



*Women's Community Rehabilitation Center*

**WCRC**

## Annual Performance Analysis FY 2022-2023

### Introduction

The UpLIFTD/WCRC program is committed to continually improving our organization and service delivery systems. Through an organized system of data collection and information management, UpLIFTD/WCRC seeks to increase the outcomes of our services and initiate new methods and/or services that can further support our mission and core values. Information about UpLIFTD/WCRC's business function and service delivery outcomes are shared with the organization's stakeholders, who are essential partners in the process of supporting continual improvements within the organization.

### **SUMMARY OF WORK PERFORMED DURING THE REPORT PERIOD:**

Progress toward the approved Women's Community Rehabilitation Center's Objectives for The **July 1, 2022, through June 30, 2023**, Budget Year is outlined below.

### **DETAILED NARRATIVE: (Objectives A through E) (CAHSD 4 Objectives-A&C)**

**A. To reduce frequency and length of episodes of in-patient care and increase residents' capacity to stabilize in the community through psychiatric support on an out-patient basis. (CAHSD Objective: To facilitate community integrations for 20-25 women over the course of one year- a. Number of Discharges; b. Number discharged that reached Level 3; c. Percent discharged who reached Level 3. Objective: 60 % of consumers placed in program will successfully remain in a community setting without hospitalization).**

- Number of Clients Served- 30
- Number of Entries - 19
- Number of Discharges - 14
- Reached Level 3 upon D/C- 4 (29 % of Discharged)

The **WCRC Overall Program Evaluation and Assessment tool**, described for Clarification in Attachment 3.a, was used to determine how residents exited WCRC. Progress towards WCRC's 5 approved goals, and **CAHSD's Objective of at least 60 % of consumers remaining in a community setting without Re-hospitalization in a 12- month period** is evidenced by an **Seventy-nine (79%)** percent **Success Rate**. This represents the 14 discharged residents' achievement of self-maintenance and living independently in the community.





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**Two (3) residents (appx 21%) were Re-hospitalized for in- patient care this report period. WCRC determines success by clients not returning to the hospital. Not all clients complete the program but all gain some skills to maintain outside of a hospital setting.**

<u>Self-Maintenance</u>	<u>Number</u>	<u>Percentage</u>
Treatment Plan/Level 3	3	
Compromised Plan	2	
Partial Complete	2	
In-Completion	4	
<b>Totals</b>	<b>11</b>	<b>79% Success Rate</b>

Number re-hospitalized - 3 Appx. 21%

### Overview of Performance Improvement System

UpLIFTD/WCRC has an ongoing performance improvement system within its operational structure. That system supports the development of data and information used for business and service delivery decision-making within the ongoing operations of the organization. An overview of UpLIFTD/WCRC's information management and performance improvement system is as follows:

- A. Business Function Improvement: UpLIFTD/WCRC has an information management structure that allows for information/data to be utilized by the Board of Directors and the Senior Management Team to make decisions that improve the operations of the organization. Information is utilized in making decisions that support the health of the organization. Areas of information that are key to decision-making are as follows: finances, accessibility, resource allocation, corporate compliance, cultural diversity and competency, risk management, human resources, technology, health and safety, field trends, and service delivery.
- B. Service Delivery Improvement: The UpLIFTD/WCRC program maintains an organized data collection system for program improvement. Data is collected at various points in service to measure the effectiveness of services, the efficiency of the provision of services, access to services, and satisfaction with services. UpLIFTD/WCRCs service delivery performance improvement team is charged with ongoing development of quality indicators, collection of the data, utilizing the data/information to make service delivery and program improvements, and reporting the information to the Senior Management Team for analysis, consultation, and needed resource allocation.





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### Performance Analysis for FY 2022-2023

\*\*\*WCRC received a 3 year CARF re-certification in May 2023. CARF survey was in March 2023 via Teams and was very successful. Next CARF survey will be in 2026.

The following is an analysis of information management and performance improvement activities for FY 2022-2023.

