

# **PUTNAM COUNTY COMPREHENSIVE SERVICES, INC.**

## **ANNUAL REPORT 2022-2023**

### **EXECUTIVE DIRECTOR'S REPORT**

2022-2023 started with PCCS beginning to grow back to pre-Covid numbers of persons served and of revenue. The Board of Directors were made fully aware during the budgeting process in Summer of 2022 that it will be impossible to operate in the black without the continued use of awarded grants. PCCS has a grant that covers expenses of hourly direct care and benefits. PCCS was a good steward of these funds and made sure that no more was taken from the multi-year grant than was necessary to make the company break-even by Fiscal Year End. This was achieved by the administration staff of PCCS.

Recognizing the industry as a whole was in crisis due to labor shortage, the State did a second large funding of grants in January 2023 that had to be used by the end of calendar 2023. PCCS was able to leverage these grants to pay for expenses over income through the end of the fiscal year, and was able to stop drawing from the first grant, and save those funds to be used in 2024, if necessary. Additionally, through the second grant, large bonuses were provided in Spring of 2023, with 3 more bonuses available in mid and late year 2023.

With much effort and advocacy of our Industry Trade Association, the State Legislature provided a thorough rate review for all HCBS Waiver services, resulting in an increase of 20% for PCCS revenue. This allowed wages to be raised by \$1.70 an hour, or a \$3,536 a year for all direct care. Beyond covering hourly and overtime costs, the rate increases also covered administrative expenses. PCCS will not require grants to cover operating expenses in 2023-24. Remaining funds in grants will be used to continue bonus programs established through the two previous grants. While the financial stability of PCCS is looking positive, it will still require good stewardship of funds to be sure they are used effectively and efficiently.

PCCS experienced a leadership change on January 1, 2023. Andrew Ranck announced his intent to leave the agency in 2023, and through careful planning by the Board of Directors and Mr. Ranck, a transition plan was developed that would promote the Assistant Executive Director, JD Miller, to Executive Director in January 2023. Following the succession planning done in previous years, Mr. Miller, was able to move into the role with great ease. Mr. Ranck agreed to stay through 2023 as the Executive Director Emeritus to ensure guidance and a smooth transfer of leadership.

The agency employees have embraced Mr. Miller as their leader, and he and Mr. Ranck continue to work in collaboration to ensure good stewardship of the agency continues through the transition. A thoughtful plan with transition goals for each quarter was established and followed.

Thankfully, COVID became a manageable sickness, and not a pandemic any longer. All programs and activities were fully open and Covid mitigation became an individual issue, not a group crisis. Through grant dollars described above, PCCS was able to continue to offer COVID sick pay and COVID Hazard pay through 2023, as had been established in 20-21, and continued through 2022. The only event that was not resumed, was the Annual Art Festival, but that was due to construction issues, not Covid restrictions.

All programs continue to rebound post-Covid. The Greenwood Day Program, which had suffered the most loss of attendees, is now back up and running, and accepting new admits.

The Work Center was again able to receive higher pay for the person served working on automotive contracts, with a potential to earn up to 20 an hour on some parts. The State is encouraging providers to eliminate sheltered

work programs and sub-minimum wage rates. PCCS has joined a collective of other providers and is working with the state on grant proposals that will assist providers in Workshop Transformations, with a focus of competitive employment.

PCCS was able to increase recruitment efforts and through grants and the new rates, and created a new position for weekends staffing. Called the Weekender, staff working 24-32 hours on Sat or Sun receive 6 to 8 hours bonus pay. 30 of these positions were created and filled within two months. Referral and new hire bonuses were increased from \$1000 to \$2000. Turnover rate reduced to 22% from a higher 29% in 2021. Further reduction in turnover should be realized as new rates were fully in place at the beginning of FYE 2023-2024.

### **Major Accomplishments of 2022-2023:**

1. Successful transitioning process of Executive Directors.
2. Successful Grant Management of Two different Grants. 2023 New Grant was \$821000K
3. Became member of Workshop Collaborative and received \$100K just for participating in exploration. Further participation may result in a \$400K grant for transformation efforts.
4. Achieved a “Break Even” status for finances, as directed by the Board in this unusually difficult financial year.
5. Increased benefits of bonuses, hourly increases, “weekender position”, and mileage reimbursement.
6. Continued to promote the PCCS Pooled Trust. 17 participants had trust at FYE 2023.
7. Rural Transit, public bus system, moved on to PCCS property.
8. Collaboration with the Arts Council, Chamber of Commerce and Main Street Greencastle afforded the art show to be moved downtown in September 2023. This has been a long-term goal of the art department.
9. Exploration into Neuro-Divergent Community in former assisted living facility did not ultimately end with the purchase of the facility, but did help focus the Board and Administration to begin long term planning in housing strategy.
10. Returned to working with Chiyoda Manufacturing for an onsite enclave. The previous relationship was halted with Covid Struggles.
11. Received 2-year 14c certificate, good through 2024. Of note: no current staff had completed this process before and successfully submitted the application with no corrections needed.
12. Several large capital projects were completed – New flooring and paint in Greenwood Office, New deck and foundation work at Tennessee House, Bathroom remodel in Attica, Sewer line correction in Attica Greencastle, Furnace at Camden House, Parking lot re-surfacing in Greencastle. 2 cars and a maintenance van were procured this year. A new server was purchased and installed for the PCCS network.
13. Successfully navigated an internal 3-year audit, a State Disability Service Audit, an Audit from 3<sup>rd</sup> party Medicaid administrator, 403B audit and workers comp audit. All of these were standard audits that unfortunately happened all in one year. PCCS has successful results from all audits, with findings in one audit pending. Those findings have been appealed and PCCS awaits determination.
14. Art Program finally was able to hire a coordinator and a ‘reboot’ is scheduled for November 2023 with consultants providing a two-week art intensive.
15. Maintained an employee satisfaction rating of above average, matching last year’s score which was the highest in 10 years.

