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| **Blue Water Developmental Housing, Inc.****Quality Improvement Plan****2021-2022** |

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**Introduction**

Blue Water Developmental Housing, Inc. (BWDH) was founded in 1976. The organization operates as a private, non-profit organization that is dedicated to assisting individuals with developmental disabilities and other special needs in reaching their full potential. The organization encourages independence by providing supervised; community-based living alternatives for children and adults. Blue Water Developmental Housing, Inc. emphasizes the least restrictive, most natural settings possible in providing services that help build dignity, self-worth and encourage self-expression. Through the years, BWDH adopted a “best practice” implementation policy and has a recognized ability to incorporate new programs into its operations in a seamless, positive manner.

BWDH has over 40 years of experience in developing an efficient, organizational structure to meet community needs. On June 16, 1976, BWDH proudly opened its first home, Blue Water House for St. Clair County’s developmentally challenged individuals. Blue Water House serves children with developmental disabilities and offers respite services. Springborn Home opened in May of 1979—serving adults with developmental disabilities. From 1980 to 1983, two more homes—Stonybrook and Semi-Independent (Tenth Street Home) opened. In November of 1985, the Eunice Hayes Home opened to further reduce the institutional population. Maple Street Home opened in 1986, followed by Oakleaf Home, Thornhill Home, Pam McDonald Home and Mackey Home from 1991 to 1998.

In 1992, the board and employees of Blue Water Developmental Housing embraced the philosophy of the emerging Community Based Living Arrangements (CSLA) program as well as the Michigan Children’s Model Waiver Program. An individual residing at the Semi-Independent Home was one of the first individuals signed up for the new CSLA program with dreams of living independently. With support services provided by BWDH, he now lives in an apartment and holds a job in the community. The organization grew rapidly without sacrificing its flexibility to accept change. Over the past several years, Supported Living Arrangements (SLA) have emerged which provides supported housing to adults with various disabilities.

Through the years, BWDH has learned to adopt a “best practice” implementation policy and has a recognized ability to incorporate new programs into its operations in a seamless, positive manner. In 2000, St. Clair County Community Mental Health offered BWDH the opportunity to assume operations of Jones Place, a group home for children with severe emotional disturbances. The transition was successful and BWDH assumed full operations in August of 2000. In 2006, Jones relocated to Marysville and the home was renamed The Children’s Home of St. Clair County. The home closed in 2012. During the summer of 2002, Macomb-Oakland Regional Center (MORC, Inc.) urged BWDH to assume operations of a six-bed home in Romeo, Michigan. With only 30 days’ notice, BWDH met the challenge in October of 2001 by smoothly transitioning the program up to BWDH standards.

In June 2006 BWDH contracted with the Board of Sanborn Gratiot Memorial Home to provide administrative and management services. Sanborn Gratiot Memorial Home is a home for the aged and in operation since 1947. The facility provides services for up to 30 residents aged 60 and older.

In 2018, BWDH assumed operation of two licensed small group homes, Nottingham and Bruce Hills, in Macomb County. In 2019 the organization assumed the operation of Pound Road Home a licensed small group home in Macomb County.

**Our Mission**

We provide a variety of quality services and supports to people

with special needs and those involved in their lives.

**Our Vision**

* Blue Water Developmental Housing as the provider of choice for housing, respite, and community-based support services for people with special needs.
* Employing staff who are highly trained and dedicated to providing services, which reflect the values of the organization.
* Relationships with other service providers, community service groups, funding sources, and other organization that help advance and enhance the services we provide.
* Continuously improving the quality of our services based on input from stakeholders and the individuals we serve.

**Our Values**

* Blue Water Developmental Housing provides a choice of supports and services which meet the consumers’ needs and are tailored to give individuals the opportunity to grow and develop in their home community.
* That individuals served are treated with dignity and respect.
* The people we employ are caring, dedicated, and trained to provide exceptional services in an ethical and fair manner.
* The organization believes that communication and cooperation at all levels is crucial to support our focus on teamwork.
* Services provided are effective and efficient.
* Services are developed in partnership with other providers, community service groups, local business, and interested stakeholders.
* Services are driven by input from those we serve or may serve and stakeholders.
* That those receiving services and their family members must be well informed of the options available to them and supported in expressing their choices.
* Consumer relationships outside the service system should be encouraged and promoted.

