St. Clair County Community Mental Health

Program Performance Indicators Table Summary

CMH Direct Run, Contract Provider & AFC/CFC Results FY 2019

FY19 Program Performance Indicators St. Clair County CMH ACT (Assertive Community Treatment) Team (74156)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1		Increase Hospital Discharge Start Rates	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (1)	100% (4)	100% (4)	100% (2)	100% (11)
2	Effectiveness M-3	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	100% (1)	N/A	100% (1)
3	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (1)	50% (2 of 4) POC RECEIVED	25% (1 of 4) POC RECEIVED	67% (2 of 3) POC RECEIVED	42% (5 of 12)
4	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
5	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.)				Community Benefits Received	Community Benefits Received
6	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
7	Efficiency M-21	Timeliness of Service	Percentage and number of persons served who are seen within 24 hours of referral.	Program will calculate percentage based on numbers reported in a. & b.	95% (a. of b.)	100% (1)	N/A	100% (1)	100% (2)	100% (4)
				a. Number of person served seen within 24 hours of referral.	a. (#)	1	0	1	2	4
				b. Number of persons served.	b. (#)	1	0	1	2	4

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Г	8	Effectiveness	Ensure Program	Program supervisor will review individually	Data will be collected via the OASIS Software	Court Court	Caret Out	Comb Out	Camb Out	Comb Out	Sent Out
	- 1,		_	1	System and ADP and reviewed monthly.	Sent Out	Sent Out	Sent Out	Sent Out	Sent Out	Sent Out
	Į.	M-71	Quality	each staffs productivity percentages.	System and ADP and reviewed monthly.	&	&	&	&	&	&
- 1	- 1		1			Reviewed	Reviewed	Reviewed	Reviewed	Reviewed	Reviewed
						Monthly	Monthly	Monthly	Monthly	Monthly	Monthly
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FY19 Program Performance Indicators St. Clair County CMH Capac (74110)

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#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1	Increase Hospital Discharge Start Rates	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	100% (3)	N/A	100% (3)
2	Effectiveness M-3	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (11)	92% (11 of 12) POC RECEIVED	88% (7 of 8) POC RECEIVED	100% (11)	95% (40 of 42)
3	Efficiency M-4	Lower Hospital Admissions	Percentage and number of persons served who are admitted into a psychiatric hospital while receiving services.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	5% or Less (# of #)	N/A	1% (2 of 144)	3% (4 of 140)	2% (3 of 146)	2% (9 of 430)
4	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (2)	N/A	33% (1 of 3) POC RECEIVED	N/A	20% (1 of 5)
5	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
6	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	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.)				Community Benefits Received	Community Benefits Received
7	Satisfaction M-8	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	Results Annually 90% (# of #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
8	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Case Management/Supports Coordination DD (74145)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	1	Increase Hospital Discharge Start Rates	i ordaniago ana mambor or portonio domina	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	100% (2)	100% (2)	100% (2)	100% (6)
2	Effectiveness M-3	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (3)	100% (4)	100% (6)	100% (7)	100% (20)
3	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	N/A	50% (2 of 4) POC RECEIVED	0% (2)	N/A	33% (2 of 6)
4	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
5	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.)				Community Benefits Received	Communit Benefits Received
6	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
7	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Central Intake Unit Port Huron (74134) Capac (74173) Marine City (74175)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1		Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (34)	100% (41)	100% (23)	100% (45)	100% (143)
2	Effectiveness M-2	Start Timelines	Percentage and number of new persons served receiving a face to face assessment with a professional within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (316)	100% (349)	99% (331 of 333) *REV.9.13.19	100% (353)	99.8% (1349 of 1351)
3	Efficiency M-6	Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
	Effectiveness M-7	Encourages	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.)				Community Benefits Received	Community Benefits Received
5	Satisfaction M-8	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
6	Effectiveness M-19	Rates	,	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	85% (# of #)	98% (323 of 328)	99% (362 of 366)	98% (352 of 359) *Rev.9.13.19	99% (365 of 367)	99% (1402 of 1420)
7	Effectiveness M-20	Assessment LOC	assessment (CAFAS/PECFAS) during intake.	Certified clinician will complete a level of functioning assessment as required (CAFAS/PECFAS). Program will calculate percentage based on numbers reported in a.& b.	100% (a. of b.)	100% (94)	100% (104)	100% (129)	100% (132)	100% (459)
				 a. Number of persons served (children) who received a level of functioning assessment in the reporting period. 	a. (#)	94	104	129	132	459
				b. Number of persons served (children) receiving an intake in the reporting period.	b. (#)	94	104	129	132	459

FY19 Program Performance Indicators St. Clair County CMH Community Integration Services (74165)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1		Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	N/A	N/A	N/A
2	Effectiveness M-3	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	N/A	N/A	N/A
3	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	N/A	N/A	N/A	N/A	N/A
4	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
5	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.)				Community Benefits Received	Community Benfefits Received
6	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annualiy FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
7	Effectiveness M-22	Increase Community Integration	Percentage of persons served who attended a community outing that focused on either skill building or volunteering (based on an unduplicated count).	Program will calculate percentage based on numbers in a. & b.	% TBD (a. of b.)	97% (34 of 35)	97% (37 of 38)	97% (37 of 38)	97% (36 of 37)	97% (144 of 148)
			unduplicated county.	a. Number of persons served who attended a community outing that focused on either skill building or volunteering.	a. (#)	34	37	37	36	144
			Number of outings held within the community.	b. Number of persons served eligible to attend a community outing.	b. (#)	35	38	38	37	148
				Number of outings held within the community.	(#)	146	134	152	176	608

B Effectiveness M-23	Increase Community Integration and Employment	Percentage and number of persons served participating weekly in volunteer activities or supported employment.	Program will calculate percentage based on numbers reported in a. & b.	50% (a. of b.)	97% (34 of 35)	97% (37 of 38)	97% (37 of 38)	97% (36 of 37)	97% (144 of 148)
	Opportunities		Number of persons served participating weekly in volunteer activities or supported employment.	a. (#)	34	37	37	36	144
			b. Number of persons served eligible to participate weekly in volunteer activities or supported employment.	b. (#)	35	38	38	37	148
9 Effectiveness M-24	Increase Community Integration by Reducing Aggressive Behavior(s)	Number of Incident Reports that note physical intervention was needed.	Program will review Incident Reports and forward the number of aggressive behaviors that needed a physical intervention.	%TBD (# of #)	0	0	0	0	0
0 Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly					

FY19 Program Performance Indicators St. Clair County CMH DBT (Dialectical Behavioral Treatment) Program (74108)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1		Increase Hospital Discharge Start Rates	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (1)	67% (2 of 3) POC RECEIVED	N/A	100% (1)	80% (4 of 5)
2	Effectiveness M-3	Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	N/A	N/A	N/A
3	Efficiency M-4	Lower Hospital Admissions	Percentage and number of persons served who are admitted into a psychiatric hospital while receiving services.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	5% or Less (# of #)	7% (5 of 69) POC RECEIVED	7% (4 of 59) POC RECEIVED	6% (3 of 52) POC RECEIVED	3% (2 of 62)	6% (14 of 242)
4	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (1)	33% (1 of 3) POC RECEIVED	0% (1)	0% (1)	17% (1 of 6)
5	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
6	Effectiveness M-7	Encourages	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.)				Community Benefits Received	Community Benefits Received
7	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
8	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Galley Program (74119)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-29	Utilize Program Capacity	,	Program will calculate percentage based on numbers reported in a.& b.	60% (a. of b.)	N/A Rev. 2.13.19	158% (19 of 12)	108% (13 of 12)	150% (18 of 12)	139% (50 of 36)
				a. Number of persons served (students) who participated per reporting period.	a. (#)	N/A Rev. 2.13.19	19	13	18	50
				b. Maximum capacity of persons served (students) per reporting period.	b. (#)	N/A Rev. 2.13.19	12	12	12	36
2	Efficiency M-30	Ensure Program Quality	Percentage and number of persons served (students) within the reporting period who have applied for and been accepted into the Galley program.	Program will calculate percentage based on numbers reported in a.& b.	80% (a. of b.)	N/A Rev. 2.13.19	86% (6 of 7)	100% (2)	100% (1)	90% (9 of 10)
				Number of persons served (student) accepted into the Galley program within the reporting period.	a. (#)	N/A Rev. 2.13.19	6	2	1 *At capaciy	9
				b. Number of persons served (students) who have applied for the Galley program within the reporting period.	b. (#)	N/A Rev. 2.13.19	7	2	1 *At capaciy	10
3	Effectiveness M-31	Ensure Program Quality	Percentage and number of persons served (students) who have successfully graduated the Galley program and went on to volunteer or become employed within the food	Program will calculate percentage based on numbers reported in a.& b.	50% (a. of b.)	N/A Rev. 2.13.19	0% (0 of 6) POC Recelved	0% (0 of 6) POC Received	29% (2 of 7) POC Received	11% (2 of 19)
			industry.	a. Number of graduated persons served (students) who volunteer or are employed in the food industry.	a. (#)	N/A Rev. 2.13.19	6	6	7	19
				b. Number of persons served (students) who have successfully graduated from the Galley program within the reporting period.	b. (#)	N/A Rev. 2.13.19	0	0	2	2
4	Effectiveness M-32	Ensure Program Quality	Program supervisor will meet and review the course content and make needed updates to ensure continuing relevance to the potential labor market.	Program will forward the following: Dates of meetings in which course content was reviewed and updated.	Attachments	N/A Rev. 2.13.19	FY19, 3Q (April-June)	Not Completed *See Note PI Table	9.26.19	Completed
5	Effectiveness M-69	Ensure Program Quality	Number of persons served (students) who while in the program volunteer or are employed in the food industry.	Program will forward the number of person served (students) who volunteer or are employed while in the Galley program.	#TBD (#)	N/A Rev. 2.13.19	7	6	7	20

FY19 Program Performance Indicators St. Clair County CMH Intervention Services (74116)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1	Discharge Start Rates	discharged from a psychiatric inpatient unit	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (4)	100% (1)	100% (3)	N/A	100% (8)
2	Effectiveness M-3	Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	89% (8 of 9) POC RECEIVED	100% (9)	100% (11)	N/A	97% (28 of 29)
3	Efficiency M-5	Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (6)	0% (1)	0% (3)	N/A	0% (10)
4	Effectiveness M-7	Encourages	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.)				N/A	N/A
5	Access M-12	Services	deemed "high priority" that were seen within	Program will forward the percentage as well as the numbers used to calculate the percentage for 1.	95% (# of #)	100% (36)	100% (45)	100% (66)	N/A	100% (147)
				Program will forward the percentage as well as the numbers used to calculate the percentage for 2.	95% (# of #)	94% (77 of 82) POC RECEIVED	100% (58)	100% (85)	N/A	98% (220 of 225)
			deemed "low priority" that were seen within 10 days upon request of screening.	Program will forward the percentage as well as the numbers used to calculate the percentage for 3.	95% (# of #)	82% (58 of 71) POC RECEIVED	93% (69 of 74) POC RECEIVED	84% (82 of 98) POC RECEIVED	N/A	86% (209 of 243)
6	Effectiveness M-13		Number of formal trainings held, and average number of persons attending formal trainings.		2	None (Next Quarter)	1	None (Previous Quarter)	N/A	1
				Average number of persons served attending formal trainings.	#	N/A	N/A 4/23/19 Email	N/A	N/A	N/A
				3. Program will forward supporting documentation, including agenda, handouts, minutes, sign-in sheet, and other miscellaneous documentation as appropriate per training offered.	Attachments	None	N/A 4/23/19 Email	None	N/A	None