## FUNDING AND FINANCES

### June 30, 2023 Year End Financials:

#### Balance Sheet –

PCCS ended the year with \$13.5M in assets and a corresponding \$13.5 in Liabilities and Equity. This includes year-end profit of \$43K

#### Income Statement –

PCCS had income of \$14.34M and expenses of 14.29M leaving a net income over expenses of \$43K. This was a very tight year, but a planned “break even” was achieved. Income included Grant Draws of \$1.2M. The rates effective 7/1/2023 will allow no losses expected and only the mandatory spend down of grants received will be required.

## STRATEGIC PLAN

A plan was developed in late 2020, with a new plan in place Jan 2021 and scheduled to end on Dec 31, 2023. Normally a new plan would have been developed in August of 2023, but Mr. Miller and Mr. Ranck asked the board to extend the current plan through 2024 to allow Mr. Miller the time a space to determine what he would like the roadmap for the next several years to be. The Board determined that the current plan was adequate to be extended and granted approval to extend its life by 1 additional year.

The plan was written fully understanding that the length of COVID effects may alter the ability to move on some objectives, but nonetheless goals were developed for immediate and post pandemic implementation.

The 2021-23 plan includes objectives:

1. Board Stewardship – PCCS will assure the faithful stewardship of all programs, services and resources through the faithful oversight and implementation of this strategic plan. **DONE AND ONGOING**
2. Communication – External and Internal; PCCS will evaluate and improve all internal and external communications to assist in enhancing communications through all departments and the Board; creating innovative and effective communications to all community organizations and partners. **Determined current use of social media, intranet email, and text blast remain effective.**
3. Accountability (Fiscal and Operations) PCCS will develop and periodically review policies regarding fiscal responsibilities while leveraging all available fiscal resources with the goal of providing the best level of staff programming and support. **Maintained current Fiscal Policy but continued to explore other possible future markets and 3<sup>rd</sup> party administrators.**
4. Consumer Needs and Future Services PCCS will assure that its consumers have access to a comprehensive array of high-quality programs and services. **Maintained all programs available and planned growth to return to and exceed pre-COVID experience. While not 100% returned to service levels pre-COVID there is steady progress happening.**
5. Staff Development and Skill Sustainability PCCS will continue to provide staff development opportunities to assure all staff and managers have the skills necessary to fulfill PCCS’s mission and strategic plan. **Introduced new sections to DSP onboarding and trainings, provided industry and Regulatory updates and training to all coordinators. All management was trained on new setting rules expectations, consumer rights and behavior management in light of setting rule changes and expectations.**

6. Physical Asset Management PCCS will continue to maintain and improve its facilities to provide its consumers and staff with a safe and inspiring environment. **Completed many deferred maintenance projects, property improvements and portfolio expansion**
7. Crisis Planning - PCCS will proactively prepare for any future systemic crises including pandemics, weather, IT collapses, etc. Continued to focus on COVID mitigation, although no longer an emergency. **Updated all computer hardware to newer operating systems, ensured off site/3<sup>rd</sup> party back up and web-based programs usage to ensure protection. Updated virus and firewall protection. Able to Exercise to “test” systems completed.**
8. Work Culture - PCCS will strive to create a work environment and culture which is sensitive, equitable and inclusive; embrace an atmosphere that is accepting and respectful to all consumers, families, staff, community members and visitors while promoting a positive culture through purposeful dialogue; value inclusion and diverse perspectives by seeking input from stakeholders when considering agency policies and operations. **Collaborated with DePauw University, State of Indiana, INARF Trade Association and Family Support Services for trainings on Settings rules, client’s rights, trauma informed care. Maintained/encouraged an open, welcoming employment experience allow for diverse opinions, diverse backgrounds, and diverse race and sexual/gender expressions.**

### **CEO GOALS for 2022-23**

1. Maintains a climate which attracts, keeps, and motivates a diverse staff by working as a Team Leader
2. Maintain financial stability and practices
3. Maintain/Enhance PCCS’s image locally and at the State Level
4. Assure board is kept fully informed on conditions of the organization
5. Assures that the organization is responsive to the needs and preferences of those it serves and maintains certification and licensure
6. Oversee the implementation, progress, and reporting on the 2021-23 Strategic Plan

The Board Executive Committee and the Executive Director met in August 2022 to review the goals and success of completion in 22-23. It was determined that the goals had been met, and that the same goals could be carried over to the next year 2022-2023.

In December it was announced that the current Executive Director would be stepping down and the current Assistant Executive Director would be assuming the position in January 2023.

An Additional goal was added at this time:

7. New Executive Director and the Director Emeritus will work in conjunction to smoothly and transparently transfer power to the new ED. A schedule of goals for each quarter was devised for the transfer. 50% of the transfer goals were completed by June 2023, with all goals on track to be completed by Dec 31, 2023, the Emeritus’ exit.

An annual review of Industry executive compensation comparison revealed that the executive director’s compensation is competitive with like-sized, like-located programs.

PCCS continues to have adequate resources, reserves and growth mindset to provide the communities we serve with what is most valued: A recognized system of support and services for people with disabilities striving to improve their skills, experiences, and engagement in their activities and communities of choice.

## **PROGRAM REPORTS**

The following reports provide a synopsis of the year for PCCS' programs. A full Outcome Measurement Report is available for each service.

### **Supported Group Living (Group homes):**

As the year started we saw a second longtime consumer have increased medical problems resulting in a short illness followed by his passing at Putnam County Hospital November 2022. This was a sad time for many of his housemates as most of them had grown up together and their parents were instrumental in starting Putnam County Comprehensive Services, Inc. We were once again left with a vacancy in the men's group home. After reviewing packets and arranging visits we identified an individual that we thought would be a perfect fit and he moved into the house in March 2023. He does have a service dog that will likely be moving to the group home in the future after undergoing some re-training after a lengthy separation.