Our mission, vision, and value statements have directed the decisions and services our organization was built on.

Our mission, vision, and value statements continually guide the Board members and employees in strengthening our focus on providing seamless, flexible, consumer driven services in a fiscally sound manner.

**Current Supports and Services**

Currently we provide licensed residential services in thirteen (13) licensed group homes for adults with developmental disabilities. Blue Water Developmental Housing contracts with St Clair County Community Mental Health and Macomb County Community Mental Health to provide support staff to children and adults living in their family home or independently in the community in unlicensed settings. Services provided include:

* An average of 16,072 hours a month of Enhanced Community Based Support Services (Respite Care, Personal Supports, Training, and Community Integration) provided in St. Clair County.
* Approximately 893 hours a month of Enhanced Community Based Support Services provided in Macomb County.
* Seven Licensed Group Homes for Adults with developmental disabilities in St. Clair County.
* Six Licensed Group Homes for Adults with developmental disabilities in Macomb County.
* A 2-unit apartment for individuals with a disability in St. Clair County operated by an affiliate organization.
* 3 residential homes for women of domestic violence with children operated by Blue Water Residential Non-Profit Housing Corporation.
* 12-unit apartment complex for individuals with a disability in St. Clair County.
* 2 single unit condos for individuals with developmental disabilities operated by Blue Water Residential Non-Profit Housing Corporation.
* 18 Supported Living Arrangements in St. Clair and Macomb County

**Community Events**

The individuals we serve can participate in community events as well as special trips. Some of those include:

* BWDH Christmas Party
* BWDH Annual Company Picnic

**Highlights**

Employees of BWDH have received awards or commendations recognizing their quality of work and dedication. Others volunteer extra services to the community and play active roles on committees, workgroups, and/or councils. List below are some of the active employees:

* Recipient Rights awards:
* Kathleen Swantek, Executive Director, chair of the Housing and Supports Services Workgroup of the St. Clair County Community Services Coordinating Body and is a member of: The Michigan Association of Community Mental Health Services Boards Provider Alliance; vice president of the Macomb County Provider Alliance, member of the St Clair County Provider Alliance, and member of Rotary of Port Huron.
* Kathryn Baker, Co-Chair of the United Way of St. Clair County Human Services Campaign; Community Based Services Director, member of St. Clair County CSCB, Inter-Agency Service Team of the Housing and Supports Services Workgroup, and plays an active role with Woman’s Life of St. Clair County Chapter 806.
* Vonda Willey, Administrative Services Division Director, chairperson of St. Clair County CSCB Inter-Agency Service Team

**Community Needs Assessment**

Blue Water Developmental Housing provides quality services to individuals with developmental disabilities. To continue providing these services BWDH must review trends within the community and compare them with the service provision trends within the organization. A comprehensive *Community Needs Assessment* (CNA) is conducted when reviewing trends and is a critical component for the organization’s ability to plan, implement, monitor, evaluate, and refine its service delivery system.

**Racial and Ethnic Composition**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Report Area** | White | Black | American Indian | Asian | Native Hawaiian & Pacific Islander | Mixed Race |
| St. Clair County | 93.5% | 2.1% | 0.17% | 0.68% | 0.02% | 2.9% |
| Macomb County | 81.5% | 11.4% | 0.29% | 3.89% | 0.04% | 2.29% |
| Michigan | 78.5% | 13.8% | 0.53% | 3.06% | 0.03% | 2.85% |
| United States | 76.3% | 12.72% | 0.86% | 5.63% | 0.19% | 3.45% |
| Source: US Census Bureau, American Community Survey. 5 year nestimates 2014-2018 |

**Disabilities**

**Population with Any Disability under age 65**

This indicator reports the percentage of the total civilian non -institutionalized population with a disability.

