u>	<u>Actual</u>	
ACTR	90%	99%	goal met
Oakwood Estate	90%	100%	goal met
Linden Estate	90%	100%	goal met
CILA	90%	100%	goal met
CRS	N/A	N/A	
Agency total	90%	99%	goal met

The goal is high and staff do well at assuring it is met.

- 12. There will be no more than two incidents of Escherichia (E) coli urinary tract infections for the agency per month.**

The monthly incidence of Escherichia coli urinary tract infections was 0 at ACTR and 0 at all other facilities. This meets the agency goal.

This is a reasonable goal and will continue.

- 13. There will be no more than two residents with MRSA per month.**

The monthly incidence of MRSA was no more than 2 at ACTR and 0 at all other facilities. This meets the agency goal.

This is increasingly more difficult to attain but should be kept.

- 14. There will be no more than two residents with C.Diff per month.**

The monthly incidence of C.Diff was no more than 2 at ACTR and 0 at all other facilities. This meets the agency goal.

This is increasingly more difficult to attain but should be kept.

- 15. Those facilities whose food service is inspected by the Tazewell County Public Health Department will receive passing scores for all inspections.**

ACTR is the only facility inspected by the Tazewell County Public Health department. The kitchen did pass their inspections for the year.

This goal should continue.

**Apostolic Christian Home for the Handicapped
July 2014 - June 2015
Annual Consumer Satisfaction Survey**

Always
Sometimes
Never

Facility

Always	Sometimes	Never	
95	1	0	1. Do you believe your home is well taken care of?
90	5	0	2. Do you have a private place to visit / be alone?
93	4	0	3. Do you have privacy during your care (curtain pulled during bath, etc.)

Resident Care

79	20	0	4. Do staff knock & say their name before entering your room?
89	7	0	5. Do staff explain your care?
88	8	0	6. Are staff available to help you (case manager, aides, etc.)?

Day Program / Work

77	16	0	7. Do you like where you work?
82	13	0	8. Are your wants and needs taken care of at work?

Leisure / Community

89	6	0	9. Do you enjoy the activities planned at your home?
86	11	0	10. Do you like the outings offered to you?

Dietary

81	15	0	11. Do you like the food where you live?
87	8	0	12. Do you enjoy where you eat (dining room, tablemates, etc.)?

Resident Rights

92	2	0	13. Do you understand your rights & believe they are followed?
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**Apostolic Christian Timber Ridge
July 2014 - June 2015
Annual Consumer Satisfaction Survey**

Always
Sometimes
Never

Facility

32	0	0	1. Do you believe your home is well taken care of?
32	0	0	2. Do you have a private place to visit / be alone?
32	2	0	3. Do you have privacy during your care (curtain pulled during bath, etc.)

Resident Care

28	7	0	4. Do staff knock & say their name before entering your room?
30	2	0	5. Do staff explain your care?
28	4	0	6. Are staff available to help you (case manager, aides, etc.)?

Day Program / Work

28	4	0	7. Do you like where you work?
28	4	0	8. Are your wants and needs taken care of at work?

Leisure / Community

30	2	0	9. Do you enjoy the activities planned at your home?
29	5	0	10. Do you like the outings offered to you?

Dietary

25	7	0	11. Do you like the food where you live?
29	2	0	12. Do you enjoy where you eat (dining room, tablemates, etc.)?

Resident Rights

32	0	0	13. Do you understand your rights & believe they are followed?
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**Apostolic Christian Oakwood Estate
July 2014 - June 2015
Annual Consumer Satisfaction Survey**

Always
Sometimes
Never

Facility

10	0	0	1. Do you believe your home is well taken care of?
8	2	0	2. Do you have a private place to visit / be alone?
8	1	0	3. Do you have privacy during your care (curtain pulled during bath, etc.)

Resident Care

7	3	0	4. Do staff knock & say their name before entering your room?
9	1	0	5. Do staff explain your care?
9	1	0	6. Are staff available to help you (case manager, aides, etc.)?

Day Program / Work

8	2	0	7. Do you like where you work?
8	2	0	8. Are your wants and needs taken care of at work?

Leisure / Community

9	1	0	9. Do you enjoy the activities planned at your home?
10	0	0	10. Do you like the outings offered to you?