A large deck repair/replace occurred at Tennessee House this year. We were able to add a ramp that allows greater safety for our mobility impaired residents. In addition to having two ramps the new deck adds outdoor living space for the guys to enjoy. Furthermore, the deck is constructed of composite decking which will provide increased durability and longevity.

Staffing has continued to be problematic this year. Despite the increase to wages, sign on bonuses and quarterly incentives we have struggled to find qualified professional and paraprofessional staff. We have been fortunate to have a seasoned management team that has worked well together to meet the demands of both houses. Hopefully we can identify two qualified staff to replace openings that will occur after the first of the year.

Overall 2022-2023 was a good year for the individuals residing in our group homes. Outings, activities and appointments were resumed as prior to the pandemic. All our folks enjoyed taking advantage of shopping, going to restaurants, local community theatre, First Fridays and concerts in the park among other things. The additional time spent with their families this year was an added bonus everyone enjoyed.

### **Community Living-HCBS Waiver:**

The Community Living Services (CLS) Program serves individuals of the Indiana Medicaid Home and Community Based Services Waiver as administered by the Indiana Division of Disability and Rehabilitative Services (DDRS) under the umbrella organization of the Indiana Family and Social Services Administration (FSSA). These waivers include the Community Integration and Habilitation waiver (CIH), the Family Support Services Waiver (FSW). There are two other waivers administered by the Indiana Division of Aging under the FSSA; The Traumatic Brain Injury Waiver (TBI) and the Aged and Disabled Waiver (A&D). In 2021-2022 PCCS Served 311 participants on these waivers; this is a slight decrease of from 2021-2022. While PCCS had slightly fewer individuals served, hours served were increased for this year. This year PCCS has seen an increase in A&D waiver referral following State guideline changes. PCCS has 8 A&D waiver participants, an increase from 3 the following year.

Revenue for the CLS programs was significantly lower than the previous year. PCCS attributes this decrease to Day Services opening fully in this FYE. While Day Program experienced closures during the pandemic, the CLS program experiences in influx services hours. This naturally decreased when individuals were able to return to work and day services. Due to a staffing crisis, PCCS pulled our services from several counties. Individuals serviced in those areas were provided a 60-day notice to end services (lasting until another appropriate provider was found). All of these individuals had high budgets, resulting in a revenue decrease.

CLS requires most people to have at least one roommate to provide a full 24 hours of staffing if deemed necessary by the Individuals support team. The biggest barrier with this is to find and keep appropriate roommates to share services if 24-hour coverage is necessary. Beyond finding a roommate, the next barrier is to find safe, appropriate, and affordable housing. PCCS buys houses as we can to meet the needs of the individuals we serve. PCCS purchased another home this year in the Indianapolis area to accommodate 3 individuals. These purchases assist several individuals with affordable housing. The cost of housing is a very large barrier for our individuals, especially those that wish to live on their own. If individuals are not in a PCCS owned home, they might live on their own (sometimes with a State Approved Enhanced Budget, if unable to live with others, or they may receive less than 24 hour supports on their own). Individuals might also live in a family home, be supported through Adult Foster Care, Structured Family Care Giving services, or in a leased or owned home with multiple roommates.

24-Hour supervision needs can be done in a residential setting, but most individuals require some sort of day services, at less cost, to afford a full 24-hour day of supervision services. Therefore, having a roommate and congregate day settings are a necessity for 24-hour supervision to be achieved. PCCS continues to advocate and educate family's and guardians on alternative services such as Electronic Monitoring Remote Services.

Hiring and maintaining staff is an ongoing challenge, more so following Covid-19 pandemic. PCCS continues to provide referral bonuses for current employees. PCCS CLS had a turnover rate of 24.4% in 2022-2023. This is lower than the past year of 29.4%. PCCS was able to utilize several federal and state grants for retaining and onboarding DSP's. See Financial section for a full breakdown of how the grants were utilized for DSP's. Additionally, PCCS was able to keep a lower insurance cost per payroll from employee contribution of \$70 per month.

PCCS encourages family members to see if they are eligible to be hired to provide services. PCCS also encourages and accepts many referrals from family members of a loved one or a preferred person to be a DSP working with their loved one. There are some waiver requirements that limit family members providing services, but PCCS works within the guidelines and rules of the waivers to try and hire family members, or family friends of the individual served. Aside from affordable health care, PCCS also offers referral bonuses to current DSP's that refer someone, that person must be on board and a current staff at least 90 days. PCCS offer \$250 awarded at 90 days and \$750 after 6 months completed by the new hire. With State and Federal Rate increases PCCS plans to increase the bonuses to \$500 at 90 days and \$1500 at 6 months beginning FYE 2023-2024.

Individual Satisfaction of services has been above average, with a rating of 4.27 out of 5 for the year. PCCS has made changes for better compensation and benefits for DSP's, these are often addressed as the need arises.

PCCS continues to utilize Electronic Remote Support Services for some individuals who are able to be alone, but may needs some assistance occasionally. Electronic Monitoring provides a two-way communication system with a designated call center, this can be triggered by the individual served or passively through sensors placed throughout the home based on the individual's needs, such as door alarms, bathroom/bedroom alarms, seizure alarms, kitchen appliance alarms, window alarms, etc. This is a voice only system, cameras are not used in the homes. If the call center needs local intervention, they are able to call 911 for an emergency. For non-emergency intervention a call tree is utilized to get a PCCS face-to-face service within 15-20 minutes of a call. No new individuals accessed this service the FYE 2022-2023. This year, 11 individuals (6 households), an increase from the previous years, utilized this service with no reported difficulties. PCCS feels there are more individuals that could safely utilize this service, but there is reluctance from parents/guardians to move away from traditional staffing. PCCS has an increasing aged population. With individuals getting older this does limit the appropriateness of Remote Services for some, as their needs may increase due to age. PCCS does not force this

service to be used, but continues to advocate for any individuals that could benefit from this service to gain more independence.

