

HOPE HAVEN, INC.
AGENCY MEASUREMENT AND MANAGEMENT PLAN
FY 2026

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Report Period: 7-1-2025 to 6-30-2026

Date: September 2026

This report summarizes highlights identified by Hope Haven Managers and Directors in management reports written to describe their programs' outcomes. Upon request, a comprehensive report of all services/programs is available from Hope Haven's Director of Quality Improvement and Service Planning.

AGENCY-WIDE DATA

- € Hope Haven served **855 people**, an increase of **38 people (4.7%)** over FY2025.
- € **651 people (76%)** resided in Iowa and **204 (24%)** resided in Minnesota.
- € Age distribution was broad: **52 (6%)** were under 18, **281 (33%)** were ages 18–29, **294 (34%)** were ages 30–49, and **228 (27%)** were age 50 or older.
- € The population served was **58% male (493)** and **42% female (362)**.
- € **79 people (9%)** identified as belonging to an ethnic minority group.
- € The agency received **134 referrals** during the year.
- € Hope Haven employed **650 people agency-wide**, including **574 Hope Haven Services employees, 64 DHH employees, and 12 HHIM employees**.
- € Agency-wide employment remained stable compared with FY2025, increasing from **648 to 650 employees**.
- € The largest payer groups were **Wellpoint, serving 300 people (35%), and ITC, serving 229 people (27%)**.
- € A program breakout includes:
 - ⌞ Employment Services: = 451 (146-MN; 305-IA)
 - ⌞ Mental Health & Recovery Services
 - Intensive Psychiatric Rehabilitation (IPR)=37
 - Peer Support=89
 - ⌞ My Day (Day Habilitation) Services
 - Day Hab ID: 226
 - Day Hab MI: 47
 - ⌞ IA Community Living (Daily)=209
 - ⌞ IA Supported Community Living (Hourly SCL & Respite) =260 Unduplicated
 - ⌞ MN Community Living =14
 - ⌞ Residential-Based Supported Community Living (RBSCL-Children Svc.) = 28

Referral Summary

- The agency received 134 referrals, with the largest numbers involving Community Living and RBSCL services; 25 referrals were determined ineligible because Hope Haven could not meet the person's level-of-care needs or lacked available resources.
- At year-end, 206 of 233 bedrooms were occupied, resulting in an overall occupancy rate of 88%. Hope Haven continued using technology, virtual interviews, and a cross-department review process to improve referral efficiency, while adapting to regional system changes and HHS requirements. In the coming year, the agency plans to evaluate the Habilitation referral process so people with urgent placement needs can receive faster consideration.

Satisfaction Survey Outcomes: (Scale is 1: Very Unsatisfied to 5: Very Satisfied.)

- € **Guardian/Family:** 126 satisfaction surveys were collected specifically from this group of individuals. The scores averaged an outcome of 4.6 on a 5.0 scale.
- € **Members:** There were 218 surveys collected directly from members served. The average score result was 4.5 on a 5.0 scale.
- € **Agency Wide Survey Results:** The average score when combining the members served, and the guardian/family was 4.5. This met our set outcomes of 4.0 or higher.
- € **Accessibility and Barriers Survey:**
 - € **Overall Rating:** 51 returned surveys from guardians or primary caretakers rated Hope Haven facilities high, with an average score of **4.33/5**. About **85%** of respondents rated facilities either 4 or 5 out of 5, indicating strong overall satisfaction with physical environments. Hope Haven services also received strong ratings, averaging **4.24/5**. Approximately **80%** of respondents gave ratings of 4 or 5, suggesting broad confidence in service delivery.
 - € **Accessibility & Barriers:** The majority (**67%**) reported **no barriers experienced**. Among those who did report barriers, **communication-related issues (15%)** were by far the most common concern, exceeding all other barrier categories. Feedback from these 7 individuals indicated that there could be delayed responses, lack of information sharing, inconsistent follow-through, and exclusion of guardians or families from important communications.

A smaller but influential group identified systemic barriers involving organizational policies, service availability, staffing limitations, and restrictions on community participation. Several stakeholders expressed a desire for more outings, social opportunities, transportation options, and community integration activities for supported individuals
- € **Employee Orientation Surveys:**
Each quarter, staff who have completed an annual evaluation receive a satisfaction survey. General results are posted on the HUB, so employees can review feedback from their peers. Service directors also review individual comments quarterly and share relevant information with the management team to support improvements in employee satisfaction. Based on this feedback, the agency updated its PTO payout policy during the past fiscal year.
- € **Employee Exit Surveys:**
Thirty-seven exit survey responses were received in fiscal year 2026. Of these only returned surveys, 78% indicated positive exits. Of the responses to question number 5, which was, "What was your main reason for leaving Hope Haven, 8 included items that appeared negative, such as a lack of respect from supervisor, feeling stress at work due to the needs of a member served, and not feeling heard or appreciated. Two indicated it was due to pay. Some of the other responses included leaving due to personal health issues, relocating, needing to focus on school, or not fitting their schedule.

