

Jessica Sampley
Executive Director

September, 2020

To:

Community Stakeholders

From:

East Arkansas Youth Services, Inc.

Re:

Annual Report 2019-2020



Please find enclosed the agency's Annual Report for the Fiscal Year 2019-2020. The fiscal year began July 1, 2019 and ended June 30, 2020.

This report contains in addition to statistical and financial data, information about our performance quality improvement efforts and recent updates and revisions to our long-range strategic plan. It also contains information about our outcome measurement efforts in our program components.

This is an opportunity for you to provide feedback about our organization and our services. When feedback or suggestions are provided, we use the information in the development of our quality assurance and improvement efforts and our long-term goals.

We also welcome input from our community stakeholders regarding our services at any time. You may also visit our website at www.eays.org or our Facebook page East Arkansas Youth Services, Inc. for additional information about our organization.

If you have any questions or comments, feel free to contact me or one of our Board Members listed below.

Thank you for your continued support.

Jessica Sampley

Executive Director

jessica.sampley@eays.org

Board of Directors:

Carl Weatherford, President- Wynne LaTwon Whitby, Vice President - Forrest City Sherry Holliman, Secretary/Treasurer- Marion Ramonda Henderson, Earle

Enclosures (1)



EAST ARKANSAS YOUTH SERVICES, INC. 2019-2020 ANNUAL REPORT TO STAKEHOLDERS

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Executive Summary

During fiscal year 2019-2020, East Arkansas Youth Services, Inc. has continued to transition with changes in the administration. Each site and department have new leadership which helped with the implementation of new requirements set forth by major funding sources. Several veteran employees have transitioned into a new role which has increased their knowledge of the agency as a whole. During this fiscal year, like much of the world, EAYS has faced unprecedented times due to the global pandemic of COVID-19. The pandemic has impacted EAYS in several ways including causing a staff shortage at the Residential Group Home, less referrals as court was halted for several months, several protocols were put into place to ensure the safety and health of staff and clients, as well as changes in the delivery of services using technology to conduct virtual visits and meetings as necessary.

The organization has completed the first full year in the new service area which includes White and Prairie Counties. Over the past year the organization was able to develop a working relationship with 17th JD court staff/juvenile department which has relied on the services offered by EAYS to fulfill the needs that are assessed by the state mandated risk assessment (SAVRY). The commitment rate in White county is higher than the other service areas we serve. The agency continues to advocate for the youth who may need services offered before the need of commitment is necessary. Over this year we have been able to successfully implement and deliver services to the youth and their families in this area.

The organization continues to maintain a stable financial status. The agency did have in reserves at year-end enough cash on hand for 5-6 months of operating expenses. The organization's income has grown but only marginally over the last five years and the growth is almost entirely from additional State Government contract/grant money which is why the financial. The organization is hoping to become a Medicaid provider at some point. However, the transitional efforts and growth have presented more intensives efforts to prepare for this than were anticipated. The organization continues to receive clean independent audits and excellent monitoring reports from outside agencies.

During this year, the agency decreased in the total unduplicated number of clients served by (39). The number of clients that were served started decreasing when COVID-19 became a pandemic. Due to the pandemic, the agency was unable to provide GED/Day Services program or take Community-Based referrals to the residential group home in order to increase the safety of clients and staff and to follow the safety protocols of CDC as well as the Arkansas governor. Court was discontinued in all service areas during this time decreasing the number of referrals received. The organization has also completed the first full year with the QRTP population. Although these youth require a more extensive level of care, there has been success in ensuring stability for this population at the Group Home. Half of the population that have entered the program are coming up on their first full year at the EAYS.

With regard to Performance Quality Improvement (PQI), the agency achieved seven out of nine goals related to client satisfaction, finance, staff turnover, organizational safety, work/service environment, service delivery, and client outcomes. Data retrieval and compilations continue to present challenges with regard to measuring these goals in several areas of PQI.

