

01030 - ADMINISTRATION

Consequences of Not Funding this Program

This program provides the administrative structure necessary to support the daily functions of the PSH&TC programs that provide habilitation, active treatment and board and care to ICF/IID residents and for the Sexual Predator Treatment Program individuals who are reintegrating into the community. Without funding for this overhead program, PSH&TC would be forced to close. The IID individuals served at PSH&TC would need to be relocated into other community agencies or living arrangements that are likely ill-equipped to deal with their special needs. The SPTP program participants would need to be returned to the Department of Corrections and their transition plans cancelled. Approximately 500 employees would lose their income as positions would no longer exist.

	Statutory Basis	Mandatory vs. Discretionary	MOE/Match Rgt.	Priority Level
Specific	76-1406, 76-1407, 76-1409, 76-1409a, and 76-1415. Also applicable are 75-Article 29 K.A.R.'s relating to Civil Service and certain 75-Article 37 K.A.R.'s relating to the Department of Administration and 76-12a01-76-12a34, 76-12b01-12b11, 45-403, and applicable State and Federal Fire Code regulations.	Mandatory	No	1

Program Goals

- A. Effectively administer and oversee the PSH&TC programs that provide effective habilitation, rehabilitation, active treatment and care to residents of the facility in a safe, healthy and home like living environment with consideration for the informed personal lifestyle choices of each resident.
- B. Provide budgetary oversight and manage resources within budgetary authority accounting for all expenditures for supplies, equipment and personnel according to State of Kansas statutes, rules and regulations, as well as maintaining compliance with regulatory and certification agency requirements (CMS, ICF/IID, KDHE, SSA, etc.)
- C. Recruit personnel and manage payroll and fringe benefit programs.
- D. Provide information technology services and communications services throughout the facility.

Program History

This program provides an administrative structure for the people residing at PSH&TC that enables the Superintendent and PSH&TC's Department Managers to organize maximum effectiveness and efficiency in PSH&TC's operation. PSH&TC's operation is directed at implementing supports and services for persons with intellectual and developmental disabilities throughout the fiscal year, and at meeting the requirements of rules, regulations, policies, and standards of relevant state and federal agencies which apply to PSH&TC.	
PSH&TC is currently home to 148 individuals who function within the borderline to profound range of intellectual abilities and receive supports and services within PSH&TC's Habilitation and Treatment Program. About 90% are dually diagnosed; meaning that in addition to having an intellectual disability they also have accompanying psychiatric impairments such as Borderline Personality Disorder, Paraphilias (e.g., pedophilia, bestiality, and necrophilia), Psychotic Disorders and Mood Disorders. The foundation for all services through PSH&TC is within a culture of person directed supports. During the past five fiscal years, there have been 61 discharges and 54 admissions to PSH&TC. COVID-19 significantly impacted admissions and placements during the last half of FY 2020 and most of FY 2021, but as restrictions are lifted, activity in these areas are expected to resume.	
Superintendent	Oversees the operation and administration of PSH&TC in accordance with applicable state and federal regulations.
Risk Management	Ensures people living at PSH&TC are treated with dignity and respect and are free from abuse, neglect, and exploitation in accordance with applicable state and federal regulations.
Information Resources	Maintains information technology equipment and infrastructure for daily operations at PSH&TC and provide support for developed applications to other agencies as needed.
Human Resources	Recruits employees, provides insurance information, and facilitates payroll for the people who work at PSH&TC in accordance with applicable state and federal regulations.
Business & Fiscal Services	Schedules use of vehicles and sees that necessary maintenance is performed to ensure all vehicles are safe for the people living at PSH&TC and staff.

