

St. Clair County Community Mental Health
Annual Program Performance Indicator Summary

CMH Direct Run, Contract Provider & AFC/CFC Results
FY 2023

December 2023

FY23 Program Performance Indicators
St. Clair County CMH
Capac Children's (74936) & Capac (74110)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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 #)	Child N/A Adult N/A	Child 100% (1) Adult 100% (4)	Child 100% (1) Adult 100% (3)	Child 100% (1) Adult 100% (1)	Child 100% (3) Adult 100% (8)
2	Effectiveness M-3 (MDHHS #3)	Improve Service Start Timelines	Percentage of new persons during the period starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	Child 69% (18 of 26) Adult 57% (20 of 35)	Child 57% (8 of 14) Adult 79% (27 of 34)	Child 33% (6 of 18) Adult 65% (24 of 37)	Child 41% (11 of 27) Adult 57% (17 of 30)	Child 51% (43 of 85) Adult 65% (88 of 136)
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 #)	Child N/A Adult 1% (2 of 255)	Child N/A Adult 1% (3 of 239)	Child N/A Adult 1% (3 of 248)	Child N/A Adult 2% (5 of 251)	Child N/A Adult 1% (13 of 993)
4	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	Child N/A Adult N/A	Child 0% (1) Adult 20% (1 of 5) POC Received	Child 0% (1) Adult 0% (3)	Child 0% (1) Adult 0% (2)	Child 0% (3) Adult 10% (1 of 10)
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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%

FY23 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 Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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 #)	PH 100% (27) Marine City 100% (7) Capac 100% (3)	PH 100% (30) Marine City 100% (3) Capac 100% (5)	PH 100% (34) Marine City 100% (9) Capac 100% (5)	PH 96% (25 of 26) Marine City 100% (3) Capac 100% (3)	PH 99% (116 of 117) Marine City 100% (22) Capac 100% (16)
2	Effectiveness M-2 (MDHHS #2A)	Improve Service Start Timelines	The percentage of new persons during the period receiving a completed biopsychosocial assessment within 14 calendar days of a non-emergency request for service.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	PH 59% (354 of 595) Marine City 59% (70 of 118) Capac 65% (67 of 103)	PH 69% (468 of 674) Marine City 59% (86 of 147) Capac 68% (63 of 92)	PH 70% (428 of 612) Marine City 65% (85 of 131) Capac 67% (49 of 73)	PH 63% (409 of 647) Marine City 65% (84 of 129) Capac 66% (47 of 71)	PH 66% (1659 of 2528) Marine City 62% (325 of 525) Capac 67% (226 of 339)
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	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
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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
6	Effectiveness M-19	Improve Show Rates	Percentage and number of persons served who are referred by the Access Center to CIU who show for the intake assessments within 30 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	85% (# of #)	93% (577 of 619)	96% (721 of 749)	96% (680 of 706)	97% (638 of 660)	96% (2616 of 2734)
7	Effectiveness M-20	Improve Assessment LOC Determinations	Percentage and number of persons served (children) who received a level of functioning 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% (248)	100% (226)	100% (221)	100% (196)	100% (891)

				a. Number of persons served (children) who received a level of functioning assessment in the reporting period.	a. (#)	248	226	221	196	891
				b. Number of persons served (children) receiving an intake in the reporting period.	b. (#)	248	226	221	196	891

FY23 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 Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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 (MDHHS #3)	Improve Service Start Timelines	Percentage of new persons during the period starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	N/A	N/A	N/A	N/A	N/A
3	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	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 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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
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% (29 of 30)	97% (29 of 30)	97% (30 of 31)	100% (29)	98% (117 of 120)
				a. Number of persons served who attended a community outing that focused on either skill building or volunteering.	a. (#)	29	29	30	29	117
			Number of outings held within the community.	b. Number of persons served eligible to attend a community outing.	b. (#)	30	30	31	29	120