With regard to Governance, it has been a challenge to find people interested and committed to serving such a widespread geographic area. To help with these challenges we have developed ways to hold virtual meetings and conference calls to increase participation. We are currently looking for board members to represent the new service area as well as other service areas. In 2019-2020 we were able to secure two more board members but also had two board members terms expire. We still have a small board and attempts at recruiting more board members have not always been successful.

It would be accurate to characterize 2019-2020 as a year full of challenges due to the pandemic, reaccreditation efforts, and new contractual requirements, but also a year of innovation and continued change and growth for the agency.

Prepared by: Jessica Sampley

CEO / Executive Director

2019/2020 Financial Statement/Report

	Statement of Activities
Total Support and other Revenues	\$2,520,798
Total Expenses	\$2,126,886
Balance	\$393,912
	Statement of Cash Flows
Cash, beginning of year	\$657,069
Cash, end of year	\$1,087,055
Increase in cash	\$429,986
Net Assets Adjusted Beginning of Year	\$1,934,876
Net Assets Year End	\$2,328,788
Balance	\$393,912
18% Expenses to Admin	/Support
82% Expenses to Progr	ams/Services

Financials audited by: Watkins Uiberall, PLLC

	2015/2016	2016/2017	2017-2018	2018-2019	2019-2020	Difference after 5 years	*Notes
Statement of Activities	\$1.559.921	\$1.540.636	\$1.710.099	\$2 052 348	\$2 520 798	\$960 877 →	* The reason for substaintial increase in 2010,2020
Expenses	\$1,521,450	\$1,551,456	\$1,634,105	\$1,986,750	\$2,126,886	\$605,436 ♠	is the PPP Loan Program
Balance	\$38,471	-\$10,820	\$75,994	\$65,598	\$393,912	\$355,441	*in the balance of income over expenese over 5 years
Statement of Cash Flows							
Cash, beginning of year	\$644,374	\$701,987	\$670,625	\$803,790	\$657,069	\$12,695	
Cash, end of year	\$/U1,98/	\$670,625	\$803,790	\$657,069	\$1,087,055	\$385,068	
Increase in cash	\$57,613	-\$31,362	\$133,165	-\$146,721	\$429,986	\$372,373	* in cash over 5 years
* Net Assets Adjusted Beginning of Year	\$1,765,642	\$1,804,113	\$1,793,293	\$1,869,287	\$1,934,876	\$169,234	
* Net Assets Year End	\$1,804,113	\$1,793,293	\$1,869,287	\$1,934,876	\$2,328,788	\$524,675	
	\$38,471	-\$10,820	\$75,994	\$65,589	\$393,912	\$355,441	* in assets over 5 years
Expenses to Admin/Support	16%	16%	15%	16%	18%		* Below the IRS recommendation
Expenses to Programs/Services	84%	84%	85%	84%	82%		* Above the National Average
Financials audited by:	Watkins Uiberall						

ADDITIONAL/SUPLEMENTAL SERVICES & PROGRAMS

Substance Use Groups - All Areas Combined Total youth and/or Parents Served in Groups	62	Unduplicated
Average Served per month Average weekly attendance	5 15	
Community Service	Units of service	Staff Hours Providing Service
1st Judicial District Counties	269	134.5
2nd Judical District - Crittenden only	275	137.5
17th Judicial District Counties	270	135
Total	814	407
Parenting S	Sessions	Unduplicated # Served
2nd JD Crittenden	7	2
1st JD	17	30
17th JD	O	13

hs	Crittenden Site only
1326	Units of Day Services
663	Hours of Class time

Total

29 5

45 3

lotal	2nd Judical District - Crittenden only	1st Judicial District Counties	S	Court Appearance U	Number of Sessions	Average attendance per session	Average Weekly Served	Average Monthly Served	Annual Total of Monthly Attendees	Day & Evening Reporting Center Acti
2076	367	1513	service	Units of	88	18	42	168	2027	vities/ E
519	49 92	378	in Court	Staff Hours					2027 Duplicated	vents - Structured F
										Day & Evening Reporting Center Activities/ Events - Structured Recreation / Motivational Life Skills Sessions

Includes Power Source, Parenting, Substance Abuse Groups & Stuctured Recreations/Motivational Life Skills (All AREAS)

^{*} Group Events, Community Service & Presentations are not reflected in the DYS State database with regard to number of clients served. Some services and clients served have been manually counted from agency records.