Performance Measures

Outcome Measures	Goal	FY 2019	FY 2020	FY 2021	3- yr. Avg.	FY 2022	FY 2023
1. Number of ICF/IID standards pertaining to Administration.	A	9/9	9/9	9/9	9/9	9/9	9/9
2. Percent of compliance to ICF/IID Certification Survey.	A	100%	100%	100%	100%	100%	100%
3. Number of vouchers processed in SMART within the FY.	B	10,082	12,456	8,159	10,232	8,000	8,000
4. Number of resident financial transactions completed in Client Management System (CMS).	B	29,255	24,648	23,477	25,793	23,500	23,500
5. Direct Support Staff annual turnover rate.	C	27.6%	28.5%	32.2%	29.4%	20.2%	18.7%
6. Total number of new Direct Support Staff hired in the FY.	C	87	66	60	71	55	50
7. Number of Cisco network switches supported.	D	Data Not Recorded	Data Not Recorded	26	26	26	26
8. Number of physical or virtual servers supported.	D	Data Not Recorded	Data Not Recorded	13	13	13	13
9. Number of computer systems supported.	D	Data Not Recorded	Data Not Recorded	220	220	220	220
10. Number of desk phones and cell phones supported.	D	Data Not Recorded	Data Not Recorded	355	355	355	355
11. Number of customized software applications supported.	D	Data Not Recorded	Data Not Recorded	15	15	15	15

Funding

Funding Source	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
State General Funds	\$ 390,936	\$ 566,170	\$ 1,264,798	\$ 884,437	\$ 1,590,016	\$ 1,603,899
Non-SGF State Funds	76,542	96,386	13,538	77,217	77,210	2,075
Federal Funds	895,925	672,391	289,897	918,082	257,024	221,189
Total	\$ 1,363,403	\$ 1,334,947	\$ 1,568,233	\$ 1,879,736	\$ 1,924,250	\$ 1,827,163

01070 - STAFF EDUCATION AND RESEARCH

Consequences of Not Funding this Program

This program provides basic and advanced training for PSH&TC staff. The people who live at PSH&TC require staff who are trained to deal with their special needs. If staff does not receive the specialized training necessary for supporting individuals with intellectual and developmental disabilities, an unsafe living environment with increased risk of injury to individuals and staff results, compliance with ICF/IID regulations is jeopardized and PSH&TC's certification and license as a special ICF/IID state hospital will be rescinded. Without proper certification and license PSH&TC will be forced to close.

Statutory Basis	Mandatory vs. Discretionary	MOE/Match Rgt.	Priority Level
Specific 76-1406, 76-1407, 76-1409, 76-1409a, and 76-1415. Also applicable are 75-Article 29 K.A.R.'s relating to Civil Service and certain 75-Article 37 K.A.R.'s relating to the Department of Administration and 76-12a01-76-12a34, 76-12b01-12b11, 45-403, and applicable State and Federal Fire Code regulations.	Mandatory	No	1

Program Goals

A. Provide staff training and a full range of staff development services to all PSH&TC personnel, promoting research that will contribute to higher quality service and living environments for people with intellectual and developmental disabilities.

Program History

This program was restructured for FY 2022. The new structure will allow a better system for tracking the progress of new staff throughout the training process. All staff will be required to complete their training prior to reporting to their assigned areas of work. The new training format, implemented August 9, 2021, consists of a 2-day basic orientation for all new employees, followed by an additional 3-week New Employee Orientation (NEO) for all direct care staff. NEO is made up of a series of classes focusing on specialized training designed to educate and train staff in detail regarding the delivery of supports and service, as well as the rights and safety for individuals with intellectual/developmental disabilities.

Performance Measures

<i>Outcome Measures</i>	<i>Goal</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>3- yr. Avg.</i>	<i>FY 2022</i>	<i>FY 2023</i>
1. Number of new employees.	A	114	82	79	92	70	60
2. Number of new employees completing two-day basic orientation.	A	New Program: Data not tracked prior to Aug 2021				70	60
3. Number of new employees completing 3-week intensive orientation for direct care staff.	A	New Program: Data not tracked prior to Aug 2021				65	55

Funding

<i>Funding Source</i>	<i>FY 2018</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>FY 2022</i>	<i>FY 2023</i>
State General Funds	\$ 305,723	\$ 368,743	\$ 313,026	\$ 283,427	\$ 346,749	\$ 344,389
Non-SGF State Funds	1,037	160	1,136	420	10,500	10,500
Federal Funds	364	-	593	83,894	58,156	58,278
Total	\$ 307,124	\$ 368,903	\$ 314,755	\$ 367,741	\$ 415,405	\$ 413,167

32900 - SEXUAL PREDATOR TREATMENT PROGRAM (SPTP)

Consequences of Not Funding this Program

This program provides a variety of supports to individuals who are transitioning from a Department of Corrections facility into a community setting. Not funding this program would result in these individuals being transferred back into a correctional facility and their transition programs would be cancelled. Any progress that they had made towards becoming productive members of society would be forfeited. The program would be shut down and the staff would lose their jobs and family income.