In 2022-2023 FYE two individuals moved to a nursing facility for rehab, both individuals returned back into services. One individual was admitted to a psychiatric hospital and was able to return to services. CLS works with an individual's team if their circumstances changes, requiring the need for additional supports. CLS works with the funding levels provided by the State in cases of circumstance or emergency needs arises. CLS moved one individual from living alone to an increased staffed home with remote services as his financial circumstances changed and living alone was no longer affordable. CLS accepted 13 new individuals this year. Due to the staffing crisis, many new individuals were taken on when staffing was already in place for them (family, friend, etc.).

Covid mitigation continued to be a monitored concern during the year. PCCS was able to continue our Day Programing services in both locations with minimal concern of Covid outbreaks.

### **Respite Services:**

Respite services are an available service on all Home and Community Based Services Waivers (HCBS) through the Indiana Medicaid System as administered by the Family and Social Services Administration (FSSA) of the State of Indiana.

PCCS provided Respite services to 60 individuals in 2022-2023. This is a decrease compared to 2022-2022 FYE. We accepted one additional individual for this service. Referrals were lower for this service year due to the staffing crisis that followed the Covid pandemic. All referral accepted had a family member or friend able to be hired on as a DSP for the individual. Some families choose to change respite services to PAC (Participant Attendant Care) due to the circumstance and guideline limits for respite services. Respite cannot be used while a primary caregiver is at work, however, PAC services can be used in those situations. With the Covid pandemic, many families opted not to have staffing in the home due to health-related concerns for the individual served, as well as, family members living in the home, contracting Covid.

The service had large dip in utilized hours. Only 29% of the allocated hours were used. Overall revenue for Respite was less than the year previous. PCCS has not returned to pre-Covid revenue and respite hours served, but this is continual area addressed. PCCS has focused on employment incentives to hire and retain DSP's. Respite is often used in emergencies or during summer and holiday months. Many plans have more respite budgeted than will be used due to Case Managers maximizing budgets to their fullest allowable dollar, regardless of provider ability to serve. Maximizing the budget initially allows for more room to move and change service allocations in the budget year if needed.

PCCS attempts to utilize family and friends of the individuals to assist with covering respite needs. Often, family and friends are providing this service as a natural support, but PCCS tries to work with those eligible for employment to be hired and compensated for their supports to the individual.

Some respite hours are completed by employees whose primary duties are not in Respite care, even in the case of overtime, when they are willing to pick up additional hours. Often these DSP's are from the CLS or HAB departments.

Satisfaction was above average at 4.27 out of 5. Comments made for improvement were based on lack of staffing options. This is an agency concern across all departments. Turnover for services was 22.6%, which is down from the previous year of 29%. PCCS will continue to strive to provide Respite when possible.

No individuals in Respite required emergency services. Some individuals moved from family homes but still maintained existing services.

## **Adult Day Programs**

### **HCBS – Day Services**

#### **Vocational Services (Job Development & Supported Employment):**

The Job Development program served twenty-nine individuals with varying disabilities throughout the past year. Five of these individuals were successfully placed in competitive community employment throughout Putnam County. Only four persons closed unsuccessfully and two trial work experiences were performed. Supported Employment currently services twenty individuals by providing job coaching at ten different community employment sites. Following the FSSA requirement for 14c Certificate Sheltered Workshops to transition from piece rate pay to competitive wages, our Supported Employment department is expediting referrals from our Sheltered Workshop.

#### **Sheltered Workshop:**

A total of forty-two people were served this year. Heartland Automotive and Cook's Urological remained the two primary contracts. But in early autumn of 2022, Chiyoda contacted PCCS to assist with four different tasks which resulted in a new contract. An enclave was established which provided work for four individuals at that site daily. Our agency began the process of transformation away from sheltered employment and piece rate pay by joining the Indiana DDRS Employment Collaborative which provided a grant to assist with this transformation. We continued to refer individuals to Vocation Rehab to help support them in finding competitive wage employment opportunities while maintaining our Sheltered Workshop for those that have not yet had that opportunity.

#### **Habilitation (Personal and Social Support Services):**

PCCS continued to expand on the HCBS Settings rule with more opportunities for community involvement including volunteer opportunities at Gleaners Food Bank, Pack Away Hunger, Happy Hounds, and Meals on Wheels. PCCS was able to reintroduce more evening and weekend small group activities again. A total of one hundred and fourteen individuals were served.

#### **Greenlight Art Studios:**

Not in Operation 2022-23, however a new coordinator was hired in Spring of 2023 and a full reboot of the program will happen in 2023-2024.

## **ACCESSIBILITY**

Annually, and as is needed, PCCS reviews and plans for activities and expenditures that will enhance the accessibility of the communities in which we serve.

The following barriers to accessibility were identified and addressed in 2022-2023:

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The following barriers to accessibility were identified and addressed in 2022-2023:

#### **Architectural Barriers –**

- New home in south Indy area purchased March 2022. No new homes identified at this time.
- Home in Attica deeded to us for the care of an individual in our services in June 2024 – sewage line needs replaced and bathroom needs remodeled – approximately 20k
- Lack of low-cost housing within Greencastle. Continue to work with supportive housing to assist with



- possible multi-family unit on the Avenues –will continue to explore option of multi-family units in future.
- 320 Dogwood ramp needs railing off of back patio – completed summer 2021
- Westridge carpet replacement – completed fall 2021.
- Tennessee House deck will need replaced – 30k
- Accessible shower at Arlington house
- Accessible shower needed Meadow in Greencastle – completed summer 2021.
- Secure extra lot in avenues for multi-family unit – determine feasibility along with working with supportive housing developers and the city to determine need for revitalization of avenues.

