2024-2025 Makor/WLCR

Agency-Wide

Quality of Life, Valued Outcome Assessment, and Quarterly Council Meeting Review

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Part One: Makor/WLCR 2024-2025 Agency-Wide Quality of Life Review

As per the directive of OPWDD, in 2016 Makor/WLCR adopted the CQL POMS as a measure of Quality of Life. This replaced the Quality of Life Instrument Package for Adults with Developmental Disabilities published by the Centre for Health Promotion at the University of Toronto, which Makor/WLCR had been using as a Quality of Life measure since 2005. Results from the CQL POMS are used to develop individualized goals and objectives.

Despite the use of the CQL POMS to better align with OPWDD preferences and survey measures, there are aspects of the Toronto Instrument that Makor/WLCR finds extraordinarily useful and which are lacking in the CQL POMS. Most notably, the CQL POMS only measures the presence or absence of outcomes in each area measured by the tool, and while it is true that personal preference is included in the measure of whether or not an outcome is present, there is no way of knowing how important the outcome is to an individual based solely on the score itself.

For example, in the area of intimate relationships, the presence or absence of the outcome is established via the following method:

1) Does the person have intimate relationships?
2) Is the person satisfied with the type and scope of intimate relationships?
3) If the answers to #1 and #2 are yes, the outcome is present.
4) If the answers to #1 and #2 are no, is this due to personal choice?
5) If due to personal choice, the outcome is present.

While this methodology does convey in a black or white, dichotomous manner whether or not the person is satisfied with his or her intimate relationship status, a “present” rating tells you nothing about how important this outcome is to the person or how important it is compared to other outcomes measured. If, for example, this person is satisfied with his intimate relationship status but this status is not very important to him, it cannot necessarily be said to be an adequate measure of the person’s Quality of Life. If the person is not happy with her intimate relationship status but is even more dissatisfied with her employment status, then splitting attention and

resources to address both concerns equally based on their equal "not present" ratings may not be truly person centered. Similarly, if a person is 99% satisfied with his intimate relationship but states that he still seeks improvement ("I love my girlfriend, but it upsets me that we only speak eight times a day instead of ten times a day"), this would be rated as equally "not met" on the CQL POMS as someone who is 0% satisfied (i.e. "I wish I had a girlfriend"). Furthermore, when using a simple, dichotomous, present/not present rating system, Makor/WLCR typically achieves a 100% agency-wide satisfaction rate on the CQL POMS with no measure of nuance or basis for comparison across items or time periods and thus no need for improvement noted, and we like to seek improvement.

The Toronto Instrument, however, takes both satisfaction and subjective importance to the individual into account when determining the impact of a given area on one's Quality of Life. It does this by asking two distinct questions for each area assessed: 1) How important is this aspect of life to the person, and 2) how satisfied is the person with this aspect of his or her life? Responses to these questions are coded using a Likert scale ranging from 1 (very little) to 5 (a lot). By measuring both importance and satisfaction levels, the Toronto Instrument is able to distinguish between a person who reports moderate satisfaction in an area that is less important to him from a person who is equally satisfied in the same area, but who views that area as being more important. When analyzing results of the Toronto Instrument, importance and satisfaction scores are statistically collapsed into Quality of Life Scores, thus allowing areas deemed by individuals as more important to them to be weighted more heavily than areas deemed less important. For example, a person who reported being highly satisfied (a satisfaction score of "5") in an area deemed by her to be of very little importance (an importance score of "1") will achieve a Quality of Life Score in that area of "2", while a person who reported being highly satisfied (a satisfaction score of "5") in an area deemed as "very important" (an importance score of "5") will achieve a Quality of Life Score in that area of "10". Quality of Life Scores thus fall on a theoretical 20 point Likert Scale, with 10 being "Highly Satisfied in an area of great importance to me" and -10 being "Highly unsatisfied in an area of great importance to me".