Statutory Basis	Mandatory vs. Discretionary	MOE/Match Rqt.	Priority Level
Specific 59-29a01 through 59-29a27	Mandatory	No	1

Program Goals

- A. To safely reintegrate residents into the community as productive members of society and to be independent and live offense free.
- B. Residents will utilize resources, transportation, and coaching to aid in obtaining employment.
- C. Residents will utilize program resources and complete program requirements to achieve transitional release.

Program History

HISTORY: The Sexual Predator Treatment Program (SPTP) completed its seventh full year of operation at PSH&TC in FY 2021. The program serves individuals who have successfully progressed through the residential treatment portion of the Kansas Sexual Predator Treatment Program at Larned State Hospital and have received approval to move to the PSH&TC reintegration facility. These residents continue in treatment while working to safely reintegrate into society. The program began in FY 2014 with only two residents, but by the beginning of beginning of FY 2016, Maple House exceeded its capacity in terms of optimal space and was serving nine (9) individuals. During FY 2014 and FY 2015, K.S.A. 59-29a stipulated that no more than eight SPTP reintegration individuals could reside in one county. Effective July 1, 2015, legislation was passed increasing the number of SPTP reintegration individuals allowed to reside in one county from eight to sixteen. On July 5, 2016, PSH&TC opened a second reintegration facility (Willow House) to support additional residents entering the program. Census varied throughout the following years, maintaining between 8-14 residents per year. COVID-19 impacted admissions, limiting the number of individuals who were allowed to transition into this program. Currently, Willow House is closed and there are 7 individuals living at Maple House, participating in the reintegration program.

At the reintegration facility, residents undergo treatment and training to help them meet additional structured requirements. Only after all objectives have been met will an individual be evaluated for the opportunity to re-enter a public setting. It is expected that residents will spend an average of 4.7 years at the PSH&TC reintegration facility, depending on their compliance with treatment, therapy, and program rules. The program provides a variety of supports to each individual such as a monthly stipend; travel to and from job searches and work settings, and professional counseling. All medical needs, including physician visits, hospital treatment services and prescription medications are also supported by the program utilizing community providers. PSH&TC will provide transportation, supervised internet access, job search skill building, and additional resources essential for obtaining employment. Residents will follow a Treatment Plan, Relapse Prevention Plan, program rules and requirements, program Step System and actively participate in the treatment process to advance to Transitional Release.

Performance Measures

Outcome Measures	Goal	FY 2019	FY 2020	FY 2021	3- yr. Avg.	FY 2022	FY 2023
1. Number of individuals served in the SPTP program during the FY.	A	13	12	9	11	10	11
2. Number of residents employed in community setting.	B	10	12	8	10	10	11
3. Number of residents granted court-ordered conditional release.	C	4	0	0	1	4	1
4. Number of residents meeting transitional release requirements.	C	5	1	4	3	4	2
5. Number of residents returned to Larned State Hospital due to program violation.	C	1	4	1	2	0	0

Funding

<i>Funding Source</i>	<i>FY 2018</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>FY 2022</i>	<i>FY 2023</i>
State General Funds	\$ 1,943,168	\$ 1,970,183	\$ 1,807,171	\$ 1,424,359	\$ 2,037,289	\$ 2,037,289
Non-SGF State Funds	-	-	-	-	-	-
Federal Funds	-	-	(385)	-	-	-
Total	\$ 1,943,168	\$ 1,970,183	\$ 1,806,786	\$ 1,424,359	\$ 2,037,289	\$ 2,037,289

37900 - HABILITATION & TREATMENT

Consequences of Not Funding this Program

PSH&TC would have to close. Approximately 150 individuals with intellectual and developmental disabilities would have to be relocated to other living situations. Many of these individuals are dually diagnosed with extreme behavior issues that could create violent and unexpected consequences for the public. This would place a unpredictable burden on the local community who would have to assume responsibility for these individuals, their mental, medical and physical needs.