#### **Attitudinal Barriers –**

- Continued need to increase public awareness of positive consumer attributes. PCCS continued to sponsor and promote on Social Media Talent Shows, Pageants, Art Shows, and Dining in the Dark to help address this area. Begin inviting public back to our facilities and hosting events.
- Updated language within documents and among language used on social media and company documents that is person first and inclusive – ongoing goal.
- Ongoing concerns with Families nervous using non-traditional service models like Electronic Monitoring. The address Coordinators add the topic to team meetings when they feel it might be appropriate to look at alternate service models. This based on the individuals desire for more independence and the ability to provide individual emergency and safety interventions when not staffed face-to-face (i.e. Can dial 911, can evacuate, can administer PRN medications)

#### **Community Integration Barriers –**

- Continue to invite Public to us POST COVID; ‘Reverse Integrate’ - Need to invite public to us. Hosting Chamber Events, Special Olympic gatherings, Art shows, and Sponsor Farmer’s market assisted with this goal. With COVID it has been impossible for us to gather and host events, but hosting events again once pandemic has ceased or is in decline.
- Continued need to increase opportunities to integrate with artists, artisans and public event audiences AND to sell and promote art. Vendor participation at local Farmers Markets and First Friday Events, Winter Market in Johnson County and our Annual Art Show.
- Increase Club Participation– membership drive for Aktion Club increased club numbers larger than the Sponsoring Kiwanis Club. A 3K Matching Fund Raiser drive for Special Olympics was planned, but thwarted due to COVID cancellations.

#### **Communication Barriers –**

- Visually Impaired Person served needs Braille instruction. Impaired Employee paired as Mentor to tutor. Individual has not returned consistently back to the sheltered work center by his own choice – will continue if he so desires.
- Continue to repair and maintain communication devices for individuals utilizing these devices and maintain relationship with computer contractor to maintain those devices on an annual/ongoing basis.

#### **Employment Barriers**

- Individual working at the park decided not to go back there to work – will continue to explore options with the city and park for any interested in the future.
- Work center contracts have picked up within facility and in Chiyoda enclave – will continue to foster relationship with manufacturers and explore further enclave options in the future.
- Pre-vocational sheltered work centers to be closed by 2025 – working on increasing Competitive Integrative Employment amongst those that desire that pathway. Will need to expand our Supportive Employment program staffing to accommodate further caseloads. Will also need to explore increase in number of individuals served within the Day Habilitation program, as it will likely increase from others unable to find community employment. Will also explore further minimum wage positions for our individuals currently doing piece rate work.

#### **Environmental Barriers –**

- Completed in Spring 2022
- Improve flooring at Greenwood day services – carpeted area being completed spring 2023.

**Equal Opportunity –**

- Artists needs for community engagement – seek out awards and contests – minimal entry fees and can be covered with activity funds. Begin talking with community about collaboration for Greenlight Art Festival.

**Financial Barriers –**

- Staff sometimes have financial “hiccups”. Continued 0% \$300 loans – continue with 4 allowed in a year to be paid back in 4 consecutive pays.
- Consumers occasionally have big bills or repairs needed. Continued to provide 0% loan to consumers up to 10k based on needed work/purchase and ability to pay back – look into possibility of minimizing risk to agency by placing real property liens on major home repairs.
- Employee finances “strained” – provided bonuses as we are able and hazard pay to individuals working with confirmed positive cases.

**Participation in Community Activities Barriers –**

- Funds needed for some consumers to participate in events. Established the Maxine Haskett Trust Funds for Activities with donation bequeathed. Fund was established with an initial gift and each year there will be an annual allocation.
- Lack of personal or natural transportation to events. Continued to provide transportation as needed.
- Post-Covid – continue to provide safe events for all individuals served and staff

**Program/Services Entrance Criteria**

- Reopen Work Center. Ongoing Federal Guidelines require Consumer Awareness Training regarding employment options. Complying with standards by hosting at least every 6 months training and retraining provided by the Self Advocates of Indiana and the ARC of Indiana.
- Admissions soft opening as long as staffing allows. Begin to take on as long as they are coming with staff or into a home that can support.

**Transportation-**

- Lack of or restricted Public Transit in Greencastle for those with employment or day services. Continued Contract with Rural Transit to provide rides to and from Day Services for fixed fee. Maintain Weekday Transportation for Supported Employment added weekend transport as Taxi system failed to be reliable. Rural Transit as a tenant in our auxiliary building.
- Lack of Personal or natural support for general transportation. Continued to add to fleet. Addition of minivans to fleets as they age out and as needed.

**Technology Barriers-**

- Aging/obsolete Computers and Computers for program growth. Continued to add computers as necessary. Older, but functional, computers are refurbished and placed into service for internet access and some simple computing needs for consumers. Server is aging and will likely need replaced within the next year. Improvements in time documentation and documentation standards has increased the need for server space to house documentation.
- Employees will need smartphones for EVV implementation. EVV continued to stall for this year. Continue to work with State on roll out plans.

The area of Reasonable Accommodation did not have barriers identified this year.

## **CORPORATE COMPLIANCE**

The Corporate Compliance Committee met this year to review policies and procedures. The current Corporate Compliance Plan is available upon request.

## TECHNOLOGY

PCCS continues to rely heavily on, and continues to grow its use of, technology to better serve all stakeholders. PCCS maintains a large inventory of hardware for personal computer use, cellular phones for all administration and middle management. All network computers are maintained and updated through a contractual relationship with 12-Point Technologies.

12-Point provides nightly backup, off site to the cloud. They also handle fire wall protection and network access points.

PCCS relies on 3<sup>rd</sup> party apps for timekeeping, billing, and employee and persons served records, donations and art sales.

PCCS maintains a website maintained by Distinct Web Design. The site is updated annually with calendars and on needed basis for announcements. It provides referral and employment links and contacts. It handles also handles donations to the agency through Stripe Financial Services.

PCCS had a system wide implementation of Windows 19 in 2022. All hardware was updated to this platform. All hardware had its annual back-up, virus scanning and malware software updates.

7 new laptops, 2 desktops computers and monitors were purchased this year. A server was purchased this year to replace a 12-year-old server. All hardware was configured to the new server, with minimal network delays during installation.

