



PROGRAM EVALUATIONS

FY 2017



CHILDREN'S SERVICES

Rainbow's End – Corydon and Georgetown

21st Century Community Learning Centers

PROGRAM EVALUATION FINAL REPORT FY2017

Rainbow's End Corydon

Primary Measures		Goal	Outcome	Percent Achieved
1	Optimize staff training - average number of hours of in-service training per childcare staff	15	15.36	102%
2	Maximize the variety of activities offered - percent of activity areas covered per week (gross motor, manipulative procedures, dramatic play, language, math, science, sensory experiences)	10/day	10	100%
3	Provide learning opportunities that follow a predetermined theme - percent of weekly activities that correspond with the weekly theme	85%	85%	100%
4	Minimize the number of accidents that require medical attention - number of accidents that require medical attention	2	1	150%
5	Optimize parents involvement			
a	Percent of parents attending parent teacher conferences for 5-year-old class.	50%	100%	200%
b	Number of informational articles provided to parents per month.	12	12	100%
6	Maximize satisfaction of the families served - percent of ratings in the top two categories on general satisfaction.	95%	91%	95%

Corydon Child Care Supplemental Information

Number of Children Served: 129
 Number of Funding Children Served: 35
 Number of Children to Withdraw: 33
 Licensure Capacity: 156
 Staff Turnover: 50%

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Rainbow's End Corydon

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
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2 For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.

The only goal that was not achieved is that only 91% of families indicated on the Consumer Satisfaction Surveys that they were satisfied with the services. The goal was 95%.

3 List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.

It is believed that this goal was not achieved because the return rate of surveys was so low. Next year more effort will be dedicated to collecting completed surveys from all parents.

PROGRAM EVALUATION FINAL REPORT FY2017

Rainbow's End Georgetown

Primary Measures		Goal	Outcome	Percent Achieved
1	Optimize staff training - average number of hours of in-service training for child care staff	15	28	186%
2	Maximize the variety of activities offered - percent of activity areas covered per week (gross motor, manipulative procedures, dramatic play, language, math, science, sensory experiences)	10/day	10	100%
3	Provide learning opportunities that follow a predetermined theme - percent of weekly activities that correspond with the weekly theme	85%	85%	100%
4	Minimize the number of accidents that require medical attention - number of accidents that require medical attention.	2	0	200%
5				
a	Percent of parents attending parent teacher conferences for 5-year-old class.	50%	100%	200%
b	Number of informational articles provided to parents per year.	12	12	100%
6	Maximize satisfaction of the families served - percent of ratings in the top two categories on general satisfaction	95%	94%	99%

Georgetown Child Care Supplemental Information

Number of Children Served: 84
 Number of Children on Funding: 12
 Number of Children to Withdraw: 19
 Licensure Capacity: 93
 Staff Turnover Rate: 50%

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Rainbow's End Georgetown

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
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2 For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.

The only goal that was not met was that only 94% of parents returning Consumer Satisfaction Surveys indicated that they were satisfied with the services received. The goal was 95%.

3 List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.

It is believed the percentage would have been higher had more parents returned their satisfaction surveys. Next year, more effort will be placed on collecting completed surveys.

PROGRAM EVALUATION FINAL REPORT FY2017

EAST WASHINGTON ELEMENTARY SCHOOL

Primary Measures					Goal	Outcome	Percent Achieved
1	100% of students (50) will meet an attendance goal of 60 days by year end.				50	52	104%
2	Optimize staff training - average number of hours of in-service training per afterschool staff				15	39.1	261%
3	Participants will score a grade of C or higher on their Reading/Language Arts report card grade.				75%	86%	115%
4	Participants will score a grade of C or higher on their Math report card grade.				75%	78%	104%
5	Minimize the number of accidents that require medical attention - number of accidents that require medical attention				2	0	200%
6	Optimize parents involvement						
a	Number of family events hosted.				4/year	3	75%
b	Average percent of parents attending family events				75%	56%	75%

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: East Washington

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
Goals not met: Only 3 family events were held (goal was 4 events); only 56% of families attended events (goal was that 75% of families would attend events). The program participated in 4 events, however, 1 event was hosted in partnership with the Title 1 program and staff did not maintain attendance sheets during this event therefore event was not counted. There are no outstanding reasons why only 56% of families attended events.		
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	
1) The program manager will discuss with Coordinator the importance of maintaining attendance records at all family events. 2) The program coordinator will work with the manager and other program coordinators to plan events that parents will want to attend.		

PROGRAM EVALUATION FINAL REPORT FY2017

MEDORA ELEMENTARY SCHOOL

Primary Measures		Goal	Outcome	Percent Achieved
1	At least 90% of students will meet an attendance goal of 60 days by year end.	90	86	96%
2	Optimize staff training - average number of hours of in-service training per afterschool staff	15	44.4	296%
3	Participants will score a grade of C or higher on their Reading/Language Arts 1st and 2nd semester report card grade.	75%	95%	127%
4	Participants will score a grade of C or higher on their Math first and second semester report card grade.	75%	86%	115%
5	Minimize the number of accidents that require medical attention - number of accidents that require medical attention	2	0	200%
6	Optimize parents involvement			
a	Number of family events hosted.	4/year	7	175%
b	Average percent of parents attending family events	75%	60%	80%

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Medora Elementary School

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
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2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.
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Goals not met: 1) Only 86% of enrolled students met the attendance goal (90% was goal). 2) Only 60% of parents attended family events (goal was 75%).

