

Outcome Measures Report July 2022- June 2023

July 2022- June 2023 Year in Review

| Financial Indicator | Previous Year | Current Year |
|---|---------------|---------------------|
| Total Served | 915 | 1255 |
| Total Small Group Employment Sites | 7 | 5 |
| New Small Group Employment Sites | 0 | 0 |
| Total Individuals in Community Placements | 67 | 69 |
| New Individual Community Placements | 27 | 14 |
| Total Can Redemption Revenue | \$12,127.11 | \$34,650.28 |
| Total Car Detailing Revenue | \$9,459.09 | \$10,895.51 |
| Total Small Group Revenue | \$266,398.00 | \$91,749.00 |
| Total Second Time Around Revenue | \$103,645.90 | \$106,367.07 |
| Total Donations | \$81,919.00 | \$22,749.56 |
| Total Grants/Contract Revenue | \$309,347.00 | \$0 |
| Total HHS Stimulus | \$366,391.16 | \$0 |
| Total ARPA | \$909,904.00 | \$1,680.908.00 |

Our Mission, Vision, and Values

Our Mission: First Resources Corp provides community-based programs within integrity and respect that inspire home and contribute to the well-being of the people we serve.

Our Vision: First Resources Corp exists to provide quality services for people based upon their individualized needs and desires. First Resources Corp exists within communities to enhance the abilities of those served and to be productive participating member of their families and of their communities.

Our Core Values:

- Service Excellence
- Open Communication
- Constant Respect
- Professional Development
- Innovation

Our Services:

Disability Services: These services are provided to people who are on the Brain Injury Waiver, ID Waiver or Habilitation Waiver. Services provide opportunities for grown, maintenance of skills and the ability to make choices about their live, recreate, etc. Services Include:

- Daily Supported Community Living (SCL)
- Hourly Supported Community Living (SCL)
- Home Based Habilitation (Hab)
- Adult Day Habilitation (ADH)
- Respite
- Consumer Directed Attendance Care (CDAC)
- Consumer Support Services (CSS)

Employment Services: These services are provided to people through funding with Iowa Vocational Rehabilitation Services, Brain Injury Waiver, ID Waiver or Habilitation Waiver. Services provide the opportunities for people to explore job opportunities, to secure, and to maintain employment of their choosing. Services include:

- Assessment/Job Discovery
- Job Development
- Job Coaching
- Small Group Employment

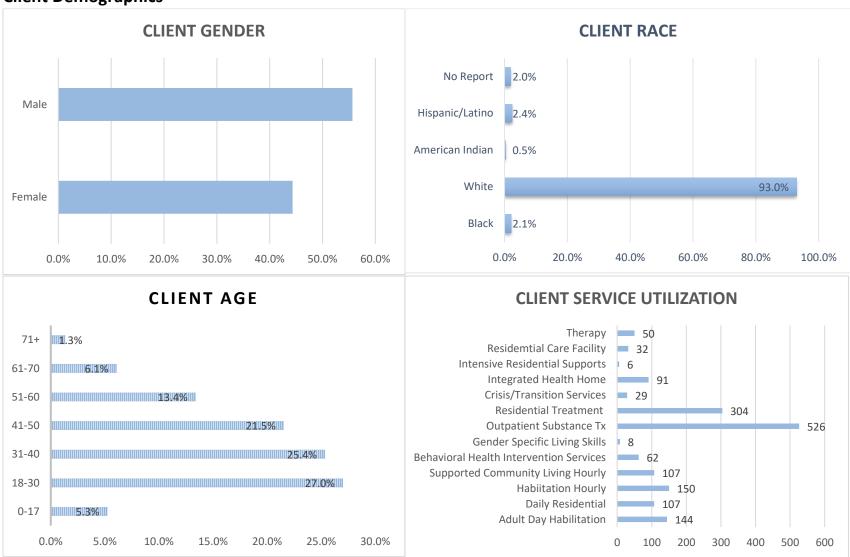
Behavioral Health Services: These services are provided to people through their private health insurance, DHS Decat Grants or sliding scale payments. The services address behavioral needs, mental health needs and substance abuse treatment needs for both children and adults. Services include:

- Inpatient Substance Abuse/ Residential Treatment (Res Tx)
- Outpatient Substance Abuse (SA) Treatment
- Behavioral Health Intervention Services (BHIS)

Mental Health Services: These services are provided to people through Habilitation Waiver, ID Waiver, Regional Funding, and their personal health insurance. These services are designed to be short term support for people with mental health diagnosis to help them stabilize, maintain skills, and make plans to transition to independent living or services of their choosing. Services include:

