PayneCounty
YouthServices,Inc.
www.pcys.org

PAYNE COUNTY YOUTH SERVICES

FY 2019 MANAGEMENT REPORT

JULY 1, 2018 – JUNE 30, 2019

FY 2019 Management Report

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PAYNE COUNTY YOUTH SERVICES
FISCAL YEAR 2019 MANAGEMENT REPORT

Mission Statement
Payne County Youth Services, Inc. is dedicated to providing free quality services for the positive development and recovery of children, youth and families.

Organizational Plan
Attachment A is a copy of the agency's Fiscal Year 2020 Organizational Plan.

Program Plan
Attachment B is a copy of the agency's Fiscal Year 2020 Program Plan.

Community Needs Assessment
A community needs assessment was conducted to determine what the community sees as the most pressing issues facing youth and families in our community. A variety of stakeholders received the assessment, including the Office of Juvenile Affairs, the Department of Human Services, schools, churches, clients, former clients and others.

It appears from this data that most of the community respondents had a good knowledge of the services of Payne County Youth Services. Some of those surveyed were not familiar with the specific programs offered. There was an increase in overall awareness of the agency within the community. Respondents indicated significant satisfaction with their working relationship with PCYS, our services and our outcomes.

The top issues which community respondents identified as community needs were child physical abuse, child sexual abuse, child behavior problems, stress/anxiety/depression, school-related problems, drug and alcohol issues, family conflicts and household dysfunction, disregard for authority, and a cluster of needs including disruptive behavior, boredom, emotional disturbance/depression, delinquency, child abuse and neglect, and bullying.

In our effort to address needs of the community, PCYS continues to offer the Skills for Success Program for students and parents, adjustment counseling, mental health and substance abuse counseling, specialized victim services as well as the Safe Place program and emergency youth shelter. An ongoing parent support/education group is provided for parents to learn how to better parent their teenagers. PCYS provides on-going emotions management groups and relationship groups.

Victim of Crime Act (VOCA) supported counseling is available. Referrals for victims' services include compensation, transportation to court, and advocacy. The VOCA counselor also continues to serve on the Child Abuse Prevention Task Force and as an advocate for services for victims. Funding from VOCA was received for the 2019 fiscal year, which continues to allow PCYS to expand victim services to include participants in the Transitional Living Program and to provide specialized training for clinical staff serving this population. Three PCYS staff members have received training and continue to utilize Eye Movement Desensitization and Reprocessing

(EMDR), a specialized technique for work with severe trauma and PTSD, in addition to other therapeutic interventions.

Payne County Youth Services continues to provide our drug and alcohol services and was recertified for one (1) year by the Oklahoma Department of Mental Health Substance Abuse Services (ODMHSAS) until June 2020 and will be applying for recertification in 2020. PCYS continues to provide alcohol and other drug psychoeducational groups, prevention groups and individual treatment services. Our school-based, office-based and Community-At-Risk (CARS) counseling programs many times are centered upon these youth who are dealing with substance abuse along with stress, anxiety, and depression, resulting in a large number of youths served receiving services for co-occurring disorders.

Problems at school continue to be a focus for our agency. PCYS provides a clinician to each of the secondary schools for school-based individual, family, and crisis intervention and prevention counseling in Stillwater, Yale, Cushing, Perkins, and Glencoe. Botvin Life Skills Education, an Evidence-Based Prevention Curriculum, is provided to most Stillwater Middle School, Morrison Secondary School, and Glencoe Secondary School students during the school day. True prevention programming is often difficult to achieve in a crisis-driven society. Increasing our prevention programming is an exciting challenge that PCYS is meeting head-on.

The PCYS Safe Place Program and Emergency Youth Shelter continue to provide critical emergency shelter to youth in crisis. The PCYS Safe Place Program has expanded to 59 sites, including 30 OSU Big Orange Busses. Thirty youth accessed Safe Place during FY 2019.

The PCYS Emergency Youth Shelter, licensed for 17 beds by DHS, sheltered 78 youth this fiscal year for a total of 2,015 shelter care days. Providing for all needs of the youth while in residence, PCYS has provided educational opportunities in accordance with the McKinney Vento Act, recreational opportunities, life skills, counseling and other needs of each youth. Many youth are experiencing longer stays in our facility with many staying for a number of months during a single placement and returning for multiple placements throughout their adolescence.

Transitional Living Program
Our Transitional Living Program, serving youth 18-22 years, has provided housing assistance, case management, counseling, education assistance and job-related services to 21 young adults, some with minor children. This program is funded by a grant from the Emergency Solutions Grant from the Department of Commerce, in addition to support from Elite Repeat, private donations, The Faye Allene Rife Brown Foundation, and other donors. Due to paying living expenses for some participants, this is a high-cost-per-participant program.

Foster Care Program
PCYS had implemented our program in 2014, and recruited, trained and supported Foster Care Families and Homes within our Foster Care system. PCYS provided comprehensive support to our Foster Parents from the initial contact and throughout their journey which included counseling services, respite, training; special events, certain supplies; tutoring, referral and 24/7 guaranteed immediate access to our Foster Care Staff.

Having provided exemplary services to foster children and foster parents, PCYS closed our Foster Care Program at the end of the 2019 fiscal year. Contracting opportunities with DHS had been removed by the state, making the program not fiscally sustainable. PCYS was able to transfer our families to a long-time partner agency, Meadows of Hope, and continues to provide counseling and shelter to foster children.

Quality Assessment
As an agency accredited by the Commission on Accreditation of Rehabilitative Facilities (CARF), certified by the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS), and a Certified Youth Service Agency and member in good standing of the Oklahoma Association of Youth Services (OAYS), Payne County Youth Services has demonstrated a significant commitment to quality in the services we provide. PCYS was reviewed by the Oklahoma Office of Juvenile Affairs (OJA) and OAYS and received a 100% compliance rating from both reviewers. PCYS was reaccredited by CARF in June 2018, for 3 years. PCYS received outstanding results from the survey with a 99.9% compliance rating. PCYS will apply for CARF re-accreditation in 2020.

Payne County Youth Services conducts quality assessment activities in a variety of ways. The Quality Assurance Team meets quarterly to review case files to ensure they are current and accurately reflect the work being done with clients. The Quality Assurance Team also reviews effectiveness, efficiency and accessibility measures, client satisfaction data, and community needs assessments to look at trends and make recommendations for improving service delivery. Confirmation of accuracy of billing to Medicaid or other sources is also reviewed.

Our goal is for a majority of the charts reviewed to have 90% or above of the items reviewed to be correct. This benchmark has been met each quarter. Deficiencies in files revolved mainly around slight inconsistencies in use of certain forms. No critical concerns were noted, and all issues have been addressed through training and Quality Assurance processes.

Case consultation occurs on a weekly basis, allowing agency service providers to discuss difficult cases and receive feedback from other counselors as to strategies that might be effective in working with their clients. This also provides a forum for counselors to share new and innovative treatment approaches for working with clients, and to receive support to mitigate burn-out in this high-stress field. Suggestions as to treatment planning are documented in the client file along with documentation as to what staff was present at the meeting.

Shelter files are reviewed by the Shelter Director and YGS Supervisors at least quarterly to ensure accuracy. Shelter Staff Meetings and full Staff Meetings are held at least monthly to provide training, information and for team building activities.

Services Summary

The following table summarizes the number of service hours and number of clients served during FY 2019:

Program	Actual # Clients	Actual Hours
Individual/Family Counseling	224	1,770
CARS	23	78
Psycho Educational Group	450	5,400
Skills for Success/First Offender	29	121
VOCA	211	NA
Case Management	NA	4,444
Shelter	78	*48,360
Community Development / Education	61,345	10,871
Safe Place (clients accessing)	30	NA
Safe Place Presentations/Education	52,000	NA
Transitional Living Program	21	NA
Voices of Today Art Program	120	NA
Adopt-A-Family Holiday Program	150	NA
Training Delivered (Staff)	NA	111
Training Received (Staff)	NA	1,065
Consultation/Supervision Provided (Staff)	NA	2,118
Building a Competent Community for Suicide Prevention		

*2,015 shelter care days (SCD) where 1 SCD = 24 hours for 1 resident

The agency goals and objectives for FY 2020 can be found in Attachment D.

Approximate breakdown of non-shelter clients served among individual communities are: Stillwater, 45%; Yale, 5%; Perkins, 14%; Cushing, 20%; Ripley, 12%; Glencoe, 1%; Morrison, 2%; other areas, 1%. Approximate breakdown of clients served by race are: American Indian or Alaskan Native, 7%; Asian/Pacific Islander, 4%; Black, not of Hispanic Origin, 4%; Hispanic, 6%; White, not of Hispanic Origin, 79%. Approximate breakdown of clients served by gender are: female, 57%; male, 43%.

Data Collection

Data was collected in the areas of effectiveness, efficiency, accessibility, and consumer satisfaction.

Effectiveness Measures -

The effectiveness measure used to track client's progress was that 80% of the clients would show a 1 or more point decrease (improvement) in their Client Assessment Record (CAR) score at each 90 day review.

Clients Reaching CAR Goal -
The Client Assessment Record (CAR) is a numerical scale used to determine client function across 9 domains that include feeling, mood, affect; thinking, mental process; substance abuse; medical/physical (including medications); family; interpersonal; role performance; socialized; and self-care/basic needs. An additional assessment of communication is required for specific populations for acute levels of care.

The CAR score was measured at the time of intake, every 90 days during treatment, at discharge, and 90 days post-discharge. The goal is for 80% of the clients to show a decrease in CAR score of 1 or more points during a 90-day period or between intake and discharge, whichever is shorter.

FY 2019 CAR outcomes showed an average of 86% reaching goal. The average change in CAR per client was a reduction of 4.7 points (goal of 1.0 points). This excludes the few who demonstrated no change as a result of coming to the mental health assessment only.

Accessibility Measures -
One (1) accessibility measure was utilized during Fiscal Year 2019. The accessibility outcome goal is for 100% of clients who request service to be contacted within 15 days.

The agency continues to work hard at ensuring clients are contacted for services within 15 days of referral. Should caseloads or specific needs make it impossible for a client to be seen at PCYS within 15 days, PCYS staff has many resources to whom we can send a client and family, including Oklahoma State University counseling centers, private providers, and others. All referrals coming into the agency are tracked by the Clinical Director and reviewed by the Executive Director, and through a triage approach, those requiring immediate assistance are seen within 48 hours, or sooner, if at all possible, or provided with referrals for immediate assistance. In FY 2019, 96% of clients were seen within 15 days.

Consumer Satisfaction -
Client satisfaction surveys are given to or mailed to all active clients every 90 days and at discharge. Clients are asked to indicate their level of agreement with a series of 5 statements measuring their experience at PCYS. Our goal is to average 4 on these responses, with 5 being the most favorable response. For FY 2019, our responses indicate an average of 4.5 on this measure.

Outcomes Summary -
Our measures indicate an overall trend in meeting the goals of accessibility, effectiveness and increase in CAR. The CAR scores measure was not always reached. These measures are indicative of the increasingly complicated clinical cases that staff are seeing, including an increase in resistance associated with a higher incidence of more complicated substance abuse cases.

Critical Incidents
Critical Incident Reporting is mandated by the Office of Juvenile Affairs (OJA) and by the Department of Mental Health and Substance Abuse Services (ODMHSAS). Critical Incidents that meet criteria must be reported to OJA if it involved an OJA client to ODMHSAS and to the Office of Client Advocacy.