3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.
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1) Program manager and district coordinator will work to develop attendance incentives; 2) Program manager and district coordinator will work to plan events that parents will want to attend and to develop incentives which may be offered to parents for attending.

PROGRAM EVALUATION FINAL REPORT FY2017

MORGAN ELEMENTARY SCHOOL

Primary Measures

		Goal	Outcome	Percent Achieved
1	100% of 50 students will meet an attendance goal of 60 days by year end.	50	52	102%
2	Optimize staff training - average number of hours of in-service training per afterschool staff	15	38.4	256%
3	Participants will score a grade of B or higher on their Reading/Language Arts report card grade.	75%	71%	95%
4	Participants will score a grade of B or higher on their Math report card grade.	75%	67%	89%
5	Minimize the number of accidents that require medical attention - number of accidents that require medical attention	2	0	200%
6	Optimize parents involvement			
a	Number of family events hosted.	4/year	4	100%
b	Average percent of parents attending family events	75%	58%	77%

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Morgan Elementary

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
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2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.
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Goals not met: Only 71% of students received a B or higher report card grade in reading (goal was 75%); Only 67% of students received a B or higher report card grade in Math (goal was 75%); Only 58% of families attended family events (goal was 75%).

3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.
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During the next year, program coordinators will be required to enter their own report card grades into EZ Reports thereby allowing them to identify students who are struggling in order to target these students for additional assistance in math and reading. The Manager will work with all coordinators to plan family events that family members will want to attend and will develop incentives for families who participate.

PROGRAM EVALUATION FINAL REPORT FY2017

NORTH HARRISON ELEMENTARY SCHOOL

Primary Measures		Goal	Outcome	Percent Achieved
1	100% of 50 students will meet an attendance goal of 60 days by year end.	50	51	102%
2	Optimize staff training - average number of hours of in-service training per afterschool staff	15	35.8	239%
3	Participants will score a grade of B or higher on their Reading/Language Arts report card grade.	75%	87%	116%
4	Participants will score a grade of B or higher on their Math report card grade.	75%	85%	113%
5	Minimize the number of accidents that require medical attention - number of accidents that require medical attention	2	2	100%
6	Optimize parents involvement			
a	Number of family events hosted.	4/year	4	100%
b	Average percent of parents attending family events	75%	78%	104%

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: North Harrison Elementary

1	Did your program meet or exceed all of the goals identified? (Yes or No)	Yes
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	

COMMUNITY RESOURCES

Habilitation
In-Home Services
Structured Family Care

PROGRAM EVALUATION FINAL REPORT FY2017

Habilitation -- Corydon

		Goal	Outcome	Percent Achieved
1	Maximize the number of service hours provided	85%	80%	94%
2	Increase or support independence through skill acquisition - 80% percent of persons served will achieve 50% of their objectives.	80%	85%	106%
3	Maximize personal choice - percent of goals that contain choice-making opportunities.	90%	77%	86%
4	Maximize satisfaction of persons served and their advocates. Percent of ratings in top two categories in consumer satisfaction survey.	100%	83%	83%

Habilitation -- Salem

	Primary Measures	Goal	Outcome	Percent Achieved
1	Maximize the number of service hours provided	85%	81%	95%
2	Increase or support independence through skill acquisition - 80% percent of persons served will achieve 50% of their objectives.	80%	89%	111%
3	Maximize personal choice - percent of goals that contain choice-making opportunities.	90%	78%	87%
4	Maximize satisfaction of persons served and their advocates. Percent of ratings in top two categories in consumer satisfaction survey.	100%	90%	90%

Habilitation -- Palmyra

	Primary Measures	Goal	Outcome	Percent Achieved
1	Maximize the number of service hours provided	85%	80%	94%
2	Increase or support independence through skill acquisition - 80% percent of persons served will achieve 50% of their objectives.	80%	85%	106%
3	Maximize personal choice - percent of goals that contain choice-making opportunities.	90%	83%	92%
4	Maximize satisfaction of persons served and their advocates. Percent of ratings in top two categories in consumer satisfaction survey.	100%	100%	100%

SWOT ANALYSIS HABILITATION

STRENGTHS

- Staff training
- Expertise in working with individuals with disabilities
- Expansion of services
- Individualization to meet the needs of the individual

WEAKNESSES

- Aging of individuals served creates new demands
- Limited Resources
- Having updated Plans of Care authorizing appropriate number of hours & services
- Consumer Absences

OPPORTUNITIES

- Traumatic Brain Injury Waiver an option for those currently served but not funded

THREATS

- Subject to changes in funding from state (BDDS)
- Funding - Limited service hours authorized by POC
 - Inflexibility of service hours authorized by POC

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Habilitation

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
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2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.
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Maximize the number of service hours provided – consumer absence, staff absence and training, inclement weather.
 Maximize personal choice – guardian input limiting personal choice, SGL completing day services ISP.
 Maximize satisfaction of persons served – confusion of what services the survey is actually for, references to the workshop and transportation in the survey are evidence of confusion on the program the survey is actually for.

