

2020 Annual Report

Clinton County Chapter NYSARC, Inc.
dba
Advocacy and Resource Center



***Supporting people to live their
lives to the fullest.***

March, 2021

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A MESSAGE FROM THE BOARD PRESIDENT

Merrilee Hamlin, Board President

Dear Friends,

We have all been living through a historical and trying time. We have all become very aware of just how precious our family and friends truly are. Throughout this pandemic, the Advocacy and Resource Center administration and staff have been faced with many challenges. Hard decisions had to be made quickly. We have been charged, and trusted, to keep the lives of people with developmental disabilities, whom we serve, safe and secure. We take this responsibility very seriously. "We are all in this together" became our mantra. We had to rely on our state representatives, local agencies, leadership, staff, and our families for guidance, support, and information. Our immediate needs for PPE, funding for child care for staff, and keeping all of our people safe, and a thousand other details had to be considered. Time was a critical factor. A COVID Response Team was formed and plans were finalized to address every precaution and mandate. Sadly, our Day Habilitation program for people who live with their families (PATH) had to be closed to prevent spread. The people who live in our IRAs (residences) were allowed to continue Day Habilitation within their homes.

At the Advocacy and Resource Center, we are very grateful for the blessings that have emerged from COVID-19 hardships. Amazingly, to date, we have had no COVID-19 cases among the 126 people who live in our 24 IRAs (residences). We are so thankful to everyone who all made many self-sacrifices to make this happen. Through collaborative efforts with CVPH, the majority of the residents have received both vaccinations.

On August 12, 2020, we were able to reopen PATH to our folks that live with their families, with all safety precautions in place. Sheltering in place made us aware of the importance of having one's own space. Our carpenters went to work, renovating the majority of our IRAs with bedrooms for every individual living in that house. The folks were overjoyed. An outdoor track was completed to give everyone space for recreational opportunities.

At this time, on behalf of the Board of Directors, I wish to express our sincere gratitude to our state and local representatives, local agencies, and business people for their help in getting information and supplies. Thank you to CVPH and the local health department for their efforts in getting our folks and staff vaccinated. It is so very much appreciated. Thank you to our sister ARC agencies for their collaboration in obtaining PPE that was so needed to get us safely through the pandemic. We also thank the ARC Foundation for their gracious offering of child care grants for our employees.

We owe a debt of gratitude to our DSPs and other agency staff who worked so selflessly to keep everyone safe. Thank for your constant and consistent efforts to

share information and implement safety measures. We want to thank each and every one of you who have been a part of keeping our folks safe.

In closing, I must remind you, that COVID-19 is not the only threat to the quality of life of the people with developmental disabilities. State funding cuts are threatening to take away services and programs at every chapter in this state. We need your advocacy and support more than ever.

Sincerely,

A handwritten signature in cursive script that reads "Merrilee Hamlin". The ink is dark and the handwriting is fluid and legible.

Merrilee Hamlin

2020 ANNUAL REPORT TO THE BOARD OF DIRECTORS

Robin A. Pierce, Executive Director

2020 was a year like none other. It started with our agency making plans to integrate programs, and to continue the momentum of diversifying our program structure. Our plan was to do this by growing our programs that had the demand and funding and creating new opportunities that would be non-Medicaid funded. I was nine months into my role as the new Executive Director when the world was hit with the Coronavirus pandemic. By March 16, 2020, significant changes had come to be. We had to temporarily closed Day Habilitation programs running at PATH and CVI. We had stay-at-home orders from our Governor. We were trying to figure out how to operate each department without the whole department getting exposed. We didn't know much about this virus, but knew it was extremely contagious and New York was the epicenter. We were doing our best to operate in unprecedented times.

Who would have thought we would take such a drastic turn in our society and economy in just a few short weeks? What became very clear was we had to prioritize the safety of the people over all other decisions. Over the course of the next nine months, we created a response team that worked on safety protocols for the individuals we supported in our homes and who attended our Day Habilitation Program at PATH. We also found that our staff were excellent in keeping the people we support from getting this dreaded disease and I can say we are still COVID free as of March 2021. The program integration of Residential Services and Day Habilitation Services into Habilitation Services went very well. What had been planned to be rolled out was put in place immediately due to the closures of the day programs. All of our planning had paid off. A good side effect of these changes was we found the people we supported in our IRA's excelled from having the same staff serving them in both residential and day habilitation. We also supported families in the community by checking in to see if they had any needs, running errands for them and picking up groceries. Helping them with anything we could during a time with so many restrictions in place.

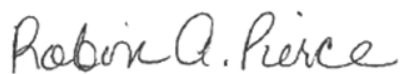
One thing that became obvious right away was Personal Protective Equipment (PPE) was not going to be easy to get. We had to work together with our sister Arc New York chapters to obtain the necessary PPE needed to meet our burn rates. On our own, the vendors did not have our organization type listed as a priority. We were not even included in the same categories as nursing homes or assisted living. This was unthinkable. But, working together as The Arc New York, we had the buying power to get the needed supplies to keep our staff and individuals we support safe. That is just what we did, and it paid off. We are now able to meet our burn rates and keep our staff in PPE. We continue to inform and advocate our government that people with Intellectual and Developmental Disabilities should be priorities in their decision making and that our staff should be publicly recognized as essential workers.

Our staff are essential and always have been. There should have been an immediate recognition by our government. Through much of our advocacy, we were successful in getting flexibility in our funding, that would allow for our day programs to get the much-needed revenue that we may not have had due to the pandemic limiting or closing those programs. We were also successful in being included in the first group of people in New York to get the COVID vaccine when they became available. We applied for and obtained much needed grant relief, thanks to our Business Office. More work needs to be done, but a lot has been achieved in nine months.

We have learned a lot during 2020. We learned we can be flexible in how we achieve our work. We have learned that technology really can be our friend. We also found our language had changed with some new terms that has become the norm:

- This is a fluid situation
- Stand six feet apart
- Be sure to social distance yourself from others
- Let's meet on Zoom
- We are still COVID free
- You are required to wear a mask in this establishment
- I have COVID fatigue

I am so incredibly proud of our team here at the Advocacy and Resource Center. We stepped up when the rainy day hit, and we made sure our mission continued to be achieved. We kept people safe, we kept people engaged, we were two steps ahead of our government when looking at what we needed to do in this pandemic. We also kept our organization going. Much of my report is about the pandemic as it should be, but we must not forget that we also did all the other work necessary to run this organization. I have our supportive Board of Directors and our great team of staff to thank for getting us through this year as successful as we have. Looking to 2021, we are going to keep the lessons we learned in 2020. Good things will be the fruit of that labor and the benefactors will be the people we support.



Robin A. Pierce
Executive Director

FOCUS OF THE AGENCY

Our Vision Statement

The Advocacy and Resource Center will be recognized within the community as an outstanding service Agency. Development of all individualized services will be based upon identified personal outcome measures and quality leadership standards.

The future we envision is one where all individuals supported are active within their community and accepted in all aspects of life. Each person's quality of life will be enriched through personally meaningful activities, formation of sincere relationships and the pursuit and realization of dreams and goals. Individuals will be recognized for their abilities and contributions as a friend, companion, patron and member of the community.

Our Mission Statement

Supporting people to live their lives to the fullest.

OUR GUIDING PRINCIPLES

The guiding principles have been adopted from the Council on Quality and Leadership (CQL) Basic Assurances and should be viewed as fundamentally necessary to meet the personal outcome measures of all individuals support by the Agency.

I. RIGHTS PROTECTION AND PROMOTION

- ◆ Implement policies and procedures that promote individuals' rights.
- ◆ Educate and support individuals to exercise their rights and responsibilities.
- ◆ Uphold due process requirements.
- ◆ Provide decision-making supports to individuals as needed.

II. DIGNITY AND RESPECT

- ◆ Treat individuals as individuals.
- ◆ Respect individuals' concerns and respond accordingly.
- ◆ Ensure individuals' privacy.
- ◆ Provide supports and services that enhance dignity and respect.
- ◆ Provide individuals with meaningful work and activity choices.