Dietary

10	0	0	11. Do you like the food where you live?
9	1	0	12. Do you enjoy where you eat (dining room, tablemates, etc.)?

Resident Rights

10	0	0	13. Do you understand your rights & believe they are followed?
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**Apostolic Christian Linden Estate
July 2014 - June 2015
Annual Consumer Satisfaction Survey**

Always
Sometimes
Never

Facility

- | | | | |
|---|---|---|--|
| 7 | 0 | 0 | 1. Do you believe your home is well taken care of? |
| 7 | 0 | 0 | 2. Do you have a private place to visit / be alone? |
| 7 | 0 | 0 | 3. Do you have privacy during your care (curtain pulled during bath, etc.) |

Resident Care

- | | | | |
|---|---|---|---|
| 7 | 0 | 0 | 4. Do staff knock & say their name before entering your room? |
| 7 | 0 | 0 | 5. Do staff explain your care? |
| 7 | 0 | 0 | 6. Are staff available to help you (case manager, aides, etc.)? |

Day Program / Work

- | | | | |
|---|---|---|--|
| 5 | 1 | 0 | 7. Do you like where you work? |
| 6 | 0 | 0 | 8. Are your wants and needs taken care of at work? |

Leisure / Community

- | | | | |
|---|---|---|--|
| 7 | 0 | 0 | 9. Do you enjoy the activities planned at your home? |
| 7 | 0 | 0 | 10. Do you like the outings offered to you? |

Dietary

- | | | | |
|---|---|---|---|
| 6 | 1 | 0 | 11. Do you like the food where you live? |
| 7 | 0 | 0 | 12. Do you enjoy where you eat (dining room, tablemates, etc.)? |

Resident Rights

- | | | | |
|---|---|---|--|
| 7 | 0 | 0 | 13. Do you understand your rights & believe they are followed? |
|---|---|---|--|

Apostolic Christian CILA
July 2014 - June 2015
Annual Consumer Satisfaction Survey

Always
 Sometimes
 Never

Facility

44	1	0	1. Do you believe your home is well taken care of?
42	3	0	2. Do you have a private place to visit / be alone?
44	1	0	3. Do you have privacy during your care (curtain pulled during bath, etc.)

Resident Care

37	8	0	4. Do staff knock & say their name before entering your room?
43	2	0	5. Do staff explain your care?
43	2	0	6. Are staff available to help you (case manager, aides, etc.)?

Day Program / Work

35	8	0	7. Do you like where you work?
39	6	0	8. Are your wants and needs taken care of at work?

Leisure / Community

42	3	0	9. Do you enjoy the activities planned at your home?
39	6	0	10. Do you like the outings offered to you?

Dietary

39	6	0	11. Do you like the food where you live?
40	5	0	12. Do you enjoy where you eat (dining room, tablemates, etc.)?

Resident Rights

42	2	0	13. Do you understand your rights & believe they are followed?
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**Apostolic Christian CRS
July 2014 - June 2015
Annual Consumer Satisfaction Survey**

Always
Sometimes
Never

Facility

- | | | | |
|---|---|---|--|
| 2 | 0 | 0 | 1. Do you believe your home is well taken care of? |
| 1 | 0 | 0 | 2. Do you have a private place to visit / be alone? |
| 2 | 0 | 0 | 3. Do you have privacy during your care (curtain pulled during bath, etc.) |

Resident Care

- | | | | |
|---|---|---|---|
| 0 | 2 | 0 | 4. Do staff knock & say their name before entering your room? |
| 0 | 2 | 0 | 5. Do staff explain your care? |
| 1 | 1 | 0 | 6. Are staff available to help you (case manager, aides, etc.)? |

Day Program / Work

- | | | | |
|---|---|---|--|
| 1 | 1 | 0 | 7. Do you like where you work? |
| 1 | 1 | 0 | 8. Are your wants and needs taken care of at work? |

Leisure / Community

- | | | | |
|---|---|---|--|
| 1 | 0 | 0 | 9. Do you enjoy the activities planned at your home? |
| 1 | 0 | 0 | 10. Do you like the outings offered to you? |

Dietary

- | | | | |
|---|---|---|---|
| 1 | 1 | 0 | 11. Do you like the food where you live? |
| 2 | 0 | 0 | 12. Do you enjoy where you eat (dining room, tablemates, etc.)? |