FY23 Program Performance Indicators
 St. Clair County CMH
 IPS (Individual Placement and Support) Program **SMI** (74113)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
1	Efficiency M-65	Ensure Program Quality	The average number of days accrued between the start of vocational profile and job development for all persons served.	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	27	17	21	22	87
2	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 #)	38% (36 of 95)	37% (46 of 125)	54% (51 of 94)	50% (55 of 110)	44% (188 of 424)
3	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.	75% (# of #)	78% (21 of 27)	76% (35 of 46)	84% (43 of 51)	87% (48 of 55)	82% (147 of 179)
4	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 #)	86% (59 of 69)	100% (89)	100% (65)	95% (69 of 73)	95% (282 of 296)
5	Effectiveness M-86	Ensure Program Quality	The average hourly pay received.	Program will report the average hourly pay received by individuals who participate in the program.	Above Minimum Wage	\$13.57	\$13.54	\$13.55	\$13.56	Average \$13.56
6	Effectiveness M-87	Ensure Program Quality	The average number of hours worker per week.	Program will report the average weekly hours worked by individuals who participate in the program.	TBD	24	23	22	26	95

FY23 Program Performance Indicators
St. Clair County CMH
IDDT (Integrated Dual Disorder Treatment) Program (74967)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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)	86% (6 of 7) POC Received DC	N/A	90% (9 of 10)
2	Effectiveness M-3 (MDHHS #3)	Improve Service Start Timelines	Percentage of new persons during the period starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	100% (3)	N/A	100% (1)	100% (3)	100% (7)
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 #)	11% (5 of 45) POC Received *DC	10% (4 of 42) POC Received *DC	9% (4 of 43) POC Received DC	16% (6 of 37) POC Received DC	11% (19 of 167)
4	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (2)	0% (1)	38% (3 of 8) POC Received DC	N/A	27% (3 of 11)
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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
8	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity (dashboard).	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
9	M-103	Ensure Program Quality	One hundred percent of persons served have "Stage of Change", identified and reviewed at least monthly in progress note.	Data Department will provide a report for the IDDT & Dual Recovery programs, Identifying information needed for "Stage of Change" Identified/reviewed.	1	TBD	TBD	TBD	TBD	TBD

FY23 Program Performance Indicators
St. Clair County CMH
Next Step Program (74985)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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% (7)	100% (4)	100% (2)	100% (15)
2	Effectiveness M-3 (MDHHS #3)	Improve Service Start Timelines	Percentage of new persons during the period starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	N/A	100% (3)	67% (2 of 3)	N/A	83% (5 of 6)
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 #)	19% (8 of 43) POC Received	9% (4 of 46) POC Received	5% (2 of 40)	14% (5 of 37) POC Received	11% (19 of 166)
4	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (1)	44% (4 of 9) POC Received	0% (4)	0% (3)	24% (4 of 17)
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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
8	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity (dashboard).	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
9	Effectiveness M-108				TBD	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
St. Clair County CMH
Marine City Children's (74932) & Marine City (74104)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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 #)	Child 100% (1) Adult 100% (2)	Child 100% (1) Adult 100% (2)	Child 100% (1) Adult 100% (4)	Child N/A Adult 100% (4)	Child 100% (3) Adult 100% (12)
2	Effectiveness M-3 (MDHHS #3)	Improve Service Start Timelines	Percentage of new persons during the period starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	Child 49% (17 of 35) Adult 60% (24 of 40)	Child 74% (28 of 38) Adult 81% (30 of 37)	Child 56% (20 of 36) Adult 62% (37 of 60)	Child 43% (13 of 30) Adult 58% (40 of 69)	Child 56% (78 of 139) Adult 64% (131 of 206)
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 #)	Child 1% (1 of 151) Adult 1% (4 of 343)	Child 1% (1 of 164) Adult 1% (5 of 347)	Child 1% (2 of 173) Adult 2% (8 of 383)	Child 0% (194) Adult 3% (13 of 408)	Child 1% (4 of 682) Adult 2% (30 of 1481)
4	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	Child N/A Adult 0% (3)	Child N/A Adult 0% (2)	Child 0% (1) Adult 17% (1 of 6) POC Received	Child N/A Adult 33% (2 of 6) POC Received	Child 0% (1) Adult 18% (3 of 17)
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

FY23 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 Total/Average
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 #)	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
2	Effectiveness M-25	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.)	93% (13 of 14)	100% (12)	90% (18 of 20)	90% (17 of 19)	92% (60 of 65)
				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. (#)	13	12	18	17	60
				b. Number of persons served who graduated a year ago from MHC.	b. (#)	14	12	20	19	65
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	Effectiveness M-27	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.)	96% (102 of 106)	95% (105 of 110)	94% (110 of 117)	96% (125 of 130)	95% (442 of 463)
				a. Number of persons served who continue to maintain a lifestyle free of criminal charges in the current quarter.	a. (#)	102	105	110	125	442
				b. Number of persons served currently in MHC.	b. (#)	106	110	117	130	463
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.)	77% (20 of 26) POC Received	69% (18 of 26) POC Received	82% (27 of 33)	74% (23 of 31)	76% (88 of 116)
				a. Number of persons served in the program who have successfully graduated this quarter.	a. (#)	20	18	27	23	88
				b. Number of persons served discharge from MHC this quarter.	b. (#)	26	26	33	31	116