3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.
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Continue to minimize staff absences and attempt to have training during times that would not interfere with providing services. Continue to advocate for consumer choice with guardians and request SGL include choice making opportunities for consumers residing in their homes. Specify on the satisfaction survey in bold what program the survey is for.

PROGRAM EVALUATION FINAL REPORT FY2017

In-Home			
Primary Measures		Goal	Outcome
1	Maintain community integration and participation of each person served		
a	Prevent institutionalization - percent of persons served that exit services due to institutionalization	0%	6%
b	Prevent temporary placement in behavioral medicine unit - percent of persons served that experience a temporary placement in a behavioral medicine unit	0%	3%
c	Increase or support independence through skill acquisition-100% of persons served will achieve 75% of objectives on the ISP.	100%	92%
2	Maximize utilization of authorized service hours - percent of authorized hours that were used by the family		
a	Utilization of Respite services	75%	64%
b	Residential Habilitation and Support	90%	86%
c	Day Services	90%	76%
d	Attendant Care	90%	89%
e	PAC	90%	87%
3	Maximize satisfaction of persons served and their advocates - percent of ratings in the top two categories on general satisfaction.	100%	100%

SWOT Analysis

In-Home Services

STRENGTHS

- In-Home has several long-term staff
- Long-term management
- Positive relationships with referral sources - case managers
- Consumer-specific training

WEAKNESSES

- Continued difficulty in hiring staff
- Aging of individuals served creates new demands
- Limited resources

OPPORTUNITIES

- Expand into additional counties

THREATS

- Other In-Home providers
- Funding cuts

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: In-Home Services

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
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2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.
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Maintain community integration – aging of the population served has increased the hospitalizations and inpatient stays for consumers served. Utilization of service hours – consumer illness, staff absence and training, inclement weather, scheduling conflicts.

3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.
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Recommend wellness services for consumers that would benefit in hopes to decrease hospitalizations and inpatient stays. Schedule training during nonservice hours, provide sub staff when possible, hire additional staff.

PROGRAM EVALUATION FINAL REPORT FY2017				
STRUCTURED FAMILY CARE				
Primary Measures		Goal	Outcome	Percent Achieved
1	Achieve 100% of persons served remaining in a stable home for at least one year	100%	100%	100%
2	Increase or support independence through skill acquisition - 90% percent of persons served will achieve 100% of ISP objectives	90%	97%	103%
3	Maximize satisfaction of persons served - percent of ratings in the top two categories in general on satisfaction survey.	100%	100%	100%

PROGRAM EVALUATION MANAGEMENT REPORT FOR FY 2017		
PROGRAM: Structured Family		
1	Did your program meet or exceed all of the goals identified? (Yes or No)	Yes
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
All goals were either meet or exceeded.		
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	

PROGRAM EVALUATION FINAL REPORT FY2017			
WELLNESS COORDINATION			
Primary Measures	Goal	Outcome	Percent Achieved
1	Maintain community integration and participation of each person served		
a	Prevent institutionalization: percent of people served who exit services due to nursing home placement	0%	100%
b	Prevent hospitalization: percent of people served who are temporary placed in the hospital	20%	100%
2	Maximize satisfaction of people served: percent of ratings in the top two categories of overall general satisfaction	90%	95.5%

PROGRAM EVALUATION MANAGEMENT REPORT FY2017		
PROGRAM: Wellness Coordination		
1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
A low response rate to the satisfaction surveys mailed out		
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	
Ensure when the consumer satisfaction survey is mailed out, staff are following up to ensure maximum participation.		

EMPLOYMENT SERVICES

Job Trials/Work Experiences
Supported Employment
Placement

PROGRAM EVALUATION FINAL REPORT FY2017

Employment Services -- JOB TRIALS/WORK EXPERIENCES/CBE

Primary Outcome Measures		Goal	Outcome	Percent Achieved
1	To obtain job trials, work experiences & CBE - average number of job trials/work experiences completed per month.	4	14	350%
2	To create employment opportunities from job trials/work experiences/CBE - percent of employment opportunities created from job trials & work experiences.	30%	N/A	*State restructure of service

SUPPORTED EMPLOYMENT

Primary Measures		Goal	Outcome	Percent Achieved
1	To obtain community-based employment - percent of persons obtaining community-based employment.	80%	35%	44%
2	To obtain a regular competitive wage - average hourly wage	\$7.25	\$8.37	115%
3	To maximize job retention - percent of persons that retain employment for 90 days	75%	63%	84%
4	To minimize program length from referral to placement - average number of days from referral to placement	120	192	160%
5	Increase or support independence through skills acquisition - percent of persons served who achieve at least one ISP objective	70%	100%	143%
6	Maximize satisfaction of persons served - percent of ratings at satisfactory or greater.	95%	100%	105%
7	Maximize satisfaction of employers - percent of ratings at satisfactory or greater.	75%	100%	133%
8	Maximize satisfaction of referral sources (VR) - average percent of ratings at satisfactory or greater.	95%	100%	105%