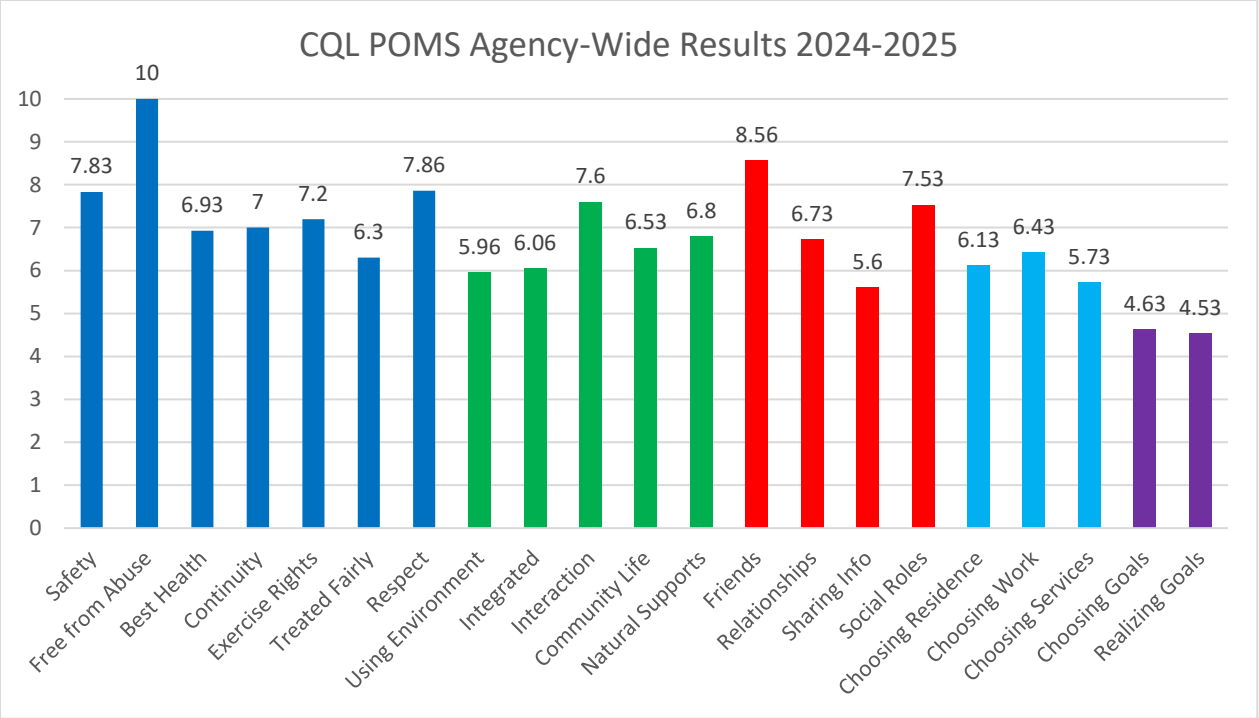
In order to gather data found to be useful to the agency in addressing the needs of our Service Participants while at the same time meeting the instrumental preference of OPWDD, Makor has adopted a hybrid model in our Quality of Life assessments. Namely, in addition to administering

the CQL POMS in the standardized manner the instrument demands, the two additional Toronto Instrument questions (how important is this aspect of life to the person, and how satisfied is the person with this aspect of his or her life) are posed for each personal outcome investigated by the CQL POMS. Makor/WLCR then further groups responses into the following categories: “Highly satisfied” (Quality of Life Scores of 8, 9, or 10); “very satisfied” (Quality of Life Scores of 4, 5, 6, or 7); “satisfied” (Quality of Life Scores of 0, 1, 2, or 3); “unsatisfied” (Quality of Life Scores of –1, -2, or -3); “very unsatisfied” (Quality of Life Scores of -4, -5, -6, or -7); and “highly unsatisfied” (Quality of Life Scores of -8, -9, or -10).

Makor/WLCR has found this information to be extremely valuable in understanding the nuance of specific individuals’ Quality of Life ratings and in using this nuance to establish both individualized and agency-wide objectives.

Results for this survey were derived through CQL POMS reviews covering June of 2024 through May of 2025, as well as Valued Outcome Assessment and Quarterly Meeting Minutes from the 2024 calendar year. These results will be used to determine agency-wide areas to target for improvement. Thirty respondents are included in this year’s survey, down from 33 respondents last year. This sample size is commensurate with the sample from the 2023 survey year and reflects a sample size of roughly 14% of people being supported by Makor/WLCR’s OPWDD services.

Criteria for assigning importance and satisfaction scores are outlined in the handbook of the Quality of Life Instrument along with the table used to assign Quality of Life Scores. In addition to assessing satisfaction in individual areas, the CQL POMS uses a principal components factor analysis to group its results into five domains: My Human Security (Non-negotiable human and civil rights); My Community (Access to be in, a part of, and included in the community); My Relationships (Social support, familiarity, intimacy, and belonging); My Choices (Decisions about one’s life and community); and My Goals (Dreams and aspirations for the future). This final category consists exclusively of the, “People choose personal goals” and “People realize personal goals” areas. Results of this year’s review are as follows:



<u>Agency-Wide Averages By Domain</u>

My Human Security: 7. 58 (down from 8.46)

My Community: 6.59 (down from 7.27)

My Relationships: 7.10 (down from 7.23)

My Choices: 6.09 (down from 7.54)

My Goals: 4.58 (up from 3.96)

<u>2024-2025 CQL POMS Agency-Wide Results by Level of Satisfaction:</u>

<u>Highly Satisfied (QOL Scores of 8, 9, or 10)</u>

People are free from abuse and neglect (10, steady with 10 last year)

People have friends (8.56, down from 9.08 last year)

