

# 2023 ANNUAL REPORT

## Performance Management System

Calendar Year 2023 and First Six Months of Fiscal Year 2024

### I. INTRODUCTION

Sunshine Village's Performance Management System is an application of a variety of approaches to assess the implementation and utility of services provided. It is an outcome-based tool that evaluates the agency's services and overall performance with a purpose of improving operations based upon information and customer input.

Sunshine Village completes an Annual Report at the end of each calendar year and a Bi-annual Report at the end of each Fiscal Year in July.

The **Annual Report** *includes* outcome measures in the following Critical Areas:

- Customer Assessment
  - Client and Guardian
- Finance
  - Audit
- Security
  - Safety
  - Risk Management
  - Critical Incidents
  - Restraints
- Rights
  - Human Rights
  - Positive Behavioral Supports
  - Complaints and Investigations
- Accessibility
- Cultural Competency, Diversity and Inclusion
  - Initiatives
  - Demographics
- Quality Assurance / Programs
- Service Delivery
- Strategic Planning

This **Bi-annual Report** *includes* measures in the following Critical Areas:

- Customer Assessment
  - Employees
  - Funding and Referral Sources
  - Business Partners
- Workforce Management
- Technology

- Communication, Goodwill and Marketing
- Service Delivery
- Quality Assurance / Programs
- Strategic Planning

## II. ACCREDITATION, LICENSING AND SURVEYS

**ACCREDITATION:** SSV was surveyed by the Commission on Accreditation of Rehabilitation Facilities – CARF – in March of 2023 and was awarded a three-year certification. The report complimented the organization in a multitude of areas.

**LICENSING:** SSV received a two-year certification and a rating of 94% in February of 2023.

## II. ORGANIZATIONAL PERFORMANCE

**CUSTOMER SATISFACTION PROGRAM:** SSV is committed to achieving high levels of satisfaction within each customer group, within the constraints of fiscal realities. In an effort to identify satisfiers and dissatisfiers, the agency formally assesses its customer groups, including participants, families/guardians, funding/referral sources and business partners on an annual basis. In addition to the formal program, satisfaction levels are assessed on a continuous, albeit less formalized, basis. Other mechanisms for gathering information include focus groups, forums, individual meetings and telephone conversations. The data gathered assists in planning purposes, allowing SSV to individualize services; make improvements on a programmatic and organizational scale; anticipate future needs and exceed present expectations. **Satisfaction is detailed within this report from various stakeholders.**

**EMPLOYEES:** The next survey will be administered in February of 2024 using similar questions to the survey conducted in February of 2022 and 2023 so that trends can be identified from comparison to baseline responses. The results of this survey will be reported in the next Bi-Annual Performance Management System Report.

### CLIENTS AND FAMILY MEMBERS/GUARDIANS:

#### **EMPLOYMENT SERVICES (comprised of Westover Maintenance Systems and CBDS):**

<b>WMS / CBDS CLIENTS</b>	<b>Agree</b>	<b>Disagree</b>
Courteousness ( <i>Staff are Polite</i> )	99%	1%
Friendliness ( <i>Staff are Nice and Approachable</i> )	98%	2%
Positive Attitude ( <i>Staff Motivate Me / Are Usually Upbeat</i> )	96%	4%
Professionalism ( <i>Staff are Dedicated / Get Along Well</i> )	96%	4%
Knowledge and Competence ( <i>Staff Know their Job</i> )	99%	1%
Willingness to Help ( <i>Staff Help When Needed</i> )	96%	4%
Comfortable with Safety Measures	97%	3%
Support Staff Listens to Me	98%	2%
Like Coming Here Each Day	96%	4%
I Enjoy My Day and Activities	96%	4%
I am satisfied with how and when SSV communicates with me	97%	3%
I am happy with the technology/assistive technology provided	97%	3%

<b>NEW QUESTION</b>		
I am Satisfied with SSV Services	97%	3%
<b>OVERALL SATISFACTION</b>	<b>97%</b>	
I am interested in working by myself in a competitive job	76%	24%

**Analysis:** Satisfaction remains very high and dissatisfaction remains very low.

**Performance Improvement:** New questions? Overall satisfaction for 2023 was 97%. SSV will continue to monitor satisfaction levels. SSV will also look into the desire for a competitive job from clients – as this feedback is very different than what has been presented on day-to-day basis and during ISPs. A more in-depth survey will be administered to direct employment efforts.