- Mental Health Therapy
- Residential Care Facility (RCF)
- Intensive Residential Service Homes (IRSH)
- Transitional Services (TS)
- CHOICES Drop-In Center
- Integrated Health Homes (IHH)

Client Demographics



Staff Demographics



Analysis of Client Demographics:

- Over the past year, there has been an increase of 7.7% of clients who are between the ages of 18 to 50.
- Over the past year, there has been a decrease of nearly 6% related to people served over the age of 50. This continues to be due to people needing a higher level of care than First Resources Corp provides.
- No significant differences related to gender or race/ethnicity.
- The agency has added Intensive Residential Service Homes this year. This program is open to up to 4 people at a time.
- The agency has expanded our Community Integration (Day Habilitation) programs to include people on the habilitation waiver. This program is called Hab Day Hab (HDH). There are currently 10 people in this program.
- Some services have been limited due to staff vacancies. For example, BHIS services went from 4 providers to 1, Substance Abuse Counselors went from 3 providers to 1, and currently we have no therapists. The agency continues to recruit for these positions.

Analysis of Staff Demographics:

- Employees of First Resources continue to be predominantly of white/non-Hispanic descent like the people served.
- The First Resources Corp service area continues to heavily focused on industry and farming; most men work in these areas. This leads to First Resources Corp workforce being predominantly female staff. The agency continues efforts to recruit male staff.
- Over the past year, there has been a 5.4% increase in staff that are 30 or younger and nearly a 4% decrease in staff between the ages of 31 to 40. The percentage of staff that are 50 or older has remained consistent. As such the agency has made concerted efforts to encourage the use of social media, community participation and integration of staff through various processes/projects. The agency has also offered training regarding intergenerational gaps.

Development of the 2022-2023 Outcome Measures

First Resources Corp merged with Tenco on 7/2020. A blended outcomes plan was not established until January 2021, but combined practices were not complete until closer to July 2021. Therefore, the organization felt that the Jan to July 2021 plan was used to establish a baseline while the 2021-2022 Outcomes Plan provided the opportunity for the agency to grow and shape its future while addressing ongoing staff shortages and impacts of COVID. The organization felt that continuing the same goals into 2022-2023 would continue our focused efforts on consistency and preparation for the future.

Community Integration (ADH) Outcomes

| Measurement Category | To Whom its Applied | Objective | Goal | Data Source | Person(s) Responsible | Current Results | Past Results | Progress Made | Overall Goal Met |
|-------------------------|---|--|----------------------|--|---|--------------------|-----------------|---------------------------------|---------------------|
| Effectiveness | Adult Day Hab Staff | Will plan community integrated activities | 3 times per week | Original Activity Calendar | Day Hab Supervisor/Coordinator | 68.8% | 75.0% | -6.2% | Not Met |
| | Individuals in ADH | Will participate in at least 2 community activities a month | 50% of the people | Activity Tracking Form | Day Hab Supervisor/Coordinator | 68.8% | 56.1% | NA as measurement changed | Met |
| Efficiency | ADH | Will ensure client participation justifies staffing patterns | 90% of the time | Attendance Tracking and EHR System | Day Hab Supervisor/Coordinator | 85.7% | 79.0% | +6.7% | Not Met |
| Service Access | Individuals referred for ADH services | Will have time from acceptance in residential services to start of services | Be within 30 days | Referral Tracking Form | QA Auditor/Director of Disability Services | 53.9 days | 41.3 days | -12.6 days | Not Met |
| Satisfaction | Individuals in ADH | Will maximize their overall satisfaction | At 95% | Client satisfaction surveys at annual meetings | Area/Program Supervisors/ Quality Assurance Auditor | 100% | 98.7% | +1.3% | Met |
| Business Function | Staff in ADH | Will complete initial training within designated time frames | 95% of the time | Relias/I Solved | Trainer | 89.4% | 70.0% | +19.4% | Not Met |
| | Staff in ADH | Will complete annual training within designated timeframe | 95% of the time | Relias/I Solved | Trainer | 100% | 57.9% | +42.1% | Not Met |
| | FRC | Will minimize turnover of ADH staff | To 20% | ISolved | HR Administrator | 20.7% | 50.0% | +29.3% | Not met |

Analysis/Trending of Community Integration (ADH) Outcome Objectives and Results: First Resources Corp provides services in predominantly rural areas. Transportation to get to various activities can be limited; this is an even bigger challenge for folks needing wheelchair accessible transportation. The shortage and price of vehicles since COVID adds to the challenge. While staff turnover has improved significantly, staff vacancies/turnover has at times limited First Resources Corp's ability to complete the planned activities. The amount of time for service access increased due to the expansion of the Hab Day Hab services; there was a delay in funding being secured for the services to start.