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| --- | --- | --- | --- | --- | --- | --- |
| **Report Area** | White | Black | American Indian | Asian | Native American | Mixed Race |
| St. Clair County | 17.0% | 19.8% | 28.3% | 5.1% | 44.7% | 18.1% |
| Macomb County | 14.4% | 13.9% | 25.7% | 7.5% | 0.0% | 13.0% |
| Michigan | 14.0% | 17.9% | 21.0% | 5.3% | 16.0% | 13.6% |
| United States | 13.2% | 13.8% | 16.9% | 6.9% | 11.1% | 10.7% |
| Source: US Census Bureau, American Community Survey. 5 year nestimates 2014-2018 |

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| --- | --- | --- | --- |
| **Report Area** | Percentage |  |  |
| St. Clair County  | 16.9% |  |  |
| Macomb County | 14.0% |  |
| Michigan | 14.3% |
| United States | 12.6% |
| Source: US Census Bureau, American Community Survey. 5 year nestimates 2014-2018 |

 **Demographic Trends: National, State and Regional**

**Mental Health**

**Access to Mental Health Providers**

This indicator reports the rate of the county population to the number of mental health providers including psychiatrists, psychologists, clinical social workers, and counsellors that specialize in mental health care.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Report Area | Estimated Population | # MHP | Ratio of MHP to Population (MHP per # persons) | MHP Rate (Per 100,000) |
| St. Clair | 159,337 | 389 | 410 to 1 | *244.6* |
| Macomb | 874,759 | 1,632 | 536 to 1 | *186.5* |
| Michigan | 9,995,915 | 26,788 | 373 to 1 | 267.9 |
| United States |  |  |  |  |
| MHP=Mental Health Providers |
| Community Commons: University of Wisconsin Population Health Institute, County Health Rankings. 2016. Source geography: County |

* There will likely be a large segment of needs unmet by the resources of the current public mental health system. These unmet needs will only be partially addressed by other treatments, natural supports and medical providers.
* If all persons having a developmental disability sought assistance, the current system would rapidly become overwhelmed.
* Additionally, all these scenarios are likely to be exacerbated as declining tax revenues and competing public interests have flattened-and in some cases reduced the resources available to community mental health systems and the agencies they fund.
* Finally, some long-term risk factors are growing; the population is aging and this; of course, include those individuals having a developmental disability. This, in turn, suggests that current service providers with need to “revamp” their approach to better address needs associated with chronic illnesses and the full range of geriatric issues.

**Service Gaps**

\*A new focus group will take place 3rd or 4th quarter 2022.

 June 25, 2020, Blue Water Developmental Housing hosted a parent/guardian focus group to discuss the current service gaps within mental health system. The discussion was facilitated by Community Services Division Director, Kathryn Baker, and Program Supervisor, Victoria Scheffler. Listed below are identified service gaps:

* There is an increased need for emergency respite care for adults with developmental disabilities due to the increased number of people with developmental disabilities being served in their own homes in the community.
* There is a high turnover of staff, work on ways to improve retention.
* The staff need more frequent training on the Individual Plan of Service to implement all portions of the plan.
* The staff make wages which are too low. Continue to advocate at the state and local level to improve staff wages.
* A housing option that provides more security is needed. Consider the feasibility of providing a housing option that has secure building entry for person supported through a hallway that does not open to the outside.
* Parents are not receiving information that directly affects the persons supported. Consider a communication to parents semi-annually that provides information about upcoming and pending changes that affect services.

**Internal and External Assessments**

**Internal Strengths**

Internal strengths are resources or capabilities that help an organization accomplish its mandates or mission. Blue Water Developmental Housing, Inc. has many internal strengths that have been recognized nationally by CARF, regionally by the State of Michigan and locally by St. Clair County Community Mental Health Authority. Below is a list of the strengths of the organization. Blue Water Developmental Housing Inc.’s internal strengths are listed in Table 1.0.

**Internal Weaknesses**

Internal weaknesses are deficiencies in resources and capabilities that hinder an organization’s ability to accomplish its mission. Blue Water Developmental Housing Inc.’s internal weaknesses, as well as options for overcoming those weaknesses, are listed in Table 2.0. The weaknesses were objectively derived from focus groups with the management team, quality improvement reports and employee surveys. It is important to note that the recognition of an organization’s own weaknesses allows the organization to address and overcome them. Table 2.0 outlines the internal weaknesses.