Other incidents are noted in PCYS Incident Reports, but do not rise to the level of meeting Critical Incident Reporting requirements.

Incidents and critical incidents that occurred throughout the FY19 time period include shelter-based occurrences such as runaway behavior and resident interaction issues. All incidents are evaluated and addressed through staff training, procedures review or other methods as appropriate.

Grievances
In FY2019 Payne County Youth Services received no formal grievances at either the office or shelter. This is indicative of the dedication of our staff to help youth and families navigate their issues proactively while striving for positive change in the ability of our client and residents to communicate their needs proactively to staff.

Agency Financial Position / Personnel Matters
Agency revenues totaled $1,834,849 for FY 2019. This is an increase in overall revenue of 26%.

The Agency continues to demonstrate strong fiscal responsibility. The Board of Directors again sponsored *An Evening to Remember* February dinner fundraiser, a combination dinner and entertainment event. The community responded favorably by acting as corporate sponsors and participants. Staff and Board members volunteered time and effort to make these events a success.

PCYS staff continues to demonstrate a high level of professionalism and dedication to the clients and services of PCYS. Staff and volunteers have provided volunteer time and effort to remodel and redecorate areas at the shelter and offices as needed with community businesses providing many supplies and services. Staff participated by working at other UW agencies.

PCYS continues to benefit from the support of The Advisory Board for Sustainability and Public Awareness. The membership, comprised of community and state leaders from many areas, are dedicated to advocacy, public relations, funding and financial support of PCYS and our clients.

Our annual Independent Financial audit was conducted in October 2018 by Saunders and Associates, Inc. There were no findings or concerns. The Independent Audit for FY 2019 is scheduled for November 2019.

PCYS completed the purchase of an additional 3,800 square feet of programming space at our out-patient location on 2224 W 12th St in Stillwater, OK. This additional space is already in use to provide additional counseling, prevention, intervention, and some administrative space.

Statement of Financial Position as of June 30, 2019	
Assets	2019
Cash	$302,814
Investments	$125,319
Accounts Receivable	$173,853
Prepaid expenses	$17,352
Property & Equipment	$0
Total Assets	$619,338
Liabilities	
Accounts Payable	$19,430
Accrued Absenses	$44,597
Total Liabilities	$64,027
Equity	$555,311
Total Liabilities & Equity	$619,338

Statement of Activities as of June 30, 2019	
Revenue	2019
State	$514,057
Federal	$456,594
Donations	$95,989
Medicaid	$26,232
Interest	$2,319
United Way	$44,573
Misc.	$26,060
Private Contracts	$669,025
Total Revenue	$1,834,849
Expenses	
Program Services	$1,444,943
Administrative & General	$420,256
Other	$0
Total Expenses	$1,865,199
Equity at Beginning of Year	$594,408
Equity at End of Year	$555,311
Change in Equity	-$39,097

Revenue FY19
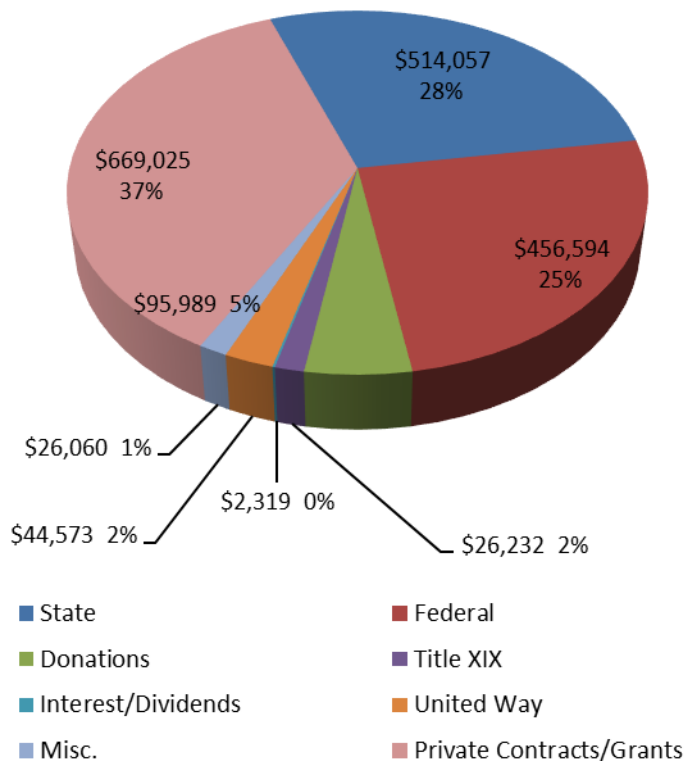
Expenses FY19
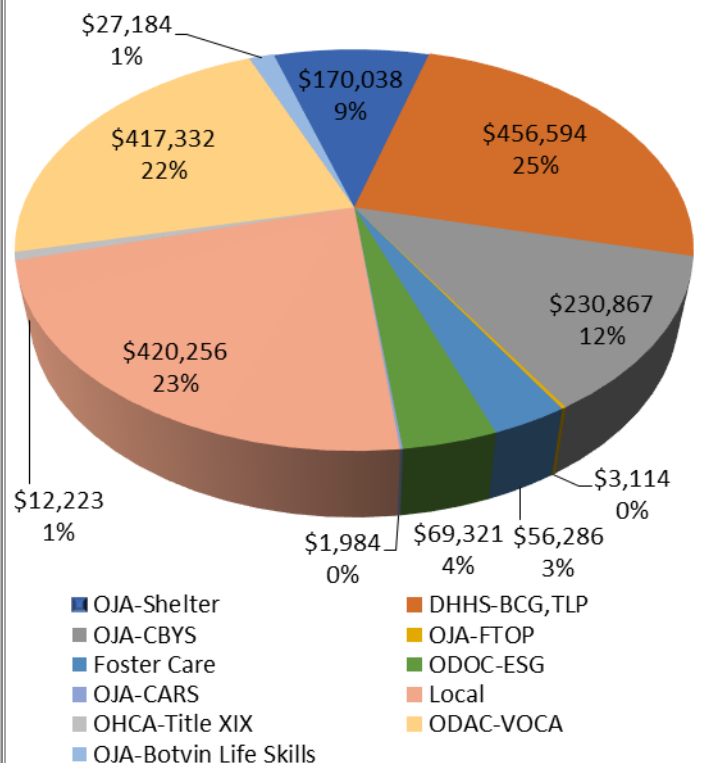
Quality Assurance Plans
Payne County Youth Services prepares annual quality assurance plans to ensure ongoing compliance and innovation toward meeting requirements of certifying and auditing bodies, as well as the needs of our clients and stakeholders. These plans are utilized as dynamic documents. Reviews of the Accessibility Plan, Cultural Diversity Plan, Risk Management Plan, Technology and System Plan, Organizational Plan, and Service Programs Plans are conducted on an annual basis by the management team and Board of Directors (see FY20 plans, attached).

PCYS reviews Policy and Procedure annually, both at the staff and Board of Directors levels.

Stakeholders and Community Partner Relationships
Payne County Youth Services strives to meet the needs of our Stakeholders. Through community partnership with businesses, civic groups, other non-profit agencies, mainstream services, faith-based organizations, Oklahoma State University students, faculty and staff groups, The Saville Center, The Oklahoma Commission on Children and Youth, Sarkeys Foundation, the Oklahoma Department of Human Services, the Oklahoma Office of Juvenile Affairs, the Stillwater Area United Way, The City of Stillwater, Elite Repeat, Stillwater Medical Center, the Faye Allene Rife Brown Foundation, the Oklahoma Association of Youth Services and others, PCYS is able to bring resources, financial support, donations, volunteers and greatly varied expertise from across the state to our efforts to provide relevant, effective, efficient, high quality services to the members of our communities.

PCYS is also an active member of the Oklahoma Association of Youth Services (OAYS) and has worked to leverage the collaborative power of this organization to bring additional funding, training, contracting opportunities, legislative appropriations and other assets to the state and to PCYS. The PCYS executive director served on the OAYS Board of Directors for 10 years, with various staff serving as committee members and chairpersons.

PCYS enjoys a collaborative relationship with Oklahoma State University, with PCYS serving as a training site for interns from various OSU programs, an employer of students and work-study students, and as a referral source for services utilized by OSU Faculty, staff and students.

PCYS benefits from the work of many volunteers who are staff, faculty and students who provide a variety of assistance, donations, or serve on our Advisory Board for Sustainability and Public Awareness. PCYS also participates in various relevant research studies and program validation studies with OSU.

PCYS works with community partners to support our holiday Adopt-A-Family program, matching donors with client families who are most in need. An annual Art, Poetry and Photography contest is provided to encourage appropriate expression by youth. Community education is also provided by staff to many organizations across our catchment area.

Many local organizations, civic groups, faith-based organizations, foundations and individuals support PCYS. This support is critical to the organization's ability to meet its mission and serve the community.

One of our primary roles in our community-based services is providing counseling, prevention and crisis services to the public schools in Stillwater, Cushing, Perkins, Yale and Glencoe. PCYS provides a counselor at each secondary school in these communities one day a week as well as both targeted and universal prevention and skills building groups.

PCYS is providing an Evidence-Based Prevention Program to Stillwater Middle School, Glencoe Schools, Cushing Schools, Morrison Schools, and Perkins Schools.

During FY2019, PCYS launched the Building a Competent Community for Suicide Prevention program. Utilizing evidence-based curriculum, PCYS trained 1,000 individuals during the first 9 months of programming. Training equips adults to recognize signs and symptoms of suicidal thoughts, teaching skills and prevention tools for those trained to feel competent in and resources to intervene with a suicidal person. Trainings have been held with civic groups, faith-based organizations, businesses, schools, first responders, professional organizations, and others. Contact PCYS to schedule a training free of charge.

Attachments

PAYNE COUNTY YOUTH SERVICES, INC.
FY 2020 ORGANIZATIONAL PLAN

Statement of Intent
Payne County Youth Services is committed to providing quality services to youth and families in Payne County. To this end, PCYS develops and maintains comprehensive and integrated quality improvement systems that include systems for assessment of consumers' needs and preferences, ongoing assessment of the quality, cost and use of services, and measurement of the outcome of services. All the information from the needs assessment, the quality assessment, monitoring, and outcomes management is collected and compiled in a cohesive fashion and is used effectively to plan and improve services, and to ensure financial responsibility.

Organizational Planning
a. Ongoing Planning Process
Payne County Youth Services is a dynamic organization that is proactive in meeting the needs of the youth and families that it serves. In order to remain on the cutting edge of service delivery, PCYS sets short-term and long-term goals based on input received from consumers, staff, the Board of Directors, the Advisory Board for Sustainability and Public Awareness, other service providers, and the community at large. Development of these goals and objectives is accomplished in a variety of ways that include:

- Obtaining input from staff and the Board of Directors during regularly scheduled staff and board meetings as to what they see are the pressing needs of the families we serve and how we can best meet these needs.
- The PCYS Advisory Board for Sustainability and Public Awareness (ABSPA) provides input, linkage, advocacy, fundraising and public relations activities.
- Developing agency short-range and long-range plans during staff and board meetings and retreats. A board and staff strategic planning retreat was held most recently during FY18 and produced a strategic plan which is guiding the agency at this time. Work groups continue to monitor and implement the Plan.
- Conducting quarterly consumer satisfaction surveys to determine how we can improve services.
- Conducting annual community needs assessments to gather information from other service providers and the community at large regarding the effectiveness, accessibility, efficiency and client and stakeholder satisfaction of services and how these services might be enhanced.
- Conducting annual employee satisfaction surveys to provide a formal process for staff input.
- Maintaining an Open-Door Policy.

b. Information Management System
To assist in the planning process, PCYS maintains an information management system to track the quantity, effectiveness, efficiency, accessibility and satisfaction of services provided. This data is compiled both manually through various reports and electronically through the Juvenile On-Line Tracking System (JOLTS). Certain grants and contracts require additional data collection and include HMIS and RHYMIS. PCYS is transitioning to electronic records through Chart Caddy.