#### A. Business Functions:

##### Summary:

The 2022/2023 FISCAL year showed an increase from previous FY due to program revenue increased as of March 2022. The WCRC Director and UpLIFTD Executive Director met with funding sources such as Louisiana Rehabilitation Services that has a fee for service contract with WCRC. LRS increased their daily bed rate from \$73.27 per day to \$85.00 per day starting with new open cases beginning in March 2022. The percentage of this increase is hard to determine overall as LRS is not a contract but a fee for service, so it is not designated for a certain amount of clients. Numbers vary through the year. A meeting was also held with Capital Area Human Services District Executive Director. This contract was not able to be increased at this time, but the director stated that she would seek an increase for the possible 2023/2024 FY. We hope to know more about this in October 2023. WCRC Director had a meeting with the director of Eastern LA Mental Health Systems for the program's contract for Forensic clients. This contract increased bed rates from \$64.00 per day to \$83.98 per day as of July 1, 2022.

In March 2022, WCRC Director and staff reviewed our money management program. Due to the cost of living, the resident requirements for room and board, once they receive an income, were changed. Residents as of March 2022 now pay 60% of their income, never to be over \$500 per month towards room and board. Each save 15% of their income and budget 25% of their monthly income for spending, bus fare, med copays and personal items. This change increased our revenue by 30%. These rates will be increased slightly again in July 2023.

WCRC was again unable to execute the annual fundraising tea. This fundraiser has not restarted since before COVID.

WCRC continued to experience much difficulty finding and maintaining staff during the past year. It is hard to determine the reason for this as unemployment benefits due to COVID have stopped. WCRC is not alone in this issue. The parent agency, UpLIFTD, as well as other businesses that we associate with in the community are experiencing the same difficulty.

WCRC was able to keep an average bed stay of 11.83 in the first half of 2022/2023 budget year. This is an increase from previous budget year at halfway which was 10.60 in 2021/2023 by December. The second





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half of the budget increased to an average bed stay of 12 which was again a slight increase from 11.93 shown in the second half of previous budget year. WCRC continued to work with more Forensic clients than what the Forensic contract pays for which is 5 beds. An average monthly number of clients that were Forensic this FY were 8.75 Forensic clients.

Positively, WCRC kept ALL 5 Forensic contract beds full for the entire budget year. All funds were billed for this budget year.

CAHSD contract beds remained at 85% full for the entire budget year. It appears that this is due to WCRC being able to move clients quicker this FY to a LRS contract bed for employment services.

LRS: 10 clients were referred to LRS this FY and 10 opened cases. This meets our goal of opening 10 new cases per FY. By the end of the FY, 6 of the 10 were placed in employment and 4 cases are still open to seek employment. 100% successful placement.

**Move to New Building:** The WCRC program moved from the old firehouse that the program had been housed in since the 1970s to the UpLIFTD building on January 25, 2023. With this move, we anticipate a savings in overhead costs as we are now sharing it with the UpLIFTD program, but it was still too soon at the end of the FY budget year to determine this.

### Financial/Resource Allocation Planning and Improvement for FY 2023-2024:

Needed Improvement:

UpLIFTD/WCRC needs to remain at or increase bed stay to at least 12 or above client beds full on average. (See statistical chart)

UpLIFTD/WCRC needs to get back to full staff capacity.

UpLIFTD/WCRC needs to move clients to LRS beds as quickly as the clients become ready. (This can be difficult as all clients are working at a different pace.)

Plan:

UpLIFTD/WCRC management will continue to contact referral sources weekly to inform of bed status and open beds for referrals.

UpLIFTD/WCRC management will advertise and interview for open positions and will hire qualified candidates to meet program needs and return to full staff capacity.





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### **1. Accessibility**

**\*\*See statistical data attached for Access to Services**

#### Summary:

UpLIFTD/WCRC saw many improvements in accessibility during FY 2022-2023, as the integration of the CARF accreditation standards expanded activities in this area beyond what the organization traditionally viewed as accessibility issues. An accessibility plan was developed in 2013. WCRC had a CARF survey for recertification in 2023 and was offered valuable feedback from the surveyor on ways to improve measurements of accessibility. As a result, UpLIFTD/WCRC has implemented a new format in its measurements for Accessibility which can be seen in the 2022/2023 APR.

