MID-YEAR REPORT FOR OUTCOME PROGRESS

*Reporting for:  July 1 – November 30 of the current year!*

**Agency Name: Friendship Ark, Inc.**

**Program Name: 15 Minute Unit Supported Community Living**

Brief Description of Program:

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:** The four participants in this program are making progress on the goals identified to become more independent in their homes.  This is an increase of one additional core member over this time last year.  The types of supports these individuals are receiving include:  personal and home skills training services, individual advocacy  services, community skills training services, personal environment support services, transportation, and treatment services.

2. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:** Staff document in our electronic documentation software, Edoc, each time a service is provided.  The results from that documentation are reviewed monthly internally and reviewed on a quarterly basis by the entire Interdisciplinary team.

3. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):** We had an average of 97.5% goal completion during the period of July 1st through Nov. 30th for the 4 core members receiving ASSET funding in hourly SCL.  The break down was 92%, 100%, 100% and 98% individually.  It should be noted that one core member did not begin receiving these services until October 2017.

4. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**:  All four core members worked on a variety of goals and based on the 97.5% success rate of goal completion, each core member is making progress and becoming more independent.  Goals worked included: chosing social activities, improving social skills, improving independence with hygiene tasks, improving independence with household chores such as laundry and keeping their apartment clean, making menus, shopping list, and cooking basic recipes, safety skills while in the community, learning how to use CyRide or increasing the number of routes used and maintaining a healthy lifestyle by exercising.  All of these goals allow each individual to continue to increase their indepence and many allow them to be more active participants within their community.

5. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):**  There were no barriers encountered in providing this service.  Due to the existence of Managed Care, we have to include not only the Regional case manager, but also the MCO case manager if they are on the waiting list for the ID

Waiver. It can be challenging to determine who that case manager is and make sure that all parties receive communication.

6. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** During this reporting timeframe, we served four individuals with ASSET funding.

7. **Have you had to turn any clients away that desire to participate in this program?  If so, why?  If so, how many?  If so, when?** We have not had to turn any clients away from this specific program.  We do have a waiting list due to the need for additional staff.  All referrals have been contacted regarding services and made aware that we are working on hiring additional staff and will begin services as soon as staff are hired and trained.

8. **Comments:** We have had an increase in referrals for the hourly SCL program in October and November.  One of which, is a referral from Maxwell, so we are working out logistics to begin providing SCL services, not just in Ames, but other communities in Story County as well.

**Agency Name: Friendship Ark, Inc.**

**Program Name: Day Habilitation- Full Day and 15 minute Unit**

Brief Description of Program:

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:** The participants in this program are making progress on the goals identified by their interdisciplinary team to become more integrated in their community and learn new social skills as well as develop appropriate behaviors for community participation. They are being offered opportunities to participate in activities within their community allowing for community inclusion.

2. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:** Staff document in our electronic documentation software, Edoc, each time a service is provided. The results from that documentation are reviewed monthly internally and reviewed on a quarterly basis by the entire Interdisciplinary team.

3. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):** We had an average of a 95% goal completion during the period of July 1st through Nov. 30th for the 2 core members receiving ASSET funding for Day Hab services. The break down was 90% and 100% individually.

4. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**: Participants were offered an opportunity to participate in activities that were community inclusive 100% of the time services were provided, because our program is completely community-based. With core members successfully working on their goals 95% of the time, we saw an increase or improvement in skills including independently selecting activities the person would like to participate in, following through with participation, interacting in a positive way with peers and others in the community, learning appropriate cell phone etiquette for community activities. As these core members increase these valuable skills, they are better able to participate in their community.

5. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):** We lost one of the vehicles from our fleet, creating a strain on our ability to transport everyone in Day Hab to all the various locations. During this reporting period, we were made aware that DHS will transition beginning Dec. 1, 2017 to a tiered rate system for all daily services within the ID Waiver. This may have an impact on how the Region choses to move forward with contracting and rate setting.

6. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** During this reporting timeframe, we served 2 individuals with ASSET funding.

7. **Have you had to turn any clients away that desire to participate in this program?  If so, why?  If so, how many?  If so, when?** We have not had to turn any clients away from this program, although, it has taken longer than anticipated to get someone started from our waiting list.  This is due, in part, to staffing challenges and having enough staff to meet the demand.

8. **Comments:** Answers to these questions are for full day and 15 minute unit Day Hab, because we do not separate the program by funding sources other than for billing.  All outcomes are person-centered and based on the individual's success as a whole in the Day Hab Program.

| **Staff Use Only:** | | |
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| Change/ Benefits demonstrated for client/ community? | Yes | No |
| Quantifiable Outcome Measures? | Yes | No |
| Outcomes Reported? | Yes | No |