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Employment Services

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
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2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.
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Obtain Community Based Employment:
 Employers no longer allowing job carving has limited pool of jobs some individuals are able to perform
 Employers are also seeking applicants who can multi-task and/or cross train (i.e. stocking shelves at store must also run register)
 Client geographic location/need limits availability

Maximize Job Retention:
 Client work ethic
 Supportive services needs/family supports are lost

Minimize Length from Referral to Placement:
 Two clients were placed after 1000 days in development status
 Client specific needs within a rural community

3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.
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	Enhance discovery services Expand job trial opportunities Increase client/program marketing
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FAMILY SERVICES

First Steps
Healthy Families

PROGRAM EVALUATION FINAL REPORT FY2017

FAMILY SERVICES -- FIRST STEPS OF SOUTHERN INDIANA

Primary Measures		Goal	Outcome	Percent Achieved
1	Referrals will be made by a variety of community partners, at least 4 sources per county.	100.0%	100%	100%
2	The average age at referral will be 18 months or less.	18.0	14	129%
3	Families will complete enrollment within 45 days	100%	96%	96%
4	Children will be served in their natural environment	96%	99%	103%
5	Infants and toddlers birth to 1 in will be served.	1.40%	1.91%	136%
6	Children birth to 3 will be served.	3.00%	4.8%	160%
Supplemental Information Average Enrollment / Month = 135 Number of Referrals = 2,849				

FAMILY SERVICES/PROGRAM EVALUATION FINAL REPORT FY17

FIRST STEPS OF WEST CENTRAL INDIANA

Primary Measures		Goal	Outcome	Percent Achieved
1	Referrals will be made by a variety of community partners, at least 4 sources per county.	100.0%	100%	100%
2	The average age at referral will be 18 months or less.	18.0	14	129%
3	Families will complete enrollment within 45 days	100%	90%	90%
4	Children will be served in their natural environment	96%	99%	103%
5	Infants and toddlers birth to 1 in will be served.	1.40%	1.71%	122%
6	Children birth to 3 will be served.	3.00%	3.52%	117%
Supplemental Information Average Enrollment/Month = 49 Number of Referrals = 1,059				

FAMILY SERVICES / PROGRAM EVALUATION FINAL REPORT FY 2017

HEALTHY FAMILIES

Primary Measures		Goal	Outcome	Percent Achieved
1	FRS will complete 8 assessments per month.	100.0%	67.0%	67%
2	Families offered home visitation services will accept and enroll in the program.	50%	43.0%	86%
3	Families enrolled in home visitation will receive 75% of their scheduled visits.	75%	63%	83%
4	Direct Service Staff will receive weekly supervision sessions.	90%	91.0%	101%

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: First Steps

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
Inability to recruit and hire therapists for the Assessment Team impacted our ability to determine eligibility and enroll children in services within 45 days.		
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	
Continue to seek therapists. Director invited State program personnel to meet and discuss the issue. This meeting is scheduled for 8-8-17. This problem is not unique to BRS, most providers across the state have this same issue.		

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Healthy Families

1	Did your program meet or exceed all of the goals identified?	(Yes or No)	No
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2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.
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Staff turnover greatly impacted assessment and home visitation completion rates. The program only employs 5 home visitors, a supervisor and a program manager. Two home visitors, one of whom also completed assessments, left within a month of each other. There simply isn't a depth of staffing to pull from in order to complete all visits each week.

3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.
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Provide excellent training to new staff and focus on engaging them in hopes of retaining them.

HOUSING

Affordable, Accessible, Senior and
Transitional Housing

PROGRAM EVALUATION FINAL REPORT FY2017

AFFORDABLE HOUSING

Primary Measures		Goal	Outcome	Percent Achieved
1	Provide affordable housing to individuals from all average median income (AMI) levels			
a	Percent of applicants served with a 30-40% AMI	22%	41%	186%
b	Percent of applicants served with a 41-50 % AMI	49%	38%	78%
c	Percent of applicants served with a 51-60 % AMI	13%	20%	154%
d	Percentage of applicants served with a 61+% AMI	16%	13%	81%
2	Maintain affordability of housing by seeking outside funding sources			
a	Number of federal and/or state grants applied to annually	2	2	100%
b	Number of other sources sought for housing funds annually	2	3	150%

ACCESSIBLE HOUSING

3	Provide assessable housing to community members with disabilities			
a	Percentage of housing rented to people with disabilities	5%	10%	200%
b	Percentage of accessible housing	10%	10%	100%

Counties Served: Crawford, Harrison, Washington

PROGRAM EVALUATION FINAL REPORT FY2017

TRANSITIONAL HOUSING

Primary Measures		Goal	Outcome	Percent Achieved
1	To provide housing assistance for victims of domestic violence			
a	Percentage of women who are referred that are placed in transitional housing	25%	75%	300%
b	Percentage of families transitioning into permanent housing	50%	90%	180%
2	Maintain self-sufficiency in woman served by transitional housing			
a	Percentage of woman who are referred to community resources (i.e. learning center, daycare services, employment services, counseling)	75%	100%	133%
b	Percentage of women who obtained/maintained employment while in transitional housing	75%	60%	80%
c	Percentage of woman who achieve half of their Individual Program Goals	85%	70%	82.4%

HOUSING SWOT ANALYSIS

STRENGTHS

- Autumn Ridge has great location next to interstate
- Newest apartments in the area
- Only apartments in County with 4-bedroom apartments.