HCBS Outcomes

| Measurement Category | To Whom its Applied | Objective | Goal | Data Source | Person(s) Responsible | Current Results | Past Results | Progress Made | Overall Goal Met |
|-------------------------|--|--|----------------------|---|---|--------------------|-----------------|------------------|---------------------|
| Effectiveness | Individuals living in Daily Site homes | Will have an annual physical completed | 90% of clients | Appointment Tracking in EHR System | Health and Safety Staff/Area Coordinators/Quality Assurance Auditor | 64.3% | 45.1% | +19.2% | Not Met |
| Efficiency | Individuals in Hourly Supports | Will meet as scheduled (reducing no call/no show rates) | 85% of the time | EHR System | Area Coordinators | 88.5% | 83.6% | +4.9% | Met |
| | Hourly Staff | Will maximize direct service time | 75% per FTE | Billing | Area Coordinators | 56.1% | 58.0% | -1.9% | Not Met |
| Service Access | Individuals referred for Residential services | Will have time from acceptance to start of services | Be within 45 days | Referral Tracking Form | Quality Assurance Auditor/Director of Disability Services | 48.4 days | 68.0 days | +11.6 days | Not Met |
| Satisfaction | Individuals in Residential Services | Will maximize their overall satisfaction | At 95% | Client satisfaction surveys at annual meetings | Quality Assurance Auditor/Director of Disability Services | 100% | 98.7% | +1.3% | Met |
| Business Functions | Staff Providing Home Based Hab Services | Will complete initial training within designated time frames | 95% of the time | Relias/I Solved | Trainer | 60% | N/A | | Not Met |
| | FRC | Will minimize turnover of HCBS Residential staff | To 20% | ISolved | HR Administrator | 15.2% | 41.1% | +25.9% | Met |

Analysis/Trending of HCBS Outcome Objectives and Results: The agency didn't utilize a set process for tracking annual physicals and believes that this number is low. The agency is implementing a new electronic health record in September 2023; data will be more consistent as it will be collected by the staff immediately as the appointments occur. Staff travel time in our rural areas continues to impact the ability to maximize hourly staff's direct service time. Coordinators have made concerted efforts to process referrals in a timely manner. There has been an inconsistent review of Relias training which led to staff not getting the training done timely; the responsibilities for oversight are changing. Staff turnover has decreased due to focused efforts on training and communication.

Supported Employment Outcomes

| Measurement Category | To Whom its Applied | Objective | Goal | Data Source | Person(s) Responsible | Current Results | Past Results | Progress Made | Overall Goal Met |
|-------------------------|--|---|------------------------------------|--|--|--------------------|-----------------|------------------|---------------------|
| Effectiveness | Individuals in Supported Employment | Will obtain a community - based job | 16 annually | Employment Tracking Form | Director of Employment Services | 13 | 15 | -2 | Not Met |
| Efficiency | Individuals in Supported Employment | Will find jobs that match their interests | 75% of the time | Interest Assessment and Employment Tracking Form | Director of Employment Services | 100% | 100.0% | 0 | Met |
| Service Access | Individuals referred for HCBS Supported Employment services | Will minimize the time from acceptance for Job Development to Job Placement | Within 90 days | Employment Tracking Form | Director of Employment Services | 35.4 days | 64.3 days | +28.9 days | Met |
| Satisfaction | Individuals in HCBS Supported Employment services | Will maximize their overall satisfaction | At 95% | Client satisfaction surveys at annual meetings | Quality Assurance Auditor | 100% | 100% | 0 | Met |
| | Employers working with Supported Employment services | Will maximize their overall satisfaction | At 95% | Employer satisfaction surveys annually in the fall. | Quality Assurance Auditor | 100% | 95.0% | +5% | Met |
| Business Function | FRC operated businesses | Will fulfill the agency mission by | Remaining financially viable | Monthly Financial Reports | CFO/Director of Employment Services | 62.5% | 100% | -37.5% | Not Met |
| | Staff in Supported Employment Services | Will complete initial training within designated time frames | 95% of the time | Relias/I Solved | Trainer | 96.2% | 100% | -3.8% | Met |
| | Staff in Supported Employment Services | Will complete annual training within designated timeframe | 95% of the time | Relias/I Solved | Trainer | 90.9% | 100% | -9.1% | Not Met |