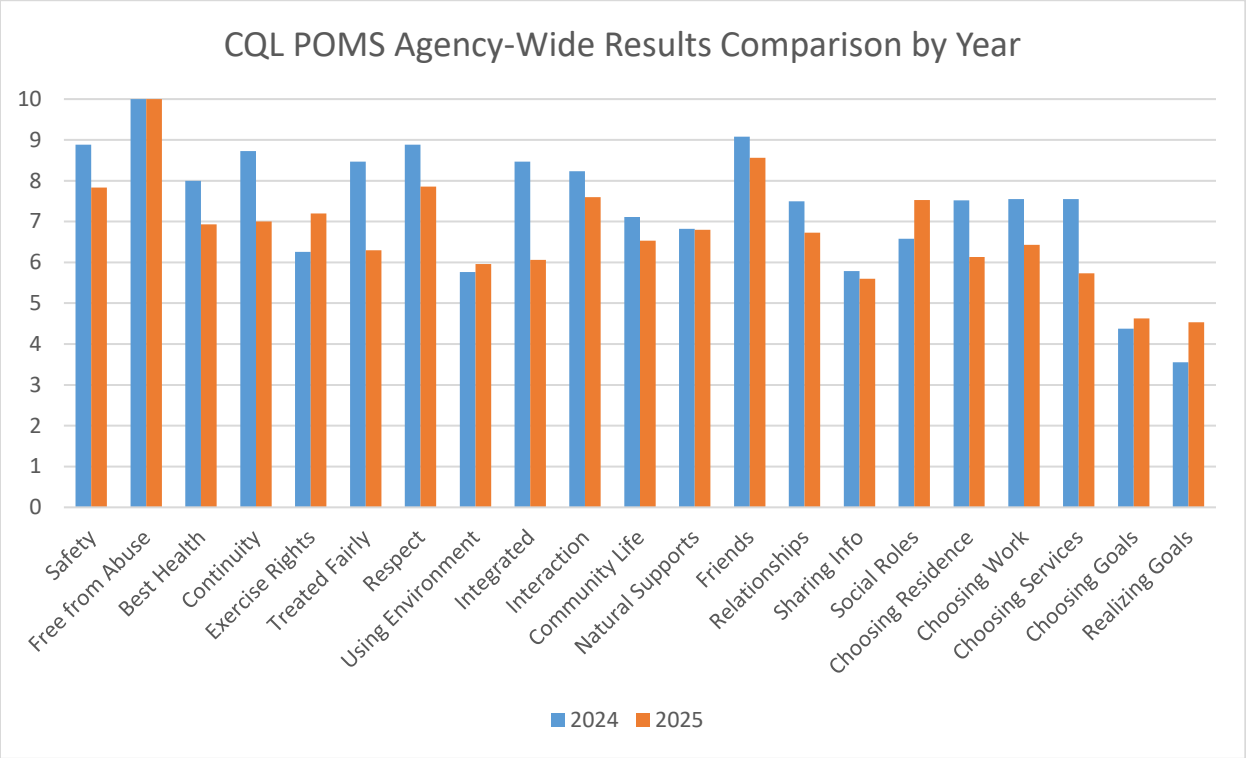
Very Satisfied (QOL Scores of 4, 5, 6, or 7)

People are respected (7.86, down from 8.88)
People are safe (7.83, down from 8.88 last year)
People interact with other members of the community (7.6, down from 8.23 last year)
People perform different social roles (7.53, up from 6.58 last year)
People exercise rights (7.2, up from 6.26 last year)
People experience continuity and security (7, down from 8.73 last year)
People have the best possible health (6.93, down from 8 last year)
People are connected to natural support networks (6.8, down slightly from 6.82 last year)
People have intimate relationships (6.73, down from 7.5 last year)
People participate in the life of the community (6.53, down from 7.11 last year)
People choose where they work (6.43, down from 7.55 last year)
People are treated fairly (6.3, down from 8.47 last year)
People choose where and with whom they live (6.13, down from 7.52 last year)
People live in integrated environments (6.06, down from 8.47)
People use their environments (5.96, up from 5.76 last year)
People choose services (5.73, down from 7.55 last year)
People choose personal goals (4.63, up from 4.38 last year)
People decide when to share personal information (5.6, down from 5.79 last year)
People realize personal goals (4.53, up from 3.55 last year)

Satisfied (QOL Scores of 0, 1, 2, or 3) None

Unsatisfied (QOL Scores of -1, -2, or -3): None
Very Unsatisfied (QOL Scores of -4, -5, -6, or -7): None
Highly Unsatisfied (QOL Scores of -8, -9, or -10): None

A graphic version of comparisons of this year's findings to last year's findings for all areas assessed is as follows:



These results indicate an overall 100% satisfaction rate across the agency in all areas assessed by the CQL POMS. Furthermore, these results reflect sentiment of "very satisfied" or above in all areas, with no areas assessed falling within the merely, "satisfied" range or in any of the "unsatisfied" ranges. At the same time, however, this year's results indicate net decreases in satisfaction in four of the five general domains specified by the CQL POMS, namely, My Community; My Relationships; My Choices; and My Human Security. Despite these decreases, domain averages in each of these areas remain within the "very satisfied" range. These ranges remain steady in the areas of My Community, My Relationships, and My Choices, but reflect a drop from the "highly satisfied" range to the "very satisfied" range in the area of My Human Security, which fell from 8.46 last year to 7. 58 this year. Meanwhile, the domain average in the area of My Goals improved from 3.96 last year to 4.58 this year, moving from the merely "satisfied" range to the "very satisfied" range.

When viewing these results by individual item, these results reflect decreased satisfaction as compared to last year's findings in 15 of the 21 areas assessed by the CQL POMS while overall satisfaction rates went up in 5 of the 21 areas assessed. One area assessed, namely, "People are

free from abuse and neglect" remained steady with a perfect score of 10. In addition, seven categories dropped from "highly satisfied" last year to "very satisfied" this year, namely: People are respected (7.86, down from 8.88); People are safe (7.83, down from 8.88 last year); People interact with other members of the community (7.6, down from 8.23 last year); People experience continuity and security (7, down from 8.73 last year); People are treated fairly (6.3, down from 8.47 last year); People have the best possible health (6.93, down from 8 last year); and People live in integrated environments (6.06, down from 8.47). It is unclear why satisfaction rates in most areas dropped this year over last year, with theories ranging from heightened stress levels in the overall Jewish community since the October 7th attack to the aging of much of the population we serve (clearly reflected in the single "unsatisfied" response given this year discussed below). Whatever the reasons, these findings do imply that while the overall quality of life of service participants served by Makor remains very high, focus should be given in the coming year on enhancing these good feelings.