Cell devices and services are provided through Verizon Wireless. Online donations or payments are handled through Strip on our website, and through square for onsite donations or purchases.

PCCS utilizes Night Owl Monitoring for person served who don't need immediate, in-person staffing but can benefit from a two-way communication and monitoring by off site operators. PCCS does not determine the need, but the person served team does, and PCCS supports these desired when there is consensus from a team.

PCCS completed a Table Top Exercise for technology planning this year. Results are below.

### Table Top Exercise 9/22

Assistant Executive Director, JD Miller; IT Coordinator, Caroline Cash; and Computer Consultant representative, Brent Cash met to discuss our Technology Plan and effectiveness and to discuss any possible changes needed for more desirable results of data protection, asset management, and any other IT related information. In this scenario we discussed what steps would be taken in the event that we experienced a ransomware attack:

- 12-point would be notified of the ransomware attack, as we would not be able to recover our files unless posting the ransom.
  - 12-point would then check that the servers had been backed up the previous night and if we are able to access all the files and whether or not they had been encrypted. This would be done offsite and then checked onsite to ensure access is available to computers onsite.
- Staff would be notified that the timekeeping system is down and to take paper notes as a result of not being able to access our server. This would be done via text blast and through Facebook.
- Accel/Provide would be notified of the ransomware attack as well as our insurance company. We would discuss with our insurance company what is covered on the policy and what steps to be taken. Many times, it is recommended to pay the ransom, even though encryption keys are not guaranteed. However, if our servers were backed up properly, this may not be necessary.
- 12-point would ensure that all threats had been mitigated/removed prior to restoring the backed-up data to the server.
- HR and Executive Director would be in contact with insurance and law enforcement as needed throughout the process.

#### Areas needing addressed/General Discussion:

- The committee tabletop exercise could not identify any areas needing addressed as a result of this tabletop exercise. While an unfortunate event of this magnitude could occur, PCCS continues to exercise great caution and believe that there are sufficient safeguards in order to prevent a ransomware attack from having a significant impact on business continuity.
- Server is getting to the age that it will likely need replaced within the next year. Begin to reach out to Dell regarding a new server. The age and amount of data required from Accel/Provide as well as moving to less paper has placed extra work on an already old server. Full set up would look to be around \$25k.
- Continue to purchase laptops and phones as they are needed for our employees that require the use of these.
- Continue to update software as needed – no major software updates needed at this time.

#### Technology Goals 2022-2023:

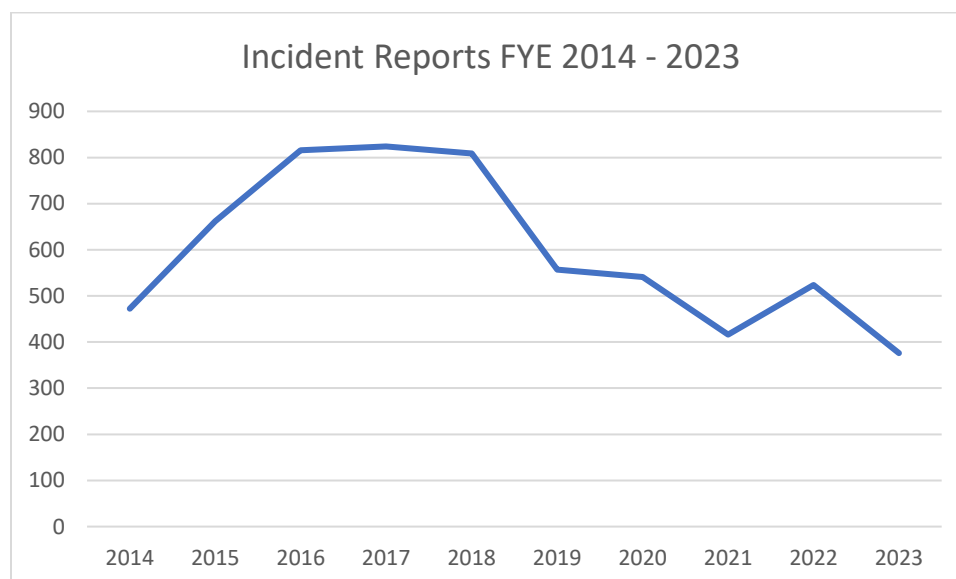
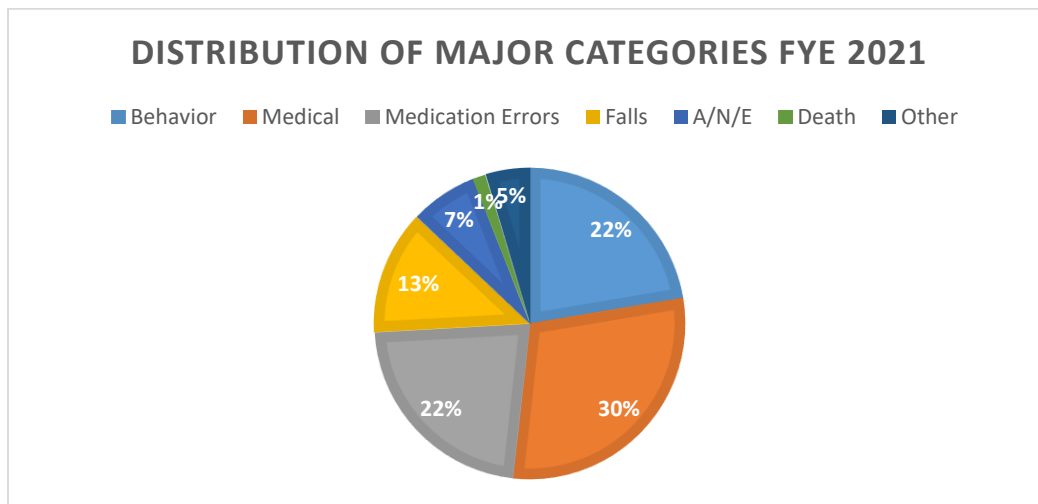
1. Test emergency systems and back up scenarios with an annual table top. **COMPLETE SEPT 2023, Repeat annually**
2. Continue to reduce paper where possible. **Complete and Ongoing. All persons served records are electronic, personnel paper files are kept for active personnel. Terminated files are stored electronically.**
3. Maintain relationship with 12-Points Technology. **Complete and ongoing.**
4. Complete annual updates. **Complete and ongoing.**
5. Encourage use of Electronic Monitoring (Night Owl) **Complete and ongoing.**
6. Maintain and update website as needed. **Complete and ongoing.**
7. Move desk phones to VOIP as equipment and network ages, becomes obsolete. **Long Term goal 2023-2024**
8. Plan for server replacement in 2023 – **Complete**
9. Be on top of EVV (Electronic Visit Verification) requirement as the State begins implementation steps in 2023. Will require much training and cell access to use the GPS required software – **ONGOING, working with INARF trade association to keep updated. Goes Live Fall 2023**