2022-2023 Outcomes Report 10 |

| FRC | Will minimize | To 20% | ISolved | HR Administrator | 14.9% | 36.8% | -22.1% | Met |
|-----|---------------|--------|---------|------------------|-------|-------|--------|-----|
| | turnover of | | | | | | | |
| | Supported | | | | | | | |
| | Employment | | | | | | | |
| | staff | | | | | | | |

Analysis/Trending of Supported Employment Outcome Objectives and Results: Overall the economic outlook has changed which has left community employers having more applicants for their jobs. The willingness to hire people with disabilities appears to be decreasing; this reflects First Resources job obtainment scores. One member of staff didn't get their annual training completed; the agency is changing our monitoring processes for Relias training which should help identify this in the future. First Resources Corp has 3 businesses where financials are reviewed monthly. There has been an increase in reimbursement for the can redemption. The marketing team has begun assisting the Second Time Around with promotions to help increase sales.

11 |

Outpatient Substance Abuse Services Outcomes

| Measurement Category | To Whom its Applied | Objective | Goal | Data Source | Person(s) Responsible | Current Results | Past Results | Progress Made | Overall Goal Met |
|-------------------------|---|---|------------------|--|---|---------------------------------------|-----------------|------------------|---------------------|
| Effectiveness | Adults and Children in Outpatient Behavioral Health Services | Will have a successful discharge from services | 60% of the time | EHR System | Director of Behavioral Health Services | 58.6% | 47.7% | +10.9% | Not Met |
| Efficiency | Adults and Children in Outpatient Behavioral Health Services | Will report an improvement in their quality of life | 50% of the time | Follow Up Call Screening at 90 days | Quality Assurance Auditors | 100% (6 of 26 people responded) | No Data | N/A | Met |
| | Adults and Children in Outpatient Behavioral Health Services | Will attend as scheduled (reducing no call/no show rates) | 85% of the time | EHR System | Quality Assurances Auditors | 69.8% | 77.0% | -7.2% | Not Met |
| Service Access | Individuals referred for Outpatient Behavioral Health Services | Will minimize the time from assessment to admission | To 7 days | EHR System | Director of Behavioral Health Services | 5.0 days | 14.9 days | -9.9 days | Met |
| Satisfaction | Individuals in Outpatient Behavioral Health Services | Will maximize their overall satisfaction | At 95% | Client satisfaction collected last month of each quarter | Director of Behavioral Health Services/QA Auditor | 100% | 99.6% | +.4% | Met |
| Business Function | CADC Staff | Will maximize time in billable direct service | 62.5% per FTE | Billing | Accounting/Director of Behavioral Health Services | 49.0% | 75.2% | -26.2% | Not Met |

Analysis/Trending of Outpatient Substance Abuse Outcome Objectives and Results: The outpatient SUD program has reduced from 4 CADCs to 1. This instability may explain the decrease of people attending appointments and a reduction on staff's ability to maximize billable time.

Residential Treatment Services Outcomes

| Measurement Category | To Whom its Applied | Objective | Goal | Data Source | Person(s) Responsible | Current Results | Past Results | Progress Made | Overall Goal Met |
|-------------------------|--|--|--------------------|---|--|-------------------------|--------------|------------------|---------------------|
| Effectiveness | Individuals at Hope House Residential Treatment | Will have a reunification rate with their children | 80% | Parenting Assessment | Service Coordinators | No data | 57.7% | N/A | Not Met |
| Efficiency | Individuals in Residential Treatment | Will have a successful discharge | 60% of the time | EHR System | Quality Assurance Auditor | 52.4% | 53.2% | 8% | Not Met |
| Efficiency | Individuals in Residential Treatment | Will improve their quality of life | 50% of the time | Follow Up Call Screening at 30 days | Quality Assurance Auditors | 75% (8 of 68 responded) | 90.3% | -15.3% | Met |
| Service Access | Individuals in Residential Treatment | Will be connected to 4 or more community resources/natural supports prior to discharge | 90% of the time | Tracking sheet | Service Coordinator | 84.8% | 52.9% | +31.9% | Not Met |
| Satisfaction | Individuals in Residential Treatment Services | Will maximize their overall satisfaction | At 95% | Client satisfaction collected last month of each quarter | Service Coordinator/ Quality Assurance Auditor | 95.7% | 94.8% | +.9% | Met |
| Business Function | FRC | Will minimize turnover of Residential Treatment staff | To 20% | Solved | HR Administrator | 10.5% | 58.1% | +47.6% | Met |

Analysis/Trending of Residential Treatment Outcome Objectives and Results: Turnover of the Hope House Supervisor and Director of Behavioral Health Services has led to a breakdown in tracking parenting assessments. Clients have increased support to connect with community resources. Staff training and supervisory changes are having a positive impact on staff retention. The agency has obtained a grant to obtain certified training for the Residential Treatment Techs.