All told, of the 630 unique responses to this year's CQL POMS interviews (n=30 x 21 areas assessed= 630), 629 (99.84%) fell into the binary satisfied range and 1 (0.15%) fell into the binary unsatisfied range. The single "unsatisfied" response was in the category of "People are treated fairly", and was expressed by a service participant who was placed on a lower consistency diet than he had been on in the past due to choking concerns and who believed this medical intervention to be, "unfair". Nevertheless, and despite this single individual's valid and validated concern (staff commiserate and empathize with this individual while concurrently attempting to explain the medical necessity of his reduced texture and trying to make his diet as pleasing as possible for him), the overall agency-wide binary satisfaction level within both the specific and general domains identified in the CQL POMS remains at 100%.

Part Two: Makor/WLCR 2024 Agency-Wide Valued Outcome Assessment

In addition to the Quality of Life Instrument, an assessment of Valued Outcomes was administered to approximately 12.5% of Service Participants and/or their Advocates (n=27, down from 35 individuals reflected last year). Valued Outcomes were identified via clinical

interviews (the “Valued Outcome Assessment”) conducted with the Service Participants, their families, staff, and Advocates.

A total of 147 Valued Outcomes (down from 194 last year and generally commensurate with the 151 from the previous year) were identified through this process. Of these, 53 (down from 68 last year and generally commensurate with the 56 from the previous year) were Service Participant Generated Valued Outcomes and 94 (down from 126 last year and generally commensurate with the 95 from the previous year) were Staff, Advocate, or Family Generated Valued Outcomes. Stated differently, Service Participant Generated Valued Outcomes constituted approximately 36% of the total Valued Outcomes identified (generally commensurate with the 35% and 37% from the previous two years) while Advocate Generated Valued Outcomes constituted 64% (approximately commensurate with the 65% and 63% from the previous two years). Please keep in mind that there is likely to always be a higher percentage of Advocate Generated Valued Outcomes than Service Participant Generated Valued Outcomes as each individual Service Participant may have family members as well as staff and other advocates interviewed for this survey. Valued Outcomes were then categorized by theme to provide a comprehensive picture of the types of outcomes given priority by our Service Participants and their Advocates. Results are presented as percentages of each category of Valued Outcome within the total number of Service Participant or Staff/Advocate/Family Member Generated Valued Outcomes. Please note that family generated, advocate generated, and staff generated Valued Outcomes have been collapsed under the heading "Valued Outcomes as per Advocates", and that the total percentages for each column may not add up to 100% due to rounding errors. Last year’s results are documented in parentheses next to this year’s results.

Valued Outcomes as per Service Participants:	Valued Outcomes as per Advocates:
Health Issues: 0% (8.8%)	Health Issues: 8.5% (12.7%)
Marriage: 1.8% (1.4%)	Marriage: 0% (0.7%)

General Development/ Independence: 1.8% (1.4%)

Academics: 0% (0%)

Social Skills & Opportunities: 1.8% (2.9%)

Community Participation: 0% (0%)

Spirituality: 3.7% (5.8%)

Quality of Life: 3.7% (4.4%)

Employment: 7.5% (4.4%)

Concrete/Material requests: 5.6% (8.8%)

Training in Activities of Daily Living: 9.4% (11.7%)

Family Contact: 3.7% (2.9%)

Travel: 0% (2.9%)

Choice making 0% (2.9%)

Privacy: 0% (0%)

Clinical Services/Issues: 9.4% (4.4%)

Hobbies: 22.6% (20.5%)

Recreation: 18.8% (8.8%)

Safety/Cared For: 0% (2.9%)

Day Program: 1.8% (2.9%)

Owning Home: 0% (0%)

General Development/ Independence: 7.4% (8.7%)

Academics: 0% (0%)

Social Skills & Opportunities: 13.8% (13.5%)

Community Participation: 2.1% (5.5%)

Spirituality: 5.3% (2.4%)

Quality of Life: 8.5% (3.9%)

Employment: 3.2% (2.4%)

Concrete/Material requests: 1% (2.4%)

Training in Activities of Daily Living: 13.8% (13.5%)

Family Contact: 1 (3.1%)

Travel: 0% (0%)

Choice making: 0 (0.7%)

Privacy: 0% (0%)

Clinical Services/Issues: 13.8% (14.3%)

Hobbies: 10.6% (7.9%)

Recreation: 9.5% (5.5%)

Safety/Cared For: 1% (1.5%)

Day Program: 0% (0%)

Owning Home: 0% (0%)

Helping Others: 0% (0%)	Helping Others: 0% (0%)
Staff Attention: 3.7% (1.4%)	Staff Attention: 0 (0.7%)
Computer Skills: 3.7% (0%)	Computer Skills: 1% (0%)

Evaluation and comparison of Service Participant and Advocate Generated Valued Outcomes:

1) With regard to Service Participant Generated Valued Outcomes, the top two categories in this year's survey are Hobbies, which accounts for 22.6% of Valued Outcomes (slightly up from 20.5% last year) and Recreation, which accounts for 18.8% (significantly higher than last year's 8.8). Taken together, these two categories account for 41.4% of Service Participant Generated Valued Outcomes. This marks a change from last year, where Hobbies and Training in Activities of Daily Living (which accounted for 11.7% of Valued Outcomes last year but only 9.4% this year) made up the top two Service Participant Generated Valued Outcomes categories. It should be noted that while this year's rate of Service Participant Generated Valued Outcomes in the category of Training in Activities of Daily Living decreased over the course of this year, it remains higher than the 3.5% found in the 2022-2023 report and lower than the 13% of Valued Outcomes this area accounted for in the 2021-2022 report; it seems, then, that for some reason we cannot quite figure out, this category is the most volatile of the categories focused upon by Service Participants.