FY19 Program Performance Indicators St. Clair County CMH IPS (Individual Placement and Support) Program (74113)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Efficiency M-64	Ensure Program Quality	persons served first meets with the	Program will calculate the average number of days taken to complete a vocational profile. Program will use all persons served open within the reporting period.	21 or Less	14	18	14	19	65
2	Efficiency M-65	Ensure Program Quality	between the start of vocational profile and	Program will calculate the average accrued days between vocational profile and job development. Program will use all persons served open within the reporting period.	30 or Less	24	25	26	26	101
3	Effectiveness M-66	Ensure Program Quality	Percentage and number of persons served who have been placed within the reporting period.	Program will calculate the percentage of persons served who have been placed within the reporting period.	35% (# of #)	39% (35 of 90)	32% (27 of 84) POC RECEIVED	40% (36 of 91)	56% (41 of 73)	41% (139 of 338)
4	Effectiveness M-67	Ensure Program Quality	Percentage and number of persons served who have maintained their current employment position.	Program will calculate the percentage of persons served within the reporting period who have maintained their current employment position.	%TBD (# of #)	83% (29 of 35)	93% (25 of 27)	92% (33 of 36)	88% (36 of 41)	88% (123 of 139)
5	Effectiveness M-68	Ensure Program Quality	Percentage and number of persons served on waiting list.	Program will calculate the percentage of persons served who remain on a waiting list.	%TBD (# of #)	59% (38 of 64)	53% (39 of 74)	74% (54 of 73)	69% (37 of 54)	63% (168 of 265)

FY19 Program Performance Indicators St. Clair County CMH Marine City (74104)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1	Increase Hospital Discharge Start Rates	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (3)	100% (6)	100% (3)	100% (4)	100% (16)
2	Effectiveness M-3		Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (22) *Rev.9.3.19	96% (23 of 24) *Rev.9.3.19	97% (28 of 29)	100% (24)	98% (97 of 99)
3	Efficiency M-4	Lower Hospital Admissions	Percentage and number of persons served who are admitted into a psychiatric hospital while receiving services.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	5% or Less (# of #)	2% (4 of 229)	3% (8 of 243)	1% (1 of 226)	3% (9 of 263)	2% (22 of 961)
4	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	75% (3 of 4) POC RECEIVED	22% (2 of 9) POC RECEIVED	0% (3)	0% (5)	24% (5 of 21)
5	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
6	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.)				Community Benefits Received	Community Benefits Received
7	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept. 19) Satisfaction Survey 97%
8	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Mental Health Court (74981)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1		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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
2		Decrease Recidivism	Percentage and number of persons served (graduates) who have avoided re-offending (i.e. resulting in legal action/consequence) within 1 year of program graduation.	Program will calculate percentage based on numbers reported in a. & b.	85% (a. of b.)	83% (5 of 6) POC RECEIVED	100% (10)	88% (7 of 8)	83% (5 of 6) POC RECEIVED	90% (27 of 30)
				a. Number of persons served (graduates) who have avoided re-offending (i.e. resulting in legal action/consequence) within 1 year of program graduation.	a. (#)	5	10	7	5	27
				b. Number of persons served who graduated a year ago from MHC.	b. (#)	6	10	8	6	30
3	Effectiveness M-26	Increase Community Awareness	Number of events program staff participated in to increase community awareness of program.	Program will forward number of events which increased community awareness of the program (i.e. trainings, presentation, etc.)	#	2	0	1	1	4
4		Decrease Recidivism	Percentage and number of persons served currently in the program who continue to maintain a lifestyle free of criminal charges.	Program will calculate percentage based on numbers reported in a. & b.	85% (a. of b.)	92% (67 of 73)	94% (59 of 63)	96% (70 of 73)	91% (61 of 67)	93% (257 of 276)
				a. Number of persons served who continue to maintain a lifestyle free of criminal charges in the current quarter.	a. (#)	67	59	70 _	61	257
				b. Number of persons served currently in MHC.	b. (#)	73	63	73	67	276
5	Effectiveness M-28	Program Graduation	Percentage and number of person served who have graduated the program successfully this quarter.	Program will calculate percentage based on numbers reported in a. & b.	80% (a. of b.)	75% (9 of 12) POC RECEIVED	50% (9 of 18) POC RECEIVED	67% (8 of 12) POC RECEIVED	94% (16 of 17)	71% (42 of 59)
				a. Number of persons served in the program who have successfully graduated this quarter.	a. (#)	9	9	8	16	42
				b. Number of persons served discharge from MHC this quarter.	b. (#)	12	18	12	17	59

FY19 Program Performance Indicators St. Clair County CMH Mobile Crisis Unit (74160)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	N/A	33% (1 of 3) POC RECEIVED	80% (4 of 5) POC RECEIVED	86% (6 of 7) POC RECEIVED	73% (11 of 15)
2	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
3	Effectiveness M-7		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.)				Community Benefits Received	Community Benefits Received
4	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
5	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH OBRA (74130, 74132)

#	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.)				Community Benefits Received	Community Benefits Received
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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
3	Effectiveness M-14	Services	Percentage and number of person served who met the OBRA Level II Assessment criteria for specialized mental health services for persons served residing in nursing homes, as determined by the Department, who received CMHSP managed mental health	Program will forward percentage calculated as well as provide numbers used for calculation.	95% (# of #)	100% (5)	100% (9)	100% (6)	100% (2)	100% (22)
4	Efficiency M-16	Increase Timelines of Service	Pre-authorization screening will be completed within 4 calendar days or referral.	Program will calculate percentage based on numbers reported in a. & b.	95% (a. of b.)	100% (1)	100% (3)	100% (1)	100% (2)	100% (7)
				a. Number of pre-authorization screenings completed within 4 calendar days or referral.	a. (#)	1	3	1 .	2	7
				b. Number of pre-authorizations screenings.	b. (#)	1	3	1	2	7
5	Effectiveness M-17	Increase Timelines of Service	Percentage and number of persons served authorized by MDHHS to reside in a nursing home who have received a PAS and have been seen by OBRA Active Treatment for intake within 15	Program will calculate the percentage based on the numbers reported in a. & b.	50% (a. of b.)	100% (1)	100% (2)	100% (1)	100% (1)	100% (5)
			days.	a. Number of persons served authorized by MDHHS to reside in a nursing home who have received a PAS.	a. (#)	1	2	1	1	5
				b. Number of person served seen by OBRA Active Treatment for intake within 15 days.	b. (#)	1	2	1	1	5

FY19 Program Performance Indicators St. Clair County CMH Outpatient Services (74146)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1		discharged from a psychiatric inpatient unit	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (10)	100% (6)	100% (16)	63% (5 of 8) POC RECEIVED	93% (37 of 40)
2	Effectiveness M-3	Improve Service Start Timelines	r er een aug e en re reen en er	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	98% (59 of 60)	100% (27)	100% (68)	100% (30)	99.5% (184 of 185)
3	Efficiency M-4	Lower Hospital Admissions	Percentage and number of persons served who are admitted into a psychiatric hospital while receiving services.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	5% or Less (# of #)	6% (42 of 704) POC RECEIVED	5% (34 of 721)	6% (41 of 684) POC RECEIVED	4% (33 of 800)	5% (150 of 2909)
4	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	44% (8 of 18) POC RECEIVED	18% (2 of 11) POC RECEIVED	0% (19)	14% (2 of 14)	19% (12 of 62)
5	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
6	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.)				Community Benefits Received	Community Benefits Received
7	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) SatIsfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
8	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly.

FY19 Program Performance Indicators St. Clair County CMH Residential Supports I (74118)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1		Increase Hospital Discharge Start Rates	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (2)	100% (1)	100% (3)	100% (4)	100% (10)
2	I	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (2)	100% (2)	N/A	100% (1)	100% (5)
3	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (2)	0% (1)	33% (1 of 3) POC RECEIVED	0% (4)	10% (1 of 10)
4	Efficiency M-6	l '	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
5	Effectiveness M-7	Encourages	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.)				Community Benefits Received	Community Benefits Received
6	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
7	Effectiveness M-24		physical intervention was needed.	Program will review Incident Reports and forward the number of aggressive behaviors that needed a physical intervention.	%TBD (# of #)	N/A	1	0	0	1

	M-59	Reduce Police Calls made by Mental Health Staff	served.	System on Program Performance and reported quarterly.	#TBD (#)	#36183 SD (4) #36432 DW (1) #36458 AO (1) #36756 AB (1) #37022 TB (2) #37809 FA (3)	#328794 FA (1) #907654 SJ (1) #053202 TB (3) #408079 PJ (3) #500109 SS (1) #501004 MM (1) #501214 SS (1) #926951 AB (1)	#053202 TB (1)	#053202 TB (4) #917425 JL (1) #305552 DL (1)	#328794 FA(1) #907654 SJ (1) #053202 TB (8) #408079 PJ (3) #500109 SS (1) #501004 MM (1) #501214 SS (1) #926951 AB (1) #917425 JL (1) #36183 SD(4) #36432 DW(1) #36458 AO(1) #36756 AB(1) #37022 TB (2) #37809 FA(3)
	Effectiveness M-71	Ensure Program Quality		Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Residential Supports II (74119)

Residential Supports II (74119)
Hayes (BWDH), Roehl (Innov.), Springborn (BWDH), Firth (Impact), Semi-Independent (Colorado/BWDH), Stone Creek (Innov.), Abbottsford (Innov.) & Private Homes

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
	Effectiveness M-1		Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	N/A	N/A	N/A
2	Effectiveness M-3	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	N/A	N/A	N/A
3	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	N/A	N/A	N/A	N/A	N/A
4	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
5	Effectiveness M-7		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.)				Community Benefits Received	Community Beneifts Received
6	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
7	Effectiveness M-24	Increase Community Integration by Reducing Aggressive Behavior(s)	Number of Incident Reports that note physical intervention was needed.	Program will review Incident Reports and forward the number of aggressive behaviors that needed a physical intervention.	%TBD (# of #)	Abbotsford: 0 Roeh:0 Hancock: 1 Hayes: 0 Wells: 0 Semi: 0 Stone Creek: 0 Springborn: 0	Abbotsford: 0 Wells: 0 Springborn: 0 Stone Creek: 0 Hayes: 0 Hancock: 0 Roehl: 0	Abbotsford: 0 Roehl: 0 Hancock: 0 Hayes: 0 Wells: 0 Stone Creek: 0 Semi: 0 Springborn: 0	Abbotsford: 0 Wells: 0 Hancock: 0 Hayes: 1 Charmwood:0 Semi: 0 Stone Creek: 0 Roehl: 0	Abbotsford: 0 Wells: 0 Hancock: 1 Hayes: 1 Charmwood: 0 Semi: 0 Stone Creek: 0 Roehl: 0 Springborn: 0