#### Accessibility Planning and Improvement for FY 2023-2024:

#### Needed Improvements:

1. No improvements needed at this time. Referrals to program continue to be accessible and WCRC Director and now Admin Asst share via email to referral sources weekly ways to refer clients to program.
2. The new building is more accessible and now has 4 handicapped bathrooms. No stairs in new building and all doors and entry ways are free of anything blocking them.
3. Transportation is accessible to clients. Medicaid transportation picks them up at the entrance door. Public transportation is accessible within a half block of walking to bus stop. All clients get bus cards with CATS upon entry to the program.
4. Employment is accessible through WCRC job placement or Time Limited Job Coaching with WCRC Job coach once client has reached that part of her program.
5. Upon discharge, clients are assisted with locating affordable, safe housing where transportation is accessible in the community.

#### Plan:

Continue new format for quarterly and annual statistics for Accessibility.

First board meeting of the year, present Accessibility plan to board.





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## **2. Corporate Compliance**

Summary:

The corporate compliance program improved using an anonymous electronic reporting system provided by the Accreditation Now subscription support service. No Grievance reports were submitted for the FY 2022-2023.

### **Corporate Compliance Planning and Improvement for FY 2023-2024:**

Needed Improvements:

No improvements needed at this time.

Plan:

Continue anonymous electronic reporting system with Accreditation Now.

## **2. Cultural Competency and Diversity**

Summary:

UpLIFTD/WCRC's staff continued to implement cultural competency and diversity in its program and with staff and residents during this fiscal year. All staff completed Cultural Competency training on the Accreditation Now website.

### **Cultural Competency and Diversity Planning and Improvement for FY 2023-2024**

Needed Improvement

No improvements needed at this time.

Plan:

Continue annual staff training on Cultural Competency through the Accreditation Now website.





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### **3. Risk Management**

#### Summary:

1. The 2022-2023 risk management plan and activities focused on funding. The contract beds with CAHSD was closer to remaining full in the last quarter-350 bed days out of 361.27. Referral sources continue to be contacted via email weekly by WCRC Director to inform them of bed openings. All Forensic contract beds remained full. LRS fee for service beds increased the last quarter to 8 by the end of the quarter.
2. IT safety measures and virus protection are up to date and working properly.
3. Security systems-door alarms, security cameras are all in working order.
4. Billing and coding systems are working fine, and no errors were made this quarter.
5. Insurance is adequate for assets of the company.
6. The program moved to its new location in January 2023 which we anticipate to be a decrease in overhead costs but it's still is too soon to determine that. The physical risks of the building due to old building having hazards of flooding and roof leaks is now gone with new building.

WCRC began an annual online fundraiser with 225 Gives along with our annual holiday appeal. This began in 2020 and saw a revenue the first year of a little over \$2000. In 2021, we showed a revenue of around \$5,062.00. This doubled from previous year. In 2022-2023, 225 Gives changed it's giving day to May 2023 instead of November or December 2022. Due to this change in time of year, the WCRC program showed a drastic decrease in donations from this venue. The program only brought in a little over \$150.00 The holiday season is a better time for giving as donors like to give before the end of the year or tax purposes. WCRC will continue its annual holiday appeal in November/December 2023.

UpLIFTD/WCRC was able to secure a substantial amount in grants and Holiday Appeal/225 Gives Campaign this budget year. WCRC moved to its new location at the UpLIFTD building on January 2023. The kitchen remained an eat-in kitchen only until February 2023 when the final inspections and approvals from the Fire Marshal and Health Department were received. This process began in March 2022 where the UpLIFTD building began major renovations to make this possible. During the calendar year 2022, WCRC wrote several grants to fund such things as a sprinkler system, handicapped bathrooms, kitchen hood system and fire suppression system and security cameras along with basic operational expenses.







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The total grants received for the CALENDAR year-January 2022-December 2022 were \$222,462.24

Total donations from Holiday Appeal and 225 Gives Campaign in 2021 were: \$ 5,062.00. In 2022/2023 for Holiday appeal and 225 Gives campaign, donation totals were slightly increased to \$5,496.75.