In addition to client related data, the agency financial status and staffing patterns are continually reviewed to ensure that the organization has the necessary financial and personnel resources to maintain sufficient quantity of high-quality services. Data regarding health and safety factors impacting staff and clients is also maintained as part of the information management system. All Protected Health Information is maintained according to all applicable law, HIPAA and other confidentiality and privacy regulations.

The Information Management and Corporate Compliance System is organized and administered as follows:

1. Data collected measuring the quantity, effectiveness, efficiency, accessibility and client and stakeholder satisfaction of service delivery is accomplished through the use of the various reports, forms and data collection instruments. Tracking is also noted regarding how long clients remain on the waiting list for non-residential services. Information from these instruments is turned into the Administrative Assistant I on a monthly basis, who compiles the data and forwards the information to the Quality Assurance (QA) Team.
2. The QA team reviews the data, makes recommendations for improvement, and forwards their findings to the Executive Director. Follow-up of this data and any needed improvements is evaluated, and any necessary changes are made at the next QA and on an on-going basis through supervision. Outcomes or concerns are reported to the Board of Directors.
3. The Executive Director uses this information in the agency's annual management report outlining the status of service delivery and recommendations for improvements.
4. The agency financial status is compiled by the Finance Director monthly and provided to the Executive Director for review. The Finance Director and Executive Director collaborate on an on-going basis to monitor and maximize the agency's financial position.
5. The Finance Director and Executive Director present the agency's financial position quarterly to the Board of Directors for their review and approval. In addition, the Annual Audit report, conducted by a CPA, is presented to the Board. This information is analyzed to ensure that the agency has at its disposal the necessary financial resources to maintain service delivery. If financial resources are not available, a decision is made by the Board as to what services will be reduced to ensure the agency's solvency. Information is also provided to the Treasurer of the Board of Directors on a monthly basis.
6. The annual operating budget is compiled by the Executive Director and Finance Director and presented to the Budget Committee of the Board of Directors, who then makes recommendations to the full Board. The Board of Directors annually approves the budget and is provided with on-going updates of the agency's financial position.
7. The HR/Accounting Specialist maintains the personnel records to ensure that qualified and trained staff are available to carry out the various agency programs. Demographic data on staff, interns and volunteers is compiled to track the agency's efforts in maintaining a culturally diverse workforce. Credentialing files and granting of clinical privileges of clinical staff are approved by the Clinical Director and/or the Executive Director.
8. The agency Health and Safety Officer monitors health and safety factors that might potentially impact staff and clients. Any work-related injuries or potentially dangerous situations are reviewed with recommendations for improvements made to the Executive Director.
9. The Executive Director, who also serves as the Corporate Compliance Officer, monitors threats, trends and opportunities for the organization on an on-going basis and reports to the Board of Directors.

c. <u>Needs Assessment Process</u>

Input from the community regarding services is a critical part of the agency's organizational plan. This is accomplished by mailing and e-mailing a Community Needs Assessment survey to referral sources, other service providers, clients/guardians, and other stakeholders, annually asking for their input as to how we did in service provision and how our services could be improved. Surveys are collected by the HR/Accounting Specialist who compiles the data and forwards on to the Executive Director to be included as part of the annual management report. Information is reviewed by the Management Team who, along with the Executive Director, undertakes steps to address areas of concern. This information is also reviewed by the Board of Directors, which makes recommendations to staff, if needed, to improve in any noted areas.

- PCYS also participates in a community needs assessment that is standardized for state-wide measures and was developed by OAYS.

d. <u>Outcomes Management System</u>

The Outcomes Management System measures program effectiveness, efficiency, accessibility and consumer satisfaction. In establishing this system, PCYS solicits input from the consumers as well as the community. Standardized measurements of outcomes have been established and the outcome results are analyzed by the Quality Assurance Team, the Executive Director, and the Board of Directors.

This information is utilized by the Executive Director and Board of Directors when making decisions regarding new services and programs or making improvements to existing ones. The results of this decision-making process are included in the annual management report and used when developing the following year's organizational plan.

e. <u>Use of Findings</u>

Payne County Youth Services recognizes the key to planning is the demonstrated application and utilization of the information that is collected throughout the year. This is accomplished in several ways:

- Results of the various surveys and outcome measures are disseminated to staff during staff meetings, to the Board of Directors during board meetings and to the general public in the form of an Annual Report. Outcomes can also be reported through the use of newspaper articles, speaking engagements at local clubs and organizations and through the annual report to the United Way Board of Directors.
- Outcome measures can be used to streamline, expand or reduce services as appropriate, and are used to inform management decisions, program structures and agency strategies.
- A commitment to quality improvement holds the agency accountable to funding sources and makes the agency more attractive to new funding sources.

Agency Goals and Objectives

The goals and objectives of the agency are part of the annual management report and are reviewed and updated annually with an eye toward performance improvement. Goals and objectives are informed by the data collected in information management systems.

Organizational Plan Monitoring

Monitoring of the implementation of the organizational plan occurs on an ongoing basis through the efforts of the Quality Assurance Team, through a review by the Executive Director and Board

of Directors, and through discussion at the monthly staff meetings and case consultation meetings. These efforts are documented in the client files or through meeting minutes.

Annual Management Report
The Executive Director will prepare an annual management report at the end of the agency's fiscal year. The report is a summary of the agency's activities and discusses the extent to which each program is meeting or not meeting the established measures of effectiveness, efficiency, accessibility, and consumer satisfaction and is used to improve the quality of the programs. The annual management report also addresses the following:
a. The program plans, which outline:
    (1) The population served
    (2) The admission criteria
    (3) The services offered
b. A community needs assessment
c. A quality assessment
d. Goals
e. Objectives
f. The data collected in the areas of:
    (1) Effectiveness
    (2) Efficiency
    (3) Accessibility
    (4) Consumer satisfaction
g. Critical incidents
h. Agency financial position / Personnel issues
i. Accessibility Plan, Cultural Diversity Plan, and Risk Management Plan
j. An analysis of the results from data collected
k. The use of the results

Dissemination of the Management Report
The annual management report will be presented to staff during the monthly staff meeting. Achievements will be recognized and areas needing improvement will be discussed. It will be also presented and discussed with the Board of Directors at the scheduled board meeting.

The Management Report is also distributed to Stakeholders, funding sources, posted on the agency's website, available in the lobby, and available to the public, at their request.

Annual Report
Distinctive from the Management Report, the Executive Director will prepare an Annual Report that summarizes highlights of the financial position and programming of PCYS. This shorter, more concise report will be widely distributed to stakeholders, clients served, funding sources, posted on our website and in our facilities.

PAYNE COUNTY YOUTH SERVICES, INC.
FY 2020 PROGRAM PLAN

The following program plan outlines the various programs offered by Payne County Youth Services to include the population served, admission criteria, services offered, number of FTE assigned, and FY 2020 funding level. Delineation is made in each program as to whether the program is CARF accredited.

Office of Juvenile Affairs – Community Based Youth Services
Program Description -
Funding is received from the Office of Juvenile Affairs to provide shelter services, treatment, prevention and diversionary services to youth and families. The contract follows the state fiscal year. The services provided under this contract are as follows:

a) Outreach Community Counseling - Payne County Youth Services receives funding to provide site-based and school-based counseling for youth ages 11-17 and their families residing in Payne County. Site-based services include mental health, Alcohol and other Drug, or co-occurring individual, family and group counseling. Program is CARF accredited.
b) Prevention and Diversionary Services – Formally known as the First Time Offender Program, Skills for Success is a diversionary program for youth who have committed a minor offense or are at risk of offending. Additional programs in this area include Parenting Skills, Relationship Group, Life Skills Education, Grief Group, and other services to meet community needs. Referrals are received from OJA, the municipal court, schools, law enforcement, and parents. These programs are psycho-educational in nature and therefore are not CARF accredited.
c) Emergency Shelter – A 17-bed shelter is available to youth ages 7 – 17 residing in Payne County. Secondary referrals are received from across the state. Youth are referred to the shelter by OJA, DHS, the courts, law enforcement, the schools, parents and through Safe Place. Residents receive counseling, educational services, and recreational services in a home type atmosphere. The average length of stay is 4-6 weeks, however, longer stays are becoming more common. This program is not CARF accredited, but may be much longer, based on individual needs.

   FTE Assigned – 4.5   FY 2020 Funding - $375,440

Office of Juvenile Affairs – School-Based Prevention Program
Program Description - An evidenced-based, curriculum-based life skills program, PCYS is providing the Botvin Life Skills Program to schools in our area. A prevention program, PCYS is also part of a research program to further validate the effectiveness of this program.

   FTE Assigned – 1.5   FY 2020 Funding - $108,315

Office of Juvenile Affairs – Community at Risk Services (CARS)

Program Description – CARS is a fee for service contract to provide services to delinquent youth ages 11– 17 residing in Payne County who are referred by OJA. Youth referred to the program are at risk of being sent to an institution or group home, may be on a Deferred Prosecution Agreement, or are returning from institutional placement and require reintegration services. This program is CARF accredited.

FTE Assigned – 0.50   FY 2020 Funding – $25,493

District Attorney's Council – Victim of Crime Act Grant

Program Description – This is a year-to-year grant that allows the agency to provide individual, family and group counseling and advocacy to victims of physical and sexual abuse ages 11 - 17. This program is CARF accredited.

FTE Assigned – 4.5   FY 2020 Funding - $407,000

Title XIX – Medicaid

Program Description –The agency directly bills behavioral outpatient services (individual, family, and group counseling) for Medicaid eligible youth. Clients seen in behavioral outpatient services directly billed to Medicaid fall under CARF accreditation.

FTE Assigned – 0.5   FY 2020 Funding – Federal $24,000

Stillwater Area United Way

United Way dollars are used to supplement funding in the area of counseling services, emergency shelter services, the Transitional Living Program, and the Safe Place Program. United Way funds are also used as match for other state and federal grants.

FTE Assigned – 1.0   FY 2020 Funding - $41,380

City of Stillwater

The City of Stillwater allocates funds for the agency to provide shelter services and to support general agency operations. Services assist local law enforcement and the Municipal Courts with interventions for youth and families.

FTE Assigned - 0.5   FY 2020 Funding - $15,000

Stillwater Public Schools

PCYS is contracted with Stillwater Public Schools to provide services to secondary school students referred by the SPS system, including individual and family counseling, prevention and diversion programs.

FTE Assigned – 1.0   FY 2020 Funding - $70,000

Local Donations, Foundations, Grants & Fundraising

The agency receives donations from various individuals and groups in the community. These funds are used to supplement general agency operations, particularly at the shelter. They can also be used for matching funds for various state and foundation grants.