8 Effectivenes M-59	Reduce Police Calls made by Mental Health Staff	Number of calls made to the police by Mental Health Staff providing services in a residential setting requesting assistance with persons served.		#TBD (#)	N/A	#328794 FA (1) #907654 SJ (1) #053202 TB (3) #408079 PJ (1) #926951 AB (1)	N/A	N/A	#328794 FA (1) #907654 SJ (1) #053202 TB (3) #408079 PJ (1) #926951 AB (1)
9 Effectivenes M-71	Ensure Program Quality	,	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Children's Day Treatment Night Watch (74107)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1		Increase Hospital Discharge Start Rates	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (3)	100% (1)	100% (1)	100% (1)	100% (6)
2	Effectiveness M-3	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (7)	100% (5)	100% (3)	100% (3)	100% (18)
3	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
4	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.)				Community Benefits Received	Community Benefits Received
5	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually PY19 (Sept.19) Satisfaction Survey 97%
6	Efficiency M-11	Measurement of Level of	Percentage of person served (children) who received a level of functioning assessment (CAFAS/PECFAS) as required.	Certified clinician will completed a level of functioning assessment as required Quarterly, Discharge and Annually.						
		Functioning		Number of persons served (children) with open cases in the reporting period.		19	19	19	25	82
				open cases in the reporting persons	#	(*100% Reported)	(*100% Reported)	(*100% Reported)	(*100% Reported)	(*100% Reported)
			Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	No #'s Reported	No #'s Reported	No #'s Reported	No #'s Reported	No #'s Reported
			Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	No #'s Reported	No #'s Reported	No #'s Reported	No #'s Reported	No #'s Reported
			Annually	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	No #'s Reported	No #'s Reported	No #'s Reported	No #'s Reported	No #'s Reported

Γ	7	Effectiveness	Ensure Program	Program supervisor will review individually	Data will be collected via the OASIS Software	Sent Out					
	-	M-71	Quality	each staffs productivity percentages.	System and ADP and reviewed monthly.	&	&	&	&	&	&
			-			Reviewed	Reviewed	Reviewed	Revlewed	Reviewed	Reviewed
						Monthly	Monthly	Monthly	Monthly	Monthly	Monthly

FY19 Program Performance Indicators St. Clair County CMH Children's Services Division DD (74120)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1	Increase Hospital Discharge Start Rates	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (3)	100% (2)	100% (2)	N/A	100% (7)
2	Effectiveness M-3	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (4)	100% (10)	100% (11)	100% (12)	100% (37)
3	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (3)	100% (2) POC RECEIVIED	0% (2)	N/A	29% (2 of 7)
4	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
5	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.)				Community Benefits Received	Community Benefits Received
6	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
7	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Children's Services Home Based (74106)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1	Increase Hospital Discharge Start Rates	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (3)	100% (3)	100% (7)	100% (2)	100% (15)
2	Effectiveness M-3	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (11)	100% (3)	100% (17)	100% (9)	100% (40)
3	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	60% (3 of 5) POC Received	67% (2 of 3) POC Received	13% (1 of 8)	0% (2)	33% (6 of 18)
4	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
5	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.)				Community Benefits Received	Community Benefits Received
6	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
7	Effectiveness M-9.1	Increase in Psychological Functioning	Percentage and number of persons served (children) who demonstrate an increase in psychological functioning according to FAS data on Severe Impairments.	Program will calculate percentage of persons served (children) who demonstrated an increase in psychological functioning based on numbers reported in a. & b.	35% (a. of b.)	CAFAS 37% (14 of 38) PECFAS 17% (1 of 6) POC Received	CAFAS 37% (14 of 38) PECFAS 20% (1 of 5) POC Received	CAFAS 46% (16 of 35) PECFAS 50% (3 of 6)	CAFAS 34% (12 of 35) POC Received PECFAS 33% (2 of 6) POC Received	CAFAS 38% (56 of 146) PECFAS 30% (7 of 23)

Ligareton (The second secon			a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	CAFAS 14 PECFAS 1	CAFAS 14 PECFAS 1	CAFAS 16 PECFAS 3	CAFAS 12 PECFAS 2	CAFAS 56 PECFAS 7
				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	CAFAS 38 PECFAS 6	CAFAS 38 PECFAS 5	CAFAS 35 PECFAS 6	CAFAS 35 PECFAS 6	CAFAS 146 PECFAS 23
8	Efficiency M-11		Percentage of person served (children) who received a level of functioning assessment (CAFAS/PECFAS) as required.	Certified clinician will completed a level of functioning assessment as required Quarterly, Discharge and Annually.						
				Number of persons served (children) with open cases in the reporting period.	#	N/A *5/22/19	74	91	93	258
			Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	N/A	N/A	N/A	N/A	N/A
			Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	N/A	N/A	N/A	N/A	N/A
			Annually	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	N/A	N/A	N/A	N/A	N/A
9	Access M-38	Weekly Access of Service	Program will ensure that a minimum of 4 hours of service is provided monthly to families receiving home based services.	Program will calculate percentage based on numbers reported in a. & b.	100% (a. of b.)	97% (209 of 216) POC Received	90% (163 of 181) POC Received	96% (87 of 91) POC Received	97% (90 of 93) POC Recelved	94% (549 of 581)
				a. Number of persons served (children) who received a minimum of 4 hours of service on a monthly basis.	a. (#)	209	163	87	90	549
				b. Number of persons served (children) receiving services.	b. (#)	216	181	91	93	581
10	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Children's Infant Mental Health (74121)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-3	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (1)	100% (3)	100% (2)	100% (3)	100% (9)
		Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
3		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.)				Community Benefits Received	Community Benefits Received
4	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
5	Efficiency M-37	Ensure Measurement of Level of Functioning	Percentage and number of persons served (children) who receive an attachment assessment (DECA, Piccolo, or Massie Campbell) initially, at discharge and annually.	Attachment assessment (DECA, Piccolo, or Massie Campbell) will be completed initially, at discharge and annually.						
				Number of persons served (children) with open cases in the reporting period.	#	27	28	28	11	94
			Initially	Number of persons served (children) who received an initially assessment.	100% (# of #)	100%	100% (1)	N/A	100% (4)	100% (13)
			Discharge	Number of person served (children) who received an assessment at discharge.	100% (# of #)	N/A	N/A	N/A	N/A	N/A
			Annually	Number of person served (children) who received an assessment annually.	100% (# of #)	100%	100% (8)	100% (9)	100% (2)	100% (23)
6	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Children's Services (74152)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1		Increase Hospital Discharge Start Rates	, ,	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (3)	100% (6)	100% (9)	100% (2)	100% (20)
2	Efficiency M-4	Lower Hospital Admissions		Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	5% or Less (# of #)	3% (5 of 156)	5% (8 of 172)	5% (9 of 166)	6% (12 of 189) POC RECEIVED	5% (34 of 683)
3	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (4)	0% (6)	11% (1 of 9)	33% (1 of 3) POC RECEIVED	9% (2 of 22)
4	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
5	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.)				Community Benefits Received	Community Benefits Received
6	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
7	Effectiveness M-9.1	Increase in Psychological Functioning	Percentage and number of persons served (children) who demonstrate an increase in psychological functioning according to FAS data on Severe Impairments.	Program will calculate percentage of persons served (children) who demonstrated an increase in psychological functioning based on numbers reported in a. & b.	35% (a. of b.)	CAFAS 33% (34 of 103) POC RECEIVED PECFAS 17% (4 of 24) POC RECEIVED	CAFAS 35% (43 of 122) PECFAS 19% (5 of 27) POC RECEIVED	CAFAS 28% (36 of 130) PECFAS 29% (7 of 24) POC RECEIVED	CAFAS 36% (52 of 146) PECFAS 33% (10 of 30) POC RECEIVED	CAFAS 33% (165 of 501) PECFAS 25% (26 of 105) POC RECEIVED
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	CAFAS 34 PECFAS 4	CAFAS 43 PECFAS 5	CAFAS 36 PECFAS 7	CAFAS 52 PECFAS 10	CAFAS 165 PECFAS 26

odrodenia	e for the least of the first the first of the second secon			b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	CAFAS 103 PECFAS 24	CAFAS 122 PECFAS 27	CAFAS 130 PECFAS 24	CAFAS 146 PECFAS 30	CAFAS 501 PECFAS 105
8	Efficiency M-11	Level of	Percentage of person served (children) who received a level of functioning assessment (CAFAS/PECFAS) as required.	Certified clinician will completed a level of functioning assessment as required Quarterly, Discharge and Annually.						
		Functioning		Number of persons served (children) with open cases in the reporting period.	#	CAFAS 89% (92 of 103) PECFAS 83% (20 of 24)	CAFAS 86% (105 of 122) POC RECEIVED PECFAS 100% (27)	CAFAS 99% (129 of 130) PECFAS 100% (24)	CAFAS 96% (140 of 146) PECFAS 97% (29 of 30)	CAFAS 93% (466 of 501) PECFAS 95% (100 of 105)
			Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	N/A	N/A	N/A	N/A	N/A
			Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	N/A	N/A	N/A	N/A	N/A
			Annually	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	N/A	N/A	N/A	N/A	N/A
9	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Children's Waiver (74139)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Efficiency M-6	· '	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
2	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.)				Community Benefits Received	Community Benefits Received
3	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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
4	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly	Sent Out & Reviewed Monthly

FY19 Program Performance Indicators St. Clair County CMH Children's Services Wraparound (74101)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1		Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
2	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.)	٠.			Community Benefits Received	Community Benefits Received
3		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 #)	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY18 (Aug.18) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%	Completed Annually FY19 (Sept.19) Satisfaction Survey 97%
4	M-9.1	Increase in Psychological Functioning	Percentage and number of persons served (children) who demonstrate an increase in psychological functioning according to FAS data on Severe Impairments.	Program will calculate percentage of persons served (children) who demonstrated an increase in psychological functioning based on numbers reported in a. & b.	35% (a. of b.)	50% (7 of 14)	42% (8 of 19)	35% (7 of 20)	36% (9 of 25)	40% (31 of 78)
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	7	8	7	9	.31
				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	14	19	20	25	78
5	Access M-33	Timely Access to Services	Initial meeting with family to occur within sworking days of referral acceptance.	Program will calculate percentages based on the number reported in a. & b.	100% (a. of b.)	N/A	75% (3 of 4) POC RECEIVED	75% (3 of 4) POC RECEIVED	100% (4)	83% (10 of 12)
				a. Number of initial meetings with family that occurred within 5 working days of referral acceptance.	a. (#)	N/A	3	3	4	10
				b. Number of initial meetings.	b. (#)	N/A	4	4	4	12
			2. Third meeting to occur within 30 days of the initial meeting to develop service plan.	Program will calculate percentages based on the number reported in a. & b.	100% (a. of b.)	N/A	50% (2 of 4) POC RECEIVED	50% (2 of 4) POC RECEIVED	100% (4)	67% (8 of 12)
				a. Number of third meetings that occurred within 30 days of the initial meeting to develop service plan.	a. (#)	N/A	2	2	4	8