Total=\$227,958.99

\*\*This does not include various small monetary donations made to WCRC throughout the year.

### Risk Management Planning and Improvement for FY 2023-2024

Needed Improvement:

Increase funding.

Plan:

UpLIFTD/WCRC administrative staff will continue contact with grantors and donors to promote the program and advocate for funding. WCRC Director will continue to solicit grant funding when available.

Administrative staff will continue relationships with contract officers to increase referrals and possibly increase contract beds and rates for CAHSD contract and Forensic contract.

Continue annual 225 Gives campaign with our annual holiday appeal.

Begin annual Tea Fundraiser again when COVID cases decrease and is safe to do so.

First board meeting of the year, present Risk Management Plan to board.

## **4. Human Resources**

Summary:

The staff turnover for the WCRC program during 2022-2023 FY continued to be an issue. It is hard to determine percentage, but the evening counselor position continued to be challenging to fill. In the last two months of the budget year, we still were looking for 2 weekend positions. We hired a second part-time cook in October 2022 but the original part time cook resigned in December due to health issues. We were still seeking a second part-time cook at the end of this budget year. We are aware that many other businesses are having the same issues.







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### Human Resource Planning Improvement for FY 2023-2024

Needed Improvement:

UpLIFTD/WCRC needs to hire and maintain full staff capacity.

Plan:

UpLIFTD/WCRC management will continue to search for qualified staff to fill empty positions to obtain and maintain full staff capacity.

## **5. Technology**

Summary:

A comprehensive technology plan was created in 2013, according to the CARF accreditation standards. The majority of the plan's objectives were focused on completing initial assessments of the organization's use of technology in the areas of hardware, software, security, confidentiality, backup policies, assistive technology, disaster recovery preparedness, and virus protection. UpLIFTD/WCRC has a contract with IT Inspired to maintain all company technology.

1. Improvement in computer microphones this year due to CARF survey by adding headphones to all computers.
2. New printer/scanner purchased for counselors office.
3. Fax system now working at new building with help of IT Inspired.
4. Phone system in new building working much better than old building. All new phones.
5. WCRC Director is planning to start a program for electronic records by the start of next FY.

### Technology Planning Improvement for FY 2023/2024

Needed Improvement:

Continue technology planning as suggested in recent CARF survey.

Plan:

Maintain updated technology equipment through IT Inspired. Do Bi-Annual Technology Testing with IT Inspired as suggested by CARF and at first board meeting of the year, present IT contract and Technology plan to board.





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### **6. Health and Safety**

Summary:

The UpLIFTD/WCRC health and safety program appears to be running smoothly as the residential programs had no critical events that warranted action by the health and safety committee in terms of policy and procedure changes during the 2022/2023 FY.

#### Health and Safety Planning and Improvement for 2023/2024

Needed Improvements:

No improvements needed at this time.

Plan:

Continue monitoring of health and safety program and continue quarterly safety meetings.

### **7. Service Delivery System**

Summary:

**\*\*See statistical data attached for Service Delivery**

WCRC utilized client entry, bi-annual and exit surveys; staff bi-annual surveys and stakeholder annual surveys to assess service delivery.

**See results of surveys on statistical data attached**

UpLIFTD/WCRC will continue to work to improve service delivery by the goal of obtaining and maintaining full staff capacity during this FY. The plan last year was to move the WCRC program to a permanent location on the same campus as UpLIFTD where the company will own the building and lessen its annual costs for maintenance. This was achieved in January 2023.

#### Service Delivery System Improvement for 2023/2024

Plan:

Maintain new building and see decrease in costs with sharing building with UpLIFTD.





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Plan:

Continue to gather quarterly data on Service delivery. Review expenses after after the first year in the new building to determine cost savings of being in new, shared building.