1st Judicial District Counties 2nd Judicial District - Crittender Other Counties Grand Total	47th Indicial								Ci did	Grand Total			Foster Care	Foster Care Youth		At Risk, FINS & Delinquents	16 & 17 yr olds	GED Program		Subtotal	ISC	Aftercare	Adj Deling.	Adj Fins	Diversion	DYS/CYS	Classification	
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YOUTH SERVED by RACE/GENDER/PROGRAM JULY 1, 2019 - JUNE 30, 2020

Juvenile Justice

Total	Grand							SubTotal	Other	African- Amer	White	Foster Care Youth		SubTotal	Other	African- Amer	White	GED Frogram	CED	SubTotal	Native Amercian	Other	Hrspanyc/Black	Hrspanic/White	African-Amer.	White	
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other counties Grand total	1 / In Judical District Counties 1st Judicial District Counties 2nd Judical District - Crittenden +	Total	Grand			Subtotal	remaie	Male	Foster Care Youth	Subtotal	Female	Male	GED Program	Suprotal	remaic	Male	Youth	Juvenile Justice
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Male Female Unduplicated

The unduplicated count does not include numbers served in the prevention or non court involved youth in the B2M/SA or other supplemental programs

Totals	Child Welfare DCFS	not enrolled in public school GED	Juvenile Justice DYS	Unduplicated # of Clients Served
341	38	48	255	2015-2016
326	56	47	223	2016-2017
324	44	44	236	2017-2018
370	51	ω	316	2018-2019
331	25	19	287	2019-2020 v from
-39	-26 +	16 →	-29 +	Variance from previous year
* We believe that the decrease in numbers served is related to COVID 19			* The Court was suspended for several months.	*Notes

1) Client Satisfaction:

To maintain at least 90% satisfaction with services.

Goal Achieved

92% of clients surveyed reported services being helpful at closing of the case.

Also, 92% of clients surveyed indicated satisfaction at the 15-day assessment.

Notes: 92% would call or come back if they needed assistance.

2) Educational Progress in Residential Services:

To increase Grade Level Averages of TABE scores by one grade level between pre and post testing in 50% of youth in residential services for at least 30 days and/or more.

Goal Not Achieved

31% of students tested after 30 days increased grade levels but only 21% by a full grade level.

Notes: We attribute the non-achievement of this goal to the ending of school in March and students being quarantined to do school work while quarantined.

3) Finance:

To continue to have "clean" or "unqualified" independent audits and internal quarterly reviews with no "findings" (ex: issues of non-compliance).

Goal Achieved - No Audit findings.

The agency was given a "clean" or "unqualified" audit by the accounting firm of Watkins & Uiberall PLLC on September 18,2020. Further, there have been no deficiencies cited during internal quarterly QA reviews or from monitoring by outside agencies.

4) Staff Turnover:

To show no increase in the staff turnover rate, if there are no downsize efforts.

Goal Achieved

Turnover rate in 2019-2020 was 32% or 15 out of 47 positions/staff. This was lower than the percentage the previous year which was 36% *Notes:* 13 of the 15 positions involved were in the Residential component.

Of those surveyed at Exit:

*(7 %) - Pay

*(21%) - Work Environment

*(7%) - Return to school/education

*(57%) - No reason given

*(15%) - Terminated by the agency

All residential staff did receive an increase in pay and all direct care staff also received a significant upgrade.

It should be noted that the demands of an increasingly more challenging population along with less conventional shifts or work time and weekend work do play a role in this statistic. Further, people were not motivated to work for \$10 -\$11 per hour when they were paid more than this in employment benefits not to work during COVID-19 pandemic.