FY23 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 Total/Average
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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
3	Effectiveness M-14	Ensure Access to 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 services.	Program will forward percentage calculated as well as provide numbers used for calculation.	95% (# of #)	100% (16)	100% (18)	100% (18)	100% (20)	100% (72)
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.)	N/A	100% (2)	N/A	0% (1) POC Received	67% (2@100%) (1@0%)
				a. Number of pre-authorization screenings completed within 4 calendar days or referral.	a. (#)	N/A	2	0	0	2
				b. Number of pre-authorizations screenings.	b. (#)	N/A	2	0	1	3
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 days.	Program will calculate the percentage based on the numbers reported in a. & b.	50% (a. of b.)	N/A	100% (1)	N/A	0% (1) POC Received	50% (1@100%) (1@0%)
				a. Number of persons served authorized by MDHHS to reside in a nursing home who have received a PAS.	a. (#)	N/A	1	0	1	2
				b. Number of person served seen by OBRA Active Treatment for intake within 15 days.	b. (#)	N/A	1	0	0	1

FY23 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 Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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% (2)	100% (4)
2	Effectiveness M-3 (MDHHS #3)	Improve Service Start Timelines	Percentage of new persons during the period starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	33% (2 of 3)	100% (2)	N/A	N/A	80% (4 of 5)
3	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (2)	50% (1 of 2) POC Received *DC	0% (1)	0% (2)	14% (1 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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
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 (#)	2	1	1	0	4

8	Effectiveness 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.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	#TBD (#)	#904924 SG (1) #328794 FA (5) #916806 PJ (1) #315435 LB (1)	#031265 MK (5) #326737 TM (1) #911141 SP (1)	#031265 MK (1) #326737 TM (10) #317984 AM (1) #904074 SW (1) #909127 JB (1) #916329 JR (1) #916806 PJ (1) #907654 SJ (1)	#315435 LB (2) #326737 TM (5) #328794 FA (10) #403865 GS (1) #909127 JB (1) #904074 SW (1) #904924 SG (1) #909127 JB (2) #911141 SP (1) #916329 JR (1) #916806 PJ (2) #918754 FL (1)	#031265 MK (6) #315435 LB (3) #317984 AM (1) #326737 TM (16) #328794 FA (15) #403865 GS (1) #909127 JB (1) #904074 SW (1) #904924 SG (1) #909127 JB (2) #911141 SP (1) #916329 JR (1) #916806 PJ (2) #918754 FL (1)
9	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity (dashboard).	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

FY23 Program Performance Indicators
 St. Clair County CMH
 Residential Supports II (74119)
 Hayes (BWDH), Roehl (Innov.), Springborn (BWDH), 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 Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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)	N/A	N/A	100% (3)
2	Effectiveness M-3 (MDHHS #3)	Improve Service Start Timelines	Percentage of new persons during the period starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	N/A	N/A	100% (1)	N/A	100% (1)
3	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	N/A	0% (1)	N/A	N/A	0% (1)
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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
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 (#)	7	5	3	5	20
8	Effectiveness 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.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	#TBD (#)	#904081 MG (1) #034352 MP (2)	None	None	#912896 JF (3) #915203 CW (1)	#034352 MP (2) #904081 MG (1) #912896 JF (3) #915203 CW (1)

FY23 Program Performance Indicators
 St. Clair County CMH
 Veterans Services (74162)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
1	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
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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
4	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity (dashboard).	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
5	M-88	Increase persons served.	Number of NEW CONTACTS (Veterans) this reporting quarter.	Veterans Navigator will forward information complied and submitted via the County Veteran Navigator Quarterly Narrative Report.	15	23	21	16	25	85
6	M-89	Increase persons served.	Number of CONTACT (Veterans) this reporting quarter.	Veterans Navigator will forward information complied and submitted via the County Veteran Navigator Quarterly Narrative Report.	30	33	37	30	38	138
7	M-90	Authorizations	Number of VHA Eligible but treated in the Community/VA Authorizations.	Veterans Navigator will forward information complied and submitted via the County Veteran Navigator Quarterly Narrative Report.	5	12	12	7	6	37