WEAKNESSES

- Not enough apartments to meet demand for lowest income levels
- Lack of renters able to pay for 3-bedroom apartments, even at affordable rent levels of 40% AMI or 50% AMI
- Need more 2-bedroom apartments and some 1-bedroom apartments

OPPORTUNITIES

- More senior housing needed to accommodate retiring baby boomers

THREATS

- Grant resources for construction of new housing has been cut substantially.
- Grant resources are limiting amount they will spend per unit on construction or rehab as a result of less resources, making it harder to find all the necessary money to construct or rehab facilities.

PROGRAM EVALUTATION MANAGEMENT REPORT FY2017

PROGRAM: HOUSING

1	Did your program meet or exceed all of the goals identified? (Yes or No)	Yes
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	

INDUSTRIES/JANITORIAL

Corydon Blue River Industries
Salem Blue River Industries
Janitorial Services

PROGRAM EVALUATION FINAL REPORT FOR FY2017

CORYDON BLUE RIVER INDUSTRIES

Primary Measures		Goal	Number Measured	Number Achieved	Percent Outcome Achieved	Percent of Goal Achieved
1	To increase individual productivity of consumers					
a.	Percent of consumers that participate in work services for a minimum of one year AND increased average monthly production rate from the beginning of the first quarter to the end of the fourth quarter.	75%	41	28	68%	91%
2	To increase hourly earnings for consumers					
a.	Percent of consumers that participated in work services for a minimum of one year AND increased their average wage earned from the beginning of quarter one to the end of the fourth quarter.	75%	41	23	56%	75%
3	To minimize the number of consumers that have a reportable accidents					
a.	Percent of consumers that did not have a reportable accident during the reporting period	100%	41	40	98%	98%
4	Maximize satisfaction of person served and their advocates - percent of ratings in the top two categories on general satisfaction	100%	33	28	84%	84%
a.	Percent of consumers that indicated satisfaction level in top two categories of consumer satisfaction survey.	100%	21	16	76%	76%
5	Maximize satisfaction of customers - percent of ratings in the top two categories on Customer Satisfaction Survey.	100%	5	4	80%	80%

CORYDON INDUSTRIES SWOT ANALYSIS

STRENGTHS

- Dedicated staff, balance needs of consumers and production
- ISO 9001 quality certification
- Years of experienced staff

WEAKNESSES

- Secure dependable employees
- Amount of work available

OPPORTUNITIES

- Secure new contract work

THREATS

- Lack of appropriate work force to fill job opening
- Changes in WIOA
- Lack of funding for services provided

SALEM BLUE RIVER INDUSTRIES						
Primary Measures		Goal	Number Measured	Number Achieved	Percent Outcome Achieved	Percent of Goal Achieved
1	To increase individual productivity of consumers					
a.	Percent of consumers that participate in work services for a minimum of one year AND increased average monthly production rate from the beginning of the first quarter to the end of the fourth quarter.	75%	35	14	40%	53%
2	To increase hourly earnings for consumers					
a.	Percent of consumers that participated in work services for a minimum of one year AND increased their average wage earned from the beginning of quarter one to the end of the fourth quarter.	75%	35	16	45%	60%
3	To minimize the number of consumers that have a reportable accidents					
a.	Percent of consumers that did not have a reportable accident during the reporting period	100%	35	35	100%	100%
4	Maximize satisfaction of person served and their advocates - percent of ratings in the top two categories on general satisfaction	100%	15	15	100%	100%
a.	Percent of consumers that indicated satisfaction level in top two categories of consumer satisfaction survey	100%	9	9	100%	100%
5	Maximize satisfaction of customers - percent of ratings in the top two categories on Customer Satisfaction Survey.	100%	4	4	100%	100%

SALEM INDUSTRIES SWOT ANALYSIS

STRENGTHS

- Amount of work available
- Variety of work meets the needs of consumers with severe disabilities
- Caring, dedicated staff balance needs of consumers and production
- ISO 9001 quality certification
- Indiana DOL INSHARP certification

WEAKNESSES

- Lack of industrial equipment to meet production needs
- Limited floor space for job growth and additional industrial equipment

OPPORTUNITIES

- New contract opportunities as companies seek labor
- Affirmative Industries and employment of people without disabilities

THREATS

- National and state changes in "acceptable" employment outcomes for people with disabilities
- Lack of funding
- Slow economy
- Foreign competition for subcontract work

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Industries -- Corydon and Salem

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
Goal #1 and #2- Consumer Wages- Contract Work Opportunities, work refusals.		
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	
Continue to seek contract work that provides increased wages for consumers.		