-				b. Number of third meetings.						
			· · · · · · · · · · · · · · · · · · ·		b. (#)	N/A	4	4	4	12
			3. Child and Family Team meetings are scheduled no more than 30 days apart.	Program will calculate percentages based on the number reported in a. & b.	100% (a. of b.)	100% (14)	100% (19)	100% (20)	100% (25)	100% (78)
				a. Number of Child and Family Team meetings scheduled no more than 30 days apart.	a. (#)	14	19	20	25	78
				b. Number of Child and Family Team meetings.	b. (#)	14	19	20	25	78
6	Effectiveness M-34	Improve Mental Health Functioning	Reduction of out of home placements, school truancy, suspension, expulsions, and incidents of contact with the juvenile justice system or child welfare system.	Data will be collected via the RED CAP Data/Entry System.						
				Reduction in hospitalization.	75% (# of #)	79% (11 of 14)	89% (17 of 19)	90% (18 of 20)	84% (21 of 25)	86% (67 of 78)
				Reduction in school truancy, suspensions & expulsions.	75% (# of #)	64% (9 of 14) POC RECEIVED	95% (18 of 19)	90% (18 of 20)	96% (24 of 25)	88% (69 of 78)
				Reduction in Juvenile Justice contacts (probation violations).	75% (# of #)	86% (12 of 14)	95% (18 of 19)	100% (20)	96% (24 of 25)	95% (74 of 78)
	:			Reduction in child welfare (CPS) contracts.	75% (# of #)	86% (12 of 14)	89% (17 of 19)	80% (16 of 20)	84% (21 of 25)	85% (66 of 78)
7	Efficiency M-35	Ensure Compliance with the Wraparound Promising Practice Model	Percentage and number of cases with the following elements completed: a. Strengths/Cultural Discover Essay b. Needs Assessment & Prioritization	Program will forward percentage calculated as well as provide numbers used for calculation.	100% (# of #)	100% (14)	100% (19)	100% (20)	100% (25)	100% (78)
8	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity percentages.	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly					

FY19 Program Performance Indicators St. Clair County CMH ABA Pathways, LLC (74960)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-39	Ensure Program Quality	who have completed:	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						
			(within 30 days of fine)	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.	100% (# of #)	N/A	100% (1)	50% (1@100%) (1@0%) POC RECEIVED	No New Hires	67% (2@100%) (1@0%)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	if needed.	100% (# of #)	N/A	100% (1)	100% (2)	No New Hires	100% (3)
2	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 #)	N/A	No New Hires Previous Quarter	100% (1)	100% (1)	100% (2)
3	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)	N/A	No Staff to Report at this time.	No Staff to Report at this time.	No Staff to Report at this time.	No Staff to Report at this time.
4	Effectiveness M-61	Ensure Program Quality	All 6-Month Updated Assessments and Plans have been submitted to St. Clair County CMH prior to current plan expiration.	Program will calculate the percentage based on the number reported in a. & b.	100% (a. of b.)	N/A	N/A	N/A	N/A	N/A
				a. Number of 6-Month Assessments and Plans that have been submitted to St. Clair County CMH prior to current plan expiration for the reporting period.	a. (#)	N/A	N/A	N/A	N/A	N/A
				b. Number of 6-Month Assessments and Plans that are required to be completed in the reporting period.	b. (#)	N/A	N/A	N/A	N/A	N/A

5 Effectiveness M-74	Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	N/A	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received
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FY19 Program Performance Indicators St. Clair County CMH All-Ways Care Services (74185)

#	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.	Quarter) a brief summary of activities that have occurred.	Reported Annually (4th Qtr.)				Community Benefits Received	Community Benefits Received
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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	100% (20) Customer Satisfaction	100% (20) Customer Satisfaction
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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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.	100% (# of #)	No New Hires	100% (1)	100% (2)	67% (2@100%) (1@0%) POC RECEIVED	83% (5@100%) (1@0%)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	No New Hires	80% (1) POC RECEIVED	100% (2)	100% (3)	97% (5@100%) (1@80)
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 #)	100% (2)	No New Hires Previous Quarter	N/A (1)	100% (1@100%) (1@N/A)	100% (3@100%) (2@N/A)
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)	100% (3)	100% (2)	96% (2@100%) (1@89%) POC RECEIVED	100% (3)	99% (10@100%) (1@89%)

6	Effectiveness M-42.1	Staff Receive Supervision Regularly	All staff will receive supervision on regular (30 day) intervals. Supervision may be provided by phone and/or in person or at staff meetings. Training documentation MAY be requested by St. Clair CMH QI Office.	Program will maintain training records and provided documentation if requested.	100%	100%	100%	100%	100%	100%
	M-74	Ensure Program Quality	within the reporting quarter.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Autism Systems LLC (74681)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	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				Commission for the second and the second		
			a. Recipient Rights (Initial) (within 30 days of hire)	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.	100% (# of #)	70% (7@100%) (3@0%) POC RECEIVED *7.10.19 Revised	83% (5@100%) (1@0%) POC RECEIVED	100% (1)	100% (5@100%) (1@N/A)	82% (18@100%) (4@0%) (1@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	81% (4@100%) (1@75%) (5@67%) POC RECEIVED	100% (6)	100%	100% (5@100%) (1@N/A)	91% (16@100%) (1@75%) (5@67%) (1@N/A)
2	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 #)	100% (6)	90% (4@100%) (2@80%) (1@70%) (3@N/A) POC RECEIVED	96% (2@100%) (1@88%) (3 @N/A) POC RECEIVED	100% (1)	95% (13@100%) (1@88%) (2@80%) (1@70%) (6@N/A)
3	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)	No Staff to Report	No Staff to Report	100% (4)	88% (1@100%) (2@88%) (1@75%) POC RECEIVED	94% (5@100%) (2@88%) (1@75%)

4	Effectiveness M-61	Ensure Program Quality	All 6-Month Updated Assessments and Plans have been submitted to St. Clair County CMH prior to current plan expiration.	, ,	100% (a. of b.)	2.13.19 M-61 Revised- No Data Reported FY19,1Q	73% (8 of 11) POC RECEIVED	100% (1)	80% (12 of 15) POC RECEIVED	78% (21 of 27)
				a. Number of 6-Month Assessments and Plans that have been submitted to St. Clair County CMH prior to current plan expiration for the reporting period.	a. (#)	2.13.19 M-61 Revised- No Data Reported FY19,1Q	8	1	12	21
				b. Number of 6-Month Assessments and Plans that are required to be completed in the reporting period.	b. (#)	2.13.19 M-61 Revised- No Data Reported FY19,1Q	11	1	15	27
5		Ensure Program Quality		Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Beacon Specialized Living Services Inc. Beacon Home at the Lodge & Beacon Lake Orion

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1		Encourages	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.)				No Community Benefits Received	No Community Benefits Received
2	Satisfaction M-8	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	No Information Provided	100% (Customer Satisfaction Survey)	100% (Customer Satisfaction Survey)	100% (No #'s)	100% (No #'s)
				Guardian Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	90% (# of #)	No Information Provided	100% (Guardian Satisfaction Survey)	100% (Guardian Satisfaction Survey)	100% (No #'s)	100% (No #'s)
3	Effectiveness M-39	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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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.	100% (# of #)	No Information Provided	100% (3)	100% (5)	80% (4@100%) (1@0%) POC RECEIVED	92% (12@100%) (1@0%)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	No Information Provided	100% (3)	100% (5)	100% (5)	100% (13)
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 Information Provided	96% (4@100% (1@80%) POC RECEIVED	100% (5)	100% (5)	99% (14@100%) (1@80%)

5	1	Quality	one year who are current with ALL trainings, as specified on the "Training/Requirement	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)	No Information Provided	No Staff to Report	No Staff to Report	No Staff to Report	No Staff to Report
6	Effectiveness M-74	Ensure Program Quality	Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	No Information Provided	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH (BHR) Behavioral Health Response

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
_	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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	89% Customer Satisfaction	89% Customer Satisfaction
	Efficiency M-44	1	All calls will be answered within 15 seconds or less (on average).	Average time in which telephone calls are answered.	15 Sec. or Less	9.7 Sec.	11.2 Sec.	16.5 Sec. POC RECEIVED	32.0 Sec. POC RECEIVED	17.4 Sec.
				Number of incoming telephone calls.	#	2799	1988	1791	1636	8214
	Effectiveness M-72	Ensure Program Quality	Timely submission of contract required documents (per attachment D).	Agency will forward contract required documents.	100%	Received (JG 2.11.19)	Received (JG 4.2.19)	Received (JG 7.11.19)	Received (JG 10.2.19)	Received
	Effectiveness M-73	Ensure Program Quality	Percentage of employed individuals who have completed the required Recipient Rights (Refresher) training. *RR Training completed via Genesee CMH Self-Study Test.	Agency will electronically forward the percentage & number (i.e. 90%, 9 of 10) of staff who have completed the Recipient Rights Refresher training course within the required timeframe. Training documentation MAY be requested by St. Clair County CMH QI Office as proof of course completion.	100% (# of #)	100% (47)	100% (4)	100% (1)	95% (63 of 66) POC RECEIVED	97% (115 of 118)

FY19 Agency/Program Performance Indicators St. Clair County CMH Blue Water Area Transportation

#	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.)				No Community Benefits Received	No Community Benefits Received
2	Effectiveness M-39.1	Ensure Program Quality	Percentage of new hires within the quarter who have completed: Recipient Rights (Initial) (within 30 days of hire)	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.	100% (# of #)	86% (6 @100%) (1@0%) POC RECEIVED	100% (2)	100% (3)	50% (2@100%) (2@0%) POC RECEIVED (on T/S)	81% (13@100%) (3@0%)
3	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 #)	100% (1)	100% (5@100%) (2@N/A)	100% (2)	75% (3@100%) (1@0%) POC RECEIVED (on T/S)	92% (11@100%) (1@0%) (2@N/A)
4	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)	89% (2@100%) (1@67%) POC RECEIVED	78% (2@100%) (1@33%) POC RECEIVED	78% (2@100%) (1@33%) POC RECEIVED	100% (3)	86% (9@100%) (1@67%) (2@33%)