FY23 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 Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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)	N/A	100% (2)	100% (1)	100% (6)
2	Effectiveness M-3 (MDHHS #3)	Improve Service Start Timelines	Percentage of new persons during the period starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	60% (6 of 10)	82% (9 of 11)	87% (13 of 15)	90% (9 of 10)	80% (37 of 46)
3	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (1)	0% (2)	0% (2)	0% (1)	0% (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	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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
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.)	55% (36 of 66)	45% (29 of 65)	61% (37 of 61)	49% (34 of 70)	52% (136 of 262)
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	36	29	37	34	136

				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	66	65	61	70	262
8	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.)	81% (47 of 58) POC Received	78% (45 of 58) POC Received	74% (35 of 47) POC Received	56% (29 of 52) POC Received	73% (156 of 215)
				a. Number of persons served (children) who received a minimum of 4 hours of service on a monthly basis.	a. (#)	47	45	35	29	156
				b. Number of persons served (children) receiving services.	b. (#)	58	58	47	52	215
9	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity (dashboard).	Data will be collected via the OASIS Software System and ADP and reviewed monthly.	Sent Out & Reviewed Monthly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
10	Effectiveness M-83	Ensure Program Quality	Percentage of persons served (child) who showed IMPROVEMENT on ONE or MORE OUTCOME Indicators. *Information Reported via CAFAS Aggregate Report	Program will electronically forward the percentage & number (i.e. 90%, 9 of 10) of persons served (child) who Improved on One or More Outcome during the reporting quarter.	50% (# of #)	76% (47 of 62)	75% (46 of 61)	79% (53 of 67)	78% (51 of 65)	77% (197 of 255)
11	Effectiveness M-84	Ensure Program Quality	Percentage of persons served (child) who showed MEANINGFUL and RELIABLE IMPROVEMENT. *Information Reported via CAFAS Aggregate Report	Agency will electronically forward the percentage & number (i.e. 90%, 9 of 10) of persons served (child) who showed MEANINGFUL and RELIABLE IMPROVEMENT during the reporting quarter.	50% (# of #)	71% (44 of 62)	69% (42 of 61)	73% (49 of 67)	69% (45 of 65)	71% (180 of 255)

FY23 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 Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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% (5)	100% (7)	83% (5 of 6) POC Received	95% (19 of 20)
2	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 #)	1% (5 of 397)	2% (8 of 461)	2% (10 of 477)	1% (2 of 363)	1% (25 of 1698)
3	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	25% (1 of 4) POC Received	20% (1 of 5) POC Received	0% (8)	20% (1 of 5) POC Received	14% (3 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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
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.)	64% (159 of 249)	55% (136 of 247)	59% (203 of 343)	57% (209 of 368)	59% (707 of 1207)
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	159	136	203	209	707
				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	249	247	343	368	1207

8	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity (dashboard).	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
9	Effectiveness M-83	Ensure Program Quality	Percentage of persons served (child) who showed IMPROVEMENT on ONE or MORE OUTCOME Indicators. *Information Reported via CAFAS Aggregate Report	Program will electronically forward the percentage & number (i.e. 90%, 9 of 10) of persons served (child) who Improved on One or More Outcome during the reporting quarter.	50% (# of #)	56% (224 of 399)	55% (223 of 406)	54% (285 of 526)	56% (301 of 542)	55% (1033 of 1873)
10	Effectiveness M-84	Ensure Program Quality	Percentage of persons served (child) who showed MEANINGFUL and RELIABLE IMPROVEMENT. *Information Reported via CAFAS Aggregate Report	Agency will electronically forward the percentage & number (i.e. 90%, 9 of 10) of persons served (child) who showed MEANINGFUL and RELIABLE IMPROVEMENT during the reporting quarter.	50% (# of #)	48% (192 of 399) POC Received	46% (187 of 406) POC Received	45% (239 of 526) POC Received	48% (260 of 542) POC Received	47% (878 of 1873)