FTE Assigned – 1.5   FY 2020 Funding - $71,200

Within My Reach /It's My Life
A contract with the Oklahoma Association of Youth Services (OAYS), PCYS provides these curriculums in a community-based setting. This program explores communications, decision making, relationships and other subjects. Psychoeducational in nature, this program is not CARF accredited.

FTE Assigned - 0.09   FY 2020 Funding – $1,200

Emergency Solutions Grant
This program serves youth 16-24 years old, transitioning into adulthood and provides housing, case management and supportive services, in our Transitional Living Program, and supplements shelter funding.

FTE Assigned – 1.0   FY 2020 Funding - $51,000

Cushing Public Schools
PCYS provides school-based counseling and psycho education groups.

FTE Assigned - 0.16   FY 2020 Funding - $10,000

Basic Center
The Basic Center Grant is funded by the Federal Department of Health and Human Services and provides funds for the shelter, outreach, counseling, crisis intervention, and related services.

FTE Assigned – 2.0   FY 2020 Funding - $200,000

DHHS - TLP
Provides funds to support the Transitional Living Program, includes housing, counseling, supplies, utilities, and other needs for ages 18-22 years of age.

FTE Assigned – 2.0   FY 2020 Funding - $194,726

City of Cushing
The City of Cushing allocates funds for the agency to provide shelter services and to support general agency operations. Services assist local law enforcement and the Municipal Courts with interventions for youth and families.

FTE Assigned – 0.25   FY 2020 Funding - $10,000

Elite Repeat
Provides funding to ensure services are available to meet the needs of youth at the Emergency Youth Shelter and across the programs of PCYS.

FTE Assigned – 1.0   FY 2020 Funding - $36,000

Sarkeys Foundation
Provides funding for the implementation and services of the Building a Competent Community for Suicide Prevention program.

FTE Assigned – 0.5   FY 2020 Funding - $20,000

Faye Allene Rife Brown Foundation
Provides funding to ensure services are available to meet the needs of youth in the Emergency Youth Shelter, Transitional Living Program, and across programs of PCYS.

FTE Assigned – 0.5   FY 2020 Funding - $30,000

Stillwater Medical Center
Provides support for crisis, mental health, substance abuse, and co-occurring counseling services as well as programs across the agency.

FTE Assigned – 0.5   FY 2020 Funding - $20,000

PAYNE COUNTY YOUTH SERVICES, INC.
FY 2020 AGENCY GOALS, OBJECTIVES, AND TASKS

MISSION

"Payne County Youth Services, Inc., is dedicated to providing free quality services for the positive development and recovery of children, youth and families."

PURPOSE / PHILOSOPHY

A. To create, develop and maintain programs to assist youth and their families by providing counseling, case management, and emergency shelter services.

B. To advocate for youth and families by influencing policy makers and systems into making decisions which protect children and   growth in families.

OUTPATIENT TREATMENT / CASE MANAGEMENT PROGRAM GOALS AND

OBJECTIVES

GOAL

The primary goal of the outpatient treatment and case management programs at Payne County Youth Services, Inc. (PCYS) is to develop and maintain a system of community-based prevention, intervention, and diversion services for at risk youth in Payne County. These services shall be designed to augment and facilitate the services of the juvenile court, District Court, Municipal Court, law enforcement, schools, the Oklahoma Department of Human Services, and the Office of Juvenile Affairs. These services shall be crisis oriented as well as offer longer-term services and the referral source may expect a quick response from the Agency. By decreasing the incidence of truancy, school dropouts, runaways, substance abuse and teenage suicide attempts, the number of youth entering the juvenile justice system will be reduced.

OBJECTIVE I: COMMUNITY BASED YOUTH SERVICES

To increase parenting skills and communication in families and provide intervention, crisis and prevention services to address mental health and behavioral needs in order to improve self-concept, decision making abilities and social skills in youth and families, as well as assist youth in the development of social values and problem-solving skills.

TASK 1: Individual Counseling

PCYS projects it will provide 2,000 counseling hours in individual and family counseling sessions, to approximately 200 youth. Each full-time employee (FTE) counselor will have an average caseload of 20 individual counseling clients. Length of services will average 180 days. PCYS expects to function with 3 FTE counselors providing traditional youth services counseling. Referrals to other programs will be provided as appropriate. Additionally, it is anticipated that six (6) intern student counselors will provide services, under supervision, to clients. Services will be provided at the out-patient offices and site-based at schools served.

TASK 2: Family Counseling

PCYS projects it will provide 300 hours of family counseling to 100 families. It is expected that most youth receiving individual counseling will also be seen with his/her family at some point in the therapeutic process. Referrals to other programs will be provided as appropriate.

TASK 3: Case Management Services
Payne County Youth Services provides comprehensive case management services to clients and their families. We anticipate providing 250 hours of case management activities to approximately 75 clients. These activities will include goal-orientated and individualized supports for persons served through assessment, planning, linkage, advocacy, and monitoring activities.

TASK 4: Parenting Skills Training
Payne County Youth Services anticipates that 50 parents will participate in parenting skills group training. Training will be tailored to meet the needs of attendees in regard to meet times. Referrals to other programs will be provided as appropriate.

TASK 5: Skills for Success/First Offender Program
PCYS will provide 700 hours of group psycho educational programming to 50 individuals as part of the Skills for Success Program for youth and their parents referred by the Office of Juvenile Affairs, Courts, the public schools and others. Referrals to other programs will be provided as appropriate.

TASK 6: VOCA Program
Through a grant from the District Attorney's Council as part of the Victims of Crime Act (VOCA), PCYS will provide individual, family and group counseling to 211 young people who have been victims of physical or sexual abuse. PCYS will also make available a group for adult victims of abuse who are parents/guardians of teenagers who are victims. Referrals to other programs will be provided as appropriate.

TASK 7: Information and Referral
PCYS will document information and referral services to 100 individuals, involving 50 staff hours per year.

TASK 8: Community at Risk Services (CARS)
PCYS will make available services outlined in the CARS contract with the Office of Juvenile Affairs. We project serving 10 youth. Approximately 100 hours of individual, family, and CARS group counseling, substance abuse services will be provided as appropriate.

TASK 9: Title IX Services
PCYS will continue to expand its provision of Medicaid services. Our goal is to provide Medicaid reimbursable services to all clients who are eligible.

TASK 10: Substance Abuse Services

PCYS will provide substance abuse assessment, psychoeducation, prevention, treatment, follow-up and aftercare, case management and referral services to clients as appropriate. Clients in need of a higher level of care will be provided with specific referrals and follow-up. Services will comply with Oklahoma Department of Mental Health and Substance Abuse Services Policy and requirements, and will focus on co-occurring, welcoming, accessible, person-centered, individualized, trauma informed and culturally competent service delivery.

TASK 11: Transitional Living Program

PCYS will provide Transitional Living services and follow-up services to approximately 20 youth through this program, utilizing the client-specific programming which may include housing assistance, case management, counseling, job-related and tutoring services and life skills education. Linkage to existing community resources and building permanent connections are additional focus areas of this program.

TASK 12: Botvin Life Skills Education Group

PCYS will provide both Universal Groups and Targeted Groups at schools, utilizing an evidence-based curriculum. PCYS will provide this program in Stillwater, Glencoe, Yale, Morrison, and Cushing Public Schools to students throughout the school year. Targeted groups will be provided to other schools as appropriate. Approximately 700 youth will receive 4,000 hours of services through this program.

OBJECTIVE II: EMERGENCY SHELTER CARE

PCYS will provide temporary emergency shelter care for children and youth ages 7 - 17 years who are in need of protective care, and ensure educational services are provided to each resident. A recreational program component is an integral part of resident programming. Services are available and accessible 24 hours per day 365 days per year.

TASK 1:

To shelter approximately 100 youth per year by providing approximately 2,000 shelter care days.

TASK 2:

To provide trained, caring, and competent childcare staff at the shelter to ensure proper protection and care for residents, utilizing a Competency-Based, Positive Youth Development approach.

TASK 3:

To make available the Shelter Director and Supervisory Staff to also serve as case managers who will see each resident in an effort to assist the resident in his/her shelter adjustment. Their case manager duties will include to transport court ordered residents to court as needed and attend court hearings in which residents are involved. We expect 50 court transports and hearings attended. Approximately 250 hours of case management services will be provided to shelter residents. Residents needing counseling services will receive counseling from PCYS clinicians or will be referred to outside counseling services. This

will include addressing linkage of referrals for educational, medical, counseling and other needs.

TASK 4:
To maintain a robust recreational programming of the shelter to provide appropriate activities for residents in a safe and productive manner, that assists youth to develop competencies and improve self-esteem and self-efficacy.

OTHER PROGRAM GOALS AND OBJECTIVES

Community Education/Prevention Services

The professional staff of PCYS is regularly involved in a variety of prevention/education activities, including making presentations regarding services and providing training to civic groups, professional organizations, schools referral services, and other interested parties.

Involvement in the youth and family educational/prevention activities such as health fairs, career fairs, and other venues provide opportunities to educate youth and families on pertinent issues such as suicide, substance abuse, depression, parenting, LGBT issues and other concerns.

It is anticipated that 1,400 professional hours of service will impact 30,000 individuals.

OBJECTIVE III: SAFE PLACE

PCYS will continue the Safe Place Program in Stillwater using local and United Way Funds. This project has established 59 Safe Places throughout Payne County at various businesses and agencies where young people can go to get help in a crisis. PCYS will maintain or increase the number of sites throughout Payne County, including the Oklahoma State University Transit System and 30 OSU BOB's buses as Safe Place sites. PCYS will continue to advocate for participation of payment of a Site Fee of $100 annually, paid by approved sites on an annual basis, to help underwrite the cost of this important program. PCYS anticipates that 36 youth will access Safe Place.

OBJECTIVE IV: CONTINUE CERTIFICATION BY THE OKLAHOMA DEPARTMENT OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES (ODMHSAS)

PCYS was recertified by the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) in 2020, securing an additional 1-year certification, and will reapply in 2021.

OBJECTIVE V: CONTINUE CERTIFICATION OF COMMISSION ON ACCREDITATION OF REHABILITATIVE FACILITIES (CARF)

PCYS was recertified for three (3) years by the Commission on Accreditation of Rehabilitative Facilities (CARF) in 2018, receiving 99.9% compliance rating.   PCYS will reapply in 2020. PCYS will continue to strive to meet the requirements of this certifying body by providing quality services to Payne County.

OBJECTIVE VI: CONTINUE CERTIFICATION OF OKLAHOMA ASSOCIATION OF YOUTH SERVICES (OAYS)

The Oklahoma Association of Youth Services (OAYS) conducts a Peer Review on an annual basis. A member agency, in good standing, PCYS received 100% compliance rating in our FY2018 Review. The 2019 review date is currently pending with OAYS due to their scheduling needs. PCYS will continue to strive to meet the requirements of OAYS and will seek recertification during FY 2020.

OBJECTIVE VII: MAINTAIN COMPLIANCE WITH OKLAHOMA OFFICE OF JUVENILE AFFAIRS (OJA) MONITORING REQUIREMENTS
The Oklahoma Office of Juvenile Affairs conducts an Annual Program Monitoring of our OJA Services. During this process for FY 2018, PCYS received 100% Compliance Rating from OJA. PCYS will strive to continue to meet the requirements of OJA and will be monitored again during FY 2020. The 2019 review date is currently pending with OJA due to their scheduling needs.