2) The top Advocate Generated Valued Outcome categories are Clinical Services/Issues, Training in Activities of Daily Living, and Social Skills & Opportunities which each account for 13.8% of Valued Outcomes. Taken together, these three categories make up 41.4% Advocate Generated Valued Outcomes in this year's survey.

3) In last year's study, Health Issues was the fourth most common Advocate Generated Valued Outcome accounting for 12.7% of Advocate Generated Valued Outcomes. This year, Health Issues (primarily but not exclusively related to weight) accounts for 8.5% of Advocate Generated Valued Outcomes and falls to sixth place in the rankings. Ahead of

Health Issues are Hobbies, which accounts for 10.6% of Advocate Generated Valued Outcomes (up from 2.1% last year), and Recreation, which accounts for 9.5% of Advocate Generated Valued Outcomes (up from 5.2% last year). This means that while the top two Service Participant Generated Outcome categories, which account for 41.4% of Valued Outcomes expressed by Service Participants, account for only 20.1% of Advocate Generated Valued Outcomes, the relative importance of these categories in the eyes of the advocates did improve over last year.

4) The top three categories of Advocate Generated Valued Outcomes (Social Skills & Opportunities, Training in Activities of Daily Living, and Clinical Issues/Services), while accounting for 41.4% of Valued Outcomes expressed by Advocates, account for only 20.6% of Service Participant Generated Valued Outcomes. The greatest divergence between Service Participants and their Advocates in these areas falls in the category of Social Skills & Opportunities, which accounts for 13.8% of Advocate Generated Valued Outcomes but only 1.8% of Service Participant Generated Valued Outcomes. This appears to be due in large part to Service Participants whose Advocates want them to, "Be more engaged" or "Take part in more social events" being content with either their current social base or simply doing their own thing. This is further reflected in the fact that the CQL POMS category of, "People have friends" remains in the "highly satisfied" range on this year's Quality of Life Assessment. It is unclear how much of Advocate desires in this area are based on diagnostic characteristics of their loved ones or the people they serve (i.e. there is a fine line between saying, "I wish she was more engaged" and saying, "I wish her autism was less severe").

5) The question of diagnostic expectations is also evident in the areas of Training in Activities of Daily Living and Clinical Issues/Services, which each account for 13.8% of Advocate Generated Valued Outcomes and 9.4% of Service Participant Generated Valued Outcomes. In these area, it appears that Service Participants are happier with their own skills levels than are their Advocates and more focused upon things that bring them joy (recreation, hobbies) than upon, "things they should do". Still, the overlap between Service Participant and Advocate Generated Valued Outcomes in these areas is greater

than in previous years, implying a greater desire on the part of Service Participants to become more independent and to have their clinical issues addressed (primarily amongst Service Participants who find anxiety to be getting in the way of their quality of life).

6) The areas of greatest distinction between the groups are in the categories of hobbies, which accounts for 22.6% Service Participant Generated Valued Outcomes but only 10.6% of Advocate Generated Valued Outcomes (a difference of 10%, slightly lower than last year's difference of 12.6%); Social Skills and Opportunities, which accounts for 13.8% of Advocate Generated Valued Outcomes but only 1.8% of Service Participant Generated Valued Outcomes (a difference of 12%, slightly higher than last year's difference of 10.6%); and Recreation, which accounts for 18.8% of Service Participant Generated Valued Outcomes but only 9.5% of Advocate Generated Valued Outcomes (a difference of 9.3%, up from a 5.5% difference last year). The greatest binary distinction noted this year was in the category of Health Issues, which accounts for 8.5% of Advocate Generated Valued Outcomes but no Service Participant Generated Valued Outcomes.

7) As seen in previous years, the categories of owning a home; privacy; and choice making, which are categories often emphasized in rights-based regulations, constituted 0%, 0%, and 0% of both Service Participant and Advocate Generated Valued Outcomes. As noted in previous years' reports, this may reflect our individuals' satisfaction in these areas as opposed to their disinterest in them. It also means, however, that from a person-centered perspective resources spent on documenting or supporting these areas may be more effectively spent elsewhere.

8) All told, the overlap between Service Participant and Advocate Generated Valued Outcomes is 56.1%, reflecting a drop in agreement of 4.1% compared to last year's agreement of 60.2%. This level of agreement remains greater than the 48.5% overlap seen in the 2022-2023 survey but below the 64.75% and 64% overlap observed in the prior two years. At the same time, as noted above, increases were seen in the areas most focused upon by the various constituencies, namely, increases in Valued Outcomes

expressed by Service Participants in the areas of Training in Activities of Daily Living and Clinical Services/Issues (which are viewed highly by Advocates) and Valued Outcomes expressed by Advocates in areas of Hobbies and Recreation (which are viewed highly by Service Participants.