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Janitorial

Primary Measures		Goal	Outcome	Percent Achieved
1	Maximize satisfaction of person served and their advocates - percent of ratings in the top two categories on general satisfaction.	100%	0%	Survey not returned
2	Maximize satisfaction of customers-percentage of ratings in the top two categories on the Customer Satisfaction Survey.	100%	66.7%	66.7%
3	Person served will have opportunities to train and or work as a janitorial associate.	25%	25%	100%

STATE USE FACILITIES - I-64 WELCOME CENTER/HENRYVILLE AND TAYLORSVILLE REST PARK/SEYMOUR ANNEX

Primary Measures		Goal	Outcome	Percent Achieved
1	Avoid citations that require a Plan of Correction by the State to address serious contract issues at each site.	0%	2%	98%
2	To optimize the number of persons with a disability employed through State Use	51%	51%	100%
3	Maximize satisfaction of INDOT- percent of ratings in the top two categories on Customer Satisfaction Survey.	100%	0	Survey not returned
4	Maximize satisfaction of person served and their advocates - percent of ratings in the top two categories on general satisfaction question.	100%	100%	100%

Supplemental Information

Customer Surveys- INDOT didn't return survey. Survey was mailed with a return stamped envelope, a follow up call was made in attempt to get INDOT contact to complete and submit survey.

JANITORIAL SWOT ANALYSIS

STRENGTHS

- Experienced management and staff in the janitorial department.
- Retention of Customers/Contracts.
- Employment opportunities and training for people with disabilities.

WEAKNESSES

- Labor shortage.
- Low pay rate.

OPPORTUNITIES

- Employment opportunities for people with disabilities.
- Contract Revenue for BRS

THREATS

- INDOT securing other providers.

STATE USE FACILITIES SWOT ANALYSIS

STRENGTHS

- Strong on site managers.
- Great customer service with Indiana Department of Transportation.

WEAKNESSES

- Securing part time employees.
- Securing Subs.

OPPORTUNITIES

- Full time employment for persons with a disability.
- Contract Revenue.

THREATS

- State Budget.

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Janitorial/State Use

1 Did your program meet or exceed all of the goals identified? (Yes or No) No

2 For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.

State Use Facilities Goal #1 – Citations that require plan of correction – state posted a number of sites which has increased number of complaints

List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.

Continue to provide services per contract specifications; retraining staff when appropriate.

RESIDENTIAL SERVICES

Supervised Group Living (SGL)

PROGRAM EVALUATION FINAL REPORT FY2017				
RESIDENTIAL SUPERVISED GROUP LIVING				
Primary Measures		Goal	Outcome	Percent Achieved
1.	70% of residents will achieve 50% of their objectives.	70%	73%	105%
2.	Number of days all available beds are utilized	95%	98%	103%
3.	96% of family satisfaction survey questions will be rated 4 or above.	96%	99%	103%

SWOT Analysis
Residential Supervised Group Living

Strengths

- Core of dedicated and skilled staff
- Well established and historically fiscally sound program
- Extensive knowledge of regulations governing operation of homes.
- Satisfaction of service recipients and their significant others.
- Homelike atmosphere fostered in group homes.
- Community based service.
- Service recipient input is integrated into programming.
- Very good reputation and working relationship with accrediting agencies (ISDH, BDDS)
- Consistently good results on quality and compliance surveys.

Weaknesses

- Staff turnover/ inability to hire new staff.
- Stressful working environment.
- Need for better staff training program and ways to facilitate ongoing training.
- Unpopular working hours.
- Lack of competitive wages and benefits.
- Inability to fill open beds due to inefficiency of the referral system.
- Staff morale and commitment.
- Need for better technology to enhance programming.
- Need for better management training program.
- Poor quality marketing program and marketing materials (e.g. SGL Brochure)

Opportunities

- State emphasis on person centered planning.
- Attracting new staff to our team.
- Waiver services are more costly and require more staff.
- Exploiting competitors vulnerabilities.
- Increased use of technology to enhance services and increase efficiency.
- Many Indiana residents still waiting for services.
- Building on a reputation of quality to improve our company brand.

Threats

- Emphasis by state agencies on alternate community based services.
- Aging population in group homes.
- Aging facilities and equipment.
- Negative press concerning care of individuals.
- Possibility of politically motivated changes to programs/ reduction in funding.
- Competition from other agencies.
- Trend by state agencies toward cutting or limiting services to our client base.
- Limited political clout of our clientele and industry.
- Changing policies by state agencies and costs associated with those changes.
- New providers moving into service areas.

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Residential Supervised Group Living (SGL)

1	Did your program meet or exceed all of the goals identified? (Yes or No)	Yes
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
s	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	

TRANSPORTATION SERVICES

Day Service

Public

Medical

Pre-School

PROGRAM EVALUATION FINAL REPORT FY2017

DAY SERVICE TRANSPORTATION

Primary Measures		Goal	Outcome	Percent Achieved
1	Maximize satisfaction of person served - percent of ratings on satisfaction survey report with a rating of 4 or 5.	100%	92%	92%
2	Ensure that day routes are properly managed through daily coverage, and any changes are handled in a timely manner, daily. Ensuring that there is a vehicle daily to meet the needs for these clients. Measured through TM dispatch database and manifest paper data.	100%	100%	100%