OBJECTIVE VIII: CONTINUE LICENSING COMPLIANCE BY THE OKLAHOMA DEPARTMENT OF HUMAN SERVICES
The Oklahoma Department of Human Services conducts at least three site visits annually to determine compliance with licensing standards. In FY 2019, the PCYS shelter received 99% compliance. PCYS will continue to strive to meet these requirements during FY2020.

OBJECTIVE IX: CONTINUE IMPLEMENTATION OF STRATEGIC PLAN
The most recent strategic planning exercise was conducted in June 2019. The plan has been completed and work groups of staff and board(s) members continue the dynamic process of implementing the Strategic Plan.

Problem / Issue	Goal	Objectives	Time Frame	Responsible Person
Agency is too reliant on federal, state, and municipal funding sources.	Diversify funding base to include more individual, corporate, and foundation donations.	1. Recruit and train board members to be involved in fund raising.	Ongoing	Board / ED
		2. Board fund raising committee will explore possible fundraising events.	Ongoing	Board / ED
		3. Community supporters will be approached to see if they can assist in planning and implementing fundraisers.	Ongoing	Board / ED
		4. Research foundations who might consider funding agency services.	Ongoing	ED / Board
		5. Identify, cultivate and approach potential donors to the agency, expand Advisory Board, volunteer base, and communicate awareness of needs.	Ongoing	ED / Board
		6. Continue annual *An Evening to Remember* Fundraiser.	Ongoing	Board, ED
		7. Expand funding strategies and implement these strategies	Ongoing	Board, ED

Problem / Issue	Goal	Objectives	Time Frame	Responsible Person
Assess replacement values on buildings and evaluate insurance coverage	Ensure insurance coverage is sufficient in the event of a total loss	1. Obtain appraisals from community volunteers 2. Evaluate current insurance coverage against value of property and cost of increased coverage.	Completed by June 30, 2020 Annually	Board / ED Board / ED
Continue to maintain agency facilities	Ensure facility's integrity and ability to meet programmatic needs	1. Maintain facilities 2. Schedule repairs as needed 3. Expand and maintain community volunteers and partners	On-going	Board / ED / Management Team
High risk services provided at shelter, in TLP and counseling	1. Ensure proper training and credentialing of staff and volunteers 2. Maintain appropriate safety procedures and policies 3. Ensure adequate liability insurance that addresses these programs	1. Continue robust training and credentialing program 2. Ensure training and compliance with safety procedures and policies 3. Evaluate and review appropriate levels of liability insurance with Board of Directors approval for liability insurance	On-going On-going At least annually	Board / ED / Management Team Board / ED / Management Team Board / ED

ATTACHMENT "E"
PAYNE COUNTY YOUTH SERVICES, INC.
<u>**RISK MANAGEMENT ASSESSMENT**</u>
DATE: 11/12/2019

1. Does the Agency anticipate significant changes in the types of clients currently served? (For example, is it anticipated that the Agency will need to serve more clients who do not speak English as their primary language? Is it anticipated that the Agency will see more clients with special needs? If "yes", describe the impact of these anticipated needs in terms of fiscal and human resources and the projected impact on service delivery.)

PCYS anticipates a continued increase in incidence of clients presenting with co-occurring mental health and substance abuse clients. There are certain additional risks at the Shelter due to higher-level needs youth being placed with the agency. Significant chances are being made by DHS and OJA regarding their referral process and expectations which will require PCYS to make certain adaptations. The Transitional Living Program presents additional risk exposure.   PCYS has positioned itself for this occurrence by providing training and licensing opportunities for clinicians, shelter staff and case managers to be prepared for this need. Also, our Liability insurance provider has been consulted and additional coverage added to increase coverage for apartment living for TLP participants and Foster Homes.

Assessment of Current Risk Level   ☐0 ☐1 ☒2 ☐3 ☐4 ☐5 (0 low – 5 high)

Potential impact on Agency if not addressed (check all that applies):

 X Degradation of the quality of care/client services
 X Fiscal impact on Agency
 X Negative publicity for Agency
 X Potential legal liability/adverse legal action

2. Does it appear that the Agency's inventory and accountability system for office equipment, computers, and other "high value" items is sufficient to protect against loss, theft, or inappropriate use? If "no", identify a course of correction action.

Yes. Policy and Procedures are adequate and are followed by all staff.

Assessment of Current Risk Level   ☐0 ☒1 ☐2 ☐3 ☐4 ☐5 (0 low – 5 high)

Potential impact on Agency if not addressed (check all that applies):

    Degradation of the quality of care/client services
 X Fiscal impact on Agency
 X Negative publicity for Agency
 X Potential legal liability/adverse legal action

3. Does the Agency's physical plant at all locations provide reasonable security for clients and staff? If "no", identify improvements and/or changes needed to rectify the problem.

Yes. PCYS has continued to provide maintenance and upkeep to "high value" items. The physical plant has also been adequately maintained and certain areas upgraded during FY2019. We continue to work with a volunteer base to provide many of these tasks free of charge. There is potential for significant plumbing problems with the shelter in the next 1-5 years. Office space has

reached capacity with the addition of new programs and staff and resulted in the purchase of additional programming space. Additional security has been added that includes an update of the "panic buttons" at the shelter and required improvements to the security camera system. Additional security lighting has been added at the shelter and outpatient/administration location with additional cameras also added at the shelter. PCYS maintains a storm shelter on site at the offices location as well as an additional shelter at the youth shelter to accommodate those with disabilities. Safety drills of various types are conducted quarterly at both locations. Ongoing funding by a private donor group is covering improvements at the shelter.

Assessment of Current Risk Level ☐0 ☐1 ☒2 ☐3 ☐4 ☐5 (0 low – 5 high)

Potential impact on Agency if not addressed (check all that applies):

  X   Degradation of the quality of care/client services
  X   Fiscal impact on Agency
  X   Negative publicity for Agency
  X   Potential legal liability/adverse legal action

4. Does the Agency's health and safety program appear to be effective in identifying possible risks and hazards? If "no", list all problem areas and a plan of corrective action.

Yes. PCYS was recently inspected by the Payne County Health Department (Shelter), the Fire Marshall (Shelter and office locations), and recertified for 3 years by the Commission Accreditation of Rehabilitative Facilities (CARF) and were found to be in full compliance with all certifying bodies. Training is conducted at hire, at intake and on an on-going basis. As part of their other duties, PCYS maintains a designated safety officer on staff.

Assessment of Current Risk Level ☐0 ☒1 ☐2 ☐3 ☐4 ☐5 (0 low – 5 high)

Potential impact on Agency if not addressed (check all that applies):

  X   Degradation of the quality of care/client services
  X   Fiscal impact on Agency
  X   Negative publicity for Agency
  X   Potential legal liability/adverse legal action

5. Does the Agency have an adequate oversight system in place to minimize the risk of misappropriation of funds? If "no", what plans does the Agency have to address this situation?

Yes. PCYS conducted an Annual Independent Audit by the auditing firm of Saunders & Associates, which resulted in no audit findings or areas of concern. Additionally, PCYS is monitored on an on-going basis by the Office of Juvenile Affairs (OJA), and specific contact sources. PCYS was recertified for 3 years by the Commission on Accreditation of Rehabilitative Facilities (CARF). Each of these entities reviews related policies, procedures and practices. Strict policies regarding Separation of Duties, cash controls, credit card controls, a purchase order process and approval of expenditures are enforced. PCYS also maintains a robust Corporate Compliance Program. The Board of Directors is engaged in intentional training and realignment of Board Committees to ensure appropriate, adequate oversight.

Assessment of Current Risk Level ☐0 ☒1 ☐2 ☐3 ☐4 ☐5 (0 low – 5 high)

Potential impact on Agency if not addressed (check all that applies):

  X   Degradation of the quality of care/client services
  X   Fiscal impact on Agency
  X   Negative publicity for Agency
  X   Potential legal liability/adverse legal action

6. Does the Agency's corporate compliance program appear to be effective in preventing fraud, waste, and abuse? If "no", what changes need to be made?

Yes. PCYS conducted an Annual Independent Audit by the auditing firm of Saunders & Associates, which resulted in no audit findings or areas of concern. Additionally, PCYS is monitored on an on-going basis by the Office of Juvenile Affairs (OJA), and specific contact sources, was recertified for 3 years by the Commission Accreditation of Rehabilitative Facilities (CARF). Strict policies regarding Separation of Duties, cash controls, credit card controls, a purchase order process and approval of expenditures are enforced. Adherence to policies and procedures, contract provisions, spot-checks on billing, Financial controls, Financial Review by the Board of Directors, and training are part of the Corporate Compliance Program.

Assessment of Current Risk Level ☐0 ☒1 ☐2 ☐3 ☐4 ☐5 (0 low – 5 high)

Potential impact on Agency if not addressed (check all that applies):
  X   Degradation of the quality of care/client services
  X   Fiscal impact on Agency
  X   Negative publicity for Agency
  X   Potential legal liability/adverse legal action

7. Does it appear that the Agency will face increased business competition in the next 18 months? If "yes", provide an estimate as to how that competition could affect the Agency's revenue generation and clients base.

Yes. Additional private providers of counseling services continue to operate within the communities we serve. Since PCYS remains the only provider that provides services to recipients without regard for the recipient's ability or willingness to pay for such services, it is anticipated that a significant niche for our services will remain. Additionally, referrals and case loads remain steady, and in certain areas, are increasing. We have experienced a significant decrease in Medicaid billable opportunities, partly due other providers who exist only on Medicaid dollars serving the area. Unfortunately, when those agencies become less profitable, they quickly close their operations, and PCYS must quickly absorb many of those clients. Additionally, funding at the State level is being reduced due to issues with the state budget which has the potential to drive competition. In some instances, opportunities may exist for sub-contracting with these organizations. However, the climate in which State and Federal dollars are being contracted remains changeable and unpredictable. Additional sources of revenue should continue to be aggressively pursued.

Assessment of Current Risk Level ☐0 ☐1 ☐2 ☒3 ☐4 ☐5 (0 low – 5 high)

Potential impact on Agency if not addressed (check all that applies):
  X   Degradation of the quality of care/client services
  X   Fiscal impact on Agency
  X   Negative publicity for Agency
       Potential legal liability/adverse legal action

8. Does it appear that the Agency has sufficient insurance coverage to protect the Agency's assets in the event of an emergency situation?

> Yes. Insurance coverage is assessed on an annual basis and approved by the Board of Directors of PCYS. PCYS meets or exceeds all insurance amounts required by funding sources, certifying boards. Coverage on real property has been increased and includes earthquake coverage. Additional coverage has been added to account for the Transitional Living Program. Loss of Business Use is a covered expense in our insurance plan which would provide for lost revenue due to facilities damage or loss. Officers and Directors Insurance is included in our plan. Coverage is reassessed each year prior to renewal. The Board of Directors approve coverage each year.

Assessment of Current Risk Level   ☐0 ☒1 ☐2 ☐3 ☐4 ☐5 (0 low – 5 high)
Potential impact on Agency if not addressed (check all that applies):
  X   Degradation of the quality of care/client services
  X   Fiscal impact on Agency
  X   Negative publicity for Agency
  X   Potential legal liability/adverse legal action

9. Describe the Agency's most significant challenge in the next 18 months; include an assessment of how that challenge will impact the Agency and more critically, how the Agency will meet that challenge.

