

**2024
ANNUAL ACTION PLAN
REPORT**



**Guernsey County Board of
Developmental Disabilities**

AAP 2024 Report

Goal #1: The Board will improve methods for service delivery to infants, children and adults with developmental disabilities and their families.

- All managers met with peers outside the Board to compare processes at least one time last year.
- We were able to offer mini-grant to the local school districts totaling \$24,434.68.
- We equipped six individuals with Augmentative Communication devices. That is two more than the previous year.
- We secured three additional providers, focusing on HPC, Shared Living, and Respite.
- We partnered with the community for a Fishing Tournament, Pickle-Ball, Park Clean-Up day, Pool Parties, Mug Cooking, Slightly Spooky Stroll and Candy Cane Hunt.
- Self-Advocates presented at three Board meetings.
- We sponsored inclusive summer camps at the YMCA.
- The Board offered LEAN Process Improvement to 13 community providers. That is 11 more than the previous year.

Goal #2: Increase communication and educational opportunities for individuals, their families, staff, service providers and the community.

- The Business office provided funding highlights and changes for the annual report.
- We provided five Independent Provider meetings for training and DODD updates.
- We provided monthly radio advertising, had various billboards, and participated in "Talk of the Town" to promote special events and to provide information about our services.
- Three self-advocates attended the Synergy Conference.
- Self-advocates have met on a monthly regular basis to hang-out and work on covering the self-determination principles.
- All staff completed training on review of updated policies, HIPPA, confidentiality, seizure protocol, bloodborne pathogens, lockdown/lockout, tourniquet, MUI procedures, Health and Safety Alerts, and Bill of Rights. Additionally all staff used the intranet to update their medical authorizations, press release, and vehicle insurance.
- Twice last year, HR completed a quality assurance review to make sure all staff have completed training in Person Centered Thinking.
- All staff have been trained on crisis prevention and intervention and a training schedule has been developed for new staff training.
- Two SSA's were trained in trauma informed care and trauma biographical timelines.
- We did not complete the development of a mobile app for the Board.
- In November, our online Parent support group went live on Facebook. The site is monitored by the Community Relations/Special Projects Coordinator.

AAP 2023 Report

Goal #3: Assure quality services to individuals eligible for services.

- We successfully increased the number of individuals in supported and integrated employment to 37% of all eligible adults. That is 2% more than last year.
- In 2024, we had five families participate in the PLAY Project.
- In February of 2024, all departments submitted their accreditation readiness packet for MEORC review.
- The Speech Pathologist offered provider training to support individuals who have communication and/or swallowing needs.
- The IT Officer provided information highlights and cyber-security to all staff.
- Quarterly, we monitored our website to make sure information was up-to-date.
- With the assistance of each department-head for their area, the HR Director/Records Manager ensured the Board records were reviewed and set for destruction in March of 2024 in accordance with the current Records Retention Schedule.
- The SSA Department began the implementation of the revised on-boarding schedule. Preliminary reports indicate that the newer SSA's like the process and are able to be assigned caseloads much faster with greater confidence.
- We had a goal to have two interns in 2024. We did have one but that intern decided to drop out of school and could not complete his internship. We will definitely continue this goal in 2025, as we have been able to recruit interns for full time employment in the past.
- In an effort to improve communication between staff and leadership, the HR Director attended staff meetings monthly rotating between departments.
- We set a goal of having 85% of staff complete the Employee Engagement Survey and exceeded it with 91% participation. We did not see improvement in the areas of Compensation and Relationship Management

Goal #4: Develop and implement plans and strategies for additional, alternative funding and resource acquisition to support its mission.

- We were successful with making sure we had a minimum of a three year match for Medicaid Services. DODD has placed our Board in fiscal emergency and we are starting preparations for the Board to be on the ballot in the fall.
- We completed a monthly TCM audit to ensure accurate reporting of services, timely reporting of services, and efficiencies of TCM documentation and billing.

Superintendent Report

Kellie Brown, Superintendent

Goal #5: Furnish and maintain adequate physical facilities and equipment to meet the needs for services and programming for individuals with developmental disabilities.

- We purchased a building in downtown Cambridge in order to open a pottery business and our plans to open in 2024 were halted due to lack of funds for renovations. We will budget each year for planned renovations and will continue to seek grants for additional improvements. The next large-scale renovation will be for the roof and HVAC.
- We looked at several ranch style homes but were unable to purchase any in 2024 and decided to use the funds for a complete renovation of the North 7th Street home to make it completely handicap accessible.
- In the fall of 2024, we received quotes from Federal for the replacement of the digital control and electronic valves for our heating and cooling system. Once the new Maintenance Director has acclimated himself to his new role, we will have him start planning this conversion.
- In 2024, we created and implemented a process to ensure that all resumes and applications are scanned and maintained electronically.

Goal #6 - All components of the three year plan are completed.

- Quarterly, the management team reviewed every objective to make sure that the strategic plan goals were being implemented.

In spite of large employee turnover which put additional stress in all our departments to implement our Annual Action Plan, I am pleased to report that we were able to continue to move forward in assuring quality services to those we support and their families. We look forward to continued progress in 2025.

~Kellie Brown

GCBDD Superintendent