**External Opportunities**

External Opportunities are outside factors or situations that can affect an organization in a favorable way. With the many changes in the mental health service delivery system, the opportunities are abundant. Table 3.0 outlines the external opportunities.

**External Threats**

External threats are outside factors or situations that can affect an organization in a negative way. Threats such as the decrease in funding and changes in state and federal laws can affect how we do business. The threats and how to overcome them are listed in Table 4.0.

**Industry Assessment**

As funding for health care decreases and more states use managed care programs, public managers will be under increasing pressure to provide evidence for the efficacy and efficiency of these new approaches. In addition, as managed care become more prevalent, stakeholders such as: policy makers, providers, and advocates have become concerned that declining costs may be coming at the expense of adequate access and quality of service.

**Assessment of Current Agency Stakeholder Expectations**

BWDH has a tradition of consulting with the individuals supported and stakeholders as a routine matter of how we do business. Because of this consumer orientation, BWDH is well positioned to solicit and receive comments on all aspects of its service through a well-developed, partnership network that involves all our programs. Regular meetings with funding sources etc. maintain a process of exchanging information that benefits all organizations involved. Ongoing direct communication as well as targeted surveys keeps us aware of the needs and desires of the individuals we support. Regular staff meetings and staff participation on committees and team activities ensure that employees are involved in the ongoing commitment of the organization to continuous quality improvement.

Individuals served

* A good quality life
* Satisfaction with services received
* Direct decision-making regarding services received
* Qualified, caring, respectful staff

Families of those served

* Family member to be safe (security and freedom from abuse and neglect)
* Family member to be healthy
* Fully informed about services and care
* Participation in the decision-making process

Legal representatives/public guardians

* Persons to be safe
* Organization to comply with all standards of care

Board, administrative & employees of BWDH

* Provide quality services
* Fiscal stability
* Informed about all the factors that influence the organization status and the consumers in the organization’s care
* Staff want to feel a sense of accomplishment and appreciation along with recognition for the work they do

Funding sources (purchasers of service, St. Clair County CMH, Macomb County CMH)

* Purchase quality services
* Expect accountability

Health Care and Support Service Providers

* Interaction with knowledgeable BWDH staff that inform them about the persons served
* Less paperwork
* Timely reimbursement for their services

Constantly keeping in the forefront our Mission, Vision and Values; assessing what we have done during the past years, what is happening inside and outside our agency; being aware of the needs and wants of the people we serve, the community we live in, and the other community agencies, funding and referral sources-will allow Blue Water Developmental Housing to more clearly and intelligently plan for the future of providing quality services in residential settings and assisted living programs to persons with developmental disabilities and their families.

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| **Blue Water Developmental Housing, Inc.****Quality Improvement Plan and Report** |
| **October 1, 2021 - September 30, 2022** |
| **Philosophy of the Quality Improvement Program** |
| Supporting and improving the quality of life for the consumers served is the primary focus of Blue Water Developmental Housing, Inc. (BWDH) We recognize that achievement and excellence in our service to our consumers and enhancement of the environment in which we provide service is the responsibility of every employee. BWDH is committed to systematic and continuous quality assurance and improvement of its process, function, and services. We encourage the people we serve, the community we serve and our employees to assist us in our ongoing effort to improve both the effectiveness and efficiency of the organization’s systems and services. This commitment reflects our purpose, mission and values. |
| **Quality Improvement Process** |
| Blue Water Developmental Housing, Inc. is committed to systematic and continuous quality assurance and improvement in its process, function, and services. This commitment reflects the agency’s purpose, mission, and core values. To ensure representation of our consumers, community and personnel in all steps of our quality improvement process, the board of directors for BWDH authorize a Quality Improvement Committee. The Quality Improvement Committee meets on a quarterly basis to review current goals and data. This committee includes representatives for each of the following, BWDH management and direct services. The Board of Directors authorizes a quality improvement system to facilitate the ongoing process of assuring and improving both the effectiveness and efficiency of the organization’s systems and services. |
| **Opportunities for Quality Improvement** |
| Each year Blue Water Developmental Housing, Inc. develops specific goals to be that focus of our quality improvement process. These goals directly relate to our mission statement, values, vision and quality improvement philosophy. These goals, outcomes and performance indicators are analyzed and assessed on a continual basis so that any needed remedial action can be implemented, and quality excellence can be maintained. We also wish to promote a safe, clean and pleasant and comfortable environment for our consumers by continually maintaining and improving our facilities and grounds.  |