<b>WMS / CBDS GUARDIANS</b>	<b>SATISFIED</b>	<b>NOT SATISFIED</b>
Courteousness ( <i>Staff are Polite</i> )	100%	0%
Friendliness ( <i>Staff are Nice and Approachable</i> )	100%	0%
Positive Attitude ( <i>Staff Motivate / Are Usually Upbeat</i> )	100%	0%
Professionalism ( <i>Staff are Dedicated / Get Along</i> )	100%	0%
Knowledge and Competence ( <i>Staff Know Their Job</i> )	99%	1%
Willingness to help ( <i>Staff Help When Needed</i> )	100%	0%
Safety ( <i>I am Comfortable with Safety Measures</i> )	99%	1%
Communication: It is easy for me to reach a Case Manager	100%	0%
Communication: Satisfied with how/when SSV communicates w me	98%	2%
I am Satisfied with the Program	100%	0%
I am happy with the technology and assistive technology provided.	98%	2%
<b>NEW QUESTION</b>		
If I have a Complaint, It Is Handled Well	99%	1%
I am Satisfied with SSV Services	100%	0%
I would Recommend SSV to Others	100%	0%
<b>OVERALL SATISFACTION</b>	<b>99%</b>	
I would like him/her (CBDS) to have their own job in the community	64%	36%

**Analysis:** Satisfaction remains very high and dissatisfaction remains very low.

**Performance Improvement:** Overall satisfaction in 2023, with 49 surveys, was 99%. SSV will continue to monitor satisfaction levels. SSV will also look into the desire for a competitive job from clients – as this feedback is very different than what has been presented on day-to-day basis and during ISPs. A more in-depth survey will be administered to direct employment efforts.

**DAY HABILITATION SERVICES (comprised of Day Hab and Fusion):**

<b>Day Habilitation / Fusion CLIENTS</b>	<b>Agree</b>	<b>Disagree</b>
Courteousness ( <i>Staff are Polite</i> )	99%	1%
Friendliness ( <i>Staff are Nice and Approachable</i> )	99%	1%
Positive Attitude ( <i>Staff Motivate Me / Are Usually Upbeat</i> )	97%	3%
Professionalism ( <i>Staff are Dedicated / Get Along Well</i> )	99%	1%
Knowledge and Competence ( <i>Staff Know their Job</i> )	97%	3%
Willingness to Help ( <i>Staff Help When Needed</i> )	99%	1%
Comfortable with Safety Measures	100%	0%

Support Staff Listens to Me	98%	2%
Like Coming Here Each Day	98%	2%
I Enjoy My Day and Activities	98%	2%
I am satisfied with how and when SSV communicates with me	98%	2%
I am happy with the technology/assistive technology provided	98%	2%
<b>NEW QUESTION</b>		
I am Satisfied with SSV Services	98%	2%
<b>OVERALL SATISFACTION</b>	<b>98%</b>	

**Analysis:** Satisfaction remains very high and dissatisfaction remains very low.

**Performance Improvement:** Overall satisfaction in 2023 was 97%. SSV will continue to monitor satisfaction levels.

<b>Day Habilitation / Fusion <u>GUARDIANS</u></b>	<b>Agree</b>	<b>Disagree</b>
Courteousness ( <i>Staff are Polite</i> )	100%	0%
Friendliness ( <i>Staff are Nice and Approachable</i> )	100%	0%
Positive Attitude ( <i>Staff Motivate / Are Usually Upbeat</i> )	100%	0%
Professionalism ( <i>Staff are Dedicated / Get Along</i> )	100%	0%
Knowledge and Competence ( <i>Staff Know Their Job</i> )	100%	0%
Willingness to help ( <i>Staff Help When Needed</i> )	100%	0%
Safety ( <i>I am Comfortable with Safety Measures</i> )	99%	1%
It is easy for me to reach a Case Manager	98%	2%
I am satisfied with how and when SSV communicates with me	97%	3%
I am Satisfied with the Program	100%	0%
I am happy with the technology/assistive technology provided	99%	1%
<b>NEW QUESTION</b>		
If I have a Complaint, It Is Handled Well	99%	1%
I am Satisfied with SSV Services	100%	0%
I would Recommend SSV to Others	100%	0%
<b>OVERALL SATISFACTION</b>	<b>99%</b>	

**Analysis:** Satisfaction remains very high and dissatisfaction remains very low.

**Performance Improvement:** Overall satisfaction from 75 surveys was 99% in 2022. SSV will continue to monitor satisfaction.