Quality Improvement Outcomes

- Hope Haven met 5 of the 8 HCBS established outcomes which included those around incident reports, medication error rates, HCBS settings, response to grievances, and agency satisfaction. Documentation error rates, service record completion, and personnel orientation training record maintenance fell below desired outcomes. However, we have

seen a marked improvement in personnel orientation training meeting expectations. We went from 2% to 35%, FY 25 to FY 26. This continues to be monitored to obtain further improvement. For all unmet outcomes, remediation plans are in place to address each area that didn't meet the desired outcomes.

- The agency continues to review ways that the EHR system, Setworks, can be used to maintain data in a more consistent and readily available way. During this fiscal year, new tracking tools were developed for the Emergency Drills and Safety checklist, department medication reviews, and team meeting minutes. These are available agency wide starting in Fiscal year 2027. Additionally, the Service Coordination team has been streamlining all their training documents and staff meeting notes so that they are easily accessible in one system. RBSCS services have also continued their integration into the EHR tools.
- The agency's Training and Compliance Manager monitors whether staff are meeting regulations on training requirements. This oversight provides support to management staff to alert them when training is needed for staff. Since tracking this data starting October 2025, all RBSCS staff have met expectations each month throughout this fiscal year. The staff working in Habilitation services have averaged an 84% success rate in August '25-June '26. If staff do not meet expectations, the manager is notified and corrective actions are implemented to ensure staff get caught up.
- The agency started doing in-person new hiring training. We do these in Rock Valley and Spencer. 126 attended this training in fiscal year 2026.
- The Quality Improvement team was expanded in FY 26 to allow for more staff to do documentation review. The process undergoes consistent reviews to work with teams to determine best practices and system changes to help streamline documentation. Documentation completion and accuracy are a part of the agency's Pay for Performance criteria and will continue to be to ensure staff understand the significance to timely and accurate entry of documentation.
- The Director of QI and Service Coordination participates in the Service Director meetings to ensure communications are maintained across services.

Person Centered Services:

Hope Haven's person-centered planning is done with, not to, everyone. Services reflect the person's strengths, preferences, needs, goals, and desired outcomes, with active involvement in assessment, planning, decisions, and ongoing review. Plans promote choice, autonomy, dignity, achievement, and community participation while identifying support for living, learning, working, and socializing in preferred settings. Family, natural support, and team members participate as desired, while the person's rights, preferences, and goals remain central to service planning and delivery.

Additional Ministry Services

- Between July 1, 2025, and June 30, 2026, we had 3 youth retreats in Spencer, Storm Lake and Sioux Center and 25 youth attended with 32 staff and volunteers helping.
- In the Fall of 2025, we had three adult retreats in Worthington and Milford and Sioux Center, and 101 adults attended with 46 staff and volunteers helping.
- In the Spring of 2026, we also had three adult retreats in Worthington and Milford, and Orange City. 154 adults attended and there were 72 staff and volunteers helping out.

Communication/Networking:

- Hope Haven's marketing, HR, and IT teams support both internal and external communications. Internal communication is supported through the HUB, DayForce Messaging, Networks Messaging, and email communications. Externally, social media apps (Facebook, Instagram, and LinkedIn), mailings and Hope Haven's website are used to communicate. The website, www.hopehaven.org, is again being revamped to become a much more robust information tool. This is rolling out September of 2026. Hope Haven's mailings include 3 Horizon's newsletters (Spring, Summer, and Winter) and an annual report (Fall). Approximately 5000 of these mailings are completed each time.
- This AMMP report provides a review of each service delivery area and an overall summary of the services provided at Hope Haven in a fiscal year. This report, upon completion, is shared with all the service teams. A summary of the AMMP report and the agency's annual report are always accessible through Hope Haven's website.
- There is several additional networking events used to market Hope Haven's services and fundraise. Examples of these events include: the Annual Hope Haven auction, fishing benefits, golf benefits, a dessert auction, and concerts.

Extenuating and Influencing Factors that Impacted the Agency/Programs

- Workforce shortages, turnover, and retention challenges
- State-level system redesigns and policy changes. This is particularly an issue when enrolling children into RBSCCL due to the need to obtain Variances.
- Financial pressure from rising labor and operating costs
- Reduced referrals and occupancy challenges
- Increasing complexity of mental health and behavioral support needs
- The agency is also working to influence the workforce shortage issue and to support member independence by implementing technology services through Remote Support and Telehealth. There are barriers at times which include the additional assessment needs, inconsistent payments from MCO's for technology and the lack of buy in by caretakers due to fears around no in-person support.

EMPLOYMENT SERVICES

Facility Based Employment

Total Served: 36

- ✓ *Key Outcome:* 100% of people in this program spent time on paid work.
- ✓ *Key Stat:* 50% of the people in this program are 50 or over.
- ✓ *Key Deficit:* 3% of individuals receiving FBE services transitioned to community employment and/or supported employment, short of the goal of 25%.