FY19 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.)				Community Benefits Received	Community Benefits Received
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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction Not Reported 4Q	Customer Satisfaction Not Reported
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS" a. Recipient Rights (Initial) (within 30 days of hire) b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	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.	100% (# of #) 100% (# of #)	No New Hires No New Hires	No New Hires	No New Hires No New Hires	No New Hires	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	No New Hires Previous Quarter	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)	No Staff to Report	No Staff to Report	No Staff to Report	No Staff to Report	No Staff to Report
6	Effectiveness M-42.1	Staff Receive Supervision Regularly		Program will maintain training records and provided documentation if requested.	100%	N/A	N/A	N/A	N/A	N/A

7	Effectiveness M-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.	95% (a.)	N/A	N/A	N/A	N/A	N/A
				a. Number of person served who are maintaining their desired living arrangement with the necessary amount of supports.	a. (#of#)	N/A	N/A	N/A	N/A	N/A
				b. Number of persons served who have requested and are still waiting for their desired living arrangements with necessary amount of support.	b. (#)	N/A	N/A	N/A	N/A	N/A
8	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	TBD	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Blue Water Developmental Housing

Enriching Community	Life (Clas	ses) Living a	Live in the Co	mmunity (74275)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Satisfaction M-8	Satisfaction	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 #)	Customer Satisfaction 100% Rp. FY18,1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction Reported 100%	Customer Satisfaction Reported 100%
2	1	Ensure Program Quality	Each ECL Class will provide at least 4 community specific outings per quarter.	The ECL Coordinator will randomly select 4 classes to review.	75%	100%	100%	100%	100%	100%
3	l .	Ensure Program Quality	•	The ECL Coordinator will randomly select 3 classes to review.	75%	100%	100%	100%	100%	100%
4	1	Ensure Program Quality	,	The program will verify lessons by randomly selecting 50% of the different types of class plans offered monthly.	75%	100%	100%	100%	100%	100%
5	1	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	TBD	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Blue Water Developmental Housing Community Supports Services (74277) / Community Living Services (CLS)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	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.)				Community Benefits Received	Community Benefits Received
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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction Reported 100%	Customer Satisfaction Reported 100%
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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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.	100% (# of #)	91% (10@100%) (1@0%) POC RECEIVED	91% (10@100%) (1@0%) POC RECEIVED	100% (10)	100% (4)	94% (34@100%) (2@0%)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	I I	100% (# of #)	100% (11)	100% (11)	100% (10)	100% (4)	100% (36)
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 #)	100% (12@100%) (1@N/A)	100% (12) *See Notes	100% (11)	100% (10@100%)	100% (45@100%) (1@N/A)
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)	100%	91% (2@91%) (1@90%) POC RECEIVED	100% (3)	100%	98% (9@100%) (2@91%) (1@90%)

•		Staff Receive Supervision Regularly		Program will maintain training records and provided documentation if requested.	100%	100%	100%	100%	100%	100%
	Effectiveness M-74	Ensure Program Quality	Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	TBD	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Blue Water Developmental Housing

Maple (300), Springborn (302), Stoneybrook (303), Hayes (305), Semi-Independent (Colorado) (307), Oakleaf (308) & Thornhill (309)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	1	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.)				Community Benefits Received	Community Benefits Received
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	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction Reported 95%	Customer Satisfaction Reported 95%
				Guardian Satisfaction Survey to be administered by either St. Clair County CMH QI Office per contract agency via contract requirements.	90% (# of #)	Guardian Satisfaction Not Reported 1Q	Guardian Satisfaction Not Reported 2Q	Guardian Satisfaction Not Reported 3Q	Customer Satisfaction Reported 100%	Customer Satisfaction Reported 100%
3		Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS" a. Recipient Rights (Initial)	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						
			(within 30 days of hire)	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.	100% (# of #)	100% (6@100%) (1@N/A)	100% (10@100%) (2@N/A)	83% (5@100%) (1@0%) POC RECEIVED	100% (3@100%) (2@N/A)	96% (24@100%) (1@0%) (5@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (7)	100% (12)	100% (6)	100% (5@100%)	100% (30@100%)
4		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 #)	100% (3@100%) (6@N/A)	93% (4@100%) (1@64%) (2@N/A) POC RECEIVED	92% (5@100%) (1@91%) (1@89%) (1@82%) (1@70%) (3@N/A) POC RECEIVED	100% (4@100%) (2@N/A)	95% (16@100%) (1@91%) (1@89%) (1@82%) (1@70%) (1@64%) (13@N/A)

5	1	Ensure Program Quality	one year who are current with ALL trainings,	the St. Clair County CMH QI Office for 3 staff within the reporting quarter.	100% (# of 3)	100% (3)	91% (1@100%) (1@91%) (1@82%) POC RECEIVED	100% (3)	91% (2@100%) (1@073%) POC RECEIVED	96% (9@100%) (1@91%) (1@82%) (1@73%)
•		Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	ТВО	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Blue Water Developmental Housing SED Waiver (74263)

#	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.)	N			Community Benefits Received	Community Benefits Received
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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction Reported 95%	Customer Satisfaction Reported 95%
3	Effectiveness M-39	Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS" a. Recipient Rights (Initial) (within 30 days of hire) b. Items required to be completed prior to	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	100% (# of #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires
			1	if needed.	100% (# of #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires
4	Effectiveness M-40	Ensure Program Quality	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	No New Hires Previous Quarter	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)	No Staff to Report	No Staff to Report	No Staff to Report	No Staff to Report	No Staff to Report
6				Program will maintain training records and provided documentation if requested.	100%	N/A	N/A	N/A	N/A	N/A

7	Effectiveness M-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.	95% (a.)	N/A	N/A	N/A	N/A	N/A
				a. Number of person served who are maintaining their desired living arrangement with the necessary amount of supports.	a. (#of#)	N/A	N/A	N/A	N/A	N/A
				b. Number of persons served who have requested and are still waiting for their desired living arrangements with necessary amount of support.	b. (#)	N/A	N/A	N/A	N/A	N/A
	B Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	TBD	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Community Enterprises of SCC (Community Supports 74662)

#	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.)				Community Benefits Received	Community Benefits Received
2	Satisfaction M-8	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	Results Annually 90% (# of #)	New Program N/A at this time.	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Submitting when completed.	Submitting when completed.
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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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.	100% (# of #)	No New Hires	No New Hires	No New Hires	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	No New Hires	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 *DW prev. rp on 201	No New Hires Previous Quarter	No New Hires Previous Quarter	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)	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report

6	Effectiveness M-42.1	Supervision Regularly	All staff will receive supervision on regular (30 day) intervals. Supervision may be provided by phone and/or in person or at staff meetings. Training documentation MAY be requested by St. Clair CMH QI Office.	Program will maintain training records and provided documentation if requested.	100%	100%	100%	100%	100%	100%
7	M-74	Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ · Information · Recelved	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Community Enterprises of SCC Port Huron 74201, MOVE 74581, Supported Employment 74205, Micro 74787, Job Coaching 74306

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	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.)	entre de la constanta de consta			Community Benefits Received	Community Benefits Received
2		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 #)	Customer Satisfaction 98%	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction Not Reported 4Q	Customer Satisfaction 98%
3	M-36	Increase Community Integration (PI applies	Number of outings held within the community.	Program will report number of outings held within the community.	# TBD (#)	168	127	241	194	730
		primarily to persons served receiving day	Average amount of time spent within the community per persons served.	Program will report the average amount of time spent in the community per persons served.	TBD (Text)	1 hr. 43 Min.	1 hr. 40 Min.	1 hr. 46 Min.	1 hr. 35 Min.	1 hr. 41 Min.
		services).	Percentage and number of persons served who attended a community outing (based on an unduplicated count).	Program will calculate percentage based on number reported in a. & b.	%TBD (a. of b.)	82% (1014 of 1241)	78% (780 of 1000)	87% (1388 of 1592)	86% (1278 of 1480)	84% (4460 of 5313)
				a. Number of person served who attended a community outing (based on unduplicated count).	a. (#)	1014	780	1388	1278	4460
				b. Number of persons served who are eligible to attend a community outing (based on unduplicated count).	b. (#)	1241	1000	1592	1480	5313
		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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	No New Hires	100% (3)	No New Hires	100% (2) (2@N/A)	100% (5) (2@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	if needed.	100% (# of #)	No New Hires	100% (3)	No New Hires	100% (4)	100% (7)

		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 #)	100% (3) (2@N/A)	100%	100% (3)	No New Hires Previous Quarter	100% (7) (2@N/A)
	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)	100%	100% (3)	100% (3)	97% (2@100%) (1@91%) POC RECEIVED	99,2% (11@100%) (1@91%)
	M-42.1	Staff Receive Supervision Regularly	All staff will receive supervision on regular (30 day) intervals. Supervision may be provided by phone and/or in person or at staff meetings. Training documentation MAY be requested by St. Clair CMH QI Office.	Program will maintain training records and provided documentation if requested.	100%	100%	100%	100%	100%	100%
-	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Community Enterprises of SCC River District, ECL (74203)

#	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.)				Community Benefits Received	Community Benefits Received
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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Submitting when completed.	Submitting when completed,
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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires	No New Hires	No New Hires	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	No New Hires Previous Quarter	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)	97% (2@100%) (1@90%) POC RECEIVED	100% (2)	No additional staff to report.	No additional staff to report.	98% (4@100%) (1@90%)

6	M-42.1	Staff Receive Supervision Regularly		Program will maintain training records and provided documentation if requested.	100%	100%	100%	100%	100%	100%
7	Effectiveness M-47	Ensure Program Quality	· · · · · · · · · · · · · · · · · · ·	The program will verify lessons by randomly selecting 50% of the different types of class plans offered monthly.	75%	100%	100%	100%	100%	100%
8	Effectiveness M-49	Ensure Program Quality	Seventy-five percent of all ECL classes will be offered in the community.	Community Enterprises will report quarterly.	75%	N/A *Error DS	90%	86%	82%	86%
9	Effectiveness M-50	Ensure Program Quality	in the building will have a community	Community Enterprises will report class speakers every semester (2nd and 4th quarters).	95%		100% *Reported previous Quarter		N/A	100%
10	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Community Enterprises of SCC-Marysville Enriching Community Life ECL 74171

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1		Customer Satisfaction		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 #)				Submitting when completed.	Submitting when completed.
2	Effectiveness M-47	Ensure Program Quality	Program will write and follow submitted weekly lesson plans.	The program will verify lessons by randomly selecting 50% of the different types of class plans offered monthly.	75%	100%	95%	100%	100%	99%
3	Effectiveness M-49	Ensure Program Quality	Seventy-five percent of all ECL classes will be offered in the community.	Community Enterprises will report quarterly.	75%	100%	90%	83%	84%	89%
4	Effectiveness M-50	Ensure Program Quality	,	Community Enterprises will report class speakers every semester (2nd and 4th quarters).	95%		100%		100%	100%
5	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Goodwill Industries Work Opportunity Program (74245)