FY23 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 Total/Average
1	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
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 FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%	Completed Annually FY23 (Sept. 23) Satisfaction Survey 95%
4	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.)	57% (8 of 14)	63% (24 of 38)	65% (33 of 51)	55% (29 of 53)	60% (94 of 156)
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	8	24	33	29	94
				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	14	38	51	53	156
5	Access M-33	Timely Access to Services	1. Initial meeting with family to occur within 5 working days of referral acceptance.	Program will calculate percentages based on the number reported in a. & b.	100% (a. of b.)	100% (23)	78% (7 of 9) POC Received	58% (7 of 12) POC Received	73% (11 of 15) POC Received	81% (48 of 59) *24 exceptions
				a. Number of initial meetings with family that occurred within 5 working days of referral acceptance.	a. (#)	23 *15 exceptions	7 *2 exceptions	7 *5 exceptions	11 *2 exceptions	48 *24 exceptions
			b. Number of initial meetings.	b. (#)	23	9	12	15	59	
			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.)	96% (22 of 23) POC Received	100% (10)	85% (11 of 13) POC Received	100% (15)	95% (58 of 61)

				a. Number of third meetings that occurred within 30 days of the initial meeting to develop service plan.	a. (#)	22 *2 exceptions	10	11	15	58 *2 exceptions
				b. Number of third meetings.	b. (#)	23	10	13	15	61
		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% (37)	98% (45 of 46) POC Received	81% (29 of 36) POC Received	94% (50 of 53) POC Received	94% (161 of 172)
				a. Number of Child and Family Team meetings scheduled no more than 30 days apart.	a. (#)	37 *4 exceptions	45 * 1 exception	29 * 7 exceptions	50 *3 exceptions	161 *15 exceptions
				b. Number of Child and Family Team meetings.	b. (#)	37	46	36	53	172
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 #)	81% (30 of 37)	87% (40 of 46)	90% (46 of 51)	87% (46 of 53)	87% (162 of 187)
				Reduction in school truancy, suspensions & expulsions.	75% (# of #)	60% (22 of 37) POC Received	67% (31 of 46) POC Received	51% (26 of 51) POC Received	58% (31 of 53) POC Received	59% (110 of 187)
				Reduction in Juvenile Justice contacts (probation violations).	75% (# of #)	81% (30 of 37)	74% (34 of 46) POC Received	61% (31 of 51) POC Received	72% (38 of 53) POC Received	71% (133 of 187)
				Reduction in child welfare (CPS) contracts.	75% (# of #)	95% (35 of 37)	86% (37 of 43)	69% (35 of 51) POC Received	81% (43 of 53)	82% (150 of 184)
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 c. Family Motto/Bumper Sticker d. CAFAS/PECFAS e. RED CAP Data/Entry System f. Crisis/Safety Plan g. Budget h. Monthly Updates i. Quarterly Reviews	Program will forward percentage calculated as well as provide numbers used for calculation.	100% (# of #)	86% (32 of 37) POC Received	86% (37 of 46) POC Received	88% (45 of 51) *6 exceptions POC Received	87% (46 of 53) *7 exceptions POC Received	86% (160 of 187)

8	Effectiveness M-71	Ensure Program Quality	Program supervisor will review individually each staffs productivity (dashboard).	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
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FY23 Program Performance Indicators
 St. Clair County CMH
 Attendant Care Professional Health Care at Home
 Fort Gratiot (74429) & Chesterfield (74481)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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/A	New FY24
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 #)	N/A	N/A	N/A	N/A	New FY24
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	100% (10@100%) (2@N/A)	100% (12)	100% (10)	100% (13@100%) (2@N/A)	100% (45@100%) (4@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	94% (9@100%) (3@75%) POC Received	100% (12)	100% (10)	99% (14@100%) (1@80%) POC Received	98% (45@100%) (1@80%) (3@75%)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (16@100%) (3@N/A)	100% (9@100%) (3@N/A)	100% (10@100%) (2@N/A)	100% (10)	100% (45@100%) (8@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)	87% (2@100%) (1@60%) POC Received	100% (3)	100% (3)	77% (2@78%) (1@75%) POC Received	91% (8@100%) (2@78%) (1@75%) (1@60%)