III. NATURAL SUPPORT NETWORKS

- ◆ Help individuals identify to what degree they desire natural supports.
- ◆ Foster new relationships for the development of natural supports that promote acceptance and involvement.
- ◆ Encourage communication among individuals and their circle of support.
- ◆ Implement policies and practices that facilitate continuity of natural support systems.

IV. PROTECTION FROM ABUSE, NEGLECT, MISTREATMENT AND EXPLOITATION

- ◆ Implement policies and procedures that define, prohibit and prevent abuse, neglect, mistreatment and exploitation.
- ◆ Ensure individuals are free from abuse, neglect, mistreatment and exploitation.
- ◆ Implement systems for reviewing and analyzing trends, potential risks and events including allegations of abuse, neglect, mistreatment and exploitation, and injuries of unknown origin and deaths.
- ◆ Train support professionals to prevent, detect and report allegations of abuse, neglect, mistreatment and exploitation.
- ◆ Ensure objective, prompt and thorough investigations of each allegation of abuse, neglect, injury, mistreatment and exploitation.
- ◆ Ensure thorough, appropriate and prompt responses to substantiated cases of abuse, neglect, mistreatment and exploitation.

V. BEST POSSIBLE HEALTH

- ♦ Support individuals to manage their own health care.
- ♦ Assist individuals to access quality health care.
- ♦ Evaluate health care objectives and promote continuity of services and supports.
- ♦ Address health needs in a timely manner.
- ♦ Ensure individuals receive medication and treatments safely and effectively.
- ♦ Train staff to immediately recognize and respond to medical emergencies.

VI. SAFE ENVIRONMENTS

- ♦ Provide individualized safety supports.
- ♦ Ensure physical environments that promote individuals' health, safety and independence.
- ♦ Develop and maintain individualized emergency plans.
- ♦ Complete routine inspections to ensure environments are sanitary and hazard free.

VII. STAFF RESOURCES AND SUPPORTS

- ♦ Implement and maintain a system for staff recruitment and retention to promote continuity and consistency.
- ♦ Maintain an ongoing staff development program.
- ♦ Ensure the needs of individuals shape the hiring, training and assignment of staff.
- ♦ Treat our employees with dignity, respect and fairness.

VIII. POSITIVE SERVICES AND SUPPORTS

- ♦ Develop plans that are person-centered and self-directed.
- ♦ Provide continuous and consistent services.
- ♦ Provide positive behavioral supports.
- ♦ Ensure individuals are free from unnecessary, intrusive interventions.

IX. CONTINUITY AND PERSONAL SECURITY

- ♦ Engage in sound business and fiscal practices to be able to provide viable and reliable services to individuals.
- ♦ Financial practices are audited by internal and external sources.
- ♦ Ensure sufficient resources are available to meet life's basic needs and to achieve their personal goals.
- ♦ Inform individuals of what personal information is maintained, how it can be accessed and by whom.
- ♦ Maintain an organizational structure that promotes individuals feeling secure.

QUALITY MOVEMENT: MAKING STRIDES TOWARD PERSON CENTERED EXCELLENCE

Michelle Tallman, Director Quality Management

The Advocacy and Resource Center is committed to providing person centered quality services to the people we support and is built on the foundation of principles and goals established from the Council of Quality Leadership (CQL). In 2020, enhancing our person centered supports and services proved to be the most challenging year yet, for as we all know 2020 was the year the world shut down. But with challenges come resilience, creativity and innovation.

Faced with few opportunities for community engagement, family connections and a forecast of isolation and mandated restrictions, the goals that were the focus in January quickly changed course. Swiftly identified was the immediate need for easy and routinely accessible technology. All houses became equipped with Chromebooks filled with application downloads such as Zoom, Facebook, Google Suites and Microsoft Teams. Our lives and the lives of people supported became a series of virtual connections.

The innovations continued with virtual connections keeping everyone connected to family, loved ones and friends. A movie theatre was created initially in the PATH Day Habilitation building and eventually found its permanent home in the former workshop at CVI. The dedicated space has a movie theatre size screen, theatre grade speakers and reclining seats. People can go to the movie theatre and choose movies from either Netflix or Disney+. Many people were able to enjoy the movie setting while practicing appropriate safety protocols.

With the technology in place, we were able to bring the annual wreath making workshop into the homes of those interested through Zoom. A holiday favorite for many, Haley Farms created the “kits” that were delivered to the homes and with the class held virtually, people were able to follow along and the wreaths turned out beautifully. As the months turning colder, the Quality Enhancement Specialists enlisted the assistance of the Maintenance Department who created a snowshoe / cross county / adaptive sled trail behind the PATH building. People were able to reserve the winter equipment through PATH and enjoy the trails that maintenance created.

Despite the year bringing unanticipated change, the innovations and creativity did strengthen some outcomes and supports. Personal Outcome Measure (POM) Interviews were conducted throughout the year, via Zoom. The Basic Assurance Annual Report showed a 10% increase in outcomes associated with the people having friends and an almost 10% increase in supports associated with people having continuity and security. A new area of growth that was identified in the fourth quarter of 2019, People Managing their own Healthcare, showed great strides. Baseline data showed that only 46% of the people supported participated in effectively communicating their priorities to their own health care provider, 29%

scheduled the appointment for a time most convenient for them and 12% chose their own doctor. By the end of 2020, 66% of people are now effectively communicating their priorities with their health care providers, people scheduling their own appointments increased to 33%, and 25% have chosen their own health care provider. We hope 2021 returns us to a sense of normalcy and we will again support the people to achieve their goals and dreams and celebrate along with them every step of the way.

CLINICAL SERVICES

Lori Lobdell, Associate Executive Director

REVIEW OF ACCOMPLISHMENTS – 2020

Article 16 Clinic Services

2020 will be a year most of us will never forget. As COVID-19 reared its ugly head early in the year, it forced all of us to do things differently. Clinical services were suspended for a time with the closure of our day programs. During the closure, the focus became trying to come up with options for services. Thankfully, telehealth services, using video and other methods of technology, were expanded to allow these services to be provided remotely. The Physical Therapist, Physical Therapist Assistant, Occupational Therapist and Speech Language Pathologist provided a combined total of 651 telehealth services to individuals in the residences, through the end of the year. A combination in telehealth and limited in-person services resumed in August. Most of its success is attributed to the flexibility of the clinicians and willingness to continue providing services during an unprecedented time and the excellent support received by the DSPs during these Zoom meetings. It was a great team effort!

One major goal for 2020 was to increase the services being provided in the Article 16 clinic locations. To do that, we needed to identify alternate larger spaces within PATH and CVI and have them certified by the State. The process was completed in late October and the new spaces were finally available for the clinicians to use beginning in November. Enrollment in the clinic increased by 33%, from 13 total in 2019 to 39 at the end of 2020. Direct billable clinical services (in-person and Telehealth) increased from 376 in 2019 to 599 in 2020 and additional contracted hours for providing documentation and attending meetings increased from 226 hours in 2019 to 429 in 2020.

Agency Counseling Services and Self Advocacy

Our Agency Counselor also had to adjust how she provided supports to individuals through the pandemic. Zoom meetings were offered for counseling services for individuals and once again supported by the DSPs to ensure people participated in their sessions.

For the first several months our self-advocacy group, “Capabilities” had formed 2 groups. The core group focused on learning about peer mentoring and what it is, watched how-to videos, among other things. The second group was made up of approximately 10 others who are interested in becoming self-advocates. Their focus was more on social skills, working on CIRCLES and boundaries, and what self-advocacy is and how to do it.

The group participated in these specific activities:

- Reviewed and updated the self-advocacy mission statement.
- Watched videos on peer mentoring programs.
- Purchased a curriculum on cyber safety and social media safety - worked on this with the first group in its entirety.
- Attended a presentation by Quality Enhancement Specialists about the grievance process and changes that were being recommended.
- Lots of pandemic discussions/questions/concerns/brainstorming of how to keep happy and healthy.

This year was much less active than previous years. We had things we wanted and planned to do but were unable such as going into the homes to educate.