5) Organizational Safety:

To maintain a low number of accidents. (No more than 1 per quarter or 4 annually.)

Goal Achieved

There were only (2) accidents for the year.

Notes: Both were in the Residential Component. Both had injuries and had to seek medical attention. One, a staff was playing sports outside with clients, fell and injured her hand. The other was just walking from one building the next, tripped on the sidewalk and hurt her leg/foot.

6) Work/Service Environment:

To maintain a low number of grievances with none being filed as the goal,

Goal Achieved

There were (0) grievances filed for the total agency in 19/20.

7) Service Delivery – Record Keeping:

To maintain (0) findings in the external reviews of records while working towards achievement of the same standard of accuracy with the agency's internal standards and reviews.

Goal Achieved

There were no findings by external agencies that required corrective action of any substantial significance.

Notes: Any issues cited were corrected immediately. Internal reviews or audits of cases by supervisors do find errors and issues of non-compliance. It is determined that our agency internal audits are more exhaustive. The agency scrutinizes our work more than outside agencies do and when errors are found we make corrections if possible. There was a monitoring visit performed virtually during the pandemic shut down for the DYS contract, but no report has been issued to us to date on this review. Also, an internal review during the "working from home" stint found a staff person to be reporting to have contacts with clients when the staff person was not. This staff person was terminated.

8) Service Delivery – Therapeutic Setting:

To maintain a low number of serious incidents in 10% or less of total clients served.

(Serious incidents classified as: Elopement or Runaways, Arrest, Suicidal Threats / Gestures, Medical Emergencies including loss of life & Allegations of Abuse against facility/staff)

Goal Not Achieved - but greatly improved from previous year.

There were 61 serious incidents involving a total of 47 youth meaning that some youth were involved in serious incidents multiple times. With an unduplicated count of 331 youth across all services this computes to 15% of youth served were involved in serious incidents. This is a 7% decrease over the previous year and is significant.

The breakdown of service components indicates (35) or 58% of these incidents occurred in the residential component and (26) or 43% occurred in the nonresidential component.

Notes: This goal is related to NUMBER OF YOUTH INVOLVED IN SERIOUS INCIDENTS COMPARED TO TOTAL CLIENTS SERVED

There remains a high number of arrests of nonresidential clients especially in "pockets" of the EAYS service area where crime, gang activity and poverty levels are also high.

9) Client Outcome:

Goal Achieved - partially

To show progress (or maintain, if at the most desired level) in 50% of all applicable cases in the areas measured of School, Family & Justice System.

Notes: Although collected internally, EAYS does not have the ability "in-house" to compile and maintain this data for DYS services and we are currently relying on the data system of the State Agency of DYS for this. This presents a challenge for demonstrating the accomplishment of this goal. Therefore, we revised this goal to something that is measureable at this time.

School - partial

Residential - 31% of students tested after 30 days increased grade levels but only 21% increased by 1 grade level or morel. 77% were enrolled in school after discharge from the Group Home or had obtained the GED. (This is an additional goal under the Title I Program.) We also had one resident graduate from High School at Marion.

Non-Residential- At this time we do not have a computation of educational progress for non-residential clients.

Our GED program did resume this year but shut down in March due to the pandemic.

Justice System - achieved

Residential - 7% of clients being served were arrested or obtained new charges while in the program (3 out of 43)

Non-Residential – 8% of clients being served were arrested or obtained new charges while in the program (23 out of 288)

Additionally, 92% of clients surveyed reported services being helpful at closing of the case.

(92% of clients reported satisfaction at the 15-day assessment & 92% indicated that they would call or come back if they needed assistance)

QA REV by MPK 8/27/2020 QA Team Rev - 9/19/2020 CEO REV by JS 8/27/2020 & 9/19/2020 Board Rev 9/19/2020 & 9/24/2020

EAYS, Inc. - Performance Quality Improvement Goals 2020-2021

1) Client Satisfaction:

To maintain a minimum of 90% satisfaction with clients in all services with regard to:

Services being helpful

Staff person being helpful and kind

Staff or help being accessible to clients

The client would seek help with us again if needed

We have consistently for the last several years maintained more than 90% in this area.