6	Effectiveness M-61	Ensure Program Quality	All 6-Month Updated Assessments and Plans have been submitted prior to current plan expiration.	Program will calculate the percentage based on the number reported in a. & b.	100% (a. of b.)	88% (14 of 16) POC Received	96% (26 of 27) POC Received	94% (16 of 17) POC Received	100% (21)	95% (77 of 81)
				a. Number of 6-Month Assessments and Plans that have been submitted prior to current plan expiration for the reporting period.	a. (#)	14	26	16	21	77
				b. Number of 6-Month Assessments and Plans that are required to be completed in the reporting period.	b. (#)	16	27	17	21	81
7	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 Received	Report Received	Report Received	Report Received	Report Received
8	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 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 Total/Average
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/A	New FY24
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 #)	N/A	N/A	N/A	N/A	New FY24
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	94% (15@100%) (1@0%) POC Received	100% (7@100%) (1@N/A)	83% (10@100%) (2@0%) (2@N/A) POC Received * 1 submitted late	100% (8)	93% (40@100%) (3@0%) (3@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (16)	100% (8)	100% (13@100%) (1@N/A) *1 Submitted late	100% (8)	100% (45@100%) (1@N/A)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (17)	97% (11@100%) (2@78%) (3@N/A) POC Received	100% (6@100%) (3@N/A)	97% (7@100%) (1@75%) (5@N/A) POC Received	98% (41@100%) (2@78%) (1@75%) (11@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)	94% (2@100%) (1@82%) POC Received	100% (3)	100% (3)	99% (11@100%) (1@82%)
6	Effectiveness M-61	Ensure Program Quality	All 6-Month Updated Assessments and Plans have been submitted prior to current plan expiration.	Program will calculate the percentage based on the number reported in a. & b.	100% (a. of b.)	71% (20 of 28) POC Received	96% (26 of 27) POC Received	88% (22 of 25) POC Received	83% (19 of 23) POC Received	84% (87 of 103)
				a. Number of 6-Month Assessments and Plans that have been submitted prior to current plan expiration for the reporting period.	a. (#)	20	26	22	19	87
				b. Number of 6-Month Assessments and Plans that are required to be completed in the reporting period.	b. (#)	28	27	25	23	103
7	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 Received	Report Received	Report Received	Report Received	Report Received
8	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
St. Clair County CMH
Mercy Plus (74706)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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/A	New FY24
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 #)	N/A	N/A	N/A	N/A	New FY24
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.						
			a. Recipient Rights (Initial) (within 30 days of hire)	In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet. 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% (4@100%) (1@N/A)	100% (3@100%) (1@N/A)	100% (3)	100% (13@100%) (2@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (3)	88% (3@100%) (1@80%) (1@60%) POC Received	100% (4)	100% (3)	96% (13@100%) (1@80%) (1@60%)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A"	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (3)	100% (2)	100% (4@100%) (1@N/A)	100% (1@100%) (3@N/A)	100% (10@100%) (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% (1)	96% (2@100%) (1@88%) POC Received	100% (3)	99% (9@100%) (1@88%)

6	Effectiveness M-61	Ensure Program Quality	All 6-Month Updated Assessments and Plans have been submitted prior to current plan expiration.	Program will calculate the percentage based on the number reported in a. & b.	100% (a. of b.)	100% (3)	67% (2 of 3) POC Received	100% (7)	100% (7)	95% (19 of 20)
				a. Number of 6-Month Assessments and Plans that have been submitted prior to current plan expiration for the reporting period.	a. (#)	3	2	7	7	19
				b. Number of 6-Month Assessments and Plans that are required to be completed in the reporting period.	b. (#)	3	3	7	7	20
7	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 Received	Report Received	Report Received	Report Received	Report Received
8	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.	Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).	FY24 NEW	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
St. Clair County CMH
Peak Autism Center 74577

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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/A	New FY24
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 #)	N/A	N/A	N/A	N/A	New FY24
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.						
			a. Recipient Rights (Initial) (within 30 days of hire)	In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet. 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	75% (3@100%) (1@0%) POC Received	33% (1@100%) (2@0%) POC Received	29% (2@100%) (5@0%) POC Received	43% (6@100%) (8@0%)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	N/A	90% (3@100%) (1@60%) POC Received	73% (2@80%) (1@60%) POC Received	71% (3@100%) (1@80%) (3@40%) POC Received	77% (6@100%) (3@80%) (2@60%) (3@40%)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A"	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	N/A	66% (1@100%) (1@78%) (1@63%) (1@22%) POC Received	78% (2@100%) (1@75%) (1@38%) POC Received	50% (1@100%) (1@0%) (1@N/A) POC Received	68% (4@100%) (1@78%) (1@75%) (1@63%) (1@38%) (1@22%) (1@0%) (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)	N/A	N/A	No Staff Employed Greater than 1 Yr.	No Staff Employed Greater than 1 Yr.	No Staff Employed Greater than 1 Yr.