#	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.)				Community Benefits Received	Community Benefits Received
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 #)	Customer Satisfaction 100% (6)	Customer Satisfaction 100% (12)	Customer Satisfaction 100% (14)	Customer Satisfaction 100% (12)	Customer Satisfaction 100% (44)
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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	0% (1) POC RECEIVED	100% (1)	100%	No New Hires	67% (2@100%) (1@0%)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	if needed.	100% (# of #)	67% (1) POC RECEIVED	100% (1)	100% (1)	No New Hires	89% (2@100%) (1@67%)
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 #)	100%	100%	100% (1)	100% (1)	100%
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)	97% (2@100%) (1@90%) POC RECEIVED	95% (1@100%) (1@90%)) POC RECEIVED	No Additional Staff to Report	No Additional Staff to Report	96% (3@100%) (2@90%)
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6	Effectiveness M-52	Increase Vocational Skills	Number of referrals to competitive employment or a supported employment position.	Program will report number of referrals to competitive employment positions.	2 (Total Sup./Comp.)	2	4	4	.3	13
				Program will report number of referrals to supported employment positions.	2 (Total Sup./Comp.)	0	1	1	1	3
7	Efficiency M-53	Minimize Lack of Work	Percentage and number of days or 1/2 days worked in the reporting period.	Program will calculate percentage of days worked within the reporting period based on numbers reported in a. & b.	95% (a. of b.)	100% (70)	100% (63)	100% (63)	100% (64)	100% (260)
				a. Number of days or 1/2 days worked within the reporting period.	a. (#)	70	63	63	64	260
				b. Number of available work days within the reporting period.	b. (#)	70	63	63	64	260
			2. What service was substituted on days without work & the number of person served who participated in alternative activity.	Substituted service provided on days without work.	(Text)	N/A	0	0	0	0
				Number of persons served attending the alternative activity.	(#)	0	0 ·	0	0	0
8	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Hope Network Behavioral Health Services Harbor Point Lapeer 74157 & Westlake Cottage 74688

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-77	Ensure Program Quality	Percentage of new hires within the reporting quarter who have completed: a. Recipient Rights (Initial)	Program will electronically forward to St. Clair County CMH QI Office the "Compass Education Report" for every new hire within the reporting quarter.						
			a. Recipient Rights (Initial) (within 30 days of hire)	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 #)	N/A	N/A	N/A	100% (6)	100% (6)
			b. As requested/needed program will forward documentation (i.e Drivers License/State ID, Criminal Background Check etc.) for the purpose of program review and/or audit.	NOTE: If requested by the St. Clair County CMH QI Office the program will submit any requested documentation (i.e. Drivers License/State ID, Criminal Background Check etc.) needed for the purpose of program review and/or audit.	As Requested/N eeded	N/A	N/A	N/A	100% (6)	100% (6)
2	Effectiveness M-78	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 #)	N/A	N/A	N/A	No New Hires Previous Quarter	No New Hires Previous Quarter
3	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)	N/A	N/A	N/A	100% (3)	100%
4	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	N/A	N/A	N/A	N/A	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH IMPACT Simpson (321), Allen (324), Belle River (325), Michigan (330), Vine (332), Wells (438)

#	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.)				Community Benefits Received	Community Benefits Received
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	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	100% Customer Satisfaction	100% Customer Satisfaction
				Guardian Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	90% (# of #)	Guardian Satisfaction Not Reported 1Q	Guardian Satisfaction Not Reported 2Q	Guardian Satisfaction Not Reported 3Q	96% Guardian Satisfaction Reported	96% Guardian Satisfaction Reported
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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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.	100% (# of #)	100% (2) *CL moved to New Hire Previous Quarter 4/25/19	100% (4)	100% (10)	100% (8)	100% (24)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (2) *CL moved to New Hire Previous Quarter 4/25/19	100% (4)	100% (10)	100% (8)	100% (24)
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 #)	100% (5@100%) (2@N/A) *CL Added 4/25/19	100% (2)	100% (2) (2@N/A)	99% (9@100%) (1@89%) POC RECEIVED	99.4% (18@100%) (1@89%) (4@N/A)
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)	100% (3)	100% (3)	100%	100% (3)	100% (12)

6 Effectiveness M-74	Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received
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FY19 Program Performance Indicators St. Clair County CMH IMPACT

Enhanced Community Support Services (74327)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-7	Encourages	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.)				Community Benefits Received	Community Benefits Received
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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction 100% Reported	Customer Satisfaction 100% Reported
3	Effectiveness M-39	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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	No New Hires *see note/email	No New Hires	No New Hires	100% (1)	100% (1)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	if needed.	100% (# of #)	No New Hires *see note/email	No New Hires	No New Hires	100% (1)	100%
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	100% (1)	No New Hires Previous Quarter	No New Hires Previous Quarter	100%
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)	100% (3)	91% (2@91%) (1@90%) POC RECEIVED	100% (3)	100% (3)	98% (9@100%) (2@91%) (1@90%)
6	Effectiveness M-42.1	Staff Receive Supervision Regularly	All staff will receive supervision on regular (30 day) intervals. Supervision may be provided by phone and/or in person or at staff meetings. Training documentation MAY be requested by St. Clair CMH QI Office.	Program will maintain training records and provided documentation if requested.	100%	100%	100%	100%	100%	100%

1 1	Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received
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FY19 Program Performance Indicators St. Clair County CMH RiverBend II (IMPACT) Personal Care and Community Living Supports (74547)

#	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.)				Community Benefits Received	Community Benefits Received
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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	100% Customer Satisfaction	100% Customer Satisfaction
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						
	,		a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	100% (1)	100% (1 @100%) (1@N/A)	No New Hires	100% (2)	100% (4 @100%) (1@ N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	if needed.	100% (# of #)	100% (1)	100% (2)	No New Hires	100% (2)	100% (5)
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	100% (1)	100% (1) (1@ N/A)	No New Hires Previous Quarter	100% (2@100%) (1@ N/A)
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% (1@100%) (2@91%) POC RECEIVED	82% (1) POC RECEIVED	No Additional Staff to Report	No Additional Staff to Report	91% (1@100%) (2@91%) (1@82%)
6	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Innovative Enhance Community Supports Services (74348)

#	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.)		Ender the second	e de la marca d	Community Benefits Received	Community Benefits Received
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 #)	Customer Satisfaction Reported 100%	Customer Satisfaction Reported 100%	Customer Satisfaction Survey Not Reported 3Q	Customer Satisfaction Report 87% (26 of 30)	Customer Satisfaction Report 87% (26 of 30)
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			٠.			
			a. Recipient Rights (Initial) (within 30 days of hire)	new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the	100% (# of #)	100% (2)	100% (1)	No New Hires	100% (1)	100% (4)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	percentage and forward the final results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (2)	100% (1)	No New Hires	100% (1)	100% (4)
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	100% (1@100%) (1@N/A)	N/A (1)	No New Hires Previous Quarter	100% (1@100%) (2@N/A)
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)	100% (3)	91% (2@100%) (1@73%) POC RECEIVED	97% (2@100%) (1@90%) POC RECEIVED	93% (1@100%) (2@90%) POC RECEIVED	95% (8@100%) (3@90%) (1@73%)
6	Effectiveness M-42.1	Staff Receive Supervision Regularly	All staff will receive supervision on regular (30 day) intervals. Supervision may be provided by phone and/or in person or at staff meetings. Training documentation MAY be requested by St. Clair CMH QI Office.	Program will maintain training records and provided documentation if requested.	100%	100%	100%	100%	100%	100%

7 Effe M-7		Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received
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FY19 Program Performance Indicators St. Clair County CMH Innovative

Roehl (340), Oak (342), Lincoln (344), Stone Creek (349), Abbottsford (350), Mayfield (352), Ponderosa (353), Ravenswood (354), Scott (355), Hancock (437), Progression (442), Hopps (471)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	II .	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.)				Community Benefits Received	Community Benefits Received
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	Customer Satisfaction Report 87% (26 of 30)	Customer Satisfaction Report 87% (26 of 30)	Customer Satisfaction Report 87% (26 of 30)	Customer Satisfaction Report 87% (26 of 30)	Customer Satisfaction Report 87% (26 of 30)
				Guardian Satisfaction Survey to be administered by either St.Clair County CMH QI Office or per contract agency via contract requirements.	90% (# of #)	Guardian Satisfaction Report 93% (26 of 28)	Guardian Satisfaction Report 93% (26 of 28)	Guardian Satisfaction Report 93% (26 of 28)	Guardian Satisfaction Report 93% (26 of 28)	Guardian Satisfaction Report 93% (26 of 28)
3		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.	100%	100% (9@100%) (1@N/A)	73% (8@100%) (3@0%) POC RECEIVED	100% (12)	100% (8)	93% (37@100%) (3@0%) (1@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (10)	100% (11)	100% (12)	100% (8)	100% (41)
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 #)	100% (10@100%) (2@N/A)	99% (7@100%) (1@91%) (2@N/A) POC RECEIVED *Rev. 10.18.19	100% (10@100%) (1@N/A)	100% (11@100% (1@N/A)	99.7% (38@100%) (1@91%) (6@N/A)

5	Effectiveness M-41	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)	97% (2@100%) (1@92%) POC RECEIVED	100% (3)	100%	100% (3)	99.3% (11 @100%) (1@92%)
6	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/. Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Life Skills Center, Inc. Port Huron (74601) Capac (74602) Marine City (74603)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
	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.)				Communty Benefits Received	Community Benefits Received
	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 #)	Customer Satisfaction Survey 99.7%	Customer Satisfaction Survey 99.7%	Customer Satisfaction Survey 99.7%	Customer Satisfaction Survey 99.7%	Customer Satisfaction Survey 99.7%
	Effectiveness M-36	Increase Community Integration	Number of outings held within the community.	Program will report number of outings held within the community.	# TBD (#)	4,431	3,896	4,564	4,793	17,684
		(PI applies primarily to persons served receiving day	Average amount of time spent within the community per persons served.	Program will report the average amount of time spent in the community per persons served.	TBD (Text)	124.3	113.4	139.5	146.9	131
		services).	Percentage and number of persons served who attended a community outing (based on an unduplicated count).	Program will calculate percentage based on number reported in a. & b.	%TBD (a. of b.)	100% (122)	99.1% (118 of 119)	99.2% (124 of 125)	99.2% (132 of 133)	99.3% (496 of 499)
			·	Number of person served who attended a community outing (based on unduplicated count).	a. (#)	122	118	124	132	496
				b. Number of persons served who are eligible to attend a community outing (based on unduplicated count).	b. (#)	122	119	125	133	499
4	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						
			a. Recipient Rights (Initial) (within 30 days of hire)	new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the	100% (# of #)	100% (2)	No New Hires	100% (5)	100% (2)	100% (9)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	percentage and forward the final results to the program and request a Plan of Correction if needed.	100% (# of #)	100%	No New Hires	100% (5)	100% (2)	100% (9)
5	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 #)	100% (1)	100% (1 @100% (1@ N/A)	No New Hires Previous Quarter	100% (5)	100% (7 @100%) (1@N/A)