Gender Specific Life Skills (GSLS) Outcomes

| Measurement | To Whom its | Objective | Goal | Data Source | Person(s) Responsible | Current | Past | Progress | Overall |
|---------------|---|--|--------------------|---|--------------------------------------|---------|------------------------|----------|----------|
| Category | Applied | | | | | Results | Results | Made | Goal Met |
| Effectiveness | Individuals in Female Life Skills | Will have a successful discharge | 50% of the time | Monthly DHS Report | Gender Specific Life Skills Staff | N/A | 100%- no discharges | | N/A |
| Satisfaction | Individuals in Female Life Skills | Will maximize their overall satisfaction | At 95% | Client satisfaction collected last month of the qtr | Gender Specific Life Skills Staff | N/A | No Data Collected | | NA |

Analysis/Trending of GSLS Outcome Objectives and Results: Due to inability to recruit for the position, the program has ended.

Behavioral Health Intervention Services (BHIS) Outcomes

| Measurement | To Whom its | Objective | Goal | Data Source | Person(s) Responsible | Current | Past | Progress | Overall |
|----------------------|---------------------------------|--|-------------------|---|---|-----------|--------------|--------------------------------------|----------|
| Category | Applied | | | | | Results | Results | Made | Goal Met |
| Effectiveness | Individuals in BHIS services | Will increase social appropriateness skills | 75% of the time | Pre and Post Social Skill Assessment | Behavioral Health Director | 100% | 55.8% | Unable to detect as only 1 submitted | Met |
| Efficiency | BHIS Providers | Will maximize time in billable direct service | 55% per FTE | Billing | Accounting/ Behavioral Health Director | 30.9% | 29.2% | +1.5% | Not Met |
| Service Access | Individuals in BHIS services | Will minimize time from acceptance to services starting | Within 30 days | Referral Tracking | BHIS Supervisor/Quality Assurance Auditor | 53.3 days | 70.2 days | -16.9 days | Not Met |
| Satisfaction | Individuals in BHIS Services | Will maximize their overall satisfaction | At 95% | Client satisfaction collected last month of the qtr | BHIS Supervisor/ Quality Assurance Auditor | 100% | 98.6% | +1.4% | Met |
| Business Function | FRC | Will minimize turnover of Residential Treatment staff | To 20% | ISolved | HR Administrator | 16.3% | 58.1% | +31.8% | Met |

Analysis/Trending of BHIS Outcome Objectives and Results: There has been a reduction to only 1 BHIS staff and the agency has not been able to successfully recruit for the open position. The one BHIS staff is covering a large geographical area which has decreased her ability to maximize her billable time. The has led to a decrease in overall program referrals.

Therapy Services Outcomes

| Measurement Category | To Whom its Applied | Objective | Goal | Data Source | Person(s) Responsible | Current Results | Past Results | Progress Made | Overall Goal Met |
|-------------------------|--|---|-----------------------|---|---|----------------------|----------------------|---|---------------------|
| Effectiveness | Adults and Children in Therapy Services | Will have a successful discharge from services | 60% of the time | EHR System | Quality Assurances Auditors/Director of Mental Health Services | 0% | N/A | Unable to detect as only 1 submitted | Unknown |
| Efficiency | Adults and Children in Therapy Services | Will attend as scheduled (reducing no call/no show rates) | 85% of the time | EHR System | Quality Assurance Auditors | 77.5% | N/A | N/A | Not Met |
| Service Access | Individuals referred for Therapy Services | Will minimize the time from assessment to admission | To 7 days | EHR System/Referral Tracking | Director of Behavioral Health Services | 8.2 days | 14.9 days | -6.7 days | Not Met |
| Satisfaction | Individuals in Therapy Services | Will maximize their overall satisfaction | At 95% | Client satisfaction collected last month of each quarter | Director of Behavioral Health Services/QA Auditor | No data collected | No data collected | N/A | Not Met |
| Business Functions | Adults and Children in Therapy Services | Will have their programmatic files meet regulatory expectations | 90% of the time | Client File Review | Quality Assurances Auditors | 59.0% | 19.8% | +39.2% | Not Met |

Analysis/Trending of Therapy Services Outcome Objectives and Results: The program closed in October due to the loss of a full-time therapist. The agency continues to recruit for the position and hopes to resume services soon.