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| **Quality Improvement Report for Fiscal Year 2021-2022** |
| **Goal 1: To increase employment retention rate:**  |
| **Objective 1:** Residential will increase their fiscal year 20-21 retention rate of 72% to 85% for the 21-22 fiscal year. **Objective 2:** Community Based will increase their fiscal year 20-21 retention rate of 82% to 95% for the 21-22 fiscal year.**Strategy 1:** Educate management team on employment retention strategies.**Strategy 2:** Employee engagement/stay interviews.**Strategy 3:** Employee orientations.**Strategy 4:** Supervisor performance-based outcomes.

|  |  |  |
| --- | --- | --- |
| Retention Rate | FY 19-20 | FY 20-21 |
| Residential | 61% | 72% |
| Community Based | 79% | 82% |

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| **Goal 2: One hundred percent (100%) of employees will be compliant with training requirements.**  |
| **Objective 1: 100%** of BWDH employees will be compliant with training requirements set forth by the contracting agencies.**Objective 2: 100%** of BWDH employees will be compliant with training requirements set forth by BWDH. **Strategy 1:** Employees are to complete all required trainings and are informed if they fail to complete the required trainings they will be removed from the schedule until completion.**Strategy 2:** Supervisors will review the monthly training report and ensure employees complete required trainings.**Strategy 3:** Administrative Services Division Director will monitor quarterly training compliance. |
| **Strategy 4:** Division director will follow up with any program supervisor that is non-compliant and create an action plan. |

|  |  |  |
| --- | --- | --- |
| Training Compliance | FY 19-20 | FY 20-21 |
| Internal Training Requirements | 95% | 96% |
| External Training Requirements | \*87% | 92% |

 |
| **Goal 3: To increase awareness of workplace safety****Objective 1:** Identify total number of work injuries resulting in medical care only for fiscal year 20-21 and decrease this total by 25% for fiscal year 21-22.**Objective 2:** Identify total cost of worker’s compensation for fiscal year 20-21 and decrease this total by 25% for fiscal year 21-22.**Strategy 1:** Offer health and safety training to 100% of employees on slips, trips and falls. **Strategy 2:** Offer annual health and safety training to 100% of employees on proper lifting techniques.

|  |  |  |
| --- | --- | --- |
| Workplace Safety | FY 19-20 | FY 20-21 |
| Number of Injuries | 8 | 33\*\* |
| In-House Cost | $5420.72 | $1,047.00 |
| Accident Fund Cost | $31,911.17 | $37,367.81 |