### III. CRITICAL AREAS

**FINANCE:** The organization underwent an annual audit completed by Meyers Brothers Kalicka, PC. At a Board of Directors meeting on November 2, 2023, the Auditors presented the report which achieved the agency's goal of having no material weaknesses. Further, there were no recommendations for management.

<b>FY2023 AUDITS</b>	<b>FINDINGS</b>
FY2023 CPA Financial Audit	No material weaknesses
2023 401K Audit	No material weaknesses

**SAFETY**: The agency is committed to ensuring that all clients, employees and members of the community are safe. To that end, the organization follows all mandates from federal, state and local regulations as well as internal objectives.

2023 SAFETY GOALS	GOAL	OUTCOME	COMMENT
Committee Meetings	4	4	MET
% Of Sites with Safety Officer	100%	100%	MET
Monthly Safety Spotlight	10	10	MET
Quarterly Safety Inspections	4	4	MET
Internal Safety inspections	2	2	MET

**Analysis**: Sunshine Village achieved 100% of its Safety Goals.

**Performance Improvement**: Sunshine Village will continue to monitor its success in the area of safety and will augment its work in this area with risk management initiatives.

**RISK MANAGEMENT**: Sunshine Village has developed and implemented a comprehensive Risk Management Program to protect the agency’s resources – which are defined as its people, income, property and goodwill. Numerous activities are continuously undertaken to minimize or eliminate events that contribute to losses. This program (1) identifies the activities, programs and plans the organization has implemented and maintains to identify, assess and control risk that may be present in operations, service delivery, staffing and governance activities and (2) identifies specific risks within the organization and lists activities being taken to mitigate those risks. Combined with a comprehensive insurance package and extensive training, this program controls threats and allows the organization to accomplish its mission and goals.

2023 RISK MANAGEMENT GOALS	2019 BASELINE	2022 OUTCOME	2023 GOAL	2023 OUTCOME	COMMENT
Reduce total injuries to staff by 25%	110	55	41	87	NOT MET
Reduce client driven injuries to staff (acts of aggression) by 25%	54	27	20	44	NOT MET
Reduce injuries resulting from a “slip or fall” by 25%	10	5	4	7	NOT MET
Develop and implement a process to come into compliance with monitoring fire extinguishers.	n/a	n/a	100%	100%	MET
Correct all deficiencies within 2023 Accessibility Inspections	100%	100%	100%	100%	MET
Correct all deficiencies within 2023 Annual Inspections	100%	100%	100%	100%	MET

**Analysis**: Sunshine Village achieved 3 out of six goals, 50%. Of the 87 injuries to staff, 19 (22%) resulted in claims. Of the 44 client driven injuries, 9 (20%) resulted in claims. No claims resulted from the 7 “slips and falls.”

**Performance Improvement**: The Safety Committee and the Human Resources Department will continue to focus on educating employees and clients on the causes and hazards of “slips and falls” – and will renew focus on ensuring sites are free of ice/snow. We will include goals for claims resulting from injuries to determine the seriousness, in terms of both safety and financial consequences, to SSV.

Transportation Services has increased its capacity since the agency’s reopening after the global pandemic. In 2021, there was 1 vehicle accident and in 2022, there was 3. In 2023, this number increased to 12; however, the comparison to the past two years is not realistic – nor going back to pre-Covid years, as we have different employees and routes. To ensure a higher level of safety, SSV will now incorporate a more thorough review of vehicle accidents in the Performance Management System’s Annual Report – to minimize injuries and enhance safety.

**2023 Data for Vehicle Accidents – which will serve as Baseline for future years:**

Total Accidents	12	
SSV At Fault	7	58%
SSV No Fault	5	42%
Accidents with no injuries	11	92%
Accidents with one injury	1	8%
Accidents with multiple injuries	0	0%

Of the 12 vehicle accidents, 40 people affiliated with SSV were involved: 12 employees and 28 clients. One person – 3% - an employee - reported an injury. This includes all agency vehicles and includes vehicles owned by agency employees and used for job related duties.