## HEALTH AND WELLNESS

### AGENCY HEALTH MANAGEMENT ANNUAL REPORT JUL 2022- JUN 2023

There were a total of 376 state reportable incidents for the year with the following breakdown by department:

<b>Distribution Among Program Areas FYE 2023</b>		
Community Living	281	74%
Residential	68	18%
Day Services (Greencastle)	23	6%
Day Services (Greenwood)	4	1%
<b>Total</b>	<b>376</b>	<b>100%</b>



There was a significant decrease in reportable incidents in FYE 2023 from FYE 2022.

There were a total of 376 incidents this year, compared to 524 the previous year – a 28% decrease. All of the same metrics from FYE 2022 were used for FYE 2023. Different from last year, medication refusals were not tracked this year, as it is no longer required by the State Reporting website as it is a right of the individual to refuse treatment. For 2022, with medication refusals removed, the total number of incidents would have been 398. Therefore, YoY there was an overall 6% decrease in reportable incidents when medication refusals for FYE 2022 were removed from the equation.

CLS comprised 74% of the agency total for 2023 – an 8% point decrease from the previous year. Day Services GC & GW increased slightly from 4% in 2022 to 7% in 2023. SGL comprised 18% of reportable incidents as it relates to the agency total.

There was a 10% increase from last year in the reporting of behavioral incidents; 22% of the total reports, up from 12% the previous year. The majority of these incidents can be attributed to 1 individual, his team works closely with him to ensure that least restrictive methods are utilized when dealing with challenging behavioral issues. Medical incidents saw an increase of 1%, the total for 2023 being 29% of incidents reported across the agency.

Falls in FYE 2023 were 13% of the total reportables, and in FYE 2022 falls accounted for 8% of reportable incidents. There were 48 falls that occurred in FYE 2023 with 14 requiring an ER visit. Of the falls, 23% of them were without injury and 52% required first aid attention or less. The agency ensured each agency site had salt bought in bulk to help with safety in the colder months. Falls were spread fairly evenly throughout the year. Continued emphasis will be placed on fall awareness throughout the year. 73% of the falls occurred in CLS, 27% were SGL, and Day Services comprised 0% of the total. Client training has been done to assist in recognizing fall hazards and the need to slow down in the workshop and in the community.

Med Errors decreased to 22% representation a 50% decrease YoY, with 83 total errors occurring. As noted previously, in FYE 2023 refusal of medication errors was no longer a BDDS reporting requirement and were no longer tracked in this report. As mentioned last year, this did lead to a significant decrease in medication errors this year as a result. Each individual served has the right to refuse medications and is discussed at the team level. Additionally, 14% of errors could be attributed to doctor or pharmacy error. All medication errors are reported and each individual served teams decide if they should have more restrictive medication passes. If a staff commits the error, there is disciplinary action, retraining, and a loss of quarterly bonus in some departments. No medication error resulted in adverse effects and all error reports were closed by the State. Staff errors comprised 65% of total errors (up from 25% the previous year – this can largely be due to refusals not being tracked).

There were 26 reports of Abuse, neglect, or exploitation in FYE 2023, or 7% of the reportable incidents. 8% of the incidents were committed by non-PCCS personnel. 1 staff was terminated as a result of reported incidents of ANE. Adult Protective Services is contacted in each case and they determine if a crime that requires arrest is committed. No staff were arrested, and no arrests were reported back to PCCS by APS. PCCS takes ANE reports seriously and investigates each incident fully. The agency was only able to substantiate 5 incidents and reported those fully to the state and all other authorities required.

PCCS unfortunately had 5 deaths in FYE 2023. All deaths were unexpected, but due to health issues that each person suffered. Each death is reported to and investigated by a Statewide Mortality Review Board, and the review board found no questionable circumstances of these deaths.

The final category of OTHER represents only 5% of the incidents. Generally, “other” will capture environmental issues of an individual(s) served home, or difficulty with finances, or legal matters. All “Other” incidents were resolved and closed by the State.

PCCS ended the year with all state reportables closed by the state and no sanctions or suspension of services occurred due to incidents.

### **Newer areas being tracked**

The committee determined that the current tracking method seems to encompass all areas required and then more. The committee may determine that further areas need explored as they arise within the upcoming year. The team has determined that while tracking Days, time of incident, full-moon, and whether there was work in the work center or not was informative, there was no clear distinction that any trends had developed and chose to forgo tracking these metrics in the upcoming years. If it is decided to continue going forward we can re-implement these tracking areas.

### **The Health and Wellness Committee set the following goals for the FYE 2023**

1. Reduce Med Errors by 10%

As a percentage of reportables FYE 2022 was 44% of incidents and FYE 2023 comprised 22% of reportables. There was a decrease in the number of total errors from 230 in FYE 2022 to 83 in FYE 2023 an decrease of 50%. This goal was not met for FYE 2023. The goal will continue for FYE 2023.