 |
| \*Contract compliance only reflects St. Clair County as the tracking mechanism for Macomb County had too many variables. One, Cornerstone was where contract compliance was tracked for Macomb County homes and in April 2019 Cornerstone was no longer available to BWDH. BWDH did implement a new training mechanism, but that was not until October 2019. Two, Relias ended in September 2019 but even that was not programmed to track Macomb County contract compliance properly. Three, there are not clear training requirements as MORC and Macomb County CMH have conflicting requirements. Once BWDH fully understand the requirements, Paycor will need to be updated to track compliance. This is a work in progress. \*\* BWDH has experienced a significant increase in work-related injuries as any employee who develops COVID-19 and suspects it is work-related is required by OSHA to be reported as a work injury. Twenty two of the 33 reported are COVID-19 related. **Proposed Quality Improvement Goals for Fiscal Year 2021-2022** |
| **Goal 1** |
| **To increase employment retention rate** |
| **Objective**  |
| 1. Residential will increase their fiscal year 20-21 retention rate of 72% to 85% for the 21-22 fiscal year.
2. Community Based will increase their fiscal year 20-21 retention rate of 82% to 95% for the 21-22 fiscal year.
 |
| **Strategies** |
| 1. Educate management team on employment retention strategies
 |
| 1. Employee engagement/stay interview
 |
| 1. Employee orientations
 |
| 1. Supervisor performance-based outcomes
 |
| **Assigned Responsibility** |
| 1. Division directors and program supervisors
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| **Goal 2** |
| **100% of employees will be compliant with training requirements** |
| **Objective** |
| 1. 100% of BWDH employees will be compliant with training requirements set forth by the contracting agencies.
 |
| 1. 100% of BWDH employees will be compliant with training requirements set forth by BWDH.
 |
| **Strategies** |
| 1. Employees are to complete all required trainings and are informed if they fail to complete the required trainings they will be removed from the schedule until completion.
 |
| 1. Supervisors will review the monthly training report and ensure employees complete required trainings.
 |
| 1. Administrative Services Division Director will monitor quarterly training compliance.
 |
| 1. Division director will follow up with any program supervisor that is non-compliant and create an action plan.
2. Division Directors will monitor and update trainings.
 |
| **Assigned Responsibility** |
| 1. Program supervisors, and Division Directors
 |
| **Goal 3** |
| **To increase awareness of workplace safety** |
| **Objective** |
| 1. Identify total number of work injuries resulting in medical care only for fiscal year 20-21 and decrease this total by 25% for fiscal year 21-22.
 |
| 1. Identify total in-house cost of worker’s compensation for fiscal year 20-21 and decrease this total by 25% for fiscal year 21-22.
 |
| **Strategies** |
| 1. Offer Health and Safety Training to 100% of employees on slips, trips and falls.
 |
| 1. Offer Annual Health and Safety Training to 100% of employees on proper lifting techniques.
 |
| **Assigned Responsibility** |
| 1. Program supervisors, and division directors
 |

**Outcomes and Performance Indicators**

In addition to the primary quality improvement listed above, we also measure, monitor and evaluate the following additional outcomes and performance indicators chosen to meet agency, contract and accreditation requirements and standards:

**All Program Components**

* Admission/service denials – *effectiveness*
* Length of time from services request to initial face to face and then to delivery of services – *effectiveness and efficiency*
* Discharge of Termination Information – *effectiveness and efficiency*
* Parent/guardian and consumer Satisfaction Survey Results – *satisfaction*
* Continue in living situation or less restrictive environment – *effectiveness*
* Complaints/recipient rights – *effectiveness and satisfaction*
* Incident Reports (consumers and staff) - *effectiveness*
* Community Contacts – *satisfaction*
* Staff Hired/termination/separation/turnover rate – *effectiveness and efficiency*
* Training hours provided to staff – *effectiveness and efficiency*
* Staff meet training requirements (basic and specialized) – *effectiveness*
* New staff training within 30 and 90 days *– effectiveness*
* Medication Errors *– effectiveness*

*We invite the input of our consumers, stakeholders and personnel in all phases of our Quality Improvement process. Together we will establish Blue Water Developmental Housing, Inc. as a preeminent, private, non-profit human service agency that adds to the communities we service by supporting and improving human life.*

**Issues Addressed While Planning**

**Confidentiality**

Blue Water Developmental Housing, Inc. has a commitment to confidentiality to protect each person’s rights. These policies and procedures are applicable to all personnel of Blue Water Developmental Housing, Inc., including business and support staff. All employees are made aware of these policies and take seriously the trust placed in them by our consumers. Additionally, sources of information are protected from unauthorized use by procedures established to protect the Management Information System using locked files, rooms, facilities and computer systems that are protected and have limited access through password protection, and other security procedures in compliance with HIPAA.

**Management Information Systems**

 An integral part of the Continuous Quality Improvement process management is timely collecting and reporting of identified data elements. A data dictionary of elements as part of the Continuous Quality Improvement plan and specific procedures and tools has been developed to collect and report on those date elements. The Management Team is responsible to analyze report and formally address the information provided through each program component in order to help the organization make timely decisions regarding quality consumer care and the service delivery process.