**CRITICAL INCIDENTS:** Sunshine Village has monitored and assessed critical incidents to improve service delivery for decades. In 2020, the organization refined its data collection systems and now includes this area in the Annual Report.

AREA	2023 TOTAL CRITICAL INCIDENTS	ASSESSMENT COMPLETED BY	TRENDS IDENTIFIED	CORRECTIVE ACTIONS
DPPC Complaints	27	Human Rights Committee	None	None
Workers Comp Injuries	87	Director of Human Resources	See below	See below
Restraints	19	Director of Day Services	None	None
Client Grievances	0	Executive Director	None	None
Vehicle Accidents	12	Executive Director	None	None

***Workers Comp Injuries:*** We will detail this measure to be Total Injuries and Total Claims. Of the 87 injuries, 19 resulted in a claim. Lack of awareness in the person’s environment and surroundings is an on-going factor and injuries from clients are the top two reasons for the claims. These will be addressed in the Safety Committee meetings and within the agency’s technical training targeted to DSPs.

***Data for Vehicle Accidents:*** This is included in the Risk Management goals – and this data was updated for 2023 – which will serve as our baseline for future years.

**CRITICAL INCIDENT REVIEW:** The following is a summary of Critical Incidents that are reviewed in detail by the agency’s Human Rights Committee.

CRITICAL INCIDENTS	2020	2021	2022	2023
Death	0	0	0	0
Suicide Attempt	0	0	0	0
Unexpected Hospital Visit	22	15	30	33
Medical/Psychiatric Intervention NOT Requiring Hospital Visit	14	8	7	6

Inappropriate Sexual Behavior with Police Involvement	0	0	2	5
Perpetrator of Physical Altercation **	45	52	6	130
Victim of Physical Altercation **	34	19	10	75
Significant Behavioral Incident	12	10	48	137
Missing Person	0	0	0	2
Fire	0	0	0	0
Suspected Mistreatment and Abuse *	1	5	11	28
Property Damage	0	0	2	11
Theft	0	0	0	2
Criminal Activity Including Possession / Use of Weapon or Unauthorized Use of Legal / Illegal Substances	0	0	2	3
Transportation Accident involving Emergency Responders	0	1	0	10
Emergency Relocation for more than 24 hours ***	0	0	0	0
Medication Occurrence (MAP)	1	0	0	1

**Analysis:** The above information is a result of two systems, being HCSIS 2020, 2021 and 2022) and eHana (2023.) The thresholds for reporting are different – and the data cannot be compared. The 2023 data will now serve as baseline.

**Performance Improvement:** The 2023 data will serve as baseline and improvements will be made if future trends or significant increases occur.

*\*Report filed when SSV employee suspected mistreatment or abuse of client by an entity outside Sunshine Village.*

*\*\*\*Sunshine Village closed buildings March 16, 2020, due to COVID19 and began re-opening buildings August 2020 – therefore baseline data from 2020 and 2021 is skewed due to client census.*

<b>RESTRAINTS</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>
# Restraints	39	4	29	19
# Clients Restrained	18	3	7	9

**Analysis:** Restraints are reviewed individually by the agency’s Human Rights Committee. They had no concerns about the 19 that occurred in 2023. They identified no trends.

**Performance Improvement:** We will maintain our monitoring systems in the area of restraints.

**HUMAN RIGHTS and POSITIVE BEHAVIORAL SUPPORTS:** Sunshine Village is committed to providing the highest quality of services in a safe environment that respects and promotes the rights and dignity of everyone. The organization monitors itself in numerous areas, including compliance with mandates as well as communication of information and education.

**D1. HUMAN RIGHTS OUTCOMES:** For calendar year 2023, the organization has maintained 100% compliance with all regulatory mandates and is maintaining or exceeding its own targets for communication and education.