Sample responses for individual Valued Outcome categories:

General Development/Independence:

This category relates to general statements regarding growth and independence as ideals but not related to specific skills or training.

Sample responses:

"Y.N. would like to be more independent."

"I want to do more things on my own."

Academics:

This category relates to Valued Outcomes regarding formal education and schooling.

Sample responses:

"Improving writing and math skills."

"I want to get my GED."

Social Skills Development and Opportunities:

This category relates to Valued Outcomes regarding meeting specific people or developing specific types of relationships, but not romantic relationships or marriage.

“I want to make more friends.”

“M.B. will enroll in a social skills class.”

"I want to meet more people."

Marriage:

This category relates to Valued Outcomes specifically regarding marriage.

Sample Responses:

"I want get married."

"I want to have a boyfriend so that I can get married."

“I want his relationship with his wife to be a happy one for both of them.”

Community Participation:

This category relates to Valued Outcomes regarding involvement in the general community or in community functions.

Sample responses:

"She would like to take part in community functions."

"She would like to go out into the community more."

“He would like to be more involved in the community.”

Spirituality:

This category relates to Valued Outcomes having to do with religious observance, engagement, and spirituality.

Sample responses:

"I want to attend shul (synagogue) more."

"To learn Torah."

"I want to spend more time learning (Jewish texts)."

“I would like to learn to read Hebrew.”

Quality of Life:

This category relates to general statements about overall wellbeing and happiness.

Sample responses:

"To be happy."

“I want to know he is happy.”

Concrete/Material Requests:

This category relates to specific requests for objects not related to travel or hobbies.

Sample responses:

“I want to get the new book by Rabbi Frand.”

“I want a computer.”

“I want a bigger television.”

Travel:

This category relates to specific requests for travel.

Sample responses:

"I want to go to Florida."

"I want to go to a luxury hotel for Pesach (Passover)."

"I want to visit Israel."

Employment:

This category relates to Valued Outcomes having to do with employment and workplace issues.

Sample responses:

"I want a real job instead of going to program."

"I want a different job."

“E.S. would like to have more hours at his job.”

“J.W. would like to have part time job as opposed to a full time job.”

Training in Activities of Daily Living:

This category relates to Valued Outcomes having to do with the development of specific daily living skills.

Sample responses:

“M.D. needs to learn money management skills.”

“S.G. needs to learn to shower daily.”

“I would like to learn how to cook my own dinner.”

Family Contact:

This category relates to Valued Outcomes involving the development or continuation of contact, or related to the level of contact, with the Service Participant's family of origin.

Sample responses:

“Y.M. would like to continue his warm relationship with his family.”

“D.W. would like her father to be more involved in her daily life.”

“I want to visit my family more.”

“I don’t want to go to my parents for the holidays this year.”

Health Issues:

This category relates to Valued Outcomes having to do with the physical health of the Service Participant, but does not include arranging medical appointments or addressing psychiatric issues.

Sample responses:

"E.C. needs to make better, more nutritious food choices."

"P .L. needs to lower his cholesterol through diet and exercise."

"I could stand to lose some weight."

Clinical Services/Issues

This category relates to the scheduling of medical appointments, addressing psychiatric issues, arranging therapy services, securing funding, and obtaining entitlements.

Sample responses:

“E.L. needs to be enrolled in Medicare.”

“He needs to reduce his anxiety.”

“M.Y. will be less depressed.”

“All appropriate SSI paperwork will be submitted in a timely fashion.”

“She needs to be able to focus better on tasks.”

Choice Making:

This category relates to one's ability to make choices and be provided with choice-making opportunities.

Sample responses:

"I want to be able to choose the Sunday trip."

"S.G. should be able to choose her own outfits."

"I want to pick my own things to decorate my room."

Privacy:

This category relates to one's ability to have his or her own "private space", both literally and figuratively.

Sample responses:

"Sometimes I just want to be by myself."

"I don't always want to be around other people all the time."

"I want my own room."

Hobbies:

This category deals with training in skills or the provision of opportunities that are not necessarily social or academic, and which do not promote independence.

Sample Responses:

“He’s so musical. I would like Reuven to learn to play guitar.”

“I want more key chains for my key chain collection.”

“I would like to continue playing piano.”

“I like building models with the staff.”

Recreation:

This category deals with the provision of experiences that are not necessarily social or academic, and which do not promote independence. Whereas hobbies (the previous category) discusses desired “activities”, this category discusses desired “experiences”.

Sample Responses:

“I want to go to more museums.”

“I want to go to Great Adventure.”

“I want C.R. to be taken to the park more.”

Safety/Cared for:

This category deals with the basic protection of the Service Participants and the assurance that the Service Participants’ basic needs will continue to be met by the agency.

Sample Responses:

“I want to know that my daughter is safe and well taken care of.”

“I want to know that Makor will always be there for him.”

Day Program:

This category deals with issues and concerns directly related to attendance at a day program or the provision of day program services. Issues such as, “I want him to be happy at program” are better suited for the “Quality of Life” category, while issues such as, “I want the day program to work on his social skills” are more suited to the “Social Skills and Opportunities” category.

Sample responses:

“I want to switch day programs.”

“I want him to go to a good day program when he graduates from school.”

“I want to know that they will let him stay in his day program.”