### B. Service Delivery Improvement

Program Descriptions:

#### **WCRC Residential Treatment Center (WCRC)**

The residential program currently consists of 8 direct service employees at 1 location in the Baton Rouge area/East Baton Rouge Parish. When at full staff capacity, staff should be 11 with 2 more weekend/holiday/relief counselors. 1 more part-time cook and 1 evening counselor. It serves adult women who are diagnosed with severe mental illness, who could have a co-occurring substance abuse disorder and could have legal issues and under a conditional release. Fees are collected through several payment sources that include self-pay, contract bed fees through Eastern LA Mental Health System, NAMI and Capital Area Human Services District as well as a fee for service through Louisiana Rehabilitation Services. The program creates hope through an educational, therapeutic, and vocationally focused program in a safe environment; to promote dignity and self-worth through employment, permanent housing and independent living

#### 1. Effectiveness of Services

**\*\*See results of effectiveness of services on attached statistical data.**

Planning and Improvement for 2023/2024 FY/ Effectiveness Plan:

Continue to gather quarterly data on effectiveness. Utilize results from surveys to continue to make improvements in the program.

#### 2. Efficiency of Services

**\*\*See results of efficiency of services on attached statistical data.**

Planning and Improvement for 2023/2024 FY/ Effectiveness Plan:





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Continue to gather quarterly data on efficiency. Utilize results from surveys to continue to make improvements in the program.

### 3. Access to Services

**\*\*See statistical data attached for Access to Services**

Planning and Improvement for 2023/2024 FY/ Access to Services Plan

Continue to gather quarterly data on access to services and utilize data to improve program.

### 4. Feedback From Persons Served and Other Stakeholders

**\*\*See statistical data attached for Service Delivery**

Planning and Improvement for 2023/2024 FY:

Continue to gather quarterly data on feedback from persons served and other stakeholders/service delivery and utilize data to improve the program.

## Statistics for Employment Services:

Supported Employment/Job Placement				
Reporting period: July 1, 2022 – June 30, 2023				
Function	Indicator	Target	Actual	Variance +/- 10%
Access	Number of vocational rehab referrals	Refer at least 10 clients annually to LRS	10	100%
Efficiency	Number of clients placed in competitive employment	Place 5 clients (50%) annually in employment	5	100%
Effectiveness	Individuals maintained employment for 90 days or longer	5 clients (50%) will maintain employment for 90 days or longer	5	100%

Summary: LRS Referrals increased this year. Clients appeared to be ready to work quicker than clients in previous year. This variable changes depending on the ability of the clients served at the time.





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Plan: WCRC will refer clients when ready for LRS services and WCRC Job Coach will work closely with client to obtain and maintain gainful employment.

ACCESS TO SERVICES							
Reporting Period:	July 1, 2022- June 30, 2023		Annual Summary	4 <sup>th</sup> quarter	3 <sup>rd</sup> quarter	2 <sup>nd</sup> quarter	1 <sup>st</sup> quarter
Function	Indicator	Target	Actual	Actual	Actual	Actual	Actual
Access	Screen new referrals within 30 days	80% compliance	100%	100%	100%	100%	100%
Efficiency	Keep 12 beds full	75%	96%	100%	87%	98%	97%
Effectiveness	Contract beds will remain occupied for 90 days at 75%	75%	95%	99%	87%	98%	97%

SUMMARY: For the budget year 2022-2023, WCRC exceeded the target goals for access to services for both efficiency and effectiveness.

PLAN: WCRC Director will continue to send out emails to referral sources weekly to let them know the bed status and that referrals are being accepted.

**SERVICE DELIVERY:**

**FEEDBACK FROM PERSONS SERVED: Reporting period: July 1, 2022-June 30, 2023**

**\*\*WCRC does client satisfaction surveys twice a year, staff surveys twice a year and stake holder surveys once a year. Entry and Exit surveys will remain.**





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**CLIENT ENTRY SURVEYS:**

Reporting period	July 1, 2022-June 30, 2023		Annual Summary	4 <sup>th</sup> quarter	3 <sup>rd</sup> quarter	2 <sup>nd</sup> quarter	1 <sup>st</sup> quarter
Function	Indicator	Target	Actual	Actual	Actual	Actual	Actual
Efficiency	Number of entry surveys completed within 3 months of entry	75%	95%	100%	80%	100%	100%
Effectiveness	Successful completion of entry surveys	75%	95%	100%	80%	100%	100%

**SUMMARY:** For the budget year 2022-2023, WCRC had 95% achievement on efficiency and 95% on effectiveness of Service Delivery goals. All are above target goal.