Resident Rights

- | | | | |
|---|---|---|--|
| 1 | 0 | 0 | 13. Do you understand your rights & believe they are followed? |
|---|---|---|--|

Apostolic Christian Home for the Handicapped
July 2014 - June 2015
Annual Family Satisfaction Survey

Never	Rarely	Sometimes	Mostly	Always
1	2	3	4	5

FACILITY				
0	0	0	11	80

0	0	0	4	84
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STAFF				
0	0	0	10	81

0	0	0	13	74
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RESIDENT CARE				
0	0	0	19	73

0	0	0	7	83
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MEDICAL				
0	0	3	12	77

0	0	0	11	80
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LEISURE				
0	0	0	27	63

0	0	1	21	64
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IDT PROCESS				
0	0	0	6	77

0	0	0	8	79
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1. Do you feel that the overall condition and upkeep of the facility is good?
2. Do you feel comfortable and welcome when visiting the facility?
3. Are staff members generally accessible and willing to assist?
4. When you bring a concern or idea to management or staff do they respond?
5. Are you comfortable with the overall care that your resident receives?
6. Do you feel staff interact with your resident in a compassionate and respectful manner?
7. Are you informed of matters regarding your resident's healthcare services?
8. Is medical information communicated in a thorough, clear manner at your resident's IDT meeting and/or when speaking with nursing staff?
9. Do you feel that your resident's leisure needs are met within the facility?
10. Are you satisfied with your resident's opportunities for community access?
11. Do you feel comfortable participating in the planning meeting?
12. Is the information presented at the IDT meeting and/or in the ISP packet useful in better understanding your resident's strengths and needs?

**Apostolic Christian Timber Ridge
July 2014 - June 2015
Annual Family Satisfaction Survey**

Never	Rarely	Sometimes	Mostly	Always
1	2	3	4	5

FACILITY				
0	0	0	4	33

0	0	0	2	33
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STAFF				
0	0	0	7	30

0	0	0	4	29
---	---	---	---	----

RESIDENT CARE				
0	0	0	9	28

0	0	0	3	34
---	---	---	---	----

MEDICAL				
0	0	0	4	33

0	0	0	3	33
---	---	---	---	----

LEISURE				
0	0	0	12	23

0	0	0	8	23
---	---	---	---	----

IDT PROCESS				
0	0	0	4	28

0	0	0	5	29
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1. Do you feel that the overall condition and upkeep of the facility is good?
2. Do you feel comfortable and welcome when visiting the facility?
3. Are staff members generally accessible and willing to assist?
4. When you bring a concern or idea to management or staff do they respond?
5. Are you comfortable with the overall care that your resident receives?
6. Do you feel staff interact with your resident in a compassionate and respectful manner?
7. Are you informed of matters regarding your resident's healthcare services?
8. Is medical information communicated in a thorough, clear manner at your resident's IDT meeting and/or when speaking with nursing staff?
9. Do you feel that your resident's leisure needs are met within the facility?
10. Are you satisfied with your resident's opportunities for community access?
11. Do you feel comfortable participating in the planning meeting?
12. Is the information presented at the IDT meeting and/or in the ISP packet useful in better understanding your resident's strengths and needs?

**Apostolic Christian Oakwood Estate
July 2014 - June 2015
Annual Family Satisfaction Survey**

Never	Rarely	Sometimes	Mostly	Always
1	2	3	4	5

FACILITY				
0	0	0	0	8

0	0	0	0	8
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STAFF				
0	0	0	0	8

0	0	0	1	7
---	---	---	---	---

RESIDENT CARE				
0	0	0	1	7

0	0	0	1	7
---	---	---	---	---

MEDICAL				
0	0	0	2	6

0	0	0	0	8
---	---	---	---	---

LEISURE				
0	0	0	4	4

0	0	0	5	3
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IDT PROCESS				
0	0	0	1	7

0	0	0	2	6
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1. Do you feel that the overall condition and upkeep of the facility is good?
2. Do you feel comfortable and welcome when visiting the facility?
3. Are staff members generally accessible and willing to assist?
4. When you bring a concern or idea to management or staff do they respond?
5. Are you comfortable with the overall care that your resident receives?
6. Do you feel staff interact with your resident in a compassionate and respectful manner?
7. Are you informed of matters regarding your resident's healthcare services?
8. Is medical information communicated in a thorough, clear manner at your resident's IDT meeting and/or when speaking with nursing staff?
9. Do you feel that your resident's leisure needs are met within the facility?
10. Are you satisfied with your resident's opportunities for community access?
11. Do you feel comfortable participating in the planning meeting?
12. Is the information presented at the IDT meeting and/or in the ISP packet useful in better understanding your resident's strengths and needs?