Behavioral Support Services

The Behavior Specialists developed and monitored 62 behavior support plans and 19 medication monitoring plans throughout the year. The plans required routine review at least every 6 months, direct staff training on the implementation of the plan when possible, and observation/feedback to ensure the plans were being consistently followed. They were also required to provide oversight to 28 MIPS (Medical Immobilization Protective Stabilization) and ensuring all regulatory requirements were followed. The oversight of MIPS did transfer to the Nursing Department in December 2020. The use of physical interventions maintained a lower frequency this year. Use of physical interventions in 2018 occurred on 375 occasions. This decreased to 198 in 2019 and displayed minimal increase to 202 for 2020. The number of plans that include the planned use of physical interventions decreased by 25%, from 16 to 12 from 2019 to 2020. There were significant increases in the use of monitoring equipment and a modest increase in the use of rights restrictions. The number of people receiving psychotropic medications, which are recommended and monitored by the provider increased from 49 in 2019 to 55 in 2020.

HUMAN RESOURCE DEVELOPMENT

The Clinical Department employs.

- 1 full time Behavior Intervention Specialist Supervisor
- 1 full time Behavior Intervention Specialist
- 1 full time Behavior Clinician
- 1 relief Behavior Intervention Specialist
- 1 Physical Therapist
- 1 Physical Therapy Assistant
- 1 Speech Language Pathologist
- 1 Occupational Therapist
- 1 Agency Counselor

- 1 Clinical Support Assistant
- 1 Clinical Assistant
- 2 contracted Clinical Psychologists

GOALS FOR 2021

Clinical Goals

- Explore and implement alternative therapy options that will allow for increased services provided in the clinics.
- Assess the need and capability to provide clinic supports to people outside of the residential program, to include evaluating the need to add additional clinicians.
- Add all therapeutic dining plans, clinical and behavioral plans/documentation to Precision Care.
- Work with nursing department, OT and SLP to develop precision care-based diet and allergy summary.
- Start one small therapy group to target improving or maintaining functional communication skills.
- Evaluate the need to replace tubs and showers in the homes to better meet the needs of the individuals and improve overall safety and functionality.
- Increase objectivity of assessments by developing/utilizing screen form.
- Move Safe Patient Handling training (refreshers) to Relias and re-format in-person refresher training.

Self-Advocacy Goals

- Focusing on re-invigorating the “Capabilities” self-advocate group and seek out additional people who would be interested in participating from the community.
- Develop and implement peer mentoring programs, such as assisting with hosting a YouTube video, teaching about internet safety, etc. supported by the self-advocacy group “Capabilities”.
- Establish an outlet (phone, email etc.) that peer supports/mentors can be accessed by others in need for advice/support.
- Invite community member/ agency staff to speak at self-advocacy meetings on topics that will enhance the self-advocacy groups ability to further their knowledge to aid with peer mentoring.

Behavioral Support Services Goals

- Evaluate data regarding maladaptive behavior and progress toward fading criteria on a monthly basis.

- Begin offering dialectical behavioral therapy group for people who would like to improve their coping skills in a group setting.
- Complete the action steps that were identified in our CQL accreditation for the peer-mentoring committee and wellness committee.

CORPORATE COMPLIANCE

Valerie Bragg, Corporate Compliance Officer

REVIEW OF ACCOMPLISHMENTS – 2020

Several changes to federal laws went into effect in 2020 requiring new requirements in Compliance Programs. Analysis of the new mandates against the agency's current compliance program showed minimal changes were needed to the agency's compliance plan. Policy revisions were made to maintain compliance in regards to changes with federal regulations. These policy revisions included Overview of Corporate Compliance (#140.1) as well as Conflict of Interest (#140.5). Also, in conjunction with the CFO, Compliance ensured that the Certification Statement for Provider Billing Medicaid completion also attested that the agency has an effective and functional compliance program as opposed to the Social Services Law and Deficit Reduction Act attestations that normally occurred in December.

The Compliance Officer worked with all agency providers to provide education on changes to various federal and state regulatory mandates to include numerous State of Emergency changes that effected ADM regulations and billing standards based on the COVID-19 pandemic. The agency moved towards full Electronic Health Record (EHR) documentation for all services. Using electronic documentation allows for further mitigation of risk as the EHR auto populates many of the required fields for Medicaid Billing, thus reducing the human error factor. In addition, the EHR eliminates the possibility of billing for more than one service at the same time, auto calculates the time in service when the service bills in 15-minute increments as well as verifies the staff providing the service through use of an individual specific electronic signature. In addition, service providers were made aware of the day to day changes of regulations, billing standards and guidance as expressed through the Appendix K/ State of Emergency guidelines during pandemic considerations.

The addition of Electronic Visit Verification (EVV), in relation to personal care service providers (Community Habilitation and Respite) allows for more comprehensive and accurate documentation, which benefits both providers and service recipients. Additional benefits of EVV is the reduction of fraud and abuse, which indirectly assists with billing and compliance. eVero software was added to the Fiscal Intermediary department in 2020 to assist with EHR documentation, timely turnaround of processing information and accuracy of service provision.

Work was completed with the Staff Educator to ensure Relias computer-based training met the requirements for compliance training for new and seasoned staff. Annual compliance training was conducted with Board of Directors and new committee members met with Compliance Officer prior to their first committee meeting so that review of various policies (Code of Conduct (#140.20), Conflict of Interest (#140.5) and Confidentiality of Protected Health Information (#530.1) could occur as well as to obtain information for the Exclusion Screening data base.

A college intern assisted in a project that would assist service providers with easier access to current regulatory requirements. Regulatory binders for all Waiver and Non-Waiver Services were created for all providers based on Administrative Memorandums (ADMs) for the service, care management and staff action plan as well as NYCRR regulations, Audit Protocols (OMIG and OPWDD), current Audit Tools as well as any temporary regulatory guidance.

Routine and as needed audits were conducted to ensure compliance with regulatory and billing standards through the use of updated audit tools based on regulatory changes (temporary or permanent). Compliance concerns were investigated as they were communicated and concerns, findings and corrective actions were documented within the Compliance Log. Audit and investigative findings and plans of corrective action were shared with the Corporate Compliance Committee on a quarterly basis.

GOALS FOR 2021

- Work with Data Analysis regarding format of compliance log and analysis of data to identify trends.
- Work towards completion of any audits delayed by State of Emergency to ensure audit schedule is up to date by year's end.
- Re-vamp training to be more "department" specific by meeting with Service Directors.
- Obtain Certification in Healthcare Compliance (CHC).

HUMAN RESOURCE DEVELOPMENT

The department consists of one Corporate Compliance Officer.

EMPLOYMENT SERVICES

Michelle L. McGrath, Director

REVIEW OF ACCOMPLISHMENTS – 2020

The Employment Services Department, known as Workforce Network, consists of Supported Employment, Pathway to Employment, Community Prevocational Services, Individualized Support Services, Family Reimbursement Program and Family Education and Training.

2020 was a very challenging year for Workforce Network (WFN) due to the global pandemic. However, WFN was able to continue to provide a quality service to the people supported through non-traditional means. WFN worked closely with ACCES-VR (Adult Career and Continuing Education Services – Vocational Rehabilitation) and OPWDD (Office for People with Developmental Disabilities) to assist individuals with their employment goals. Both partner agencies made allowances for remote services to be provided to individuals supported. Services continued to be provided to adults and students both in person and remotely. Many of the individuals in supported employment continued to work throughout the COVID-19 pandemic as most were considered essential workers. The Employment Specialists focused heavily on safety practices and following all CDC guidelines during this unique time.

WFN worked with many businesses in the area to provide employment opportunities for adults and students. We added several new business partners in 2020 which included: Spencer's, Mainely Lobster, Northern Cakes, Norma J's, Town Fair Tire, YMCA, Citizen Advocates, Kinney Drugs, Clinton County Nursing Home, Best Western, Chazy Orchards and Clinton County Historical Society. Staff continued to attend the Chamber of Commerce events when available. The Career Developer and Director became active members of the Noon Rotary Club to increase community awareness for the agency and Employment Services Department. This assisted in finding new opportunities for volunteering and employment for the programs.