**PLAN:** WCRC staff will continue to complete client entry surveys when client intake is performed in the firsts 7 days of client's entry. WCRC staff will assure that surveys show completion in Accreditation Now program after survey completed.

**CLIENT BI-ANNUAL SURVEYS:**

Reporting period	July 1, 2022-June 30, 2023		Annual Summary	4 <sup>th</sup> quarter	3 <sup>rd</sup> quarter	2 <sup>nd</sup> quarter	1 <sup>st</sup> quarter
Function	Indicator	Target	Actual	Actual	Actual	Actual	Actual
Efficiency	Number of bi-annual surveys completed within 3 months of entry	75%	100%	100%	NA	100%	NA
Effectiveness	Successful completion of bi-annual surveys	75%	100%	100%	NA	100%	NA

**SUMMARY:** For the 2022-2023 budget year, client surveys were completed twice during the budget year, WCRC achieved 85% of efficiency and effectiveness for goal of completion of client surveys in the previous year and 100% for this FY. Average scores were 3.21/4 which was agree/strongly agree. Surveys reviewed in group therapy and positive feedback shared. No recommendations for change.





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**PLAN:** This goal will continue twice a year for next budget year. Results will continue to be shared in group sessions with clients and staff to discuss feedback and brainstorm improvements as recommended.

**CLIENT EXIT SURVEYS:**

Reporting period	July 1, 2022-June 30, 2023		Annual Summary	4 <sup>th</sup> quarter	3 <sup>rd</sup> quarter	2 <sup>nd</sup> quarter	1 <sup>st</sup> quarter
Function	Indicator	Target	Actual	Actual	Actual	Actual	Actual
Efficiency	Number of bi-annual surveys completed within 3 months of entry	75%	40%	0%	50%	86%	25%
Effectiveness	Successful completion of bi-annual surveys	75%	40%	0%	50%	86%	25%

**SUMMARY:** For the 2022-2023 budget year, WCRC scored an average of 37% of completion of client exit surveys with the goal being 75%. for previous budget year. This FY the average annual score was 40% so a slight improvement but still the targets for efficiency and effectiveness of this goal was not met.

**PLAN:** WCRC will strive to reach a minimum of 75% efficiency and effectiveness of this goal for the next budget year. Staff will work to have clients complete exit survey when discharge summary is completed. When exit surveys are done, WCRC staff reviews to discuss feedback and brainstorm changes if needed.

**STAKEHOLDER SURVEYS:**

Reporting period	July 1, 2022-June 30, 2023		Annual Summary	4 <sup>th</sup> quarter	3 <sup>rd</sup> quarter	2 <sup>nd</sup> quarter	1 <sup>st</sup> quarter
Function	Indicator	Target	Actual	Actual	Actual	Actual	Actual
Efficiency	Number of Stakeholder surveys completed	75%	100% Will count open house as surveys.	NA	NA% No surveys but Open House	100%	NA







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Effectiveness	Successful completion of Stakeholder surveys	75%	100%	NA- Open House	100%	100%	NA
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**SUMMARY:** 2 stakeholders completed surveys for 2<sup>nd</sup> and quarter of the 2022-2023 budget year. 3<sup>rd</sup> quarter was verbal and in-person feedback at Open House. 100% of goal met for efficiency and effectiveness. Average scores on questions in the strongly agree category. Will continue this goal for next budget year.

**PLAN:** Staff will incorporate at least 2 stakeholders annually surveys when quarterly reports and goals for clients are completed to maintain compliance going forward. Staff will review feedback each time and discuss reports and brainstorm if changes are suggested.