**Apostolic Christian Linden Estate
July 2014 - June 2015
Annual Family Satisfaction Survey**

Never	Rarely	Sometimes	Mostly	Always
1	2	3	4	5

FACILITY				
0	0	0	4	4

0	0	0	0	8
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STAFF				
0	0	0	1	7

0	0	0	2	5
---	---	---	---	---

RESIDENT CARE				
0	0	0	1	7

0	0	0	0	7
---	---	---	---	---

MEDICAL				
0	0	0	1	7

0	0	0	2	6
---	---	---	---	---

LEISURE				
0	0	0	3	5

0	0	0	2	6
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IDT PROCESS				
0	0	0	0	8

0	0	0	0	8
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1. Do you feel that the overall condition and upkeep of the facility is good?
2. Do you feel comfortable and welcome when visiting the facility?
3. Are staff members generally accessible and willing to assist?
4. When you bring a concern or idea to management or staff do they respond?
5. Are you comfortable with the overall care that your resident receives?
6. Do you feel staff interact with your resident in a compassionate and respectful manner?
7. Are you informed of matters regarding your resident's healthcare services?
8. Is medical information communicated in a thorough, clear manner at your resident's IDT meeting and/or when speaking with nursing staff?
9. Do you feel that your resident's leisure needs are met within the facility?
10. Are you satisfied with your resident's opportunities for community access?
11. Do you feel comfortable participating in the planning meeting?
12. Is the information presented at the IDT meeting and/or in the ISP packet useful in better understanding your resident's strengths and needs?

Apostolic Christian CILA
July 2014 - June 2015
Annual Family Satisfaction Survey

Never	Rarely	Sometimes	Mostly	Always
1	2	3	4	5

FACILITY				
0	0	0	3	34

0	0	0	2	34
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STAFF				
0	0	0	2	35

0	0	0	6	32
---	---	---	---	----

RESIDENT CARE				
0	0	0	8	30

0	0	0	2	35
---	---	---	---	----

MEDICAL				
0	0	3	5	30

0	0	0	6	32
---	---	---	---	----

LEISURE				
0	0	0	7	31

0	0	1	5	32
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IDT PROCESS				
0	0	0	1	34

0	0	0	1	36
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1. Do you feel that the overall condition and upkeep of the facility is good?
2. Do you feel comfortable and welcome when visiting the facility?
3. Are staff members generally accessible and willing to assist?
4. When you bring a concern or idea to management or staff do they respond?
5. Are you comfortable with the overall care that your resident receives?
6. Do you feel staff interact with your resident in a compassionate and respectful manner?
7. Are you informed of matters regarding your resident's healthcare services?
8. Is medical information communicated in a thorough, clear manner at your resident's IDT meeting and/or when speaking with nursing staff?
9. Do you feel that your resident's leisure needs are met within the facility?
10. Are you satisfied with your resident's opportunities for community access?
11. Do you feel comfortable participating in the planning meeting?
12. Is the information presented at the IDT meeting and/or in the ISP packet useful in better understanding your resident's strengths and needs?