PUBLIC TRANSPORTATION

Primary Measures		Goal	Outcome	Percent Achieved
1	Maximize satisfaction of person served - percent of ratings on satisfaction survey report with a Rating of 4 or 5.	100%	79%	79%
2	Log all drug FTA updates effectively every quarter. Including Pre-employment, Random and MIS reports.	100%	100%	100%
3	Transportation Management to attend all meetings provided for training through RTAP and INDOT, June and September.	100%	100%	100%

MEDICAL TRANSPORTATION

Primary Measures		Goal	Outcome	Percent Achieved
1	Maximize satisfaction of person served - percent of ratings on satisfaction survey report with a Rating of 4 or 5.	100%	89%	89%
2	Properly document each one way Medicaid transportation trip, using the proper paperwork and Medicaid authorizations, with each trip having its own Medicaid sheet per customer.	100%	100%	100%

PRE-SCHOOL TRANSPORTATION

Primary Measures		Goal	Outcome	Percent Achieved
1	Maximize satisfaction of person served - percent of ratings on satisfaction survey report with a Rating of 4 or 5.	100%	80%	80%
2	Maintenance Facility will operate effectively for the mid buses that serve these clients by performing yearly ISP inspections on all child supported vehicles.	100%	100%	100%

SWOT ANALYSIS

TRANSPORTATION

STRENGTHS	<p>Southern Indiana Transit System (SITS) has many strengths. The main one is versatility on manpower assignments with driving staff and ability to meet the many needs of Blue River Services, Inc. consumers and the public. SITS has strategically requested vehicles to fulfill community need and uses economical dispatch resources. SITS transportation has been very successful in meeting the needs of the community.</p>
WEAKNESSES	<p>SITS has a limited budget, which also limits the amount of transportation that can be provided. Local match is also a weakness overall, especially in some counties where funding is limited. Lack of funding sources that would help bring down the federal subsidy or state funding via INDOT regulations. This shortfall also prevents some counties from adopting SITS services</p>
OPPORTUNITIES	<p>Corporate providers of liability-driven investment funding would supplement existing funding with donations and help subsidize the existing local match that is received from the counties served by SITS</p>
THREATS	<p>Ongoing threats are inability to sustain local match to continue public transportation services in the counties we serve. Other threats include cuts in government funding, specifically entities that set funding limits for the Department of Transportation. This has in the recent past limited SITS' ability to expand to other counties. Security for vehicles that are stored outside Harrison County is another threat. Vehicles have been vandalized, catalytic converters have been stolen, along with other items that have been taken from vehicles, and gas has been siphoned from vehicles as well.</p>

PROGRAM EVALUATION MANAGEMENT REPORT FOR FY2017

PROGRAM: TRANSPORTATION

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
<p>Goal not met: Maximize satisfaction of person served -- percent of ratings on satisfaction survey report with a rating of 4 or 5. The amount of responses was extremely low and this doesn't possibly reflect the performance that each program is doing yearly. There has been a reduction in workforce, which covers many scenarios from staff being impacted, and in turn, impacts our client ridership. Other determining factors are scheduling, lack of staff if someone calls in ill or has a family emergency. When staff is low, it causes multiple impacts to service abilities. Other factors relate to the low wage currently doesn't attract many candidates, and efforts to find potential employees who are not dependent on wage alone.</p>		
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	
<p>Increase survey response from the ridership. There is an ongoing effort to advertise and train our staff properly through INDOT and BRS trainers. This training consists of specific safety and customer service responsibilities. Improve hiring efforts through more aggressive advertisement and hire more staff.</p>		

WOMEN, INFANTS AND CHILDREN

Crawford
Harrison
Orange
Washington

PROGRAM EVALUATION FINAL REPORT FY2017					
WIC SERVICES			Goal	Outcome	Percent Achieved
1	Number of clients receiving supplemental foods and nutrition counseling.		2,370	2,216	94%
2	Percent of infants who were breastfed at least once per day until 6 months of age.		30%	Information not available	
3	Percent of infants who were breastfed at least once		80%	75%	93%
4	Percent of ratings in the top two categories on the Consumer Satisfaction Survey question, "Is WIC a good program?"		100%	99.5%	99.5%

PROGRAM EVALUATION MANAGEMENT REPORT FY2017		
PROGRAM: WIC		
1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
	Caseload: New computer system and some reports were not available until March and there are still some reports that are not available. Breastfeeding: Poor support by physician and other community partners	
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	
	Caseload: Monitor caseload reports as available. Outreach activities and postcards to participants who miss their appointments. Breastfeeding: Outreach to physician and other community partners, educate about what WIC has to offer and how WIC supports breastfeeding in the community.	