**STAFF SURVEYS: (Bi-Annual)**

Reporting period	July 1, 2022-June 30, 2023		Annual Summary	4 <sup>th</sup> quarter	3 <sup>rd</sup> quarter	2 <sup>nd</sup> quarter	1 <sup>st</sup> quarter
Function	Indicator	Target	Actual	Actual	Actual	Actual	Actual
Efficiency	Number of Staff surveys completed	75%	100%	100%	NA	100%	NA
Effectiveness	Successful completion of Staff surveys	75%	72%	43%	NA	100%	NA

**SUMMARY:** WCRC fell a little short of the goal of completing staff surveys twice a year with over the target average. This goal met an average of 72%. Staff surveys were completed twice during the 2022-2023 budget year and all staff completed. Staff discussed survey results in staff meetings to continue to improve the program.

**PLAN:** Staff will incorporate at least 7 staff surveys bi-annually when quarterly reports and goals for clients are completed to maintain compliance. Staff will continue to discuss results in order to make improvements in program based on suggestions made.

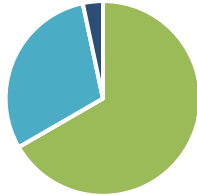




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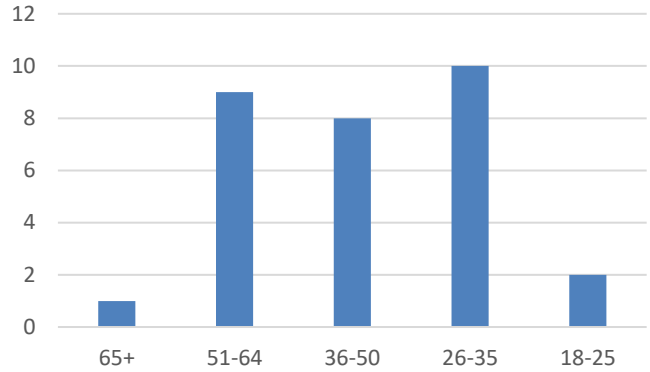
### Demographic Analysis

#### WCRC CLIENT RACE FY 22-23

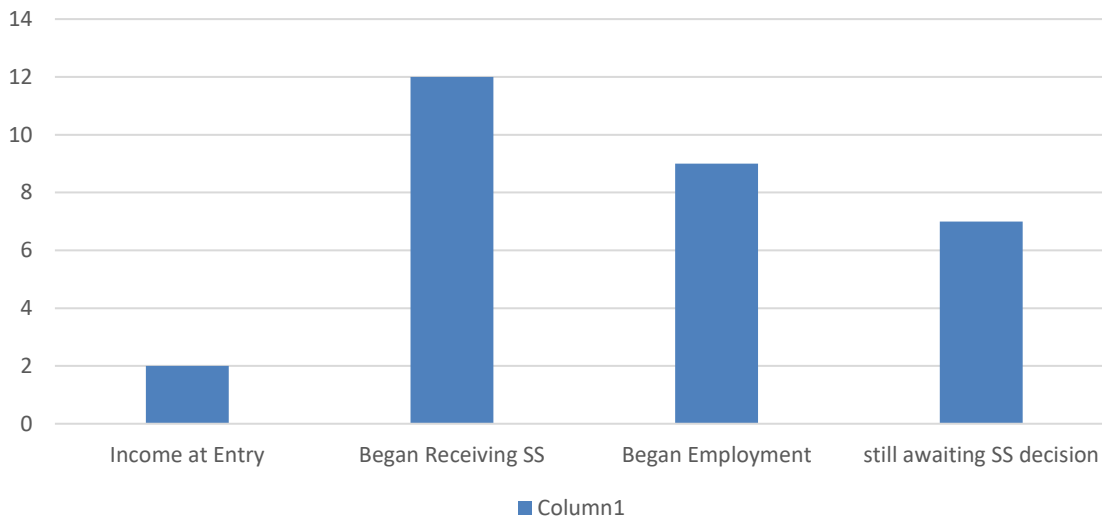


- American Indian
- Asian
- Black
- Multi Race
- White
- Other Race
- Hispanic

#### WCRC CLIENT AGE FY 22-23



#### WCRC CLIENT INCOME 2022/2023





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