Statutory Basis	Mandatory vs. Discretionary	MOE/Match Rqt.	Priority Level
Specific 76-1406, 76-1407, 76-1409, 76-1409a, and 76-1415. Also applicable are 75-Article 29 K.A.R.'s relating to Civil Service and certain 75-Article 37 K.A.R.'s relating to the Department of Administration and 76-12a01-76-12a34, 76-12b01-12b11, 45-403, and applicable State and Federal Fire Code regulations.	Mandatory	No	1

Program Goals

- A. Provide effective habilitation, rehabilitation, active treatment and care to residents of the facility in a safe, healthy, and homelike living environment with consideration for the informed personal lifestyle choices of each resident.
- B. Supplement and extend development of community service provisions for developmentally disabled children and adults, especially through Outreach Services, a statewide program for persons with developmental disabilities and psychiatric impairments.

Program History

There are currently 148 people with intellectual disabilities and dual diagnosis receiving services at PSH&TC. They live in nine different residential cottages located among the 40 buildings on PSH&TC's campus. Most residential units house 13-20 individuals. The cottages serve as the base from which all services to the individuals with intellectual disabilities living at PSH&TC are rendered. Services are provided 24 hours a day, 7 days per week. The primary goal of the Habilitation and Treatment program is to enable the people who live at PSH&TC to make choices based on their own personal preferences for all aspects of their lives. This program helps each person meet his/her informed personal lifestyle choices and needs for physical, psychological, social, religious, cultural and personal developmental resources by maintaining an individualized, person-centered developmental program for everyone. All programs are certified by the Kansas Department of Health and Environment or the Kansas Department of Education. Programs provide both generic and specialized religious, social, nursing, medical, psychological, educational, therapeutic and developmental activities, vocational, speech, audiology, developmental care, supervision and training, lodging, boarding and other services. Residents are supported in individual training programs which may include adjunctive therapies, education, or special training programs, and all are offered additional leisure-time and recreational activities during evenings and weekends. Additionally, PSH&TC individuals are afforded the opportunity to attend religious services and events of their choice both on campus and in the community. PSH&TC will continue the person directed planning process for all individuals and guardians who request consideration for placement in a community setting.

COVID-19 has had a significant impact on PSH&TC's ability to provide the usual number of activities and outings for individuals living at PSH&TC. During FY 2020 and the first half of FY 2021 extreme measures were implemented to restrict face-to-face interactions for both residents and employees. Off-campus resident outings and on-campus family visitations were prohibited. Residents were not allowed to visit other cottages on campus. Many new activities and individual entertainment devices, games, puzzles, etc., that incorporate social distancing, were purchased for PSH&TC residents to help them stay safely active. Individuals living at PSH&TC with the cognitive ability to understand the health safety issues surrounding COVID-19 received special training regarding practicing good hygiene, wearing face masks and social distancing.

During the second half of FY 2021 restrictions were loosened as COVID-19 infections seemed to trend downward. Pre-authorized family visitations were arranged and held in non-populated areas of campus. However, as FY 2022 began and the DELTA variant of COVID-19 emerged in Southeast Kansas, PSH&TC once again assumed a position of extreme caution. Continued vigilance in testing, screening, social distancing, mask wearing, surface disinfection and reimplementing of some movement restrictions has become necessary. Currently, 90% of resident population is fully vaccinated and 65% of PSH&TC staff are fully vaccinated. Resident outings to low transmission risk sites are being approved for fully vaccinated individuals. Family visitations are currently allowed in non-populated areas of campus. Twice weekly testing, or declination statement signature, is required for unvaccinated staff. As positive tests are recorded, cottages/living units are placed on quarantine for short periods of time to mitigate the spread of the virus. PSH&TC will likely experience an increase in overtime expenditures necessary for adequate staffing coverages during quarantine episodes.

Special Education	Provides required education services to school-age residents of PSH&TC.
Outreach Services	Outreach Services Teams work with community agencies and providers throughout the state to help them keep at-risk individuals with intellectual disabilities and dual diagnosis from becoming institutionalized. The expertise, and subsequent success, of PSH&TC's Outreach Teams has kept over 97% of the at-risk individuals served living within their own communities and out of state hospitals, saving the state of Kansas millions of dollars.
Trust & Benefit	Expenditures from this fund provide items and services that are not included in the operating budget. The 1974 Legislative Session required that an account be established for a Special Benefit Fund account (Section 7, HB 1059). Withdrawals of less than \$500 are made by supervisors who make written requests for special program or activity expenditures. These requests are reviewed in the Accounting Department to determine propriety.