1 -	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)	100% (3)	100% (3)	100% (2)	100% (3)	100% (11)
	Effectiveness M-42.1	Staff Receive Supervision Regularly	All staff will receive supervision on regular (30 day) intervals. Supervision may be provided by phone and/or in person or at staff meetings. Training documentation MAY be requested by St. Clair CMH QI Office.	Program will maintain training records and provided documentation if requested.	100%	100%	100%	100%	100%	100%
8	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Norserv Group, Ltd. (74236)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
•		Discharge Start Rates	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	N/A	N/A	N/A
1	4	Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (2)	100% (1)	N/A	N/A	100%
	Efficiency M-4	Admissions	Percentage and number of persons served who are admitted into a psychiatric hospital while receiving services.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	5% or Less (# of #)	N/A	N/A	N/A	N/A	N/A
	1	Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	N/A	N/A	N/A	N/A	N/A
	1	Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
	M-7	Encourages	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.)				Community Benefits Received	Community Benefits Received
	Satisfaction M-8	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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction 100% Reported	Customer Satisfaction 100% Reported
ı	Effectiveness M-9	Psychological	Percentage and number of persons served (children) who demonstrate an increase in psychological functioning.	Clinician will complete a level of functioning assessment as required (CAFAS/PECFAS). Program will calculate percentage of persons served (children) who demonstrated an increase in psychological functioning based on numbers reported in a. & b.	25% (a. of b.)	82% (9 of 11)	100% (5)	100% (2)	100% (3)	90% (19 of 21)
				Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	9	5	2	3	19
			·	b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	11	5	2	3	21

9	M-11	Ensure Measurement of Level of Functioning	Percentage of person served (children) who received a level of functioning assessment (CAFAS/PECFAS) as required.	Certified clinician will completed a level of functioning assessment as required Quarterly, Discharge and Annually.						
W45-7-				Number of persons served (children) with open cases in the reporting period.	#	11	5	5	3	24
			Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# _. of #)	100% (1)	100% (3)	100% (2)	100% (2)	100% (8)
			Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	100% (5)	100% (6)	100% (3)	N/A	100% (14)
			Annually	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	N/A	N/A	N/A	N/A	N/IA
10	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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires
11	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	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter
12	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)	86% (2@88%) (1@83%) POC RECEIVED	82% (1@89%) (1@80%) (1@78%) POC RECEIVED	89% (1) POC RECEIVED	No Additional Staff to Report	85% (2@89%) (2@88%) (1@83%) (1@80%) (1@78%)

13 Effectiveness M-74	Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received
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FY19 Program Performance Indicators St. Clair County CMH Norserv Group Ltd. School Success (74233)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	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 #)	Customer Satisfaction 100% (19)	Customer Satisfaction 94% (14 of 15)	Customer Satisfaction 100% (19)	Customer Satisfaction 94% (15 of 16)	Customer Satisfaction 94% (15 of 16)
2	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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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.	100% (# of #)	No New Hires	No New Hires	No New Hires	100% (2)	100% (2)
			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	No New Hires	84% (1@100%) (1@67%) POC RECEIVED	84% (1@100%) (1@67%)
3	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	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter

4	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)	92% (1@100%) (1@83%) POC RECEIVED	No Additional Staff To Report	No Additional Staff To Report	No Additional Staff To Report	92% (1@100%) (1@83%)
5	Access M-55	Promote Timely & Successful Prevention Interventions	Service interventions used to reduce the incidence of behavioral, emotional or cognitive dysfunction, resulting in a reduction of the need for individual mental health treatment.	Program will calculate percentage of referrals contacted within 3 business days of assessment based on the numbers reported in a. & b.	100% (a. of b.)	100% (8)	100% (5)	100% (10)	100% (1)	100% (24)
			treatment.	a. Number of referrals contacted within 3 business days of the assessment.	a. (#)	8	5	10	1	24
			,	b. Number of referrals open to the program.	b. (#)	8	5	10	1	24
				Program will calculate percentage of families (persons served) seen within 5 business days of the truancy hearing based on the numbers reported in a. & b.	100% (a. of b.)	84% (16 of 19) POC RECEIVED	94% (15 of 16) POC RECEIVED	100% (19)	100% (16)	94% (66 of 70)
				a. The number of families (persons served) seen within 5 business days of the truancy hearing.	a. (#)	16	15	19	16	66
8				b. Number of persons served open to the program.	b. (#)	19	16	19	16	70
				Program will calculate percentage of persons served refereed to inpatient mental health service based on the numbers reported in a. & b.	15% or Less (a. of b.)	0% (19)	0% (16)	0% (19)	0% (16)	0% (70)
				a. Number of persons served that are referred to inpatient mental health services.	a. (#)	0	0	0	0	0
				b. Number of persons served open to the program.	b. (#)	19	16	19	16	70

Effectiveness M-56	Increase School Attendance	Interventions will increase school attendance of persons served participating in program.	Program will calculate percentage of persons served open for greater than 1 month showing improved attendance based on numbers reported in a. & b.	90% (a. of b.)	85% (11 of 13) POC RECEIVED	86% (12 of 14) POC RECEIVED	95% (18 of 19)	N/A *Summer/No Classes	89% (41 of 46)
			a. Number of persons served showing improved attendance.	a. (#)	11	12	18	N/A	41
			b. Number of persons served open for greater than 1 month.	b. (#)	13	14	19	N/A	46
7 Effectiveness M-57	Improve Academic Performance	Interventions will improve academic performance for students who participate in program.	Program will calculate academic performance improvement based on numbers reported in a. & b.	75% (a. of b.)	67% (4 of 6) POC RECEIVED	100% (7)	100% (1)	80% (4 of 5)	84% (16 of 19)
			a. Number of persons served (students) showing an improvement at discharge.	a. (#)	4	7	1	4	16
			b. Number of persons served (students) discharged.	b. (#)	6	7	1	5	19
 B Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Professional Counseling Center Outpatient (74228)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
	Effectiveness M-1	Discharge Start Rates	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	100% (1)	100% (1)	100%	100% (3)
	I .	Start Timelines			95% (# of #)	100% (12)	100% (15)	87% (13 of 15) POC RECEIVED	80% (12 of 15) POC RECEIVED	91% (52 of 57)
	Efficiency M-4	Admissions	Percentage and number of persons served who are admitted into a psychiatric hospital while receiving services.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	5% or Less (# of #)	N/A	1% (1 of 115)	2% (2 of 88)	1% (1 of 99)	1% (4 of 302)
	Efficiency M-5	Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	N/A	0% (1)	0% (2)	0% (1)	0% (4)
	1	Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
			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.)				Community Benefits Received	Community Benefits Received
	Satisfaction M-8	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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction 100% Reported	Customer Satisfaction 100% Reported

8	Effectiveness M-9	Increase in Psychological Functioning	Percentage and number of persons served (children) who demonstrate an increase in psychological functioning.	Clinician will complete a level of functioning assessment as required (CAFAS/PECFAS). Program will calculate percentage of persons served (children) who demonstrated an increase in psychological functioning based on numbers reported in a. & b.	25% (a. of b.)	53% (17 of 32)	47% (15 of 32)	31% (10 of 32)	29% (10 of 35)	40% (52 of 131)
				Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	17	15	10	10	52
			:	b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	32	32	32	. 35	131
9	Efficiency M-11	Ensure Measurement of Level of Functioning	Percentage of person served (children) who received a level of functioning assessment (CAFAS/PECFAS) as required.	Certified clinician will completed a level of functioning assessment as required Quarterly, Discharge and Annually.						
				Number of persons served (children) with open cases in the reporting period.	#	47	40	40	43	170
			Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	100% (21)	100% (26)	100% (24)	100% (24)	100% (95)
			Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	100% (10)	100% (8)	100% (8)	100% (9)	100% (35)
			Annually	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	100% (6)	100% (1)	100% (4)	100% (5)	100%: (16)
10	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						Marie Baker i juli
		a. Recipient Rights (Initial) (within 30 days of hire) 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	100% (# of #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires		
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	and request a Plan of Correction if needed.	100% (# of #)	No New Hires				

11	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	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter
12	2 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@100%) (1@83%) POC RECEIVED	100% (1)	91% (1@100%) (1@82%) POC RECEIVED	100%	96% (7@100%) (1@83%) (1@82%)
13	B Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Professional Counseling Center Home-Based Program (74223 & 74232)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1	Discharge Start	Percentage and number of persons served discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	74223 N/A 74232 N/A	74223 N/A 74232 100% (1)	74223 N/A 74232 100% (1)	74223 N/A 74232 100% (1)	74223 N/A 74232 100% (3)
2	Effectiveness M-3	Improve Service Start Timelines	Percentage and number of new persons served starting any needed ongoing service following a non-emergent assessment from CIU within targeted timeframes of 14 days of referral.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	74223 100% (2) 74232 100% (1)	74223 N/A 74232 100% (1)	74223 N/A 74232 100% (5)	74223 100% (1) 74232 100% (4)	74223 100% (3) 74232 100% (11)
3	Efficiency M-4	Lower Hospital Admissions	Percentage and number of persons served who are admitted into a psychiatric hospital while receiving services.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	5% or Less (# of #)	74223 6% (1 of 17) POC RECEIVED 74232 N/A	74223 N/A 74232 3% (1 of 30)	74223 N/A 74232 N/A	74223 N/A 74232 3% (1 of 32)	74223 6% (1 of 17) 74232 3% (2 of 62)
4	Efficiency M-5	Lower Hospital Recidivism	,	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	74223 N/A 74232 N/A	74223 N/A 74232 0% (1)	74223 0% (1) 74232 0% (1)	74223 0% (1) 74232 N/A	74223 0% (2) 74232 0% (2)
5	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
6	Satisfaction M-8		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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction 100% Reported	Customer Satisfaction 100% Reported

7	Effectiveness M-9	Increase in Psychological Functioning	Percentage and number of persons served (children) who demonstrate an increase in psychological functioning.	Clinician will complete a level of functioning assessment as required (CAFAS/PECFAS). Program will calculate percentage of persons served (children) who demonstrated an increase in psychological functioning based on numbers reported in a. & b.	25% (a. of b.)	48% (21 of 44)	49% (21 of 43)	56% (24 of 43)	35% (14 of 40)	47% (80 of 170)
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	21	21	24	14	80
				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	44	43	43	40	170
8	Efficiency M-11	Ensure Measurement of Level of Functioning	Percentage of person served (children) who received a level of functioning assessment (CAFAS/PECFAS) as required.	Certified clinician will completed a level of functioning assessment as required Quarterly, Discharge and Annually.						
				Number of persons served (children) with open cases in the reporting period.	#	51	45	49	44	189
			Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	100% (32)	100% (30)	100% (29)	100% (25)	100% (116)
			Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	100% (6)	100% (4)	100% (15)	100% (10)	100% (35)
			Annually	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	100% (6)	100% (6)	100% (6)	100% (6)	100% (24)
9	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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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.	100% (# of #)	100% (1)	No New Hires	100% (3)	100% (1)	100% (5)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	50% (1) POC RECEIVED	No New Hires	83% (1@100%) (2@75%) POC RECEIVED	75% (1) POC RECEIVED	75% (1@100%) (3@75%) (1@50%)