WFN created a Facebook page in order to share information with the community at large and the individuals supported on various items of interest and to educate on services provided.

WFN continued to offer the Pathway to Employment service in 2020. Due to the nature of the service being provided in a community setting, it was put on hold for a majority of the year.

In 2020, WFN started to oversee the Community Prevocational Services (CPV) Program. Due to the pandemic, services were put on hold until it was safe to provide them. The number of volunteer sites were limited to sites that remained closed to the public. The individuals were able to volunteer at OLVA, Cumberland Head, JCEO, St. Augustine and the Methodist Church.

Family Education and Training (FET) is still an option through our agency, but it is an antiquated service at this point. Due to self-direction, individuals no longer need the service in order to waive family income to receive Medicaid benefits.

The Individualized Support Services (ISS) Contract continued in 2020 with 11 individuals receiving ongoing contracts. Financial supports were used for rental and utility subsidies.

In 2020, the Family Reimbursement Program provided funding to families within the OPWDD catchment area. Families who care for a developmentally disabled family member within their own home are eligible for the financial assistance. We provided funds for various types of therapy, in home care, adaptive equipment, clothing, educational opportunities, uncovered medical expenses, psychological evaluations and various household related expenses. Although the funding was withheld by 20% in 2020, this funding was a significant help to those families financially impacted by the COVID-19 Pandemic.

HUMAN RESOURCE DEVELOPMENT

The Employment Services Department employs:

- 6 full-time Employment Specialists
- 2 part time Employment Specialists
- 1 full time Career Developer
- 1 Direct Support Supervisor
- 1 Direct Support Professional
- 1 Program Secretary
- 1 full time Director

The Employment Services Department has four people who are maintaining the Certified Employment Support Professional (CESP) credential. This national credential recognizes individuals who have demonstrated a sufficient level of knowledge and skill to provide integrated employment support services to a variety of populations.

GOALS FOR 2021

- Employment Services will seek opportunities to educate the public, businesses and individuals supported regarding services provided and look for possible collaborations to improve the services provided.
- WFN will continue the use of various social media platforms in order to share information regarding services available and provide information with people supported.

- WFN will focus on job development with new businesses in the area and create relationships with at least five new employers and/or volunteer opportunities.
- Ensure compliance is maintained for record keeping, service provision and documentation in accordance with both ACCES-VR and OPWDD guidelines.

FISCAL INTERMEDIARY SERVICES

Dani Rix, Director

REVIEW OF ACCOMPLISHMENTS – 2020

In 2020, the Fiscal Intermediary (FI) Services department met with one of its most challenging years. The year began with promise . . . a new Director at the helm, a renewed energy to move self-directed services to new heights, a new electronic health record in the works, and a successful collaborative partnership with Mountain Lake Services.

Then COVID-19 hit, upending the best-laid plans, spurring modifications to the service structure and environment, giving us telehealth services and ZOOM planning team meetings. The FI department was not immune to the unprecedented economic toll of the COVID-19 pandemic. Faced with scores of Self-Directed Staff (SDS) spread across five counties, many of whom found themselves unexpectedly out of work as a result of the pandemic, unemployment insurance claims rose to staggering levels, resulting in unforeseen expenses.

In addition, in August of 2020, New York State (NYS) reported a \$14.5 billion revenue decline in General Fund receipts and, at that time projected, a potential revenue loss of \$62 billion in the next four years. In an effort to mitigate these losses and protect the financial health of the state, NYS enacted several changes, to include the implementation of instituted a 20% withholding of local aid payments. This 20% withhold applied to all Self-Directed Other Than Personal Services (SD OTPS) funded items, including housing subsidies and Family Respite Reimbursements (FRR).

But while COVID-19 raged on, the Department continued to look toward the future. At the end of 2019, in an effort to improve customer service, quality, compliance, and efficiency of services, the FI Department made the choice to enter into the electronic recordkeeping world with the software purchase of eVero. Implementation efforts continued throughout 2020 and on November 1st, the eVero Corporation's **EMPOWER™ Self Directed Services** software system platform officially launched. This represented a huge change for the staff, families, and our service recipients; one which required all involved to learn new ways of doing things.

The end of the year saw the FI Department getting ready for the January 1, 2021 implementation of Electronic Visit Verification (EVV) requirements. As part of the 21st Century Cures Act, all agencies that provide personal care services (i.e. Community Habilitation and Respite) must have an EVV solution in place by January 1, 2021, or risk having their Medicaid claims denied. Electronic visit verification is used to verify services to ensure that recipients are not neglected and to cut down on fraudulent claims.

The year ended with promise . . . 2020 was a year of unprecedented change for the Fiscal Intermediary Services department, but one which brought about tremendous growth and experience. In spite of it all, the Brokerage and FI services continued to experience sustained gains, which we will strive to continue into this new year.

HUMAN RESOURCE DEVELOPMENT

In an effort to maximize staffing patterns and safeguard internal finances, the FI Department made targeted structural changes to the department's staffing pool, eliminating two FI Specialist positions, and making the Senior FI Specialist position revenue generating. At the close of 2020, the FI Department employed:

- 1 Director
- 1 Assistant Director
- 2 Agency Brokers
- 1 Senior FI Specialist
- 5 FI Specialists
- 1 Senior Support Assistant
- 2 Support Assistants
- 1 Clerk

GOALS FOR 2021

- To focus on the provision of consistent, high quality services with an emphasis on providing exemplary customer service in an effort to develop our reputation and relationships within the community.
- To develop our Brokerage services through a concerted campaign to carve out and highlight the service independent of the FI services that we offer.
- To optimize usage of the eVero Empower software platform to make all internal workflows more efficient.
- To develop the FI Team as subject matter experts, building autonomy and confidence through increased educational opportunities.

GUARDIANSHIP SERVICES

*Maris Haynes, Primary Guardianship Coordinator
Dorie Millington, Back Up Guardianship Coordinator*

REVIEW OF ACCOMPLISHMENTS – 2020

The Clinton County Chapter Guardianship program started the year supporting 14 people as primary guardian. One person supported with primary guardianship passed away in 2020. The committee helped coordinate memorial services and honored his life virtually. Currently, the program helps support thirteen people as primary guardian. In addition, the Guardianship program continues to support one person as standby guardian. The Guardianship committee had 10 active community members on the committee in 2020. In 2021, the committee will have nine active community members. The Guardianship committee kept in contact mainly virtually during the unprecedented times that made it unsafe to have in person contacts. The committee contacted participants and staff through phone calls, video chats, visits outdoors/on porches, and visits with a window as a barrier. The committee was not able to coordinate in person summer and winter holiday gatherings due to the pandemic. The committee was creative and coordinated dropping off gifts, mailing many cards each month to each person supported through the Guardianship program. Zoom (virtual) parties were coordinated to celebrate birthdays and holidays. The committee conducted most committee meetings via Zoom to continue to provide advocacy and support to the individuals. The focus this year was health and safety for all participants. The committee was proud that the Habilitation Services staff supported each person so well that they were able to prevent everyone from becoming ill from the virus. The committee advocated for and provided consent for all participants to receive the Moderna COVID-19 vaccine sequence with the goal of the best possible health in 2021.

HUMAN RESOURCE DEVELOPMENT

Presently, the two Habilitation Coordinators for the agency serve many functions, to include serving as primary and back up Guardianship Coordinators to provide continuity for the people supported through the program as well as the committee members.

GOALS FOR 2021

- Continue to develop and maintain meaningful relationships between Guardianship committee members, service providers and people supported by the Guardianship Committee while continuing to monitor and support each person's individualized health and safety needs.

- Provide advocacy and support to people interested in future guardianship assistance. In 2021, the program anticipates additional referrals for primary guardianship assistance.
- Begin guardianship process for four individuals living in the IRA program (three primary and one stand by) that have been identified as needing the services and supports provided by the Guardianship Committee.