Performance Measures

Outcome Measures	Goal	FY 2019	FY 2020	FY 2021	3-yr. Avg.	FY 2022	FY 2023
1. Number of ICF/IID standards pertaining to Habilitation and Treatment Program.	A	Met 28/28	Met 28/28	Met 28/28	Met 28/28	Meet 28/28	Meet 28/28
2. Percent compliance to ICF/IID standards pertaining to Habilitation and Treatment Program.	A	100%	100%	100%	100%	100%	100%
3. Number of PSH&TC residents enrolled and served in the Special Education program.	A	17	20	20	19	21	21
4. Number of Client-Based Behavioral Program Trainings provided to PSHTC Direct Care Staff by PSHTC Psychology Department.	A	224	255	220	233	235	245
5. Average number of PSHTC residents that require increased supervision due to their self-injurious or aggressive behaviors.	A	138	139	139	139	139	139
6. Average number of PSHTC residents that require their own bedroom due to their self-injurious or aggressive behaviors.	A	99	94	83	92	83	83
7. Estimated annual costs for staffing to provide 1:1 supervision for residents.	A	\$ 1,376,282	\$ 1,659,190	\$ 1,490,945	\$ 1,508,806	\$ 1,930,137	\$ 1,946,616
8. Shrinkage dollars necessary to meet base budget.	A	\$ 2,296,016	\$ 950,864	\$ 554,477	\$ 1,267,119	\$ 2,776,714	\$ 2,179,988
9. Number of individuals served by Outreach Services Teams	B	176	127	131	145	145	165
10. Number of completed referrals for individuals at risk of institutional placement	B	112	76	93	94	95	105
11. Number of individuals admitted to PSH&TC after receiving referral services	B	3	2	3	3	2	2

Funding

Funding Source	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
State General Funds *	\$ 5,116,855	\$ 5,926,493	\$ 5,930,937	\$ 3,284,755	\$ 104,050	\$ (2,027,484)
Non-SGF State Funds *	178,763	174,318	49,133	268,509	69,800	82,025
Federal Funds *	8,924,631	8,384,903	9,395,328	11,842,632	15,543,376	15,351,503
Total	\$ 14,220,249	\$ 14,485,714	\$ 15,375,398	\$ 15,395,896	\$ 15,717,226	\$ 13,406,044

80000 - ANCILLARY SERVICES

Consequences of Not Funding this Program

PSH&TC would have to close. Approximately 150 individuals with intellectual and developmental disabilities would have to be relocated to other living situations. Many of these individuals are dually diagnosed with extreme behavior issues that could create violent and unexpected consequences for the public. This would place a unpredictable burden on the local community who would have to assume responsibility for these individuals, their mental, medical and physical needs.

Statutory Basis	Mandatory vs. Discretionary	MOE/Match Rgt.	Priority Level
Specific 76-1406, 76-1407, 76-1409, 76-1409a, and 76-1415. Also applicable are 75-Article 29 K.A.R.'s relating to Civil Service and certain 75-Article 37 K.A.R.'s relating to the Department of Administration and 76-12a01-76-12a34, 76-12b01-12b11, 45-403, and applicable State and Federal Fire Code regulations.	Mandatory	No	1

Program Goals

A. Provide for the optimal mental, physical and social health of each resident with consideration for the informed personal lifestyle choices of each resident.

Program History

Ancillary Services provides for a variety of resident needs such as vocational work programs, entertainment, education, and religious services, as well as their overall physical and mental health and well-being. The focus is primarily individual resident needs and provides opportunities for a wide variety of social experiences where residents can interact with co-workers, friends, relatives and staff in group settings if they so desire. Each resident is offered a variety of choices for leisure time and social activities, religious services, and work programs. Disciplines of recreation, music, art and therapy based on personal preferences are included. Leisure activities for every resident are coordinated by Activity Specialists and include both individualized and personal outings as well as group outings with friends. These activities explore the interests of everyone to better prepare the resident for vocational placement. Vocational work programs on campus help residents develop work skills. Every 30 days, programs are reviewed and adjusted as needed to ensure each person's lifestyle needs are met.