> Federal and state funding will remain uncertain for several years based on current economic and political environments. The current significant budget crisis at the State will negatively impact PCYS up to 10% of state revenue this year and next, and potentially beyond. PCYS will meet these challenges through on-going cost-cutting measures and seeking out additional funding and fund-raising opportunities, and diversification of revenue sources. It is anticipated that a significantly restructured contract with OJA may be coming from the state for FY 2019. This change may create competition, may reduce state funding, and may change the shelter programming and capacity.

Assessment of Current Risk Level   ☐0 ☐1 ☐2 ☐3 ☒4 ☐5 (0 low – 5 high)

Potential impact on Agency if not addressed (check all that applies):
  X   Degradation of the quality of care/client services
  X   Fiscal impact on Agency
  X   Negative publicity for Agency
  X   Potential legal liability/adverse legal action

10. Describe any immediate action(s) that needs to be taken to ensure viability of the Agency.

> PCYS continues to pursue additional funding options, including continuation of United Way support, restaurant fundraisers, *An Evening to Remember* fundraiser*,* and on-line donation capability. The ongoing work of the Advisory Board for Sustainability and Public Awareness, and rededication of the Board of Directors and staff has created an increase in publicity and public relations events, and increased use of volunteers. PCYS executive management has also undertaken a number of no-cost initiatives to promote teamwork and maintain continuity of work force including staff appreciation activities, occasional lunches or informal "breaks", notes of thanks and encouragement, and other efforts. PCYS also continues to research additional fundraising options.   PCYS has continued an annual Donor Appreciation Reception to formally thank donors and encourage on-going commitment to the agency which appears to be bringing in new donors and assisting to encourage donor loyalty. PCYS is currently exploring ways to

promote additional Planned Giving, continue excellent donor retention and develop effective strategies for increasing the amount of donations from local donors. PCYS continues to monitor staffing positions to ensure the continuation of high-quality services in the most cost-efficient manner possible, while continuing cost-saving measures. Additional funding has been continued into FY2020 from the Department of Commerce, an expansion of Stillwater Public Schools services, The Faye Allene Rife Brown Foundation, Stillwater Medical Center and on-going support from many local sources. New actions that should be provided include the ED and Board(s) members working to bring awareness and support to PCYS from outlying communities in Payne County as well as additional marketing and public relations activities. Maintaining highly qualified staff and the ability to provide annual cost of living raises and merit pay increases is a goal. Most importantly, additional sources of revenue should be aggressively pursued. The expansion of staff positions to bring in a development officer or grant writer (these functions are currently provided by the executive director) or other realignment of duties, might be considered, are in process to maximize efficiency and effectiveness. Management continues to seek empowerment of staff and members of all three boards to retain and maximize their contributions to the agency.

Assessment of Current Risk Level   ☐0 ☐1 ☐2 ☒3 ☐4 ☐5 (0 low – 5 high)
Potential impact on Agency if not addressed (check all that applies):
  X   Degradation of the quality of care/client services
  X   Fiscal impact on Agency
  X   Negative publicity for Agency
  X   Potential legal liability/adverse legal action

Submitted by: Janet Fultz, NCC, MS, LPC
                       Executive Director
                       11/12/2019

PAYNE COUNTY YOUTH SERVICES, INC.
FY2020 TECHNOLOGY AND SYSTEM PLAN

Vision
Payne County Youth Services, Inc., is committed to the utilization of technology as relevant and beneficial to programmatic and operational functions. The agency realizes the value in keeping current trends in technology and will seek for all employees to interact successfully in a technological environment.

It is essential for users to skillfully use a variety of technological tools to maximize productivity and efficiency of the organization as well as maintain confidentiality as necessary.

Technology Standards
This section identifies the organization's current standards for purposes of planning future technology purchases and for budget planning. A primary goal for setting these standards is to establish and maintain inter-operability, compatibility, and to provide the following:

- Cost effective use of networks, equipment, and software
- Productivity in sharing data
- Reliability of networks and equipment
- Training and support to users of technology

PCYS has committed to an internal and external backup system for all electronically held information and records. This system meets all standards as required for protecting health information in the non-public space. Employees must ensure that all agency devices are properly connected to the NAS. Additionally, if personal devices are used, they must meet all requirements for being on a secured, password protected Wi-Fi connection before being utilized. Use of personal devices for job related tasks must meet all requirements of the electronic use policy. Under no circumstance may any protected health or confidential info be stored on a USB or other external device.

Hardware/Software
With growing importance in technology, planning for hardware and software changes and upgrades is essential in keeping up with emerging technologies and support options. Careful evaluation and planning of upgrades will be implemented in order to carry out the major administrative functions needed to manage operations.

Should staff become aware of potential upgrades that would facilitate increased effectiveness of work duties, they may bring such input to the supervisor.

Hardware
Hardware upgrades will be a continuing necessity to meet the ever-increasing processor and memory requirements of more demanding client and server software implementations. All software will be maintained at a functional revision level.

Software Installation and Maintenance
Each computer workstation in the organization is authorized and licensed for a specific operating system and business application based on the users' needs. Additional software may be licensed,

issued, and installed to meet special business or education and instructional purposes. Software other than the normal organization's applications will be reviewed and approved by the Executive Director.

Software must be reviewed and granted approval for use before being installed on the Agency's computer systems. Adherence to manufacturers' licensing and copyright restrictions will be strictly enforced. Any software that is not properly licensed, approved for use, or which poses degradation to other systems or network performance will be removed with the direction of the Executive Director.

The Agency will maintain and update a standard set of contemporary software for educational, personal productivity, and administrative uses. Client software will be upgraded to keep pace with evolving applications and operating systems for the orderly and efficient conduct of business. The following are the current software standards for Payne County Youth Services' computers:

Desktop Operating Systems Software:

- Windows XP or higher (PC)

Basic User Application Software
List of software applications used by basic users include:

- Internet Explorer 8.0 (web browser)
- Microsoft Office 2003
- Microsoft Security Essentials
- Adobe Acrobat v.9 or higher

Power Protection Standards
Uninterruptible Power Supply protection will be provided for all critical technology resources including:

- Computers and devices running critical processes
- Surge Protection will be provided for computers and critical device within the Agency

Firewalls
The Linksys gateway router, which is positioned between the Agency's Internet Service Provider (ISP) and the Agency's private network, is configured to provide NAT for all internal computers on the network that access the internet.

Ethernet Switches
The Agency has standardized its Ethernet switching technology from Netgear, which provides 10/100 mbps auto-sensing ports.

Internet Access
Payne County Youth Services, Inc., current Internet connection consists of wireless access provided by Chickasaw Telecom Service.

Computer Use and Internet Policy
The use of Payne County Youth Services, Inc., automation systems including computers, fax machines, and all forms of Internet access, is for company business and is to be used for authorized

purposes only. Personal use of the electronic mail system or the Internet is acceptable as long as it is not excessive or inappropriate and does not result in expense to the Agency or loss of productivity.

Existing rule, policies, and procedures governing the sharing of work-related or other confidential information also apply to the sharing of information via the Internet. Please refer to the appropriate program handbook, the Confidentiality guidelines, and the Agency rules regarding release of confidential information, as presented in the Agency policy and procedures manual.

Electronic Communication Policy
Payne County Youth Services, Inc., recognizes that electronic communications systems are a significant part of business communications. Policies, procedures, and standards must govern electronic communications systems and their usage in order to (a) promote efficiency, clarity, and accuracy in our business communications; (b) protect the organization from potential compromise of its business interest; (c) ensure the confidentiality of the Agency's information assets; and (d) ensure the appropriate use and maximum benefit from electronics communications technology.

According to Payne County Youth Services, Inc., policy, it shall govern electronic communication system use by or with the Agency and each user automatically deemed to consent to these policies, which may be changed or modified at any time.

Social Media Policy/Code of Conduct
Payne County Youth Services recognizes the potential positive impact the use of social media may have on communicating vital information to persons served and other stakeholders. PCYS also recognizes the potential misuse of such media and how it may impact risk management and strives to balance the positives and negatives in this quickly changing landscape.

Any use of social media for the agency must receive prior approval by the Executive Director. This includes any posting to the agency Facebook, website and any other type of media that may be added to the agency array. Social media shall be used to disseminate information to stakeholders including hours of operation, contact information, emergency contact information, staff credentials, programs available, entry criteria, access to services including cost, if any, and other pertinent matters. Social media is monitored at a minimum weekly by the Executive Director and/or designated staff to ensure compliance with this policy.

Social media may also be utilized to inform stakeholders of upcoming events, fund raisers, employment and volunteer opportunities and other matters of interest.

Social media shall NOT be used to:

- Provide personal opinions or ideology
- Promote any special interest of an employee or board member that is not otherwise relevant to the agency
- Utilize any form of speech that is derogatory or unprofessional
- Contain any graphics of an inappropriate nature
- Violate the confidentiality or ethical policies of the persons served or the agency
- Violate the Terms and Conditions of any website or hosting entity
- Include other use deemed outside the scope of the use of the agency and that does not meet professional, ethical and legal boundaries

Social media is often utilized by employees in a personal nature as set up on their own private accounts. At no time shall an employee discuss any protected information or in any way breach the confidentiality of a client or discuss a client, their family or support system in use of their personal media.

At times, a client or former client may contact an employee via personal social media. It is required that any such contact be reported to the employee's supervisor for documentation. No employee shall utilize personal social media to communicate with a client or their family. Should not responding to the communication appear to pose a threat or carry with it the potential to cause harm or emotional distress to the client, the employee and their supervisor will develop a plan to communicate appropriately with the client to explain the prohibition on contact. Appropriate boundaries shall be maintained at all times.

Should a contact from a client or former client contain information leading the employee to believe the client is in danger or is being abused or neglected, all agency policies regarding reporting of suspected child abuse and neglect and the duty to warn shall govern the actions of the employee and the agency. Should an employee choose to access their personal social media account from work computers, they should do so during break times. Any computer sites accessed on agency computers may be subject to agency review.

Virus Protection

Payne County Youth Services, Inc., has implemented a virus protection policy that will ensure that in case of a computer virus infection, the computer will have the means in which to quarantine or delete the infection.

This will be done by installing Norton/Symantec Anti-Virus software on all computers and servers on the network and updating the latest definition files on a continual basis.

Security

Payne County Youth Services, Inc., has implemented security strategies to safeguard the Agency's computing infrastructure. With the implementation of a security strategy and ongoing support to keep it effective, it will prevent unauthorized access of sensitive information or deliberate intrusion. The following is implemented as part of the strategy:

- Determine what changes are required to the security mechanisms already in place, or what new tools are needed to address the new threats
- Stay current on new security threats, exposures, and tools
- Stay current on new security hardware and software capabilities
- Constantly re-evaluate the potential impact of these new threats on client's environment
- Monitor and respond to attacks and security breaches

Additional hardware, software, or other revisions will be included in the annual listing submitted during budget preparation covered under section II.

Electronic data that is used to store or transfer information that contains PHI concerning clients or residents and/or employees must adhere to the following guidelines. E-mail will not contain PHI or confidential information. E-mails that do not contain client/consumer and/or employee names, or other identifiers as defined by HIPAA regulations, uses 128-bit encryption and all computers that receive

emails are password protected that only use the computer user and program supervisor has the password.   Data stored on computers after useful periods of time (six months after a client/consumer is discharged or one year after an employee leaves) will be deleted using Spybot anti-spyware program to ensure the inability to recover data, or software provided by manufacturer.