Residential Care Facility (RCF) Outcomes

| Measurement Category | To Whom its Applied | Objective | Goal | Data Source | Person(s) Responsible | Current Results | Past Results | Progress Made | Overall Goal Met |
|-------------------------|---|--|--|--|---|--------------------|-------------------|---------------------|---------------------|
| Effectiveness | Individuals with habilitation funding | Will see their mental health provider at least quarterly | 90% of individuals | Tracking Sheet | Transitional Services Coordinator | 97.9% | 97.5% | +.4% | Met |
| Efficiency | Individuals with habilitation funding | Will transition to community -based supports | Within 180 days of admission to the RCF | Admission to Discharge Date | Transitional Services Coordinator | 269.9 days | 451.4 days | +181.5 days | Not Met |
| Service Access | Individuals at the RCF | Will participate in at least 1 community activities per month | 70% of people | Activity Tracking Form | Transitional Services Coordinator | 64.1% | 0% | N/A Goal changed | Not Met |
| Satisfaction | Individuals in RCF Services | Will maximize their overall satisfaction | At 95% | Client satisfaction collected last month of each quarter | Transitional Services Coordinator/Quality Assurance Auditor | 98.0% | 94.7% | +3.3% | Met |
| Business Functions | RCF Staff | Will complete initial training within designated time frames | 95% of the time | Relias/I Solved | Trainer | 58.3% | N/A – new goal | N/A | N/A |
| | FRC | Will minimize turnover RCF staff | To 20% | ISolved | Trainer | 7.1% | 42.9% | -35.8% | Met |

Analysis/Trending of RCF Outcome Objectives and Results: The program has continued to focus on being a short-term transitional program; the agency is working to transition those longer-term clients to an appropriate level of longer-term support. There has been an inconsistent review of Relias training which has led to staff not getting the training done in time; the responsibilities for oversight are changing. Staff turnover has decreased due to focused efforts on training and communication.

Crisis Response Stabilization Residential (CSRS)/ Transitional Services Outcomes

| Measurement | To Whom its | Objective | Goal | Data Source | Person(s) Responsible | Current | Past | Progress | Overall |
|-----------------------|--|---|-----------------|--|--------------------------------------|----------------------|-------|----------|---------|
| Effectiveness | Applied Individuals in CSRS | Will have a completed follow-up appointment with a mental health professional within 30 consecutive days post discharge | 80% of the time | Tracking Sheet | Transitional Services Coordinator | 83.3% | 72.9% | 10.4% | Met Met |
| Efficiency | Individuals in CSRS | Will be connected to one support/funding source prior to discharge (i.e. Medicaid, IHH, Case Mgr) | 90% of the time | Tracking Sheet | Transitional Services Coordinator | 100% | 100% | 0 | Met |
| Efficiency | Individuals in Transitional Services | Will be connected to 4 or more community resources/natural supports/entitleme nts prior to discharge | 95% of the time | Tracking Sheet | Transitional Services Coordinator | 100% | 100% | 0 | Met |
| Satisfaction | Individuals in CSRS Services | Will maximize their overall satisfaction | At 95% | Client satisfaction surveys prior to discharge | Transitional Services Coordinator | No data collected | 100% | | Met |
| Business Functions | FRC | Will minimize turnover of CSRS staff | To 20% | ISolved | HR Administrator | 36.4% | 68.2% | -31.8% | Not Met |

Analysis/Trending of Outcome Objectives and Results: The program ended 11/1/23 due to inability to recruit trained crisis staff. The agency is currently revamping the program and hopes to open in the fall of 2023 as a transitional program only.