HUMAN RESOURCES

Laura Gartshore, Director

REVIEW OF ACCOMPLISHMENTS – 2020

In 2020, we received 1,415 applications, of which 1,180 were for direct support professional positions. The Human Resources Department's greatest challenge this past year was the COVID 19 pandemic. Face-to-face interviews were no longer possible as buildings were closed to any outside visitors. Recruiting took on a whole new look. Social media sites became an immensely important tool in reaching out to and attracting potential employees. We switched from in person interviewing to phone or Zoom interviews. All along, our focus was to be selective, allowing us to choose qualified staff. The greatest number of new hires were through Indeed.com, with 1,099 applicants, Facebook coming in second, with 161 applicants and employee referrals providing 63 applicants. Many of our "employee" referrals come from Committee and Board members. We are always very appreciative of all the positive sentiments that are spoken about our Agency to potential applicants.

Recruitment and retention of direct support staff has been the Human Resources department's overriding focus over the past few years. We increasingly spend more time and resources in finding, attracting, and hiring new staff. Our commitment is to continue finding more creative ways to bring applicants in, and to increase hiring.

Social media platforms including Facebook and Instagram have become an integral component of attracting applicants. Human Resource Department staff have become administrators on these platforms so that we have the freedom to post in the moment. We have been successful with picture posts and job posts in trying to lure potential applicants to apply. The Agency website was updated to be able to accept on-line applications. With the onset of the pandemic, this has enabled the department to provide and accept paper-free applications. We were able to face the pandemic head on without missing a step, thanks to our technical updates.

The Agency celebrated our employees who have reached five, ten, fifteen, twenty and twenty-five years of service. Traditionally a dinner was held at West Side Ballroom and speeches were given to honor each staff person. With large groups not being able to gather, in lieu of in person celebrating, each staff received 2 complimentary dinners from West Side Ballroom, an award plaque, and a monetary gift, based on their years of service. Individual stories were featured on the Agency's Facebook page, and the Agency newsletter during the Fall of 2020.

We always want our employees to feel appreciated and needed, so what started out in 2018 as a let's appreciate our staff, has now become a tradition. In order to show staff how wonderful they are, in April, the Human Resources department distributed zippered hoodies to staff, in acknowledgment of the outstanding work they were doing in keeping the people we support safe and engaged during the pandemic lockdown. Everyone was super happy to receive the hoodies. We are always seeing staff wear them, on Zoom meetings, in photos and at trainings. During Direct

Support Professionals Week, the staff received a gift bag filled with candy, chips, a set of earbuds, a t-shirt, and a mask, all bearing the Agency's logo. Again, in recognition of their continuing efforts in providing quality supports to people in our homes and community. They also received a "Turkey card" from Price Chopper before the Thanksgiving holiday.

Santa went virtual this year, with Morning with Santa, and was very much enjoyed by our staff and their families. In lieu of in-person breakfast with Santa, Mr. and Mrs. Claus were zoomed throughout the universe, so our employees' children and grandchildren could speak with Santa, tell him if they had been good or bad and listen to both Santa and Mrs. Claus read traditional Christmas stories to them. Human Resources has shopped and wrapped gifts for more than 150 children ahead of time and employees had picked up gifts prior to the magical morning with Santa. From the comfort and safety of their homes, the children were able to experience the wonder of Santa. We received a lot of positive feedback from parents and grandparents who were able to join in.

HUMAN RESOURCE DEVELOPMENT

The Agency's overall turnover rate in 2020 was 24.25%. There was a total of 223 resignations/terminations. There were 73 self-directed staff positions (10 part-time/full-time, 63 relief), and 150 traditional ARC (106 part-time/full-time, 44 relief) terminations. Of the 150 traditional ARC staff, 131 were direct support staff (92 part-time/full-time, 39 relief);

Turnover among full-time and part-time direct support staff in traditional ARC programs was 26.9%, a decrease from 28.29% in 2019. A total of 92 part-time/full-time direct support ARC staff left in 2020. The overall vacancy rate for these same positions was 23.52%, an increase from the 2019 vacancy rate of 20.45%. The highest vacancy rate for the year was in March, with 32.20%. The lowest vacancy rate was in June, at 19.43%.

In 2020, 1,415 applications were received for both advertised and unadvertised positions for ARC traditional programs. There were 172 hires, or 11% of all those who applied. Of the 172 new hires, 134 were part-time and full-time direct support staff, and 32 were direct support relief staff, for a total of 166 direct support staff, or 14.07% of the 1,180 direct support applications received.

The turnover rate in 2020 for self-directed staff is 24.7%. There were 73 resignations/terminations. There were 96 hired in 2020. Self-directed staff are hired by individuals supported through the Fiscal Intermediary program. Therefore, they are responsible for the hiring and termination of their own staff. The vast majority of self-directed staff are hired on a relief, or on an as-needed basis. The Human Resources department is responsible for the processing of all the personnel and payroll related paperwork for these staff. The staff work closely with brokers, designee's and families of the persons supported in ensuring that all federal and state government regulations are met. There are approximately 300 self-directed

staff on the Agency's payroll, and they are located all over the various counties that make up the Northern Tier.

Throughout the year 2020, 170 unemployment claims were filed against the Agency. This is up from 32 unemployment claims in 2019. This is an increase of 188%. These claims had a potential liability of over \$1,276,792.88. Through the efforts of the Human Resources Department, we were able to reduce this liability to \$382,536.24. Many of these claims are still being worked on to lower our potential liability even lower. The unusually high number of claims can be attributed to the COVID 19 pandemic, which affected those employees working in the self-directed program the most. Many families reacted to the pandemic by not allowing DSP's into their homes any longer, employees were forced to seek unemployment benefits. The pandemic has also impacted the way the state handles Unemployment Claims. Due to the overwhelming number of claimants, the state has not held hearings for any claims that were controverted. Therefore, we are hoping that the state will catch up in their processes and we will be able to lower the Agency's liability even further. Though turnover is inevitable, the Human Resources department will continue to help to control the unemployment costs incurred by the Agency.

GOALS FOR 2021

- Enhance employee appreciation and retention efforts.
- Explore options available to help employees pursue certifications and higher education.
- Develop a marketing strategy to attract qualified staff through new initiatives being pursued by The Arc New York.

NURSING SERVICES

Daniel Johnson RN, Director

REVIEW OF ACCOMPLISHMENTS – 2020

The Nursing Department provided many training opportunities in 2020. The number increased from years past with the Agency implementing a twice monthly orientation training model. The department was responsible for numerous orientation training classes: Emergency Medications-Enteralstomal Therapy-Enteral Nourishment, Seizure Disorders, Personal Care Skills, First Aid/Med Emergency, and Infection Control trainings. Several of these classes are also offered as an annual refresher to ensure that all staff members stay current with information and techniques associated with providing excellent services. Initial medication certification and recertification classes also continued to be offered throughout 2020 on an increased frequency due to needing to maintain smaller class sizes in conformance with CDC guidelines for mitigating the spread of COVID-19. In conjunction with the medication certification classes Nursing completed 438 medication pours to keep the 201 medication certified staff in compliance with OPWDD regulations. In the last quarter of 2020 Nursing worked to modify and upload trainings to Relias, a web-based training platform. After implementation of Relias, in November of 2020, this reduced the amount of time Nursing did in-person instruction for many orientation and refresher training sessions.

The Nursing Department was responsible for arranging 2,668 medical appointments for individuals served by the Agency in 2020 (an increase of 317 from 2019). This not only involved scheduling, but providing information to providers and subsequently completing follow-ups as necessary and data entry related to the appointment including all necessary dissemination of pertinent information. Many of the appointments went to virtual appointments or telehealth with the precautions in place for the majority of the year related to COVID-19. Nursing had to facilitate training and instructions as these platforms had never been used in daily provision of health care services prior to the pandemic.

We continued to work collaboratively with the Clinton County Health Department to assure Flu shot immunizations for the individuals in Residential in spite of the pandemic. The format changed from years past and we had to do a one-day clinic out of the CVI building where all individuals were scheduled, by home, to arrive and receive their Flu shot and depart prior to the next residence arriving. During this clinic a total of 116 flu vaccinations were administered in a six-hour period of time. In conjunction with CVPH we arranged for two blood drives throughout 2020. The number was reduced from previous years due to COVID-19 precautions and restrictions.