Integrated Community Employment

Total Supported: 279

- ✓ *Key Outcome:* Average hourly rate increased from \$11.55/hour to \$11.73/hour.
- ✓ *Key Stat:* Services provided in 36 different communities in a variety of industries
- ✓ *Key Deficit:* The average hours worked per week decreased from 17.01 hours to 13.4 hours.



Job Placement Services

Total Supported: 171

- ✓ **Key Outcome:** Hourly starting wages increased in both states. In Minnesota, the starting wages increased from \$13.77/hour to \$15.23/hour. In Iowa, the starting wages increased from \$11.01/hour to \$12.91/hour.
- ✓ **Key Stat:** The average days between enrollment and first date of service was 24, an improvement over 41 days the year prior.
- ✓ **Key Deficit:** Job placement services achieved 50% placement, short of the 70% placement goal. This is also a decrease of 17% from last year.

Employment Planning Services

Total Supported: 48

- ✓ **Key Outcome:** 36% increase in worksite readiness assessments
- ✓ **Key Stat:** 75% of members using this service were male.
- ✓ **Key Deficit:** 42% of persons completing employment planning services were engaged in job placement services or community employment within 90 days. This is a significant decrease from 81% last fiscal year.

MY DAY (DAY HABILITATION) SERVICES

Day Habilitation (ID)

Total Supported: 226

- ✓ **Key Outcome:** All HCBS Settings Assessment criteria were met with a 100% success rate.
- ✓ **Key Stat:** 49% of those served are under the age of 40, while 8% of those served are 65 or older.
- ✓ **Key Deficit:** Expenses were 112% of income, missing the goal of 97% or less.

Day Habilitation (MI)

Total Supported: 47

- ✓ **Key Outcome:** Success rate of 97% for clients having meaningful connections with person(s) from the community during day hab, well exceeding the goal of 80%.
- ✓ **Key Stat:** 59% of persons served are aged 18-29
- ✓ **Key Deficit:** 83% of persons served were free from having a hospitalization due to mental health related issues. This is a decrease from 97% the year prior and fails to meet the goal of 90%.

COMMUNITY LIVING SERVICES

Residential-Based Supported Community Living

Total Supported: 28

- ✓ **Key Outcome:** Expenses were 64% of the income, meeting the goal of 97% or less by a wide margin
- ✓ **Key Stat:** 50% of clients served were between the ages of 15 and 17 years old.
- ✓ **Key Deficit:** Employee retention for 2 years or more was 67%, falling short of the goal of 80%. However, this is a significant improvement over the 34% retention rate in FY 2025.

Daily SCL / HAB Homes

Total Served: 209

- ✓ **Key Outcome:** Employee retention for 2 years increased from 57% to 78%, nearly achieving the goal of 80% and ending a three-year streak of declining employee retention rates.

- ✓ *Key Stat:* 12 homes receive supports provided through remote technology
- ✓ *Key Deficit:* Bed occupancy was maintained at 90% or more for 5 of 12 months, missing the goal of 8 of 12 months.

Supported Community Living / Hourly & Respite

Total Supported: 260

Unduplicated SCL/Hab-Hourly-244, Unduplicated Respite: 46

- ✓ *Key Outcome:* Satisfaction survey results increased from 4.1 to 4.6 out of 5.
- ✓ *Key Stat:* 21% of clients served were age five to twenty-one, 25% were aged twenty-two to twenty-nine, 28% were aged thirty to forty-nine, and 24% were fifty years or older.
- ✓ *Key Deficit:* Expenses to income were at 109% for SCL Hourly services, and 140% for respite services, missing the goal of 97% or less.

Minnesota Services

Total Supported: 14

- ✓ *Key Outcome:* The Average days from enrollment to first date of services decreased from 28 days last year to 16 days this year.
- ✓ *Key Stat:* 10 of the 14 clients (71%) are aged 40 or older.
- ✓ *Key Deficit:* The expenses to income ratio was 99% instead of the desired 97%.

MENTAL HEALTH & RECOVERY SERVICES

Unduplicated in these 2 programs: 145

Intensive Psychiatric Rehabilitation

Total Supported: 37

- ✓ *Key Outcome:* 92% of members were free from having a hospitalization due to mental health reasons, an increase from 75% last fiscal year.
- ✓ *Key Stat:* 51% of the members deal with Schizophrenia Spectrum disorders, 41% anxiety disorders, 38% Depressive disorders, and 27% with Bipolar related disorders.
- ✓ *Key Deficit:* Although all three cohort groups achieved the 80% attendance goal, they all saw slight decreases in attendance, ranging from 1% to 3%.

Peer Support

Total Supported: 89

- ✓ *Key Outcome:* 92% of persons served were free from having a mental health related hospitalization this year. This meets the goal of 90% and is an increase over 83% the year prior.
- ✓ *Key Stat:* The average satisfaction rating was 4.8 out of 5, with 5 being "highly satisfied" with the services provided. This is the highest satisfaction rating of all Hope Haven's programs or services.
- ✓ *Key Deficit:* The number of members supported during this time frame decreased from 122 the year prior to 89 this year. This may in part be due to the number of Peer Support Specialists decreasing from 8 to 7.