Peer Support Services Outcomes

| Measurement Category | To Whom its Applied | Objective | Goal | Data Source | Person(s) Responsible | Current Results | Past Results | Progress Made | Overall Goal Met |
|-------------------------|--|--|-----------------------------|--|---|--------------------|--------------|------------------|---------------------|
| Effectiveness | CHOICES Staff | Will increase the # of participants | By 5 a month | EHR System | CHOICES Lead | N/A | N/A | | NA |
| Service Access | Individuals in Peer Support Services | Will minimize time from referral to services starting | Within5 business days | Referral Tracking | Individuals in Peer Support Services | N/A | N/A | | NA |
| Satisfaction | Individuals accessing Peer Support Services | Will maximize their overall satisfaction | At 95% | Client satisfaction collected last month of each quarter | CHOICES Lead/Quality Assurances Auditors | N/A | 95.9% | | NA |
| Business Functions | FRC | Will minimize turnover of CHOICES staff | To 20% | ISolved | HR Administrator | 13.9% | 20.0% | | Met |

Analysis/Trending of CHOICES Outcome Objectives and Results: First Resources did not get certified to start Peer Support Services with all funding sources so has not transitioned to Peer Support Services. The CHOICES drop-in centers continued to operate. CHOICES participant overall satisfaction was 100%

Integrated Health Home Outcomes

| Measurement Category | To Whom its Applied | Objective | Goal | Data Source | Person(s) Responsible | Current Results | Past Results | Progress Made | Overall Goal Met |
|-------------------------|---|--|--|--|---|--------------------|-----------------|------------------|---------------------|
| Effectiveness | Newly enrolled individuals | Will have their Comprehensive Assessment and Social History (CASH) completed within 30 days of approved enrollment | 95% of enrollees | IHH Tracking Spreadsheets | IHH Supervisor/Mental Health Director | 90.2% | 89.2% | +1% | Not Met |
| Efficiency | All enrolled IHH individuals | Will have a successful IHH contact billed each month | 95% of the time | IHH Tracking Spreadsheets | IHH Supervisor/Mental Health Director | 94.1% | 88.1% | +6% | Not Met |
| | All members | Will have a Body Mass Index (BMI) recorded within the last year | 80% of the time | Vision Works/IHH Tracking Spreadsheets | IHH Supervisor/Mental Health Director | 98.3% | 100% | -1.7% | Met |
| | All members who are hospitalized for mental health | Will have a completed follow-up appointment with a mental health professional within 7 consecutive days post discharge | 80% of the time | IHH Tracking Spreadsheets | IHH Supervisor/Mental Health Director | 60.3% | 58.3% | +2% | Not Met |
| Service Access | Individuals referred for IHH Supports | Will be initially contacted/attempted contact | Within 2 business days of their referral date | IHH Tracking Spreadsheets | IHH Supervisor/Mental Health Director | 100% | 100% | 0 | Met |
| | Individual referrals who fully qualify for IHH enrollment | Will be approved within 30 days of the referral intake meeting | 80% of the referrals | IHH Tracking Spreadsheets | IHH Supervisor/Mental Health Director | 69.8% | 78.6% | -8.8% | Not Met |
| | Individual referral who qualify for service but have Iowa Health and | Will have a medically exempt form completed/set within 3 business days of receiving the | 90% of the referrals | IHH Tracking Spreadsheets | IHH Supervisor/Mental Health Director | 100% | 100% | 0 | Met |

| | Wellness Medicaid | qualifying diagnostic records | | | | | | |
|--------------|----------------------|-------------------------------|--------|-------------|-------------------|-------------|---------|----|
| Satisfaction | Individuals in IHH | Will maximize their | At 95% | Annually in | IHH | No MCO Data | Process | NA |
| | Services | overall satisfaction | | March | Supervisor/Mental | Received | Not | |
| | | | | | Health Director | | Started | |

Analysis/Trending of Outcome Objectives and Results: The agency continues to provide quality IHH services and has received the #1 rank amongst all providers in the state. The number of referrals continues to increase which is causing a slight delay in getting approved from referral to intake.

Satisfaction

| Objective | Goal | Current Results | Past Results | Progress Made? | Overall Goal Met? |
|---|------|------------------------|--------------|----------------|-------------------|
| Maximize overall client satisfaction | 95% | 97.8% | 97.6% | +.2% | Met |
| Maximize overall stakeholder (ie: Parents, guardians, referral partners) satisfaction | 95% | 95.9% | 90.9% | +5% | Met |
| Maximize overall employee satisfaction | 95% | 89.3% | 91.0% | -1.7% | Not Met |

Analysis/Trending of Satisfaction:

- For the HCBS, SE and ADH programs staff began collecting satisfaction data at the time of annual meetings. There was an overall decrease in the number of surveys collected.
- The employee satisfaction survey is defined by 7 questions. While there was a slight overall decrease, the surveys reinforced that:
 - Staff continue to feel their positions support the agency's mission.
 - There was an increase in supervisors providing support to help staff be successful in their job and staff feeling informed of relevant organizational changes by management.
 - o There is a continued need to ensure that staff feel recognized monthly for doing good work.