The Nurses worked diligently to try to facilitate individuals being more active and effective in managing their own healthcare. With many of the challenges faced during the latter nine months of the year related to the pandemic, this was increasingly challenging. The Nurses continued to advise and provide all options for

decision making that were available despite the minimal choices available to everyone because of the tightening precautions surrounding COVID-19 restrictions. As individuals needed new, or had to change providers, every opportunity was afforded to them to make an educated choice in which provider they would see for future appointments. Staff were also educated on how to facilitate the greatest degree of involvement by the individuals while utilizing the new and somewhat unknown platforms for appointments. These efforts will continue and be ongoing as we continue to navigate the COVID-19 pandemic challenges and thereafter in what we anticipate will be a return to more normative medical provision after pandemic restrictions lessen.

Nursing spent an incredible amount of hours combatting the ever-evolving challenges that were ongoing in 2020 related to the global pandemic. Much time was spent providing education to staff and individuals about the ever changing COVID information and subsequent requirements. Health monitoring and protocol development, as well as subsequent implementation, was at the forefront on a daily basis for the majority of 2020. Nursing was responsible for implementation of protocol requirements and distribution of Personal Protective Equipment (PPE) as situations occurred. Often times Nursing was the first contact and provided staff and individuals with important information and support through the challenges of quarantine and isolation. These efforts are ongoing.

HUMAN RESOURCE DEVELOPMENT

The department consists of:

- 1 Nursing Services Director
- 6 Residential RN's
- 1 Day Program RN
- 2 Residential LPN's
- 1 Support Assistant.
- 1 contracted Registered Dietitian.

GOALS FOR 2021

- Explore the possibility of adding an additional staff member to focus on dietary needs of the individuals and staff training.
- Maintain efforts to have individuals taking an active role in their own healthcare.
- Continue to partner with CVPH, Clinton County Health Department, and Clinton Community College to maintain positive community partnerships in the region.

QUALITY MANAGEMENT

Michelle Tallman, Director

REVIEW OF ACCOMPLISHMENTS – 2020

The Quality Management Department began 2020 focused on the goals to attain the identified milestones for the person-centered excellence long term goals. Other goals included developing detailed analysis reports of internal audits, working collaboratively with other agencies to identify and define quality benchmarks and provide employees with greater accessibility to incident trend analysis for educational purposes to further reduce the frequency of incidents. Advancements were made in the Excel tool used for internal audits and reports are under development to provide more detailed analysis. Quality Management successfully established three workgroups before the end of year; each with a focus on one of the three specific goals for agency reaccreditation with the Council on Quality and Leadership for person centered excellence, due in September 2021. The training materials for the incident management refresher were redesigned to provide a more detailed report of the previous year's incident analysis, including some root cause analysis and tips to reduce the frequency of incidents reoccurring. This will be updated each year.

But in March of 2020, the department changed course from the goals identified in the beginning of the year. The pandemic had forced change to service delivery, how we ensured health and safety of people supported and the tools needed to provide supports and keep people actively engaged in this new, socially distanced 'normal'. The Quality Enhancement Specialists quickly recognized an imminent need for people we support to have routine and easy access to technology. Working in collaboration with the Information Technology Department and the Habilitation Services Department, within the first couple of weeks of the community shutdown, every residential home had either an iPad or ChromeBook, downloads of Zoom Application and FaceTime, accounts, passwords and written instructions for people to remain connected to friends, loved ones, and family. Wanting to encourage participation and education in this virtual world, the Quality Enhancement Specialists created two Zoom meetings: the Morning Brew and the Afternoon Dance Party. The Morning Brew made its début on March 24, 2020 and the Afternoon Dance Party debuted the following week. Both started as a way for people to learn the virtual technology, see friends they no longer saw at the frequency they used to and to stay connected. It was a temporary way of life for a temporary setback with the virus. Word spread and in response to requests received, the Zoom call codes and passwords were then provided to all persons supported by the Agency.

At the end of December 2020, over 600 Zoom calls were participated in or hosted by the Quality Management Team. Since the March of début Zoom to the agency, the following 'communities' still meet on either a daily or regular basis: The Morning Brew, The Afternoon Dance Party, Happy Hour, Friday Night Dance Party, Bingo, Ladies Night with Deb and Yoga with Bonnie. Yoga, Bingo, and Ladies Night are now hosted by people supported. Additionally, three people supported have

developed and now host their own Zoom calls where people from the community can sign up and attend. Will hosts his own cooking show *Cook Like a King, Eat Like a Queen*, Ashley hosts her own craft show *Getting Artsy with Ashley* and Alex hosts his own show *Staying Healthy with Alex*.

Regular functions of the Quality Management Department also changed. Personal Outcome Measures interviews went virtual and are now conducted with the person via Zoom. This allows for the person supported to still have the driving voice for their goals and outcomes while maintaining optimal health with social distancing. Internal audits are now conducted off site, with the use of technology, with results shared with pertinent management via Zoom meetings. The technology embraced in 2020 as a necessary way to operate will lend to greater efficiencies in the future.

GOALS FOR 2021

- The Quality Management Department will maintain involvement with the three workgroups created in 2020 to achieve the goals set forth for reaccreditation.
- The Quality Management Department will work with agency management to secure reaccreditation with CQL in the Fall of 2021.
- The Quality Management Department will provide three POM workshops throughout the year for Supervisors, Managers, and DSP's who are new to their roles, to further person-centered excellence.
- The Quality Management Department will work in collaboration with other departments to develop enhanced support for staff providing direct services. Advanced training opportunities and individual supports to employees to improve and progress their skills will be among the opportunities.

HUMAN RESOURCE DEVELOPMENT

The Department consists of:

- 1 Quality Management Director
- 1 Quality Management Assistant Director
- 1 Quality Management Auditor
- 1 Quality Management Specialist
- 2 Quality Enhancement Specialists

HABILITATION SERVICES

Robert Manor, Director

REVIEW OF ACCOMPLISHMENTS - 2020

The single most significant event of 2020 was the global COVID-19 Pandemic. This had a tremendous impact upon the people supported by the Advocacy and Resource Center and its various services.

During 2020, the Day Habilitation portion of the Day Services Department merged with the Residential Services Department to become the Habilitation Services Department. This merger was the result of a great deal of development and planning which began in 2019. Initially, this was to occur as part of a five-part phase-in, which was to begin in January with each successive phase commencing approximately monthly until being fully implemented by May. After a great deal of consideration upon receiving feedback from staff, the determination was made for the entire implementation to occur simultaneously in March.

The main impetus for the merger of department, and consequently services, was to support each individual person through their entire array of services in a highly individualized, efficient, and overarching manner. Instead of the services themselves being the starting point, we felt that it was imperative to make each person the focal point. People residing in the IRAs would now have the opportunity for more personalized day habilitation services.

To facilitate a successful and efficient merger, it was determined that the IRA and Day services staff would be placed in blended schedules to most effectively, as well as efficiently, support the people. Additionally, every effort was made to transform these into much more favorable (to the staff) schedules. Among the criticisms of the previous schedules were the following: shifts that were long in duration (many more than 12 hours), split shifts (shifts with a morning and separate evening component on the same day), and many schedules with no weekend days off. The blended schedules addressed each of these concerns. The only shifts more than 8 hours were the overnight shifts, with all others being 8 hours or less. Within the new schedules, there are no more split shifts. Additionally, many of the schedules also have one weekend day off.

During 2020, the PATH program was able to effectively address some of its goals. One was to maintain an agency presence in community activities through new and continued volunteer activities. To that end, new activities were fostered through the development of relationships within the community. Despite the many challenges associated with the pandemic, the PATH program was able to embark on a Thanksgiving and Christmas Card project for the benefit of the people residing at the Clinton County Nursing Home.

At PATH, we were also able to invest in our employees by providing a positive environment and introducing new and meaningful incentives. A feedback form was

created to promote positive feedback, support, and messages of recognition. There was a pizza luncheon provided for the staff. There were also drawings for various prizes to include movie passes and lottery tickets.

