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| FY17 Program Performance Indicators St. Clair County CMH Blue Water Developmental Housing Children's Waiver (74267) | | | | | | | | | | |
| **#** | **Domain (Master #)** | **Primary  Objective** | **Performance Indicator** | **Data Collection/Methodology** | **PI Standard** | **1st Quarter** | **2nd Quarter** | **3rd Quarter** | **4th Quarter** | **Annual** |
| 1 | Effectiveness M-7 | CMH Supports & Encourages Community Partnerships | Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit. | Program will forward ANNUALLY (4th Quarter) a brief summary of activities that have occurred. | Reported  Annually  (4th Qtr.) |  |  |  |  |  |
| 2 | Satisfaction M-8 | Customer Satisfaction | Percentage of persons served, parents, family members and/or guardians who report satisfaction with services. | Customer Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements. | Results Annually 90% (# of #) | Reported In 3rd Quarter | Reported In 3rd Quarter |  |  |  |
| 3 | Effectiveness M-39 | Ensure Program Quality | Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial)  b. "REQUIREMENTS" | Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed. |  |  |  |  |  |  |
| a. Recipient Rights (Initial)  (within 30 days of hire) | 100% (# of #) | No New Hires | No New Hires |  |  |  |
| b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.) | 100% (# of #) | No New Hires | No New Hires |  |  |  |
| 4 | Effectiveness M-40 | Ensure Program Quality | Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form". | Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed. | 100% (# of #) | No New Hires Previous Quarter | No New Hires Previous Quarter |  |  |  |
| 5 | Effectiveness M-41 | Ensure Program Quality | Percentage of staff employed greater than one year who are current with ALL trainings, as specified on the "Training/Requirement Reporting Form".  \*ONLY report on a staff once per fiscal year. | Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for 3 staff within the reporting quarter. | 100% (# of 3) | 94%  (2) (1@96%) (1@92%) P.O.C. RECEIVED | 100%  (2)  \*REVISED |  |  |  |
| 6 | Effectiveness M-42 | Staff Receive Supervision Regularly Both On Site & in the Community Regarding Service Implementation | Percentage of staff received supervision at regular (30 days) intervals. Annually, each staff member will have 50% of the supervision face to face; the other 50% will be provided by other identified methods, i.e., phone and/or staff meetings. | Program will maintain records and provide confirmation of staff supervision. | 100% | 100% | 100% |  |  |  |
| 7 | EffectivenessM-48 | Maintain Individual's Placement in Community | Percentage and number of person served maintaining their desired living arrangement with the necessary amount of support. | Program will calculate the percentage of persons served maintaining their desired living arrangement with the necessary amount of supports using a. & b. | 95%  (a. of b.) | 100%  (6) | 100%  (4) |  |  |  |
| a. Number of person served who are maintaining their desired living arrangement with the necessary amount of supports. | a. (#) | 6 | 4 |  |  |  |
| b. Number of persons served who have requested and are still waiting for their desired living arrangements with necessary amount of support. | b. (#) | 6 Requested 0 Waiting | 4 Requested 0 Waiting |  |  |  |
| **#** | **Plan of Correction (ONLY if PI Standard NOT MET) BWDH Children's Waiver 267** | | | | | | | | | |
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