Allied Clinical Services provide staffing and services for Pharmacy, Dental, PT, Adaptive Equipment Services, Laboratory, Radiology, Speech & Hearing for all people living at PSH&TC. Assists in making accurate diagnosis to help maintain and monitor the mental and physical health of each resident by providing necessary medical laboratory work and additional medical supports and services such as nursing care, pharmacy, psychology, dental, speech, and audiology services. Develop knowledge, techniques, program innovations, and verification data required in the development of more effective habilitation and rehabilitation services through research. Other lab tests and nursing services performed by the PSH&TC staff include EKGs, x-rays, tuberculosis tests, urine analysis, electrolyte tests, lipid panel tests, blood sugar tests, tube feedings, flu shots, insulin injections, allergy injections, tetanus shots, and hepatitis B injections.

Performance Measures

Outcome Measures	Goal	FY 2019	FY 2020	FY 2021	3- yr. Avg.	FY 2022	FY 2023
1. Approximate number of community-based and recreational/leisure outings participated in by PSHTC residents.	A	22,998	17,714	21,189	20,634	22,000	22,500
2. Approximate average number of annual community-based and recreational/leisure outings per resident.	A	143	113	141	132	150	153
<i>Output Measures</i>							
1. Total number of tests conducted annually by PSHTC Laboratory Services Dept.	A	25,003	25,161	35,516	28,560	36,500	3,800
2. Number of X-Ray(s) performed by the PSHTC Radiology Department.	A	811	699	723	744	810	860
3. Number of EKG(s) performed by the PSHTC Radiology Department.	A	46	72	183	100	210	235
4. Number of dental operatives and procedures for residents performed by PSH dentist annually.	A	271	266	292	276	315	330
5. Number of teeth-cleanings performed for residents by PSH contracted dental hygienist annually.	A	364	318	321	334	350	380

Funding

<i>Funding Source</i>	<i>FY 2018</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>FY 2022</i>	<i>FY 2023</i>
State General Funds	\$ 965,419	\$ 1,197,064	\$ 1,306,955	\$ 2,745,097	\$ 3,114,690	\$ 3,111,307
Non-SGF State Funds	93,342	35,497	49,948	132,422	51,300	51,800
Federal Funds	1,233,860	1,750,615	1,693,379	29,302	183,849	210,222
Total	\$ 2,292,621	\$ 2,983,176	\$ 3,050,282	\$ 2,906,821	\$ 3,349,839	\$ 3,373,329

83000 - MEDICAL & SURGICAL SERVICES

Consequences of Not Funding this Program

PSH&TC would have to close. Approximately 150 individuals with intellectual and developmental disabilities would have to be relocated to other living situations. Many of these individuals are dually diagnosed with extreme behavior issues that could create violent and unexpected consequences for the public. This would place a unpredictable burden on the local community who would have to assume responsibility for these individuals, their mental, medical and physical needs.

	Statutory Basis	Mandatory vs. Discretionary	MOE/Match Rqt.	Priority Level
Specific	76-1406, 76-1407, 76-1409, 76-1409a, and 76-1415. Also applicable are 75-Article 29 K.A.R.'s relating to Civil Service and certain 75-Article 37 K.A.R.'s relating to the Department of Administration and 76-12a01-76-12a34, 76-12b01-12b11, 45-403, and applicable State and Federal Fire Code regulations.	Mandatory	No	1

Program Goals

A. Provide for the optimal mental and physical health of each resident with consideration for the informed personal lifestyle choices of each resident.

Program History

Medical & Surgical Services strive to ensure optimal physical health of each resident and provides medical and nursing care for each resident including those with acute and chronic medical conditions. Diagnostic tests play an essential part in this process and outside consultations are requested as needed. Additional services include the coordination of any necessary major medical needs and/or treatments for residents through specialized providers outside PSH&TC. These outside provider costs are normally covered by Medicaid under the Title XIX program.