NOTE: Similar to last year, in this year’s survey all Valued Outcomes related to day programs were positive, e.g. “I like my day program and want to keep going”.

Staff Attention:

This category deals with issues and concerns directly related to the quality and quantity of individualized attention from staff members.

Sample responses:

“I would like more individual attention from staff.”

“I want staff to spend more time with me.”

“I want Jacob, my favorite counselor, to spend more time with me.”

Computer Skills

Sample response:

"I want to learn how to use a computer."

“He should learn how to use Zoom by himself.”

Part Three: Quarterly Council Meetings Review

Quarterly Council Meetings (formerly, “Individual Council Meetings” and, before that, “Consumer Council Meetings”) fulfil a number of roles. First, they formalize service participant involvement in the decision making process. Second, they try to help our service participants become less egocentric by providing individuals with the opportunity to discuss issues and desires from a residence perspective (as part of a group) rather than a personal one. Each residence is mandated by agency policy to hold at least four Council meetings per year.

A total of 81 meetings were held between January and December of 2024 in 21 homes. At these meetings, a total of 15 different topic areas were raised. Frequency of topics by percentage as identified by the Makor Quality Assurance Department are as follows (keep in mind that totals may not equal 100% due to rounding errors):

Holiday Planning: 27% (up from 17.5% last year)

Activity Planning: 16. 5% (up from 15.4% last year)

Vacation Planning: 14% (up from 3.5% last year)

Doing/Buying Something: 10. 5% (up from 13% last year)

Health/Safety: 8% (up from 6% last year)

Developing Relationships- Peers/Staff: 4.75% (up from 1.2% last year).

Physical Plant Maintenance: 4.5% (steady from 4.7% last year)

Food Variety: 3.5% (down from 4.7% last year)

Home Responsibilities/Chores: 2.5% (down from 6% last year)

Individual Growth/Development: 2.5% (down from 4.7% last year)

Developing Relationships- Community: 2.5% (up from 1.2% last year)

Individual Interests/Enjoyment: 1.25% (down from 7% last year)

Family Interactions: 1.25% (down from 2.4% last year)

Health/Diet: 1.25% (steady from 1.2% last year)

It should be noted that the general category of "Developing Relationships- Peers/Staff", which rose from 1.2% last year to 4. 75% can be further broken down into two subcategories. The first is how individuals communicate with staff and others in the home, which made up 3.5% of total topics raised this year. The second deals specifically with complaints raised about other individuals, which comprised 1.25% of total topics raised this year. Neither of these subcategories were specified in last year's report (in other words, both are up from 0% last year) and are being subsumed under the general category of developing relationships-Peers/Staff because both are connected to the overall category of relationship-building within the homes as opposed to within the community. Practically speaking, this means that the jump from last year to this year in this general category most likely reflects additional specific comments made during meetings this year over last year (such as a service participant relating a specific complaint about another service participant) that may not actually be appropriate for a Quarterly Council Meeting.

On the flip side, the decrease in categories such as, “Individual Growth/Development” (2.5% this year down from 4.7% last year) and, “Family Interactions” (1.25% this year down from 2.4% last year), coupled with the significant increase in the categories of, “Holiday Planning” (27% this year up from 17.5% last year) and, “Vacation Planning” (14% this year up from 3.5% last year) most likely reflects the fact that Quarterly Council Meetings overall are focusing more on the broader, residence-wide/group topics at which these meetings are aimed. Indeed, the move from monthly to quarterly meetings may have helped both staff and service participants distinguish these meetings from the regular individual and group conversations about personal issues and spontaneous planning that occur regularly throughout the week.

The categories of Individual Supports, which comprised 4.7% of last year’s topics; Birthdays/Anniversary/Celebrations, which comprised 2.4% of last year’s topics; and Behavioral Support, which comprised 1.2% of last year’s topics were not observed in this year’s meetings, further indicating that topics that are, in actuality, more individualized and self-centered are being properly raised in individual conversation rather than during these broader council meetings. The area of Outings/Trips, which comprised 2.4% of last year’s topics, is included this year under the general categories of Activity Planning or Vacation Planning.

To further develop the distinction between Quarterly Council Meetings and the individual and group conversations with staff that occur regularly, the Council Meeting Handbook was recently revised and distributed. We hope that this guide will have a positive impact on future meetings.

When attempting to map out these findings with the categories used to discuss the Valued Outcomes Assessment, we find the following:

Personal Enjoyment:

QCM Categories: Holiday Planning; Activity Planning; Individual Interests/Enjoyment: 44.75%

VOA Categories: Hobbies; Recreation: 41.4%

Concrete Requests:

QCM Categories: Doing/Buying Something; Food Variety; Physical Plant Maintenance: 18.5%

VOA Categories: Concrete/Material requests: 5.6%

Heath:

QCM Categories: Health/Safety; Health/Diet: 9.25%

VOA Categories: Health Issues: 0%

Activities of Daily Living:

QCM Categories: Home Responsibilities/Chores: 2.5%

VOA Categories: Training in Activities of Daily Living: 9.4%

Individual Growth and Development:

QCM Categories: Individual Growth/Development: 2.5%

VOA Categories: General Development/Independence: 1.8%

Travel:

QCM Categories: Vacation Planning: 14%

VOA Categories: Travel: 0%

Family Contact:

QCM Categories: Family Interactions: 1.25%

VOA Categories: Family Contact: 3.7%

Social Skills and Opportunities:

QCM Categories: Developing Relationships- Peers/Staff; Developing Relationships-Community: 7.25%:

VOA Categories: Social Skills & Opportunities: 1.8%

Viewed this way, we find a 54.35% overlap between topics raised during Council Meetings and topics raised as Service Participant Generated Valued Outcomes. It is interesting to note that the most common topic raised during both the Valued Outcomes Assessments and Quarterly Council Meetings was in the broader area of personal enjoyment, indicating that much of the Quarterly Council Meetings focused on the very topics that individual's seem to view as their most important individual Valued Outcomes. While this finding can be viewed as positive, it should nevertheless be viewed in context; topics discussed during Quarterly Council Meetings are, in some ways, the exact opposite of the intended focus of Valued Outcome Assessments in that the Valued Outcome Assessments deal with *individualized* wants and concerns while Quarterly Council Meetings very openly focus on *collective* wants and concerns. Thus, some topics brought up during Valued Outcome Assessments would in fact be pushed aside during Quarterly Council Meetings (i.e., "That's a personal topic just related to you, so let's talk about that privately later."). Furthermore, Quarterly Council Meetings may, to a large degree, be viewed as one aspect of the *method for addressing* individual Valued Outcomes as opposed to an additional source of Valued Outcomes. In other words, the reason that personal enjoyment topics were raised so often during Quarterly Council Meetings may reflect this area's status as the most shared Valued Outcomes among Service Participants. At the same time, the reason why other areas raised during Quarterly Council Meetings might not be reflected in the Valued Outcome

Assessments and vice versa may be because these wants and concerns are, in fact, being addressed either individually or during Council Meetings as appropriate. As such, the particular comparison of Quarterly Council Meetings and Valued Outcome Assessments, while included here to maintain parity with last year's report, may not be as enlightening as originally assumed.

Nevertheless, Quarterly Council Meetings remain an important vehicle for giving our Service Participants a voice in how Makor addresses their wants and concerns; formalizes service participant involvement in the decision making process; and encourages less egocentric and more collectivistic thinking. These meetings therefore remain an important and successful forum for raising topics of subjective value in the lives of the people we support.

Part Four: Recommendations

<u>Follow up of last year's recommendations (last year's recommendations are listed in *italics*):</u>

1) *All results of this year's Quality of Life and Valued Outcome Assessments should be shared with appropriate agency representatives through discussions at managers' meetings, CEC meetings, Council Meetings, and Home Staff meetings, and through distribution of this written report.*

Results of last year's assessments were distributed in the ways specified in this recommendation.

2) *Emphasis should be placed on the single area on the CQL POMS that elicited a merely "satisfied" response, namely, "People realize personal goals". This could be accomplished not only by making sure people do, to the best of their abilities, realize their personal goals but also by supporting individuals to better recognize when improvement is experienced in realizing their goals. This is particularly true when viewing "personal growth" goals (such as engaging in hobbies or skills training in areas*

of interest to the individual) where "doing more" or "getting better" may be a more abstract, less definable, or elusive achievement.

This was accomplished as evidenced by the jump in the area of, "People realize personal goals" from the merely "satisfied" range to the "very satisfied" range. However, emphasis in this one area may have come at a cost as reflected in a generalized decrease in satisfaction scores in other areas.

3) *In tandem with recommendation #2, staff should be made aware of the apparent emphasis by our Service Participants on the area of Hobbies and given tools to discover these interests in the people with whom they work.*

This was accomplished through staff training, as evidenced by the increase in both Individual Generated Valued Outcomes in the area of Hobbies (from 20.5% last year to 22.6% this year) and Advocate Generated Valued Outcomes (from 7.9% last year to 10.6% this year), as well as an increase in the satisfaction score in the CQL POMS area of People choose personal goals (from 4.38 last year to 4.63 this year).

4) *Individual Council Meetings should continue to be held.*

This recommendation was implemented (with the change in terminology from "Individual Council Meetings" to "Quarterly Council Meetings"), as evident from this year's report.

5) *Use of the Quality of Life and Valued Outcomes measures used in this year's survey should continue.*

This recommendation was implemented, as evident from this year's report.

<u>Recommendations based on the 2023-2024 findings:</u>

1) All results of this year's Quality of Life and Valued Outcome Assessments should be shared with appropriate agency representatives through discussions at managers' meetings, Quarterly Council Meetings, and Home Staff meetings, and through distribution of this written report.

2) Focus should be given on enhancing the overall mood of the agency in an effort to improve generalized Quality of Life scores, recognizing that the findings of this year's study remain excellent with scores reflecting satisfaction in the "very satisfied" or "highly satisfied" ranges in all areas assessed by the CQL POMS.

3) Quarterly Council Meetings should continue to be held.

4) Use of the Quality of Life and Valued Outcomes measures used in this year's survey should continue.

5) While all measures should continue to be used, comparisons between topics raised in Quarterly Council Meetings and Valued Outcome Assessments should be reconsidered as these measures do, in fact, appear to have different goals that do not necessarily overlap as neatly as such comparisons imply.

6) Instead of reviewing Quality of Life scores covering the survey year (June – May), Quality of Life Reviews should cover the calendar year to better align with the other measures used in our annual report. That done, it is recommended that the annual Quality of Life Report be published in February instead of May in the coming year.

Respectfully Submitted,

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Director of Innovation
May 25, 2025