	<b>2023 GOAL</b>	<b>OUTCOME</b>	<b>COMMENT</b>
<i>Consumer Education</i>			
Right / Ethic / Character of the Month	10	12	MET
<i>Staff Training</i>			

Articles in Staff Newsletter	12	12	MET
Annual Training Program (DPPC)	1	1	MET
<i>Human Rights Officers</i>			
Sites with HROs	100%	100%	MET
HRO Job Description reviewed annually	100%	100%	MET
<i>Coordination</i>			
# Of Coordinators	1	2	MET
<i>Human Rights Committee</i>			
# Of members	5	6	MET
Compliance with members' expertise	100%	100%	MET
# Of meetings	4	4	MET
# Of site reviews	100%	100%	MET
HRC Job Description reviewed annually	100%	100%	MET

**Analysis:** SSV met all goals.

**Performance Improvement:** SSV is continuing to maintain a robust Human Rights System while also maintaining an equally robust Positive Behavioral Supports system. At some point, EOHHS is supposed to replace the Human Rights System with PBS.

**D2: POSITIVE BEHAVIORAL SUPPORTS:** In 2015, Sunshine Village developed and began implementing a Positive Behavior Supports (PBS) program to comply with anticipated mandates from the State of Massachusetts in this area. Until regulations change, the organization will carry both systems. Each year, the organization creates goals to enhance the system's effectiveness.

<b>PBS PERFORMANCE METRIC</b>	<b>2022 BASELINE</b>	<b>2023 OUTCOME (Goal is 95%)</b>	<b>COMMENT</b>
Clients feel support staff are courteous	98%	99%	MET
Clients feel support staff are friendly	99%	98%	MET
Clients agree staff listen to them	97%	98%	MET
Clients likes coming to SSV	95%	97%	MET
Guardians feel staff are friendly	100%	100%	MET
Each program will host a virtual "common interest" meet-up (Pathway to Friendship)	32	30	NOT MET
Incidents involving physical altercations will decrease from 24 (2022) by 10%	24	130	NOT MET
A debriefing will occur for each restraint	100%	100%	MET
Incident Prevention training will be provided at all programmatic sites twice	10	84	MET
A minimum of 20 clients will participate in advocacy/leadership series through MASS	28	9	NOT MET
The PBS Advisory Team (clients and staff) will meet at least 6 times	43	13	MET
PBS program will be updated based upon	100%	N/A	N/A



the newly developed PBS state mandates			
Quality Assurance Audits will be conducted at all sites quarterly	3	4	MET

**Analysis:** Of the 13 goals, 10 (77%) were successfully met and one was not applicable as new regulations from EOHHS were not provided in 2023. Two were not met – with the data regarding physical altercations now being collected in a different system with different thresholds – which does not allow for comparison to past baseline data. The Pathway to Friendship was not fully implemented because of visitation restrictions from the global pandemic and was discontinued in July of 2023.

**Performance Improvement:** SSV will continue to ensure that the rights of clients are protected, the supports given are effective, the environments they use are safe and welcoming and their access to advocacy training is enhanced.

**D3. COMPLAINTS AND INVESTIGATIONS:** The organization utilizes the state sponsored HCSIS System to track complaints and the reports are reviewed on a quarterly basis by the Human Rights Committee and on an annual basis through DDS’s Annual Standard Contact Review process. In both cases, no trends were found in the limited number of complaints and subsequent investigations.

<b>INVESTIGATIONS</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>
Total Number of Investigation Dispositions	7	7	17	27
DDS to Investigation	n/a	n/a	6	7
Administrative Review	4	5	4	12
Direct to Complaint Resolution Team	3	0	3	3
Dismissed	0	2	1	4
Cases Substantiated	0	0	0	1
Cases Unsubstantiated	0	0	2	3

**Analysis:** SSV continued growing in number of clients served in the first five months of 2023. Although there was a significant increase in investigation disposition, there was not a significant number of substantiated cases and, overall, there were no trends identified.