2) Educational Progress in Residential Services:

To increase Grade Level Averages of TABE scores by one grade level between pre and post testing in 50% of youth in residential services for at least 30 days and/or more.

 Explore the possibility of expanding this to other components beyond residential services for implementation possibly looking at a sample population, for example: DYS committed youth.

3) Finance:

To continue to have "clean" or "unqualified" independent audits and internal quarterly reviews with no "findings" (ex: issues of non-compliance).

To increase the diversity of funding to the agency by 1-5%

4) Staff Turnover:

To decrease staff turnover in the residential component progressively over the 2019-2020 fiscal year from the beginning of the year to the end.

Explore & examine our recruiting, application, hiring and orientation efforts or process.

5) Organizational Safety:

To maintain a low number of accidents. (No more than 1 per quarter or 4 annually.)

Continue with the Relias Learning web based training curriculum which has training that addresses workplace safety. This
has been working well as accidents have remained very low. Also, practice drills for crisis situations, CPI training and other
risk prevention measures have been productive.

6) Work/Service Environment:

To maintain a low number of grievances with none being filed as the goal.

- Continue with our QC/PQI efforts asking for feedback and input from all staff.

7) Service Delivery – Record Keeping:

To maintain (0) findings in the external reviews of records .

EAYS, Inc. - Performance Quality Improvement Goals 2020-2021 - continued

8) Service Delivery – Therapeutic Setting:

To maintain a low number of serious incidents in 10% or less of total clients served.

(Serious incidents classified as: AWOL, Arrests and Suicidal Gestures, Allegations of abuse, Medical Emergencies including loss of life)

- Continue with the Power Source curriculum with individual and group clients agency wide in all service components.
- Integrate more evidence-based practices related to Trauma Informed Care. We are implementing a new program in the group home related to this if funded by DCFS grant.

9) Client Outcome:

To show progress in 50% of all applicable cases in the areas that we have the means to measure which are at this time:

- 1) Educational Progress/School
- 2) Justice System / Therapeutic Environment
- 3) Client Satisfaction

QA Rev MPK 8/27/2020 QA Team Rev – 9/19/2020 CEO REV JS 8/27/2020 Rev Board 9/19/2020

Reviewed/Updated: 9/2020

GOALS	Status/Progress	Comments
	NEEDS ACTION	Continue to maintain accreditation.
	initiated, in	Maintain/Increase funding for our complete service area as expanded
BBIODITY BBIODITY	Progress and	We were the successful respondent to DYS RFQ for Region 14
	Continuous	Applied for additional funds for QRTP Group Living Training/Program Curriculum
	FY 2019-2020	as maintenance of current ones. Projecting more ability to do this with the OA position filed
	NEEDS ACTION	The number served was on the increase but has been reversed in
Capacity	Initiated but needs	the presence of COVID-19
z. Increase the number served	attention	The number served in the Group Home has also been impacted by
		the agency's inability to hire and retained qualified direct care
	New developments	especially on the weekends.
	FY 2019-2020	Attempting to implement a new staffing pattern at Group Home.
	NEEDS ACTION	Counties where this is not physical site: Lee , Monroe, Philips , Woodruff
ACCESSIDING	Last expanded	To expand our physical plant we must also stabilize and increase
o. Have a physical presence in each county served	FY 2018-2019	resources and funding.
TRIORITY		Specifically need a physical presence in Phillips Co. to meet with clients
		and have groups, events, etc Provide greater visibility efforts
		We want to fill in the gaps in our continuum.
A D more complete continuum of continue and capacity		We have partially restored the group home to its full capacity when we resumed
	Initiated and	taking females in 2017-2018.
inclease services and programs available in all counties.	On - going	Set backs during this 2019-2020 cycle with COVID-19
		GED services were restored with the return of public school
		Even with these we continue to expand Therapy, Substance Abuse Program and
	New Developments	evidence based efforts.
72.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	FY 2020-2021	Career Coaching and Support began as a new service in July 2020
outei responsibility improvement	NEEDS ACTION	Beginning 7/2020 the State began a backward approach to impacting this.
Reduce the rates of youth committed to DYS in our service area.	Initiated and	This method is in contradiction with REFORM efforts
Maintain acceptable numbers.	in progress	
		We have maintained commitments is most counties
Technology and Accountability	NEEDS ACTION	The agency has been collecting large amounts of data but maintaining
of povernment appainity to collect data and measure outcomes independent		some of this is largely relying upon state agencies to compile and maintain.
or government agencies		The state agency has changed some of this methods and reporting that will impact the
PRIORITY		amount and types of data we can retrieve. Now more than ever,
	FY 2020-2021	to get the information that we need to show effectiveness and accuracy, we need to do this in-house.
OR EACH GOAL OF THE PLAN ARE INCLUDED IN THE COMPLETE OF		
Core Competencies		Purpose
*Everyone has potential Strength in Training Caseworker Staff Youth who complete programs and sa	eardings with	To give youth who are challenged due to educational, socioeconemic, or
	services with	other risk factors, the opportunity to change the course of their lives.
Framework		