Staff Recruitment, Retention and Training

First Resources Corp has felt the ongoing struggles with recruiting quality staff. The agency has been able to continue adjusting wage scales and utilizing ARPA grants to provide bonuses for employees. The agency continues to use current staff, radio, social media,

Indeed, and job fairs to recruit new employees. The agency has increased our physical presence at community activities in all communities in hopes of expanding both our mission and recruitment efforts.

Training has been a large focus during the past year. First Resources has redesigned the initial employee orientation. The agency has developed field orientation guides for each position that should be completed within the first few weeks of employment; these tools help ensure consistent training and habits for staff.

The agency has adopted a Trauma Informed Care philosophy. Training in this starts at orientation for new employees. The agency has a three-year implementation plan to get this fully implemented into hiring practices, policies and procedures, and daily operations. The agency is already seeing benefits from this.

Through our various efforts, First Resources has seen a significant reduction in frontline staff turnover. Based on those programs tracked in outcomes we have went from 49% to 14% in one year.

Supervisory positions are a challenge currently for First Resources. The agency is seeing more vacancies in these positions, and it is taking more time to recruit for the positions. This is hindering some of the daily practices and oversight that is needed. The agency meets regularly to assess this and look at various forms of support.

Client Incident Trends

Agency changes that impacted the data:

- First Resources opened the Intensive Residential Service Home (IRSH) Program in late November 2022. This program is designed to support the needs of people with intense mental and behavioral health challenges. With this program we have seen a significant increase in elopements, emergency mental health treatment, and law enforcement interventions.
- 1/1/23 the agency chose to use our electronic health record system to track incident reports. While those minor incident reports were charted in staff documentation, pulling the data was very difficult so only major incidents were tracked starting 1/1/23.
- In some instances, an incident could involve more than one category (i.e.: an elopement could involve law enforcement intervention and/or emergency mental health treatment). These incidents are only counted once.
- 3/1/23 the agency began tracking minor med errors/incidents within each specific program. This allowed programs to assess the need for additional training and/or disciplinary actions if needed. Each program keeps their own data for this.

2022-2023 Outcomes Report 21 |

| Type of Incident | July 21-June 22 incidents | July 22-June 23 Incidents | Notes |
|--------------------------------------|---------------------------|------------------------------|---|
| Abuse/Neglect | 8 | 5 | |
| Car Accident | 10 | 3 | This is considered a minor incident. Data from 1/1-6/30/23 is not included. |
| Death | 1 | 0 | |
| Drug Use/Possession | 4 | 0 | This is considered a minor incident. Data from 1/1-6/30/23 is not included. |
| Elopement | 7 | 50 | 49 of these were at the IRSH Program. |
| Emergency Mental Health Treatment | 20 | 37 | 11 of these were at the IRSH Program. 9 of these were at the RCF. |
| Fall | 111 | 79 | This is considered a minor incident. Data from 1/1-6/30/23 is not included. If the incident led to medical care, then it would be counted as physical injury -seen by Dr. Several individuals have been discharged from the agency due to needing a higher level of care. |
| Major Medication Error | 2 | 3 | |
| Sexual Assault | 10 | 3 | In the 21-22 data, there was inconsistency on what was interpreted as a sexual assault. After providing clarity on inappropriate advances/comments vs assault, the agency has seen a decrease. |
| Law Enforcement Intervention | 5 | 26 | 18 were at the IRSH Program and 4 were at the RCF program. |
| Physical Injury- Seen by Dr | 23 | 8 | In the 21-22 data, staff often reported any incident where a client when to the Dr/Er as a major incident rather than just those where the client had a physical injury leading to medical care. So this data may be overstated. Retraining did occur. |

Major Goal Areas for 2023-2024 and beyond (presented in no order):

- Implement a new Electronic Health Record System
- Implement an internal web page for staff to easily access needed materials and to improve overall agency communications.
- Increase revenue streams to best meet agency needs and minimize dependency on Medicaid services.
- Expand service options to best meet the needs of the people served.
 - o Begin Peer Support Services
 - o Restart Transitional Services
- Improve retention and training of staff.
- Ensure FRC properties and vehicles are safe and well maintained.
- Increase focus on being a trauma informed care agency.

Begin Intensive Placement and Support (IPS)
 Employment Services

2022-2023 Outcomes Report 22 |