**Performance Improvement:** SSV will continue monitoring investigation and substantiated cases.

**E. ACCESSIBILITY:** In January of 2010, the Board unanimously approved the revised Accessibility Policy and recommended outcomes. This policy was established in 1993 and with a purpose of insuring that Sunshine Village continues to be actively involved in the process of removing architectural, attitudinal, social, transportation, financial, communication and other barriers to people with disabilities in compliance with Section 504 of the Rehabilitation Act of 1973 and other barriers to people with disabilities, in compliance with Section 504 of the Rehabilitation Act of 1973 and the Americans With Disabilities Act of 1990, Title I: Employment and Title III: Public Accommodation. Additionally, it provides the organization with a mechanism to ensure that all services and opportunities provided by SSV will be available to those who meet the admission requirements because of their disability when they have appropriate funding levels. It includes goals, which address architectural, attitudinal, employment, social, transportation, financial and communication barriers, and these goals are monitored on a quarterly basis

and reported in the Annual Program Evaluation Report. Technology was added as a component – so that barriers and improvements could be addressed annually.

The ACCESSIBILITY goals and outcomes for calendar year 2023, being:

AREA	GOAL	OUTCOME	COMMENT
ARCHITECTURAL	Identify barriers through an annual inspection and make corrections, as able	100%	MET
ATTITUDINAL	Increase community awareness through each DH site volunteering with at least one community organization	100%	MET
ATTITUDINAL	Increase community awareness with CBDS participating with at least 3 community organizations	100%	MET
ATTITUDINAL and TECHNOLOGY	Assess and update the organization’s website to insure it includes information that promotes community awareness	100%	MET
ATTITUDINAL	Increase community awareness with at least one Autism event in April for the general community	100%	MET
EMPLOYMENT	Promote the abilities of people with disabilities as productive employees by actively participating in membership of at least three local business organizations	100%	MET
EMPLOYMENT	Pursue the implementation of “entrepreneurial” supports for individuals interesting in pursuing self-employment	100%	MET
SOCIAL	Each day hab program will create and implement a Friendship Program	100%	MET
SOCIAL	SSV will maintain at least 4 partnerships for DH for “Bringing the Community to Us.”	100%	MET
TRANSPORTATION	Use car lift services as alternative means of transportation for both employees and participants	100%	MET
FINANCIAL	Provide information about available resources to improve economic circumstances by educating staff about retirement planning	100%	MET
FINANCIAL	Offer financial education assistance to employees	100%	MET
COMMUNICATION and TECHNOLOGY	Include communication question on client surveys	100%	MET
COMMUNICATION and TECHNOLOGY	Increase communication to employees	100%	MET

**Analysis:** Sunshine Village achieved all goals.

**Performance Improvement:** The organization will review the 2023 goals and change / increase at least 3 of them to ensure higher levels of accessibility throughout the agency.

F. **CULTURAL COMPETENCY, DIVERSITY and INCLUSION:** The CULTURAL COMPETENCY, DIVERSITY and INCLUSION goals and outcomes for calendar year 2022 were as follows:

2023 GOALS	AREA	OUTCOME	COMMENT
Incorporate diversity issues into at least 4 staff newsletters	Diversity / Staff Development	4	MET
Provide 2 PBS trainings on cultural diversity	Programming / Client Education	2	MET
Provide at least 1 opportunity for staff to learn about resources for personal finances	Socioeconomic	2	MET
Provide guidance at least once for all staff related to retirement planning	Age / Staff Development	3	MET
Assess website to reduce language barriers	Cultural Accessibility	Assessed	MET
Assess programs to reduce language barriers	Cultural Accessibility	Assessed	MET

**Analysis:** Sunshine Village met 100% of its goals in this area.

**Performance Improvement:** Sunshine Village will assess what it currently does to recognize diversity and promote inclusion and will enhance its efforts in 2024 and will include an additional question about this in the 2024 Staff Satisfaction and Engagement Survey.

**DEMOGRAPHIC INFORMATION:** Sunshine Village collected demographic information related to age, race, geographic location of home for clients, employees, management and the Board of Directors. It also collects data as to the occupation of the members of the Board of Directors. This data is reviewed – comparatively between the groups.

**Analysis:** The overall status of the clients and the employees are reflective of each other – but the diversity in race is lacking when the status of the clients is compared to management and the Board of Directors.

**Performance Improvement:** The data has been reviewed by the Board as it relates not only to the internal working of the organization but also to Board Membership. The Board of Directors completed a Self-Evaluation to gather more data about its own membership and will use this to drive decisions, as able. SSV will continue to promote itself as an Equal Opportunity employer and continue to offer professional development opportunities to employees to advance their career.