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10	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 #)	100% (1)	100% (1)	No New Hires Previous Quarter	100% (3)	100% (5)
11	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)	95% (2@100%) (1@85%) POC RECEIVED	No Additional Staff to Report	89% (2) POC RECEIVED	100% (1)	94% (3@100%) (2@89%) (1@85%)
12	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Port of Hopes (74906) ~ *Project Stay*~

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
	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.)				Community Benefits Received	Community Benefits Received
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 #)	Port of Hopes 88% Project Stay 93%	Port of Hopes 88% Project Stay 93%	Port of Hopes 88% Project Stay 93%	Port of Hopes 98% Project Stay 98%	Port of Hopes 98% Project Stay 98%
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS" a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires	No New Hires	No New Hires	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 #)	N/A (2) Terminated Prior to 90 Days	No New Hires Previous Quarter	No New Hires Previous Quarter	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)	100% (3)	92% (1@100%) (1@83%) POC RECEIVED	No Additional Staff to Report	No Additional Staff to Report	97% (4@100%) (1@83%)
6	Specific Program Requirements M-51	Maximize Customer Involvement at the Drop-In Center	PORT OF HOPES Average number of persons served attending the Drop-In Center on a daily basis.	A sign-in sheet will be used daily by Port of Hopes. It will include the follow data listed in a., b., c. & d. From this information an average number of person attending will be calculated.						
				a. The month and year of the review.	Completed	Completed	Completed	Completed	Completed	Completed
				b. The dates the drop-in center was open.	Completed	Completed	Completed	Completed	Completed	Completed
	·			c. The number of person served who attended the drop-in center each day.	65	Report Received 56	Report Received 51	Report Received 57	Report Received 52	216
				d. The number of persons served who attended each day who are enrolled in Medicaid.	2	Report Received 52	Report Received 47	Report Received 55	Report Received 50	204
7	Satisfaction M-60	Maximize Customer Involvement in the Program	PROJECT STAY PROGRAM Average number of person served receiving services daily.	Program will provide documentation (spreadsheet) of the average number of persons served receiving services.	10	Report Received 16	Report Received 17	Report Received 17	Report Received 17	16.75
8	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Touchstone (74295) Blue Water Clubhouse (Supported/Transitional Employment)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Efficiency M-5	Lower Hospital Recidivism	Percentage and number of persons served readmitted to inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	N/A	N/A	N/A	N/A	N/A
2	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
3	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.)				Community Benefits Received	Community Benefits Received
4	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 #)	Customer Satisfaction Survey 97% (30 of 31)	Customer Satisfaction Survey 97% (30 of 31)	Customer Satisfaction Survey 93% (28 of 30)	Customer Satisfaction Survey 93% (28 of 30)	Customer Satisfaction Survey 93% (28 of 30)
5	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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	No New Hires	No New Hires	0% (1) POC RECEIVED	No New Hires	0% (1)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	if needed.	100% (# of #)	No New Hires	No New Hires	100% (1)	No New Hires	100% (1)
6	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	No New Hires Previous Quarter	100% (1)	100% (1)

7		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% (1@100%) (2@91%) POC RECEIVED	86% (1@90%) (1@82%) POC RECEIVED	95% (1@100%) (1@90%) POC RECEIVED	80% (1) POC RECEIVED	91% (2@100%) (2@91%) (2@90%) (1@82%) (1@80%)
8	M-58	of Life in the Area of	Percentage of persons served in Supported/Transitional Employment who are employed 10 or more hours per week.	Program will calculate percentage based on numbers reported in a. & b.	90% (a. of b.)	91% (10 of 11)	90% (9 of 10)	91% (10 of 11)	90% (9 of 10)	90% (38 of 42)
		Supported Employment/ Transitional Employment		a. Number of persons served in Supported/Transitional Employment program employed 10 or more hours per week.	a. (#)	10	9	10	9	38
				b. Number of persons served in Supported/Transitional Employment program.	b. (#)	11	10	11	10	42
			Percentage of persons served in Supported/Transitional Employment earning minimum wage or greater.	Program will calculate percentage based on numbers reported in a. & b.	50% (a. of b.)	100% (11)	100% (10)	100% (11)	100% (10)	100% (42)
	·			a. Number of persons served in Supported/Transitional Employment program.	a. (#)	11	10	11	10	42
				b. Number of persons served in Supported/Transitional Employment program earning minimum wage or greater.	b. (#)	11	10	11	10	42
			Percentage of person served in Supported/Transitional Employment continuously employed for 6 months or	Program will calculate percentage based on numbers reported in a. & b.	70% (a. of b.)	82% (9 of 11)	80% (8 of 10)	73% (8 of 11)	86% (6 of 7)	79% (31 of 39)
			longer (not including new individuals).	a. Number of persons served in Supported/Transitional Employment program employed continuously for 6 month or longer (not including new individuals).	a. (#)	9	8	8	6	31
				b. Number of persons served in Supported/Transitional Employment program.	b. (#)	11	10	11	7	39
		·	4. Number of Supported/Transitional Employment sites for Blue Water Clubhouse will be 3.	Program will forward a monthly report with the number of Supported/Transitional Employment sites.	3	7	6	8	7	28

9 Effectiveness M-74	Quality	Corporate Compliance Complaints received	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received
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FY19 Program Performance Indicators St. Clair County CMH Visiting Nurses Association Alzheimer's Day Care Program (74250)

#	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.)				Community Benefits Received	Community Benefits Received
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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction 100% (21)	Customer Satisfaction Not Reported 3Q	Customer Satisfaction Not Reported 4Q	Customer Satisfaction 100% (21)
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						
			a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	No New Hires	No New Hires	No New Hires	100% (1)	100% (1)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires	No New Hires	No New Hires	100% (1)	100% (1)
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%	100% (1)	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter	100% (1)
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% (1@100%) (1@91%) (1@90%) POC RECEIVED	100%	No Addition Staff to Report	No Addition Staff to Report	95% (2@100%) (1@91%) (1@90%)
6	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Berg Specialized Adult Foster Care Home

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	1	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS" a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	Reporting in FY19 2Q DS	No New Hires	No New Hires	No New Hires	No New Hires
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	the program and request a Plan of Correction if needed.	100% (# of #)	Reporting in FY19 2Q DS	No New Hires	No New Hires	No New Hires	No New Hires
2	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 #)	Reporting in FY19 2Q DS	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter
3	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)	Reporting in FY19 2Q DS	78% (1@82%) (1@73%) POC RECEIVED	No Additional Staff to Reort	No Additional Staff to Report	78% (1@82%) (1@73%)
4	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	None	None	None	None	None

FY19 Program Performance Indicators St. Clair County CMH Jokie Specialized Adult Foster Care Home

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS" a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	Reporting In FY19 2Q DS	No New Hires	No response to requests. Contract ended 9.30.19	No response to requests. Contract ended 9.30.19	No New Hires
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	the program and request a Plan of Correction if needed.	100% (# of #)	Reporting in FY19 2Q DS	No New Hires	No response to requests. Contract ended 9.30.19	No response to requests. Contract ended 9.30.19	No New Hires
2	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 #)	Reporting in FY19 2Q DS	No New Hires Previous Quarter	No response to requests. Contract ended 9.30.19	No response to requests. Contract ended 9.30.19	No New Hires Previous Quarter
	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)	Reporting in FY19 2Q DS	97% (2@100%) (1@91%) POC NEEDED	No response to requests. Contract ended 9.30.19	No response to requests. Contract ended 9.30.19	97% (2@100%) (1@91%)
	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	None	None	No response to requests. Contract ended 9.30.19	No response to requests. Contract ended 9.30.19	None

FY19 Program Performance Indicators St. Clair County CMH Joslyn Specialized Adult Foster Care Home

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS" a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	Reporting in FY19 2Q DS	No New Hires	No New Hires	No New Hires	No New Hires
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	the program and request a Plan of Correction if needed.	100% (# of #)	Reporting in FY19 2Q DS	No New Hires	No New Hires	No New Hires	No New Hires
2	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 #)	Reporting in FY19 2Q DS	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter
3	B 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)	Reporting in FY19 2Q DS	100% (3)	No Additional Staff To Report	No Additional Staff To Report	100% (3)
4	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	None	None	None	None	None

FY19 Program Performance Indicators St. Clair County CMH Leach Specialized Child Foster Care Home

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS" a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	Reporting in FY19 2Q DS	No New Hires	No New Hires	No New Hires	No New Hires
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	the program and request a Plan of Correction if needed.	100% (# of #)	Reporting in FY19 2Q DS	No New Hires	No New Hires	No New Hires	No New Hires
2	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 #)	Reporting in FY19 2Q DS	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter
3	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)	Reporting in FY19 2Q DS	100% (1)	No Additional Staff to Report	No Additional Staff to Report	100% (1)
4	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	None	None	None	None	None

FY19 Program Performance Indicators St. Clair County CMH McIntyre Specialized Adult Foster Care Home

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	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	Marine Language and American Control of Control					
			a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	Reporting in FY19 2Q DS	No New Hires	No New Hires	No New Hires	No New Hires
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	the program and request a Plan of Correction if needed.	100% (# of #)	Reporting in FY19 2Q DS	No New Hires	No New Hires	No New Hires	No New Hires
2	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 #)	Reporting in FY19 2Q DS	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter
3	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)	Reporting in FY19 2Q DS	94% (2@91%) (1@100%) POC RECEIVED	No Additional Staff to Report	No Additional Staff to Report	94% (2@91%) (1@100%)
4	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Reporting in FY19 2Q DS	None	None	None	None

FY19 Program Performance Indicators St. Clair County CMH Noble Assisted Living Specialized Adult Foster Care Home

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1		Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS" a. Recipient Rights (Initial) (within 30 days of hire)	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	100% (# of #)	No New Hires				
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires				
2	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				
3	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)	~ *Rev. 11.27.19	91% (2) POC RECEIVED	No Additional Staff to Report	No Additional Staff to Report	91% (2)
4	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received

FY19 Program Performance Indicators St. Clair County CMH Noble Assisted Living II Specialized Adult Foster Care Home

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS" a. Recipient Rights (Initial) (within 30 days of hire)	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.	100% (# of #)	No New Hires	No New Hires	No New Hires	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	No New Hires	No New Hires	No New Hires
2	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	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter
3	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)	95% (1@100% (1@ 90%) POC RECEIVED	~ *Rev. 11.27.19	No Additional Staff to Report	No Additional Staff to Report	95% (1@100% (1@ 90%)
4	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received	Report/ Information Received