YOUTH SERVICES

Wyandotte House & Corydon Ramsey Youth Shelters
Safe Place
Stepping Stone

PROGRAM EVALUATION FINAL REPORT FY2017

WYANDOTTE HOUSE

Primary Measures		Goal	Outcome	Percent Achieved
1	To provide emergency (up to 20 days) or long-term shelter for children ages 10-18			
a	Percent of referred children who are admitted for residential services	90%	83%	92%
b	Minimize unplanned moves - percent of children who experience an unplanned move (run away resulting in a discharge and emergency discharges	25% or less	36%	100%
2	To promote family reunification and community placement			
a	Percent of children who transition into a less restrictive environment	75%	63%	84%
b	Percent of children who maintain contact with family	95%	96%	101%
3	To increase or support independence through skill acquisition for children who are placed for long-term care			
a	Percent of children who achieve at least 75% of their objectives in the Individual Service Plan	75%	92%	123%
b	Percent of children who maintain public school attendance during placement	90%	100%	111%
4	Maximize satisfaction of children served - percent of ratings in the top two categories on general satisfaction	80%	87%	109%
5	Maximize satisfaction of referring agencies - percent of ratings in the top two categories on general satisfaction	80%	72%	90%

Supplemental Measures		Number of placements served/county	
b.	Facility at Capacity: 7%	Crawford	2
Total Declined : 17%		Harrison	10
		Floyd	6
		Jefferson	1
		Lake	2
		Madison	2
		Marion	1
	Average duration of care per child -average number of days per placement	Monroe	1
		Orange	3
b.	Emergency Placement Average - 9	Scott	1
		Vanderburgh	3
		Washington	2
		Total unduplicated # of children served = 34	

YOUTH SERVICES SWOT ANALYSIS

STRENGTHS

- Onsite TF-CBT
- Emergency Shelter & Open Residential Services
- Youth Focused, Person Centered Services
- Low Acuity
- ID/DD Home
- Consumer Satisfaction
- Quality Youth / Program Outcomes
- Community Integration
- On-site TF-CBT

WEAKNESSES

- Staff turnover
- Internal communication
- Intake structure
- Documentation timeliness

OPPORTUNITIES

- Expand intake/assessment team structure
- Implement Therape
- Participation in Youth Service Councils
- Service area expansion

THREATS

- Competition
- State requiring greater programmatic need
- Change in funding methods/rate structure
- State licensing vs. state therapeutic conflicts in youth/family services

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Youth Services

1	Did your program meet or exceed all of the goals identified? (Yes or No)	No
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2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.
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To Provide Emergency or long-term shelter: Percent of youth admitted:
Facility was at capacity multiple times throughout the year resulting in 7% of youth being placed on agency wait list.
10% of referrals received were inappropriate for facility services.

To promote family reunification and community placement: Percent of children who transition to a less restrictive environment:
Youth were brought in until transition to a long-term therapeutic facility became available.
Youth were unable to maintain in our structure being least restrictive.

Maximize satisfaction of referring agencies - Percent of ratings in the top two categories on general satisfaction:
Timely documentation and reporting due to management turnover.

3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.
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Enhance intake review process/team.
Implement case management system to enhance reporting quality and timeliness

PROGRAM EVALUATION FINAL REPORT FY2017

SAFE PLACE

Primary Measures	Goal	Outcome	Percent Achieved
Increase youth and community awareness of program			
Number of articles published annually regarding SP program (BRS Newsletter, HCCF Nslt, Newspaper)	4	4	100%
Number of community presentations annually (6 Lion's Club, 4 After School, 1 YMCA)	4	4	100%
Number of students receiving SP information annually	1000	1,000	100%

Primary Measures	Goal	Outcome	Percent Achieved
Volunteer Recruitment and Maintenance			
Maintain active list of volunteers	0	N/A	N//A
Number of volunteer trainings held per year	0	N/A	N/A
Percentage of trained volunteers with complete background checks	0%	N/A	N/A

Primary Measures	Goal	Outcome	Percent Achieved
Site Recruitment and Maintenance			
Percentage of established sites provided with SP contact information	100%	100%	100%
Percentage of sites with visible Safe Place signs and/or decals	100%	100%	100%
Percentage of established sites (up to 30) that are actively maintained	100%	100%	100%

SUPPLEMENTAL INFORMATION

Number of established sites:	39		
Number of pending sites:	0		
Number of calls to hotline:	4		
Number of youth requesting help at sites:	1		

PROGRAM EVALUATION MANAGEMENT REPORT FY2017

PROGRAM: Safe Place

1	Did your program meet or exceed all of the goals identified? (Yes or No)	Yes
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	

PROGRAM EVALUATION FINAL REPORT FY2017

Program: Stepping Stone

Primary Measures		Goal	Outcome	Percent Achieved
1.	Units prioritizing people experiencing chronic homelessness	100%	100%	100%
2.	Clients exiting to permanent housing	90%	100%	111%
3.	Clients remaining in permanent housing at the end of the operating year	80%	94%	118%
4.	Clients maintaining or increasing employment income	80%	86%	108%
5.	Clients maintaining or increasing case income from all available sources	100%	100%	100%
6.	Clients maintaining or increasing mainstream benefits	100%	100%	100%
7.	Maintain usage rate	100%	100%	100%
8.	Collect and maintain comprehensive client data: percentage of data entry that reflects zero missing information	100%	100%	100%

PROGRAM EVALUATION MANAGEMENT REPORT FOR FY17

PROGRAM: Stepping Stone Apartments

1	Did your program meet or exceed all of the goals identified? (Yes or No)	Yes
2	For the goals that were not met, list below any determining factors that may have prevented the program from meeting the goal.	
3	List below what steps will be taken during the next Fiscal Year to improve the outcome of the goals that were not met this year.	