empower them to become healthy and productive members of their communities. and advocacy services, to youth and their families, and to instill motivation and courage to The mission of East Arkansas Youth Services, Inc. is to provide a comprehensive continuum of care to include therapeutic, educational,

ACTION NEEDED

NEW COMMENTS, DEVELOPMENTS or RECOMMENDATIONS

Youth who complete programs and services with EAYS do not re-offend. (Parameters & Benchmarks - See PQI Plan)

*Resourceful & Creative Motivated - Self Driven Relentless in efforts

Purpose Contingency Consistency Framework

East Arkenses Youth Services, Inc. - Board List 2020

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מספונט ווורוווטראט	TOME/WORK ADDRESS	County of Residence	County of Residence OCCUPATION/REMARKS HomePhone	- 1	WorkPhone	EXP/3 yr.terms		E-Mail
				- (ł			
Carl Weatherford - President	10 CR 393, Wynne, AR 72396	Cross	Cleray	870_362_1000		Alaloon		
Male/White			3)	0.00-000-		17071111	1st I erm	bro.cario mcom
							1st Term as President	sident
2								
Snerry Holliman	101 Windcrest Cove, Marion 72364	Crittenden	Mediator	870-514-4631		1/1/2024)
Female/Black			City Council	0.00		17 17 20 24	IST Ferm	Taxaatin mo. (Whot mattern
Kelsey Hensley - Sec/Treasurer 1 Alta Vista Drive, Marion 72364	1 Alta Vista Drive, Marion 72364	Crittenden	Private Business Owner 901-490-1849	901-490-1849		4/4/2022		
Female/White				1001000		177071111	2nd lerm	HELSAVDICADIO OM ALLCOM
				Cest			3 terms as Sec/Treas.	ec/Treas.
LaTwon Whithy - Vice President 3403 W Broad Committee	W COVE	۱						
Male/Black	STOR WE DIOGRAMMY, FORTECT CITY	St. Francis	Food Pantry Manager	870-270-0825		1/1/2022	2nd Term	Two nwater to the comment of the com
				cell			1st Term as V. President	resident
Iderson	1131 Rollins Street, Earle AR 72331	Crittenden	NonProfit - CEO	904-412-3410		1/1/2022	1et Term	
remale/Black								a mondallanderson@gmail.com

Board Meetings are the 4th Thursday of each QUARTER unless otherwise specified.

Auditor --- Daniel Moore - CPA Watkins Uiberall PLLC

Phone: 901-761-2720

Memphis, Tennessee

Mail: EAYS, Inc

104 Cypress Marion, AR 72364

Jessica Sampley - Executive Director E-Mail: jessica.sampley@eays.org Cell: 870-225-1934

Madelyn P. Keith - CEO Emeritus

870-636-8166