 Blue Water Developmental Housing, Inc. has refined its data collection and MIS procedures and tools in order to accommodate more efficient information management. We implemented a Local Area Network system to address the fiscal, consumer, service and utilization management date needs of our agency.

**Accessibility**

Blue Water Developmental Housing, Inc. believes in broadening the boundaries of accessibility beyond our legal requirements to staff and consumers. We actively involve the community in enhancing aspects of the lives of individuals with developmental and other disabilities in the communities served. We do this through visible participation by those we serve and staff in community events, newsletters and press releases as well as participation on community boards and membership in national advocacy groups.

 We maintain physical accessibility at the group homes and reinforce the training of our staff, volunteers and others in our organization in recognizing the importance of diversity and cultural sensitivity and treating those we serve with respect and dignity. Special emphasis is placed on cultural sensitivity and person-centered planning. BWDH believes that attitudes and behaviors of employees are important when providing services.

**Corporate Compliance**

Blue Water Developmental Housing, Inc. (BWDH) developed a centralized corporate compliance plan which addresses our commitment to the provision of quality services for individuals with developmental disabilities. The plan was created in accordance with the guidelines set forth by the Department of Health and Human Services. Within these guidelines, we integrated our commitment to compliance, our policies and procedures, external and internal reporting mechanisms, training and education and evaluative techniques. The goal of the compliance program is integrating existing practices with new initiatives while providing avenues for employees to make ethics inquiries.

 The plan’s strong points include the incorporation of the Code of Ethics and the formalization of the reporting process. We are continuing to develop additional reporting mechanisms to ease the burden of excessive paperwork.

 All employees are encouraged to use our open-door procedure to discuss any matter of concern to them. They are also encouraged to report any violation of the Code of Ethics to their Supervisor, the compliance officer or the Executive Director without fear of retribution.

**Integration with Other Agency Programs and Projects**

The Quality Improvement Process is integrated into the daily workings of the organization. Outcomes and performance indicators are updated in individual programs. Information is transferred to the administrative and support staff for review, analysis and recommendations at quarterly meetings. The management team is composed of supervisors from each program component. Collaboration and integration of the planning, assessment and decision-making process is encouraged.

 Organizational goals are developed into measurable objective program goals that address the specific requirements of the individual program, thereby ensuring a roadmap to the planning process that guides the agency’s journey through the year.

**Ongoing Monitoring Process and Decision Making-Reporting and Feedback**

 The process of Quality Improvement demands ongoing monitoring of “real-time” information to make decisions that benefit consumers. Blue Water Developmental Housing compares actual performance to planned performance. Outcome and performance indicator data are reported to the Executive Director and Management Team monthly. Annual tactical goals, outcome measures and are reported on a quarterly basis to the Management Team and Board of Directors for analysis and remedial action. Stakeholders and consumer representatives are included in this review process. Remedial action plans are developed with specific implementation strategies, resource allocations, timelines, personnel accountability and are revisited at specific dates outlined on the plan.

**Dissemination of Report and Plan**

Input into the process of quality improvement is welcomed and encouraged. This report is distributed to the following:

* Blue Water Developmental Housing, Inc. Board of Directors
* Blue Water Developmental Housing, Inc.
* Management Team
* St. Clair County Community Mental Health
* Macomb County Community Mental Health
* Others as determined by the Blue Water Developmental Housing, Inc. Board of Directors

Feedback/comments are welcomed. Please send comments regarding this plan to:

 Division Director of Administrative Services

Blue Water Developmental Housing, Inc.