F. **COMMUNICATION, GOODWILL AND MARKETING:** Sunshine Village implemented a comprehensive Marketing Plan that was developed for Fiscal Years 2017 and 2018. This plan supported the organization in branded, targeted and compelling multichannel communications to various audiences to drive both awareness and action. Sunshine Village developed a Communications and Marketing Plan for FY2019, 2020 and 2021. With the impact from the Global Pandemic, employee reductions and the economic impact on the business and donor community, Sunshine Village has suspended the full plan but continues to communicate with various stakeholders and has done some targeted fundraising as directed by the Community Relations Plan that was revised in September of 2022.

With the creation of a Community Relations Manager in the latter part of 2023, SSV will engage in increased promotional activities – using a variety of communication mechanisms – to reach all stakeholder groups in 2024. During early 2024, various performance measures related to communication, goodwill and marketing will be identified and then will be included in the 2024 Annual Plan.

## IV. QUALITY ASSURANCE / PROGRAMS

Sunshine Village began formally assessing each programmatic site on a quarterly basis in January of 2020. In April of 2022, the assessment tool was revised and includes a review of the following areas:

- Human Rights and Positive Behavior Supports
  - Respect; Opportunities; Choice and Control; Human Rights / Advocacy Education and Communication
- Personal Safety
- Workforce Competency
- CBDS Specific Standards
- Technology
- Client Focus Group Survey
  - Client Advocacy
- Employee Focus Group Survey
  - Employee Development
- Comments / Observations

The report is evaluated by the Director of Day Services – who summarizes the findings in an Executive Summary. The report is then reviewed by the Executive Director and any trends that are identified are then communicated, with improvement measures, within the Performance Management System’s Annual and Biannual Reports.

**Analysis:** The assessments that were completed since the 2023 Bi-Annual Report do not show any trends. The use of Technology continues to increase – from 36% to 45% and now to 54%.

**Performance Improvement:** Sunshine Village will continue to support both clients and employees in using technology to improve service provision and quality of life issues. The Director of Information Technology is looking at other devices that may be more conducive to SV programming.

## V. SERVICE DELIVERY

Through the Closure and Reopening Phases – and now through the Rebuilding phase - traditional performance measures have been suspended for Fiscal Years 2020, 2021 and 2022. They will be developed and implemented again for FY2023 when it is anticipated that the programs will be fully opened, and client participation is near pre-pandemic levels.

LIFE ENGAGEMENT (DAY HAB) SERVICES / FUSION – IN PERSON SERVICES:

<b>SITE</b>	<b>PRE-PANDEMIC CENSUS *</b>	<b>CENSUS - 12/31/2020</b>	<b>CENSUS – 12/31/2021</b>	<b>CENSUS – 12/31/2022</b>	<b>CENSUS – 12/31/2023</b>
Davis 2020	70	21	35	62	72
Knights 2020	60	24	44	48	45
Three Rivers 2020	77	22	62	78	70
Agawam 2020	34	23	47	66	56
<b>TOTAL</b>	<b>241</b>	<b>90</b>	<b>188</b>	<b>254</b>	<b>243</b>

EMPLOYMENT and CBDS SERVICES – IN PERSON SERVICES:

<b>SITE</b>	<b>PRE-PANDEMIC CENSUS *</b>	<b>CENSUS - 12/31/2020</b>	<b>CENSUS – 12/31/20201</b>	<b>CENSUS – 12/31/20202</b>	<b>CENSUS – 12/31/203</b>
Westover Maintenance Systems	17	14	26	23	22
Casey Building CBDS	133	34	56	63	64
Three Rivers CBDS	0	0	7	9	7
Agawam CBDS	0	7	30	40	35
<b>TOTAL</b>	<b>150</b>	<b>55</b>	<b>119</b>	<b>135</b>	<b>128</b>

\* *Pre-pandemic census numbers do not include census from VillageWorks or the day habilitation sites in Springfield and on Main Street, Chicopee – which have been closed. Total pre-pandemic census was 529. Sunshine Village is serving 74% of the client base number from March 19, 2020.*

## **V. STRATEGIC PLANNING**

The Board of Directors approved a Three-Year Strategic Plan – for fiscal years 2024, 2025 and 2026 – in June of 2023. An update will be provided in the Bi-Annual Performance Management System Report in June of 2024.