Performance Measures

<i>Outcome Measures</i>	<i>Goal</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>3- yr. Avg.</i>	<i>FY 2022</i>	<i>FY 2023</i>
1. Number of medications issued (med passes by medical staff to PSH&TC residents).	A	1,483,150	1,315,195	1,071,095	1,289,813	1,150,000	1,250,000
2. Percent of medication pass errors.	A	0.0080%	0.0100%	0.0074%	0.0085%	0.0065%	0.0056%
3. Number of on-grounds doctor appointments for PSHTC residents.	A	12,090	13,030	13,525	12,882	13,900	14,200
4. Number of times PSH residents were referred to outside medical providers for services not capable of being performed by PSHTC medical staff (specialist required, severe illnesses, surgery, etc.).	A	473	407	471	450	500	535

Funding

<i>Funding Source</i>	<i>FY 2018</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>FY 2022</i>	<i>FY 2023</i>
State General Funds	\$ 691,414	\$ 925,660	\$ 1,117,192	\$ 1,568,653	\$ 2,228,712	\$ 2,592,425
Non-SGF State Funds	1,762	-	155	10,102	6,025	6,325
Federal Funds	1,703,285	1,737,286	1,280,805	761,741	352,801	51,873
Total	\$ 2,396,461	\$ 2,662,946	\$ 2,398,152	\$ 2,340,496	\$ 2,587,538	\$ 2,650,623

96000 - PHYSICAL PLANT / CENTRAL SERVICES

Consequences of Not Funding this Program

Physical Plant and Central Services includes the agency utilities and indirect care services that support the living environment of PSH&TC's residents. If this program is not funded an unsafe living environment results. ICF/IID certifications and licensure as a state hospital will be forfeited. PSH&TC will not be able to continue serving the people who have been placed at this facility for care and treatment. The facility would have to be closed, resident would be without homes and staff would be without income.

<u>Statutory Basis</u>	<u>Mandatory vs. Discretionary</u>	<u>MOE/Match Rgt.</u>	<u>Priority Level</u>
General 76-1406, 76-1407, 76-1409, 76-1409a, and 76-1415. Also applicable are 75-Article 29 K.A.R.'s relating to Civil Service and certain 75-Article 37 K.A.R.'s relating to the Department of Administration and 76-12a01-76-12a34, 76-12b01-12b11, 45-403, and applicable State and Federal Fire Code regulations.	Discretionary	No	1

Program Goals

- A. To provide for a safe, secure and sanitary living and work environment for the residents and staff of PSH&TC while meeting compliance with all state and federal regulations pertaining to the program.
- B. To provide nutrition programs to meet the dietary needs of all PSH&TC residents.
- C. To provide clean living environments and provide laundry services for the people who live at PSH&TC.
- D. To provide safe and secure transportation for residents and staff.

Program History

Physical Plant & Central Services is responsible for the overall maintenance, safety and security of PSH&TC. Costs for utilities such as natural gas, electricity, water and sanitation services fall within this overhead program.

COVID-19 significantly impacted daily activity at PSH&TC during FY 2020 and FY 2021. Most areas were able to provide near-normal services by following the COVID-19 policies and procedures established to keep people safe. There were reductions in the number of work orders that could be completed and deliveries that could be made, but overall, there was limited interruption in campus-wide services. Special arrangements were often made to get critical work completed and supplies and food delivered in ways that ensured limited personal contact with other staff and individuals. In late March of FY 2020, all food service preparations were moved from the cottages to the old cafeteria building during these months and prepared food was customized and delivered to the doorsteps of the various cottages to minimize personal contact.

During FY 2021, as residents and staff began receiving vaccinations and COVID-19 outbreaks became much less prevalent, most cottages were able to return to near-normal family style dining within their living unit. However, usually due to staffing shortages, some cottages must occasionally have their meals prepared in the cafeteria and delivered. The grounds crew had few problems performing their normal mowing and grounds maintenance duties. Most other maintenance staff were able to social distance and complete work within their respective departments without putting other people at risk, however cottage work required that special arrangements be made. Most business travel was cancelled. The Safety and Security staff remained very active across campus as some individuals on living units did not tolerate the cutback in social outings and some didn't have the mental capacity to understand why they had to stay away from other people.

Facilities Maintenance	Responsible for the overall maintenance of PSH&TC in accordance with applicable state and federal regulations. Power Plant personnel operate and maintain the high pressure steam energy system on a 24 x 7 basis; Maintenance Department staff provides services to buildings across the entire campus in the areas of plumbing, welding, electrical, air conditioning, carpentry and painting.
Grounds Maintenance	Maintain the grounds throughout the PSH&TC campus including snow/ice removal, mowing/weedating, tree trimming/removal and planting, storm clean-up, trash hauling, flower bed maintenance, implementation of beautification projects, and maintenance and repair of all power equipment used in these processes.