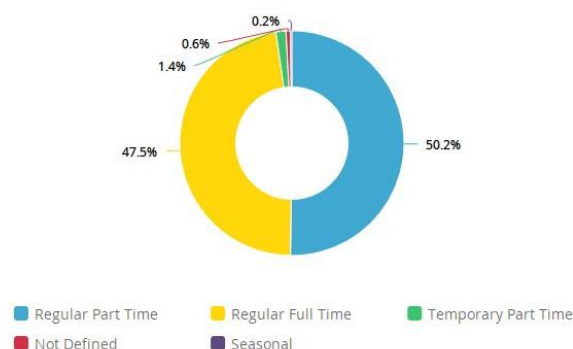
2. Reduce ER visits by 15%  
In FYE 2022 ER visits totaled 100, while they totaled 80 in FYE 2023 – a 20% decrease. This goal was met for FYE 2023 and will continue for FYE 2024.
3. Decrease use of PRN medications for Behaviors by 1%.  
PRNs were 9% (33 reportables) in FYE 2023 and 3% (16 reportables) for FYE 2022, a 52% increase YoY. All PRNs are administered only with a prescription and team approval of the need. However, this goal was not met for FYE 2023. PCCS still believes this to be an important area to track and set goals for the upcoming year, so it will continue for FYE 2024, and will remain at a 1% decrease due to the number of individuals that require PRN medications for behavioral purposes.
4. Reduce falls by 5%  
As a percentage of incidents, falls increased from 8% in FYE 2022 to 13% FYE 2023, a slight increase from the previous year. Important to note, that falls tend to be over reported since there are conflicting reporting requirements. There was a total of 48 falls this year compared to 42 from the previous year, a 13% increase. The goal was not met for FYE 2023. This goal will continue at the same percentage for FYE 2024.
5. Continue to track and encourage reporting of incidents that occur outside of service times.  
Completed in FYE 2023 and continued for FYE 2024.
6. Continue to track and study the Severity Ratio to examine if the incidents' severity is going up or down.  
Completed in FYE 2023 and continued for FYE 2024.
7. Continue to drill deeper on who is reporting the incident, and who is caring for the individual at the time of incident, so to better target needs for training and supports.  
Completed in FYE 2023 and continued for FYE 2024.
8. Continue monthly review of the past month's incidents, and produce quarterly and annual reports for dissemination.  
Completed in FYE 2023 and continued for FYE 2024.

As the year progresses, updates and additions to recommendations will be made by the committee.

## HUMAN RESOURCES

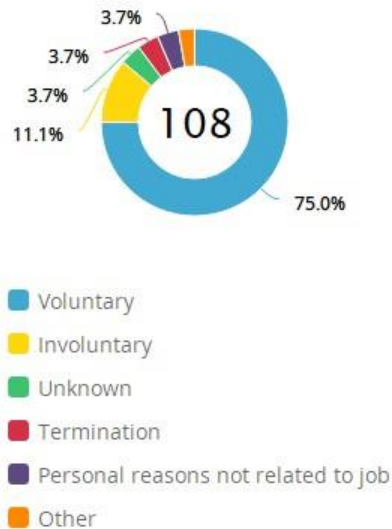
Currently the agency employs 484 staff members, 230 Full Time, 243 Part time, 7 PRN 1 seasonal, and 3 not defined. There are 40 consumers enrolled in the Sheltered Workshop and approximately 291 consumers enrolled in our various programs.

Employment Type



During the course of the year, there were 108 resignations/discharges. 81 were Voluntary, 4 were personal reasons not related to the job, 16 were involuntary, 4 were unknown and 3 were for better pay benefits.

## Termination Reasons



The agency had a 22.6% turnover rate for the year with an average tenure of 7.5 years.

## STAKEHOLDER INPUT

Persons Served	Out of 5	
33 Res. CLS	4.27	VERY SATISFIED
8 Res HAB	3.41	SATISFIED
11 Res WC	3.78	VERY SATISFIED
12 Res GH	3.99	VERY SATISFIED
4 Supported	3.68	VERY SATISFIED

**TOTAL 3.98 VERY SATISFIED**

### NO Returned Comm Partners

**Comments:** More local activities (outside of Greencastle), happy with no COVID restrictions

### Staff

DEPT	Repond.	Out of 5	
Admin	6	4.29	
CLS	55	4.02	
SGL	9	4.02	
GC HAB	3	4.57	
GW HAB	3	3.93	
WC	1	4.4	
Supp	2	4.1	
Unknown	17	4.16	
	68	4.08	Very Satisfied



**Comments: Lower insurance costs, more leave time (CLS), improve co-workers' attitudes and performance, stop all COVID restrictions; conversely Thanking for restrictions. Thanks for raise in June 2022. Thanks for bonuses throughout COVID.**

## **GRIEVANCES AND COMPLAINTS**

There were no formal grievances or complaints this year by any stakeholders.

## **WAITING LIST**

PCCS does not maintain a waiting list for any program. We look at referrals as they are received and if we are to add program consumers, we will work with individuals and their teams to secure services. If we are not able to assist a new referral, we ask them to check back with us, but also provide several other agency names in their area to explore of options/providers.

## **BOARD OF DIRECTORS**

PCCS is overseen by a 12-member board made up of community leaders and subject specialists. The Board constitution and duties are outlined in our by-laws and constitution. These members meet the last Thursday of every month, except in November.

The current PCCS Board at June 2023 was:

Executive Committee:

Ken Heeke, President  
John Moore, Vice President  
Sue McCune, Treasurer  
Matt Welker, Secretary

Directors:

Kathryn Dory  
LaToshia Everson  
Jackie Eitel  
Valerie Rudolph  
Pam Lage  
Brian Cox  
Jim Ensley  
Ann Garceau

There were no new board members in 2022-23. New board members are provided a board training, which covers policies, programs, regulatory environment, financial overview, ethics and conflicts of interest. These trainings are provided by the Executive Director on an as needed basis.