This past year, The Habilitation Services Department monthly summary note was implemented in order to increase efficiency and ease the burden which was formerly placed upon the staff responsible for the completion of the monthly summary note. The weekly summary note was developed to accomplish this goal. The weekly summary note meets all the regulatory requirements and can be completed in a fraction of the time that had previously been necessary for the monthly summaries. Staff were trained, and this was successfully implemented.

During 2020 activities for people supported by the Habilitation Services Department took a dramatic change in March in conjunction with the restrictions associated with the Pandemic. Staff endeavored to continue to provide enriching activities by a variety of virtual and other technology aided activities. People were able to take part in the daily Morning Brew and Afternoon Dance Party get-togethers via Zoom. Also, several people supported within the department also hosted regular and recurring themed events, concentrating on topics such as, cooking, yoga, and crafting. As we head into 2021, as everyone looks forward to the eventual reduction in restrictions, emphasis will continue to be on generating any and all opportunities possible for everyone supported.

HUMAN RESOURCE DEVELOPMENT

At the end of 2020 (December 31, 2020), Habilitation Services Program included:

IRA:

- DSP's
 - Full Time – 166
 - Part Time – 12
 - Relief – 59
- Supervisors – 24
- Managers – 15

PATH:

- DSP's
 - Full Time – 7
 - Part Time – 0
 - Relief – 3
- Supervisor – 1
- Manager – 1
- Support Assistant – 1

Administration:

- 1 Director
- 6 Assistant Directors
- 3 Administration Specialists
- 2 Schedulers
- 3 Program Coordinators

GOALS FOR 2020

- Implement and train all departmental staff with respect to the OPWDD Level of Supervision guidelines to effectively support people's oversight needs.
- Screen for and select appropriate candidates to fill the three current residential vacancies.
- Research, promote, and implement technological opportunities to aid in addressing people's POM goals.
- Provide for more opportunities for community activities.
- Create more choice and variety of Day Habilitation options and activities.

MAINTENANCE

Kevin Trombley, Maintenance Coordinator

2020 was a challenging year for all staff and the Maintenance Department was no exception. With individuals at home daily it gave Maintenance staff a new challenge to accomplish their work in a timely and safe manor. As we all know, having to do physical work with the addition of a mask is not easy.

REVIEW OF ACCOMPLISHMENTS – 2020

Notable projects for 2020 done **in-house** by Maintenance Department are as follows:

- The back-parking lot at the Administration building had new street lights built and installed, providing a safer area for staff leaving after dark.
- Mason Street received a new wrap-around porch as well as a more accessible safe area for fire evacuations.
- Many wheelchair accessible planters were built so individuals could grow flowers and vegetables. The homes that received them were: Alder Bend, Renadette, U-Place, Conner's Way, Tremblay, Mountain View, Freedom, and West Chazy.
- Repairs on Church Street after the fire were completed quickly to get individuals back in there home.
- Salmon River Road home had the back rec-room converted into another bedroom.
- Pineridge had the garage space converted into two new bedrooms
- Church Street had the Med room remodeled.
- The foundation under the Nursing building has had some extensive foundation work done and is not finished due to cold weather.
- We have started several garage remodels into bedrooms that will be finished in the early part of 2021 at Cliff Haven, Mason Street, Macey Lane and Whispering Pines, which also will be getting another bathroom in that space.

Other jobs:

- The replacement of Woodwinds septic peat beds
- The front door remodel at Mountain View
- Renadette Road's deck was replaced
- Small tree removal at several sites
- Pineridge received added parking
- Conner's Way had a sidewalk added to the back door and connected to the side.
- Connecticut Court had a concrete handicap ramp and rail added to an apartment of a tenant we support.
- New sheds were added to several homes for storage.

- New flooring in West Chazy Bedrooms (2) and Pineridge Bedrooms (3)

All previously listed work was done in-house by Maintenance staff and is a small fraction as to what the department does. By doing the work in-house and not hiring it out, the department saved the Agency an estimated \$102,944.00 for the year. This number comes from the total saved from the 2020 estimated budget (\$31,455) as well as the under-budget savings for the Garage Projects at (\$71,489).

There were several bid jobs that Maintenance assisted **vendors** on:

- The replacement of Champlain's Boiler
- The new roof at Turner Road
- Salmon River had a completely redesigned driveway paved giving adequate parking to staff, visitors and nursing. There was also a new safe area which is lit at night and designed to load both vans at the same time in case of an emergency.
- New security cameras were installed at Transportation.
- Adirondack has a new floor in the office/living space
- Mountain View has a new Dining Room and Kitchen floor.

Work Orders 2020

Total for All Sites

- 1) Total Submitted Work Orders: **2834 (10.75% increase from last year)**
- 2) Total 2020 Work Orders, including uncompleted workorders transferred from 2019: 2904
- 3) Transferred workorders form 2019 tracking sheet to 2020 tracking sheet: 70
- 4) Transferred workorders from 2020 tracking sheet to 2021 tracking sheet: 62
- 5) Duplicate Work Orders: 3
- 6) Cancelled Work Orders: 5
- 7) Resident moves to/from sites due to Pandemic: 10
- 8) Total Work Orders completed: **2834 (9.76% increase from last year)**
- 9) Percentage of Work Orders Completed in 2020: **97.59% (3.41% decrease from last year)**

In addition to repairs to all the agency homes and other buildings, the Maintenance staff plow most of the larger sites and do the cleanup at all the sites after storms. The department purchased extra salt and sand this year to be able to sand all sites after a storm is over. This is a new practice to limit slip and fall injuries. Three yards of salt was kept separate and used at Connecticut Court on the sidewalks to help fulfill our contract with them.

HUMAN RESOURCE DEVELOPMENT

- (8) Maintenance Mechanic positions
- (1) Maintenance Coordinator position that oversees the daily job assignments and provides direct supervision for the maintenance staff.
- (1) Senior Maintenance Mechanic who will aid the coordinator with the daily tasks as well as work side by side with the other Maintenance Mechanics to help bridge the gap between administration and staff.
- (1) Painter who was added to do all the interior and exterior painting at all sites on a two-year rotation. The painter also does small repairs in the homes.
- (1) Landscaper position was created to help maintain the landscape work that has been done at various sites along with spring and fall cleanup.
- (1) Clerical position tracks work orders submitted and completed, processes purchase order requests, maintains documentation for the bidding process and assists with scheduling vendors, obtaining price quotes, preventative maintenance schedules, inventory of tools, and other clerical duties as needed.
- (1) Janitorial position was also added to the maintenance department staff. This person works at the Southside Administration building as well as cleaning at Westside Ballroom and Path when needed.

In 2020, the Department also was successful at getting all maintenance mechanics certified with confined space OSHA training. The hope is to give staff the opportunity to grow which will help with retention of qualified personnel giving the Agency the ability to do more work in-house thus cutting costs.

GOALS FOR 2020

- Additional off-site training opportunities will be explored.
- Pursuing CDL licensing for select staff.
- Pursuing pesticide licensing for select staff.
- Pursuing OSHA 10 certification for all staff.
- Organize and streamline all project records.

TRAINING DEVELOPMENT

*James Johnson, Director of Staff Development
Andrea LaDieu, Staff Educator*

ORIENTATION TRAINING 2020

The current pandemic has changed our training procedures and challenged us to move forward with new considerations. Classroom participants maintained strict distancing requirements while in class accompanied by increased attention to hand hygiene, mask wearing, and frequent disinfection of surfaces. We had the opportunity to host 32 new hire trainings in 2020 which was more than double from the previous year. A total of 167 staff completed new hire orientation training (out of the 171 that began the orientation process). Twenty-three of the staff that completed orientation had worked for the agency previously and had wanted to return. This steady pattern of returning employees indicates the quality employment the agency offers. The largest new hire orientation took place in May 2020 with a total of 19 new staff participating and one rehire.