Deviation from this policy is not tolerated.

Confidentiality
Payne County Youth Services, Inc., falls under HIPAA laws; and therefore, we safeguard all personal and medical data both on staff and clients in all formats.

Due to sensitive information throughout the organization, it will be imperative that each user be responsible for information that is of a confidential nature. It will be their responsibility to adhere to the standards for computer safeguards against unauthorized use of their computer to protect data that is confidential.

The Executive Director will maintain a master list of user passwords and a copy will be kept in the Finance Director's locked files.

Assistive Technology
Payne County Youth Services, Inc., goal is not only to provide the technological needs of the Agency's users, but also those of the clients as well. Providing the technologies needed for persons with disabilities empowers them to do more for themselves. The following are implemented as part of the assistive technology standard:

- Evaluation of the technology needs of the individual
- Purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices for individuals with disabilities
- Selecting, designing, applying, or replacing of assistive technology devices
- Assistive technology training or technical assistance with assistive technology for an individual with a disability

Disaster Recovery Preparedness
Disaster recovery planning can improve the business, reduce reoccurring problems, and minimize downtimes. Disaster recovery protects critical corporate assets and provides measures for protecting equipment, computers, and other hardware. Emergency preparedness is an ongoing commitment and will adhere to standards such as:

- Developing and testing business continuity plans
- Risk assessment and business impact analysis
- Maintaining lines of communications with suppliers
- Responsibilities assigned to individuals for business recovery
- Recovery time objectives – Assigned priorities
- Maintaining security
- Off-site data storage, backups, and vital records
- Preventive measures

Annual Assessment of Data Collection

Payne County Youth Services, Inc., annual assessment report will summarize the Agency's technological implementations and will provide a continuous improvement infrastructure through the Agency's assessment activity.

Payne County Youth Services, Inc., has taken a comprehensive methodology of assessment that will involve all programs in the assessment process. The Agency will benefit from the process of assessment and thus strive for an economical approach of collecting this data about hardware, software, and staff training through:

- Developing data collection instruments such as surveys

Staff Training

The Agency will utilize strategies to provide the staff's training needs and a cost-effective approach in meeting these needs. These strategies will ensure that employees, who use these applications, receive comprehensive and ongoing training appropriate to their assignment. This includes the following:

- The administrators and managers working with the Executive Director or designee to define specific needs and cost-effective approaches to training and ensure that the program's budget includes funding for staff training.
- The Executive Director or designee will establish a strategy to ensure that employees, who use office applications such as email, word processing, spreadsheet, presentation, and databases, receive the appropriate training.
- Working with the Executive Director or designee, the responsible manager will establish an appropriate training strategy for specific department software applications like client databases, accounting, and payroll.

Payne County Youth Services Website

The Internet has the potential to broaden the lives and increase the healthy development of youth and their families. For youth, access to the Internet can offer educational resources and research, employment opportunities, and consumer goods. Having an accessible website will improve the user's experience and offer the capacity to reach a broader audience and expand our customer's base. Our goal is to provide an accessibility solution for youth and their families. Our website is updated on an on-going basis to provide accurate, timely and essential information to clients and stockholders. All content is approved by the Executive Director or designee prior to posting. The website is being completely revamped for the 2020 fiscal year improving intervention and funding capabilities.

Standards for Donated Equipment

From time to time, the Agency receives offers of donated equipment. The Executive Director or designee will evaluate each offer.

	Target Group	*Success Indicator*	*Measurement Tool*	*Collection Method*	*When*	*By Whom*	*Benchmark*
Effectiveness Measure 1	All Program Participants	Increase in psychological functioning	Client Assessment Record (CAR)	Review of treatment plan reviews	Each Quarter	Counselors	80% of clients will show a one-point decrease each quarter
Effectiveness Measure 2	All Program Participants	Increase in score on Beck Youth Inventories	Youth Beck Inventories, T-scores	Client completion with Beck Youth Inventories Pre-and Post-Services Provision	Prior to services initiation; at completion of services	Counselors administer to clients	Overall Income in functioning of 1 point on Beck Youth Inventories, T-Scores
Efficiency Measure 1	Direct Service Providers	Direct service hours of clinical staff	Time Sheets Case Loads	Review of HR records	Monthly	Receptionist, Reviewed by Clinical Director and ED	Each full-time counselor will spend 50-60% of time in direct services each month
Efficiency Measure 2	All Program Participants	1. Time from referral to initiate contact 2.Time taken to complete assessment and treatment plan	Completed Assessment and Treatment Plan forms	Review of case files	Each Quarter	Receptionist, Reviewed by Clinical Director and ED	1. Each client will initiate services within 3 weeks of referral and 2.Receive an assessment and treatment plan within 4 visits
Client Satisfaction	All Program Participants	Client Satisfaction Survey	Client Satisfaction Survey results	Review of completed Client Satisfaction Surveys	Each Quarter	Receptionist, Reviewed by Clinical Director and ED	Average a response of "4" (agree) on all surveys
Stakeholder Satisfaction	Referral sources, funding sources	Stakeholder Satisfaction Survey	Stakeholder Satisfaction Survey results	Review of completed Stakeholder Satisfaction Surveys	Each Quarter	Receptionist, Reviewed by Clinical Director and ED	90% of stakeholders will be generally satisfied with services

Accessibility Measure 1	All Program Participants, Stakeholders	1.Number of requests for accommodations and their rate of accommodation 2.Environmental Scan Results and Follow-Up	1.Request Log 2.Outcomes/Accommodations provided or denied 3.Report of Identified Concerns 4.Actions/Resolutions for Identified Concerns/Referrals	1.Log 2.Log 3.Review Data/Report 4.Review Data/Report	1.As needed 2.Within 2 weeks of request 3.Quarterly 4.Quarterly	Staff, Management, Board of Directors, Stakeholders as needed	1.As needed 2.Accommodate 100% by action or referral 3.Quality Assurance meetings and Annual Report 4.Quality Assurance Meetings and Annual Report and actions as needed
Accessibility Measure 2	All Program Participants, Stakeholders	Reduction of barriers to services 1.Financial 2.Cultural 3.Transportation 4.Appropriateness and quality of services	1.Free Services 2.Culturally competent staff 3.School and site-based services 4.Training and credentialing of staff	1.Review of Budget/financial outcomes 2.Review of Credentialing files 3.Review Method of Service Delivery 4.Review Outreach and Referral Strategies	1.Annually/quarterly 2.At hire, annually, and on-going 3.Quarterly and with review of Strategic Plan 4.Quarterly and with review of Strategic Plan	Staff, Management, Board of Directors, Program Participants, Stakeholders	Staff, Management, Board of Directors, Program Participants, Stakeholders

	Target Group	*Success Indicator*	*Measurement Tool*	*Collection Method*	*When*	*By Whom*	*Benchmark*
Effectiveness Measure 1	All Program Participants	Reduction in use of alcohol or mood altering illicit drugs	Client Self Report, Parent Report, SASSI-A2, TADD, DAST, AUDIT	Personal contact with client and/or parent; interview of personal use history	Every 90 days	Counselors	80% of clients will report reduction in substance use
Effectiveness Measure 2	All Program Participants	Increase in score on Beck Youth Inventories	Youth Beck Inventories, T-scores	Client completion with Beck Youth Inventories Pre-and Post-Services Provision	Prior to services initiation; at completion of services	Counselors administer to clients	Overall Income in functioning of 1 point on Beck Youth Inventories, T-Scores
Efficiency Measure 1	Direct Service Providers	Direct service hours of clinical staff	Time Sheets Case Loads	Review of HR records	Monthly	Receptionist, Reviewed by Clinical Director and ED	Each full-time counselor will spend 50-60% of time in direct services each month
Efficiency Measure 2	All Program Participants	1.Time from referral to initiate contact 2.Time taken to complete assessment and treatment plan	Completed Assessment and Treatment Plan forms	Review of case files	East Quarter	Receptionist, Reviewed by Clinical Director and ED	1.Each client will initiate services within 3 weeks of referral and 2.Receive an assessment and treatment plan within 4 visits
Accessibility Measure 1	All Program Participants	1.Number of requests for accommodations and their rate of accommodation 2.Environmental Scan Results and Follow-Up	1.Request Log 2.Outcomes/Accommodations provided or denied 3.Report of Identified Concerns 4.Actions/Resolutions for Identified Concerns/Referrals	1.Log 2.Log 3.Review Data/Report 4.Review Data/Report	1.As needed 2.Within 2 weeks of request 3.Quarterly 4.Quarterly	Staff, Management, Board of Directors, Stakeholders as needed	1.As needed 2.Accommodate 100% by action or referral 3.Quality Assurance meetings and Annual Report 4.Quality Assurance Meetings and Annual Report and actions as needed

Accessibility Measure 2	All Program Participants, Stakeholders	Reduction of barriers to services 1.Financial 2.Cultural 3.Transportation 4.Appropriateness and quality of services	1.Free Services 2.Culturally competent staff 3.School and site-based services 4.Training and credentialing of staff	1.Review of Budget/financial outcomes 2.Review of Credentialing files 3.Review Method of Service Delivery 4.Review Outreach and Referral Strategies	1.Annually/quarterly 2.At hire, annually, and on-going 3.Quarterly and with review of Strategic Plan 4.Quarterly and with review of Strategic Plan	Staff, Management, Board of Directors, Program Participants, Stakeholders	Staff, Management, Board of Directors, Program Participants, Stakeholders
Client Satisfaction	All Program Participants	Client Satisfaction Survey	Client Satisfaction Survey results	Review of completed Client Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	Average a response of "4" (agree) on all surveys
Stakeholder Satisfaction	Referral sources, funding sources	Stakeholder Satisfaction Survey	Stakeholder Satisfaction Survey results	Review of completed Stakeholder Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	90% of stakeholders will be generally satisfied with services

Attachment "I"
Payne County Youth Services, Inc.
FY 2020 Service Delivery Improvement
Out Patient Behavioral Health (Case Management)

	Target Group	*Success Indicator*	*Measurement Tool*	*Collection Method*	*When*	*By Whom*	*Benchmark*
Effectiveness	All Program Participants	Improve ability to function independently	Provider Report	Review of provider reports	Monthly	Receptionist, Reviewed by Clinical Director and ED	50% of clients will show increased progress toward goals each quarter
Efficiency Measure 1	Direct Service Providers	Direct service hours of clinical staff	Monthly Reports Case Loads	Review of Monthly Reports	Monthly	Receptionist, Reviewed by Clinical Director and ED	Each counselor will provide 1 hour of CM service each month
Efficiency Measure 2	All Program Participants	1. Time from referral to initiate contact 2.Time taken to complete assessment and treatment plan	Completed Assessment and Treatment Plan forms	Review of case files	Quarterly	Receptionist, Reviewed by Clinical Director and ED	1. Each client will initiate services within 3 weeks of referral 2. Receive an assessment and treatment plan within 4 visits
Accessibility Measure 1	All Program Participants	1.Number of requests for accommodations and their rate of accommodation 2.Environmental Scan Results and Follow-Up	1.Request Log 2.Outcomes/Accommodations provided or denied 3.Report of Identified Concerns 4.Actions/Resolutions for Identified Concerns/Referrals	1.Log 2.Log 3.Review Data/Report 4.Review Data/Report	1.As needed 2.Within 2 weeks of request 3.Quarterly 4.Quarterly	Staff, Management, Board of Directors, Stakeholders as needed	1.As needed 2.Accommodate 100% by action or referral 3.Quality Assurance meetings and Annual Report 4.Quality Assurance Meetings and Annual Report and actions as needed

Accessibility Measure 2	All Program Participants, Stakeholders	Reduction of barriers to services 1.Financial 2.Cultural 3.Transportation 4.Appropriateness and quality of services	1.Free Services 2.Culturally competent staff 3.School and site-based services 4.Training and credentialing of staff	1.Review of Budget/financial outcomes 2.Review of Credentialing files 3.Review Method of Service Delivery 4.Review Outreach and Referral Strategies	1.Annually/quarterly 2.At hire, annually, and on-going 3.Quarterly and with review of Strategic Plan 4.Quarterly and with review of Strategic Plan	Staff, Management, Board of Directors, Program Participants, Stakeholders	Staff, Management, Board of Directors, Program Participants, Stakeholders
Client Satisfaction	All Program Participants	Client Satisfaction Survey	Client Satisfaction Survey results	Review of completed Client Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	Average a response of "4" (agree) on all surveys
Stakeholder Satisfaction	Referral sources, funding sources	Stakeholder Satisfaction Survey	Stakeholder Satisfaction Survey results	Review of completed Stakeholder Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	90% of stakeholders will be generally satisfied with services

*The OAYS Data Collection Tool is utilized for all non-residential programs.