1600 Gratiot Blvd. Suite 1

Marysville, MI. 48040

Telephone 810-388-1200

Fax 810-388-0722

Email: vwilley@bwdh.org

**Internal Strengths: Table 1.0**

|  |  |  |
| --- | --- | --- |
| **Internal Strengths** | **Description** | **Options to take advantage of strengths** |
| Capable Staff |  Has the good fortune to attract and retain a disproportionately large number of capable, proficient, and talented staff members | Continue to explore ways to motivate andreward staff |
| Administrative Expertise | Experienced, talented and has been with the agency since the beginning. Invaluable asset to the organization | Create situations for speaking, share knowledge and passion with stakeholders, dual purpose: marketing |
| Accreditation | Consistently meets or exceeds standards of care prescribed by C.A.R.F. CARF certified in 2020 for three years | Advertise program/accreditation; continue to ensure the quality and consistency of care |
| High Satisfaction | Service users, parents/guardians and staff consistently rate the organization high regarding all quality of care and environmental factors | Continue to provide quality services and stay committed to improving services by asking “What can we do better” |
| Funding Source Relations | Continues to enjoy excellent relations with its funding sources. | Continue high degree of collaboration/cooperation with funding sources. Helps to ensure excellent reputation the organization throughout the region |
| Planning and Evaluation | Committed to the Strategic Planning approach which allows the agency to focus its efforts upon priority needs/issues. | Continue to monitor and evaluate the things that are being done right and work to change for continuous improvement |
| Community Collaborations | Viewed as having a high degree of interest and experience in collaborative and cooperative ventures with other entities. | Continue to address complex community issues |

**Internal Weaknesses: Table 2.0**

|  |  |  |
| --- | --- | --- |
| **Internal Weakness** | **Description** | **Options to overcome weakness** |
| Public Relations/Marketing can be strengthened | The strategic plan identifies goals and objectives to address this area. More focused and detailed plan would be helpful. | Further develop the plan for improving public relations and marketing in the community. Identify who is responsible for moving this plan forward. |
| Communication from Administrative to staff could be improved | Identified by the management team as needing improvement, the communication to direct care staff from upper management needs to be consistent and more frequent | Continue emphasis upon improving horizontal and vertical communications within the agency. |
| Healthcare costs continue to rise | Both external and internal cost of insurance coupled with organization’s inability to change the way plans are offered | Focus on prevention, employee wellness |
| Difficulty in attracting capable, career minded staff | The organization has significant employee vacancies and excessive amounts of overtime as a result | Continue to advocate for wage and rate increases from funding sources. Assess the ability to subsidize wages through fund development. Continue emphasis upon staff training and development. |

**External Opportunities: Table 3.0**

|  |  |  |
| --- | --- | --- |
| **External Opportunities** | **Description** | **Options to take advantage of Opportunity** |
| Need for Training in the Community | Direct Care Workers need certain qualifications. | Continue to build upon existing training program. |
| MI-Home (MSHDA)-funds available | Housing Funds available to 501 (c) nonprofit organizations | Submit funding applications to HUD when available and appropriate. |
| Supportive Housing for various populations | Need for supportive housing for persons with mental illness, victims of domestic violence, homeless individuals and families | Write grants and startup once funding is granted |
| Affordable Housing | Affordable housing for special needs populations along with an adequate supply of supportive services | Continue to address housing options and services for special needs populations |
| Housing Opportunities | Increasing demand for consumer choice and independence in living arrangements | Continue to address housing options. |

**External Threats: Table 4.0**

|  |  |  |
| --- | --- | --- |
| **External Threats** | **Description** | **Options to take advantage of Opportunity** |
| HIPPA (Health Insurance Portability Act) | HIPPA has tightened standards on medical records, confidentiality and ways of effective reporting | Training and implementation of HIPPAstandards |
| Decrease in community-based funding | Funding for traditional services is decreasing | Diversify services, consider fundraising and create efficiencies. |
| Balanced Budget | Decrease funding to public services | Lobby as allowed and encourage staff, parents’ communication to representatives |
| COVID 19 Challenges | Because of the pandemic, the State of Michigan instituted a state of emergency and the National Center for Disease Control instituted health and safety guidelines to slow the spread of the virus. This significantly impacts the operations of the organization. | More options for recruiting employees who have been laid off from work in other industries. |

Table 1.0 2.0 3.0 and 4.0 were populated using the needs assessment completed August 2020

Quality Improvement Loop **Attachment A**

 **PLAN**

 **Identify Problem & Root Cause**

 **Medication Errors – Training Procedure**

 **ACT DO**

**Prevent Reoccurrence Test Changes, Collect Data & Review**

 **CHECK**

 **Data Analysis**

 **(If results are good; make changes permanent)**

 **(If results are not good identify another potential solution)**