**Apostolic Christian CRS
July 2014 - June 2015
Annual Family Satisfaction Survey**

Never	Rarely	Sometimes	Mostly	Always
1	2	3	4	5

FACILITY				
0	0	0	0	1

0	0	0	0	1
---	---	---	---	---

STAFF				
0	0	0	0	1

0	0	0	0	1
---	---	---	---	---

RESIDENT CARE				
0	0	0	0	1

0	0	0	1	0
---	---	---	---	---

MEDICAL				
0	0	0	0	1

0	0	0	0	1
---	---	---	---	---

LEISURE				
0	0	0	1	0

0	0	0	1	0
---	---	---	---	---

IDT PROCESS				
0	0	0	0	0

0	0	0	0	0
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1. Do you feel that the overall condition and upkeep of the facility is good?
2. Do you feel comfortable and welcome when visiting the facility?
3. Are staff members generally accessible and willing to assist?
4. When you bring a concern or idea to management or staff do they respond?
5. Are you comfortable with the overall care that your resident receives?
6. Do you feel staff interact with your resident in a compassionate and respectful manner?
7. Are you informed of matters regarding your resident's healthcare services?
8. Is medical information communicated in a thorough, clear manner at your resident's IDT meeting and/or when speaking with nursing staff?
9. Do you feel that your resident's leisure needs are met within the facility?
10. Are you satisfied with your resident's opportunities for community access?
11. Do you feel comfortable participating in the planning meeting?
12. Is the information presented at the IDT meeting and/or in the ISP packet useful in better understanding your resident's strengths and needs?

2014 - 2015 SATISFACTION SURVEYS

ACTR

There were a total of 35 residents who were able to respond. This is about half of the total residents and reflects the large number who are not cognitively able to respond. This significantly decreases the reliability of the response. There were no negative responses. Of a total of 13 items there were two with over five responses of **sometimes**. They were about food and privacy. These are usually the most negative responses. Because of the low numbers of residents able to participate, these are primarily responded to on an individual basis. Staff will be made aware of the items so they can be sensitive.

There were 37 family/guardian responses. This is a few less than in past years. Part of this may be the decreased number of people residing at Timber Ridge. It also may represent a different group of clients based on the moves of the past years. The family survey is a scaled survey to get more accurate responses from family. There were no items that got a **sometimes**, **rarely** or **never** response. All of the responses fell in **mostly** or **always**. One third of the responses were **mostly** as opposed to **always** on leisure needs being met in the facility. One fourth of the responses were **mostly** as opposed to **always** for satisfaction with care level and for community access. We will compare these to past years and see if there is a pattern. In all other categories at least 80% of the responses were completely positive. Responses of **mostly** or **always** are a very positive reflection on services.

Oakwood Estate

10 of the 12 residents of Oakwood were able to respond to the survey. This is the first response from the new group of residents so there is no comparative data. There were no negative responses. One item had three responses of **sometimes** and one had two responses of **sometimes**. Both had to do with privacy issues. Staff will review options and go over them with residents to try to address this.

There were 8 family responses. All of them fell in **mostly** or **always**. There were some response of **mostly** to leisure needs and healthcare. Some of these are areas we are learning how to accomplish efficiently and some may be areas that guardians had unrealistic expectations of the facility and staff.

Linden Estate

There were 7 responses from residents. This is down from 12 last year. This is because of the transitions with Oakwood and the result of lower functioning residents at Linden. All of the responses were positive except of one response of **sometimes** on two items. These will be dealt with individually since it is not a pattern.

Linden had 8 family responses. This is significantly less than past years and may reflect the new residents who have less family involvement. All responses were in the two most positive options. There were several responses in the **mostly** category regarding the condition of the facility. There have been significant recent upgrades which should address this. There were also some **mostly** responses regarding leisure.

CILA and CRS

There were 47 responses from people living in the CILA and CRS facilities. No negative responses were received. There were 6-8 residents who responded **sometimes** on items like staff knocking before entering their room, satisfaction with work, preference of outings, and food. Work is an ongoing issue that is difficult to address but individually staff will explore alternatives. Staff will also look at ways to solicit input regarding outings. Some resident choices are not feasible for the agency to offer.

There were 38 responses from families. There were three responses of **sometimes** regarding being kept informed about health. This is a change from last year and will be tracked. There were some responses of **mostly** for response when concerns are brought, overall care, and leisure needs. This is also a change from last year. We are serving people with greater needs and there may have been some concerns in the transition. There also may be some anxiety from families as clients are in less intense settings. We will track responses over the next year. The large majority of responses were **always**.

SUMMARY

Satisfaction surveys are done annually and are reviewed individually, by facility and as an agency. The agency is aware that satisfaction surveys have inherent flaws and management does not use them as a sole source of feedback. The agency is also aware that “**sometimes**” or “**mostly**” responses may indicate concerns that family members are reluctant to identify. All negative and “**sometimes**” responses are reviewed with individual respondents to determine if changes are needed.

The agency does long-term planning and makes policy and procedural changes based on the satisfaction surveys along with client data, staff feed back, ISP needs, and informal feed back from clients, families, and staff.