Attachment "J"
Payne County Youth Services, Inc.
FY 2020 Service Delivery Improvement
Out Patient Psycho Educational Groups

	Target Group	*Success Indicator*	*Measurement Tool*	*Collection Method*	*When*	*By Whom*	*Benchmark*
Effectiveness	All Program Participants	Self-Report of Functioning	Satisfaction Survey: Pre/Post Test	Personal Contact with Client and/or Parent/Guardian	Completion of Service	Counselor	Overall improvement in Self-Report on Indicators
Efficiency	Direct Service Providers	Direct Service Hours of Providers	Jolts Forms Case Loads	Review of Records	Monthly	Receptionist; Reported to Clinical Director and ED	Groups completed as assigned
Accessibility Measure 1	All Program Participants, Stakeholders	1.Number of requests for accommodations and their rate of accommodation 2.Environmental Scan Results and Follow-Up	1.Request Log 2.Outcomes/Accommodations provided or denied 3.Report of Identified Concerns 4.Actions/Resolutions for Identified Concerns/Referrals	1.Log 2.Log 3.Review Data/Report 4.Review Data/Report	1.As needed 2.Within 2 weeks of request 3.Quarterly 4.Quarterly	Staff, Management, Board of Directors, Stakeholders as needed	1.As needed 2.Accommodate 100% by action or referral 3.Quality Assurance meetings and Annual Report 4.Quality Assurance Meetings and Annual Report and actions as needed
Accessibility Measure 2	All Program Participants, Stakeholders	Reduction of barriers to services 1.Financial 2.Cultural 3.Transportation 4.Appropriateness and quality of services	1.Free Services 2.Culturally competent staff 3.School and site-based services 4.Training and credentialing of staff	1.Review of Budget/financial outcomes 2.Review of Credentialing files 3.Review Method of Service Delivery 4.Review Outreach and Referral Strategies	1.Annually/quarterly 2.At hire, annually, and on-going 3.Quarterly and with review of Strategic Plan 4.Quarterly and with review of Strategic Plan	Staff, Management, Board of Directors, Program Participants, Stakeholders	Staff, Management, Board of Directors, Program Participants, Stakeholders

Client Satisfaction	All Program Participants	Client Satisfaction Survey	Client Satisfaction Survey results	Review of completed Client Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	Average a response of "4" (agree) on all surveys
Stakeholder Satisfaction	Referral sources, funding sources	Stakeholder Satisfaction Survey	Stakeholder Satisfaction Survey results	Review of completed Stakeholder Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	90% of stakeholders will be generally satisfied with services

	Target Group	*Success Indicator*	*Measurement Tool*	*Collection Method*	*When*	*By Whom*	*Benchmark*
Effectiveness	All Program Participants	Ability in maintaining at facility	Provider Reports	Review of Provider Reports	Monthly	Shelter Director, ED	100% of clients accepted at the shelter will maintain throughout placement. 2. Comply with all DHS, OJA and DHHS requirements.
Efficiency	Direct Plan Providers	Direct Service Hours	Time Sheets	Review of time sheets, HR records	Quarterly	Shelter Director, ED	Staffing levels will support facility capacity and meet budgeting requirements.
Accessibility Measure 1	All Program Participants	Immediate facility access for appropriate residents.	Resident Intake Documents	Review of resident files	Quarterly	Shelter Director, ED	Each client appropriate to facility will be admitted if space is available.
Accessibility Measure 2	All Program Participants, Stakeholders	1.Number of requests for accommodations and their rate of accommodation 2.Environmental Scan Results and Follow-Up	1.Request Log 2.Outcomes/Accommodations provided or denied 3.Report of Identified Concerns 4.Actions/Resolutions for Identified Concerns/Referrals	1.Log 2.Log 3.Review Data/Report 4.Review Data/Report	1.As needed 2.Within 2 weeks of request 3.Quarterly 4.Quarterly	Staff, Management, Board of Directors, Stakeholders as needed	1.As needed 2.Accommodate 100% by action or referral 3.Quality Assurance meetings and Annual Report 4.Quality Assurance Meetings and Annual Report and actions as needed

Accessibility Measure 3	All Program Participants, Stakeholders	Reduction of barriers to services 1.Financial 2.Cultural 3.Transportation 4.Appropriateness and quality of services	1.Free Services 2.Culturally competent staff 3.School and site-based services 4.Training and credentialing of staff	1.Review of Budget/financial outcomes 2.Review of Credentialing files 3.Review Method of Service Delivery 4.Review Outreach and Referral Strategies	1.Annually/quarterly 2.At hire, annually, and on-going 3.Quarterly and with review of Strategic Plan 4.Quarterly and with review of Strategic Plan	Staff, Management, Board of Directors, Program Participants, Stakeholders	Staff, Management, Board of Directors, Program Participants, Stakeholders
Client Satisfaction	All Program Participants	Client Satisfaction Survey	Client Satisfaction Survey results	Review of completed Client Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	Average a response of "4" (agree) on all surveys
Stakeholder Satisfaction	Referral sources, funding sources	Stakeholder Satisfaction Survey	Stakeholder Satisfaction Survey results	Review of completed Stakeholder Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	90% of stakeholders will be generally satisfied with services

	Target Group	*Success Indicator*	*Measurement Tool*	*Collection Method*	*When*	*By Whom*	*Benchmark*
Effectiveness	All Program Participants	Improve functioning as assessed by the goals in Treatment Plan	Treatment Plan	Review of Treatment Plan, Progress Notes	Quarterly	Service Provider, Reviewed by ED	Movement toward Treatment Plan Goal Assignment
Efficiency	Direct Service Providers	Direct Service Hours of Providers	Jolts Forms	Review of Records	Monthly	Receptionist; Reported to Clinical Director and ED	Groups completed as assigned
Accessibility	All Program Participants	Time taken to complete assessments and treatment plan	Completed Intake and Treatment Plan	Review of case files	Quarterly	Receptionist; reviewed by Clinical Director and ED	Each client will be contacted within 3 weeks of referral call
Client Satisfaction	All Program Participants	Client Satisfaction Survey	Client Satisfaction Survey results	Review of completed Client Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	Average a response of "4" (agree) on all surveys
Stakeholder Satisfaction	Referral sources, funding sources	Stakeholder Satisfaction Survey	Stakeholder Satisfaction Survey results	Review of completed Stakeholder Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	90% of stakeholders will be generally satisfied with services

*DCMHDD = Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood

Attachment "M"
Payne County Youth Services, Inc.
FY 2020 Service Delivery Improvement
<u>**Safe Place**</u>

	Target Group	*Success Indicator*	*Measurement Tool*	*Collection Method*	*When*	*By Whom*	*Benchmark*
Effectiveness	All Program Participants	Access to Safe Place Services	Provider Reports	Review of Provider Reports	Monthly	Safe Place Program Coordinator, ED	100% access to services for those requesting services.
Efficiency	Direct Service Providers	Direct Service Hours of Providers	Jolts Forms	Review of Records	Monthly	Receptionist; Reported to Clinical Director and ED	Immediate Services for Crisis
Accessibility Measure 1	All Program Participants, Stakeholders	1.Number of requests for accommodations and their rate of accommodation 2.Environmental Scan Results and Follow-Up	1.Request Log 2.Outcomes/Accommodations provided or denied 3.Report of Identified Concerns 4.Actions/Resolutions for Identified Concerns/Referrals	1.Log 2.Log 3.Review Data/Report 4.Review Data/Report	1.As needed 2.Within 2 weeks of request 3.Quarterly 4.Quarterly	Staff, Management, Board of Directors, Stakeholders as needed	1.As needed 2.Accommodate 100% by action or referral 3.Quality Assurance meetings and Annual Report 4.Quality Assurance Meetings and Annual Report and actions as needed
Accessibility Measure 2	All Program Participants, Stakeholders	Reduction of barriers to services 1.Financial 2.Cultural 3.Transportation 4.Appropriateness and quality of services	1.Free Services 2.Culturally competent staff 3.School and site-based services 4.Training and credentialing of staff	1.Review of Budget/financial outcomes 2.Review of Credentialing files 3.Review Method of Service Delivery 4.Review Outreach and Referral Strategies	1.Annually/quarterly 2.At hire, annually, and on-going 3.Quarterly and with review of Strategic Plan 4.Quarterly and with review of Strategic Plan	Staff, Management, Board of Directors, Program Participants, Stakeholders	Staff, Management, Board of Directors, Program Participants, Stakeholders

Client Satisfaction	All Program Participants	Client Satisfaction Survey	Client Satisfaction Survey results	Review of completed Client Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	Average a response of "4" (agree) on all surveys
Stakeholder Satisfaction	Referral sources, funding sources	Stakeholder Satisfaction Survey	Stakeholder Satisfaction Survey results	Review of completed Stakeholder Satisfaction Surveys	Quarterly	Receptionist, Reviewed by Clinical Director and ED	90% of stakeholders will be generally satisfied with services

Payne County Youth Services, Inc.
FY 2020 Service Delivery Improvement
Building a Competent Community for Suicide Prevention

	Target Group	*Success Indicator*	*Measurement Tool*	*Collection Method*	*When*	*By Whom*	*Benchmark*
Effectiveness	Persons receiving training	1. Number of persons trained 2. Satisfaction Survey	Completion of training requirements/certifications issued	Sign in sheets/ certifications	Quarterly	Staff, E.D.	20 persons each quarter
Efficiency	Persons receiving training	1. Timeliness of Training	Completion of Scheduled Training Log	Training Log	Quarterly	Staff, E.D.	Within 180 days
Accessibility Measure	All Program Participants	1. Access to Training Staff	Client Satisfaction Survey	Completed surveys	Quarterly	Staff, E.D.	24/7/365
Stakeholder Satisfaction	Persons receiving training	Stakeholder satisfaction survey	Satisfaction survey results	Completed surveys	At least annually	Staff, E.D.	At least 80% of surveys will average 4 or above