Custodial Services	Provides a clean, sanitary and safe environments for staff and the people who live at
Transportation	Schedules use of vehicles and sees that necessary maintenance is performed to ensure all vehicles are safe for the people living at PSH&TC and staff.
Safety & Security	To provide 24 hour safety and security to staff and residents at PSH&TC. Serves as first responders to all emergency situations at PSH&TC.
Switchboard	Provide 24 x 7 coverage and in addition to transferring telephone calls, work closely with security personnel and hospital personnel to provide emergency communications regarding dangerous or life-threatening safety and health situations for people living at PSH&TC and staff, severe weather conditions, etc.
Dietary Services	Ensures each person living at PSH&TC is receiving the proper nutrition and that regulations regarding food preparation and sanitation are followed.
Purchasing & Supply Services	Operates a warehouse/storeroom facility that orders, stocks, distributes and keeps inventories of all supplies and equipment necessary for each building and program on campus to ensure quality services to the people living at PSH&TC can be maintained following state procurement policies.
Laundry Services	Provides clean, infection-free laundry, clothing, towels, bed linens, etc., for all residents and areas requiring laundry service.
Capital Improvement	Energy Conservation Project

Performance Measures

<i>Outcome Measures</i>	<i>Goal</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>3- yr. Avg.</i>	<i>FY 2022</i>	<i>FY 2023</i>
1. Number of ICF/IID standards pertaining to Engineering and Protection such as "Physical Environment" met for Certification Survey.	A	Met 10/10	Met 10/10	Met 10/10	Met 10/10	Meet 10/10	Meet 10/10
2. Percent compliance to ICF/IID Certification Survey for standards pertaining to "Physical Environment".	A	100%	100%	100%	100%	100%	100%
3. Number of ICF/IID standards met pertaining to "Dietary Services".	B	Met 4/4	Met 4/4	Met 4/4	Met 4/4	Meet 4/4	Meet 4/4
4. Percent compliance to ICF/IID standards pertaining to "Dietary Services".	B	100%	100%	100%	100%	100%	100%

<i>Output Measures</i>							
1. Number of requests for specialized services/repairs issued through the electronic Maintenance Work Order Program by PSH&TC staff.	A	3,751	3,203	2,938	3,297	3,000	3,000
2. Total number of support services rendered to PSHTC staff and residents by PSHTC Safety and Security Officers.	A	25,487	25,928	34,817	28,744	35,000	35,000
3. Number of incidents when PSH&TC Safety and Security Officers were needed to assist with combative residents.	A	309	350	657	439	700	700
4. Approximate number of home-cooked meals served to people who live at PSH&TC annually.	B	176,295	172,386	164,250	170,977	160,965	160,965
5. Average cost of food per meal served to people living at PSH&TC.	B	\$2.06	\$2.06	\$2.15	\$2.09	\$2.24	\$2.28
6. Average daily pounds of laundry items processed at PSH&TC for the people who live here (This includes clothing, sheets, towels, bedding, curtains, mops, etc.)	C	1,359	1,361	1,309	1,343	1,400	1,420
7. Total number of vehicles used and maintained by PSH&TC staff and residents. Includes maintenance vehicles. Does not include tractors and mowers.	D	58	62	67	62	68	68

Funding

<i>Funding Source</i>	<i>FY 2018</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>FY 2022</i>	<i>FY 2023</i>
State General Funds	\$ 2,874,461	\$ 3,013,897	\$ 2,866,778	\$ 3,532,397	\$ 3,399,857	\$ 3,878,023
Non-SGF State Funds *	991,650	931,172	1,186,429	661,331	935,165	897,275
Federal Funds	912,552	1,061,247	1,018,804	852,585	919,514	573,163
Total	\$ 4,778,663	\$ 5,006,316	\$ 5,072,011	\$ 5,046,313	\$ 5,254,536	\$ 5,348,461

* includes SIBF * includes SIBF * includes SIBF

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Transportation

Performance Measure Reports

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