Orientation training varied in the number of hours due to the pandemic. In the beginning of the year we provided 68.5 hours of in person training. When the pandemic hit we had to tailor our training curriculum to meet the needs of the programs and the NY state training restrictions put in place. During the months of March through November we limited the number of in person trainings and created an opportunity for new hires to utilize our SDS training program remotely on our agency website. This allowed staff to still get the necessary training on a computer versus person. In November 2020 we implemented our new Online Learning Management System, Relias. This platform allowed us many opportunities to standardize training needs and update staff with their refresher trainings without having to be in person. This has also allowed us to move forward with meeting the needs of the programs with restrictions currently in place. This Relias platform will also save staff time in traveling back and forth to our training sites and allow them to complete the training while at their work sites at times convenient to them.

REFRESHER TRAININGS 2020

Prior to the pandemic we held 114 refresher classes in person totaling 539 hours of training with staff. With SDS and Relias training platforms in place we were able streamline the refresher classes on line. Currently, CPR, SCIP-R, ERGO, and Medication Certification classes remain in person and we have systems in place to meet these needs. Between the launch of Relias on 11/11/20 and the end of the year, Advocacy and Resource Center employees were able to complete more than 4,750 online refresher modules.

SELF-DIRECTED SERVICES TRAINING 2020

There were 94 SDS staff hired into the Self-Direction Program in 2020. All staff completed online orientation training prior to hire. One hundred and ninety-five SDS staff completed the online refresher training as directed by agency policy. Staff can accomplish both orientation and refresher trainings on their own with access through the Agency website. Staff are provided with a code that they can use to access the training portal, complete the training, and send notifications to the Human Resources Department.

GOALS FOR 2021

1. As soon as it is safe to do so, train all staff who are due for in-person training topics such as SCIP-R, ERGO, and CPR.
2. Develop a New Manager Orientation Plan
 - i. Initial Live session
 - ii. Follow up Relias content
 - iii. Regularly scheduled live follow up content
3. Ongoing development of custom Relias content
4. Reinvigorate our staff with the passion and heart of what we do.
 - i. Al Condeluci, guest speaker specializing in Social Capital
 - ii. Trainings for all staff regarding on the basics of why we do what we do.

TRANSPORTATION SERVICES

Thomas Church, Director

REVIEW OF ACCOMPLISHMENTS – 2020

Nine new vehicles were added to the Agency's fleet in 2020. Residential received five 2020 Toyota mini-vans, two, 2020 Ford transit large wheel chair vans and one Transit Crew van and one trailer for CVI Janitorial. The Transportation Day program received one Section 5310 Grant bus. Twenty-eight (28) vehicles were sold in a closed bidding process to the public. We included eight Mountain Lake Services vehicles in our bidding process to sell vehicles in our continued effort to share services.

The Transportation Director managed the multiple ARC vehicle bidding process for Clinton, Essex, St. Lawrence and Franklin counties, resulting in 26 vehicles purchased. The Transportation Department added employee vehicle services to include tire mounting and repair, oil changes, vehicle body under coating and vehicle washing self-service. The Transportation Department also became a Matthews Bus Sales Service Center. The service center will provide pre-delivery services for new buses and wheel chair vans sold by Matthews Bus Sales in Northern New York. In addition to pre-delivery services, the service center will provide after sales warranty service for Matthews Bus Sales. Essex County Transportation became the first customers of the Matthews Service Center with two large buses received at the center for after sale warranty services and COVID-19 driver protection shield installation. The 2017 Section 5310 Federal Grant bus delivery was completed with the receipt of a single 28-passenger bus delivered in December. This 28-passenger bus became the second new customer at the Matthews Service Center. The department's mechanics continued to provide safety inspections, preventative maintenance and repairs for the Agency's vehicles. The Transportation Department established a more in-depth comprehensive vehicle corrosion control program by implementing a department policy that all agency vehicles will receive rust preventive under coating. One of the bigger challenges faced in 2020 was the COVID-19 pandemic and how to ensure that 150 vehicles and its users were protected from contracting the virus via the vehicles. The Transportation Department developed cleaning and disinfecting procedures that included utilization of electrostatic cleaning standards and technology to help combat the virus. In addition, the department met or exceeded OPWDD COVID-19 transportation requirements for our individuals and staff. The transportation staff not only stepped up to the COVID-19 challenge, but added two (2) new business ventures for the future of the Agency during this pandemic. One of the last accomplishments was completing painting in the garage interior.

Number of Agency Vehicles: 150

Miles Driven: 802,512

HUMAN RESOURCE DEVELOPMENT

The Transportation Director continued participation with the Clinton County Coordinated Transportation Committee. The Agency Driver Trainers continued to provide orientation and remedial driver training for the 12 commercial drivers and approximately 420 agency drivers throughout the year.

Transportation Services Staffing

- 1 Program Director
- 1 Driver / Driver Trainer
- 1 Transportation Clerk
- 1 Lead Mechanic / Maintenance Scheduler
- 4 Vehicle Mechanics
- 1 Vehicle Auto Body Tech / Mechanic
- 4 Full Time Bus Drivers
- 1 Part Time Bus Driver
- 1 Relief Bus Drivers
- 4 Full Time Bus Aides
- 1 Relief Bus Aid
- 2 Wash Bay/Corrosion Control Technicians

PROGRAM COMPLIANCE

The Section 5310 Federal Grant Program was effectively administered throughout the year, as required. The 5310 Federal Grant Program administered a scheduled audit with the Agency Transportation department receiving a perfect score from the 5310 Grant inspection. The Agency's administration of the Federal Drug and Alcohol Testing Program (FMCSR) successfully stayed in compliance as per federal specifications. In addition, the Agency Transportation department joined the required National Drug Clearing House a new FMCSR program to better track drug and alcohol testing compliance. The Transportation Department successfully administered the New York State Department of Motor Vehicles 19-A Bus Driver Certification Program & new passenger safety regulations for 2019. The annual Affidavit of Compliance was submitted in July and accepted. The Transportation Department continues to maintain a no lost work time accident record.

GOALS FOR 2020

- Work with Human Resources to develop an effective method to recruit, hire and maintain commercial drivers, monitors, mechanics, etc.
- Continue the 2021 vehicle replacement plan, replacing vehicles older than 10 years of age.
- Improve Transportation Department employee safety, effectiveness, employee retention, and training.
- Strengthen relationships with other ARC agencies in the area.

- Develop training plans for the Transportation Department drivers, monitors, mechanics, and office support staff.
- Develop training plans and train the Maintenance Department staff on dump truck operations, to include a CDL Class B driver training program, from entry level to NYS DMV CDL certification.
- Continue development of current external business plans to include Vehicle Services to the general public.

PROGRAM ENROLLMENT

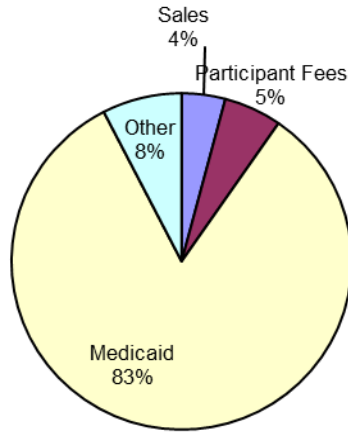
	Enrollment 12/31/2019	Enrollment 12/31/2020	Total Active in Program
Habilitation Services¹			162
Day Hab (PATH)	96	92	
Without Walls Day Hab	107	81	
Individual Residential Alternatives (IRA)	127	127	
Recreation Respite	45	16	
Site-Based Respite	11	9 ²	
Employment Services			122
Pathway to Employment	4	4	
Workforce Network (ACCES- VR and OPWDD SEMP)	112	107	
Family Education & Training	2	4	
Community Prevoc	16	8	
Fiscal Intermediary Services			425
Fiscal Intermediary / Self-Directed	303	357	
Agency Brokerage	32	68	

¹On March 30, 2020, Residential and Day Services combined to create the Habilitation Services Department. Habilitation Services includes 35 community people + 127 people in our IRAs.

²The Free Standing Respite program was closed February 2020. We are not anticipating providing services in the near future.

SOURCE AND USE OF FUNDS

JANUARY - DECEMBER 2020
Source of Funds \$27,866,755



Use of Funds \$27,729,742