6	Effectiveness M-61	Ensure Program Quality	All 6-Month Updated Assessments and Plans have been submitted 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	67% (4 of 6) POC Received	67% (4 of 6)
				a. Number of 6-Month Assessments and Plans that have been submitted prior to current plan expiration for the reporting period.	a. (#)	N/A	N/A	N/A	4	4
				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	6	6
7	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	N/A	Report Received	Report Received	Report Received	Report Received
8	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.	Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).	FY24 NEW	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
St. Clair County CMH
Piece by Piece (74659)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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/A	New FY24
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 #)	N/A	N/A	N/A	N/A	New FY24
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.						
			a. Recipient Rights (Initial) (within 30 days of hire)	In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet.	100% (# of #)	N/A	N/A	100% (1)	100% (1)	100% (2)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	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	60% (1) POC Received	100% (1)	80% (1@100%) (1@60%)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A"	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	N/A	N/A	N/A	100% (1)	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)	N/A	N/A	100% (2)	No Additional Staff to Report	100% (2)
6	Effectiveness M-61	Ensure Program Quality	All 6-Month Updated Assessments and Plans have been submitted 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 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
7	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	N/A	N/A	Report Submitted	Report Submitted	Report Submitted
8	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.	Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).	FY24 NEW	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Beacon Specialized Living Services Inc.
 Anchor Point North (74519), Eau Claire (74968), Ossineke (74465), Saginaw (74483), Southfield (74902), The Lodge (74945) & Ypsilanti (74266)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average	
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	Community Benefits	
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 Survey 96%	Customer Satisfaction Survey In Process	Customer Satisfaction Survey In Process	Customer Satisfaction Survey Results 86% POC Received	Customer Satisfaction Survey Results 86%	
				Guardian Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.		Guardian Satisfaction Survey 82% POC Received	Guardian Satisfaction Survey In Process	Guardian Satisfaction Survey In Process	Guardian Satisfaction Survey Results 96%	Guardian Satisfaction Survey Results 96%	
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.							
					a. Recipient Rights (Initial) (within 30 days of hire)	100% (# of #)	87% (13@100%) (2@0%) POC Received	100% (16) * 1 previous qrt.	80% (8@100%) (2@0%) POC Received	43% (9@100%) (12@0%) POC Received	74% (46@100%) (16@0%)
					b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	100% (# of #)	100% (15)	100% (16) * 1 previous qrt.	100% (10)	100% (21)	100% (62)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	90% (2@100%) (18@90%) (1@80%) (20@N/A) POC Received	96% (9@100%) (7@90%) POC Received	100% (15)	96% (6@100%) (4@90%) POC Received	95% (32@100%) (29@90%) (1@80%) (20@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)	76% (1@100%) (2@64%) POC Received	97% (2@100%) (1@91%) POC Received	94% (1@100%) (2@91%) POC Received	100% (3)	92% (7@100%) (3@91%) (2@64%)
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 Received	Report Received	Report Received	Report Received	Report Received
7	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Blue Water Developmental Housing
 Hayes (74305), Maple (74300), Oakleaf (74308), Semi-Independent (Colorado) (74307), Springborn (74302), Stoneybrook (74303) & Thornhill (74309)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 Survey Not Reported FY23,1Q	Customer Satisfaction Survey Not Reported FY23,2Q	Customer Satisfaction Survey Not Reported FY23,3Q	Customer Satisfaction Survey Report Received	Customer Satisfaction Survey Report Received
				Guardian Satisfaction Survey to be administered by either St. Clair County CMH QI Office per contract agency via contract requirements.		Guardian Satisfaction Survey Not Reported FY23,1Q	Guardian Satisfaction Survey Not Reported FY23,2Q	Guardian Satisfaction Survey Not Reported FY23,3Q	Guardian Satisfaction Survey Report Received	Guardian Satisfaction Survey Report Received
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	100% (4)	88% (7@100%) (1@0%) (3@N/A) POC Received	67% (2@100%) (1@0%) POC Received	90% (9@100%) (1@0%) POC Received	88% (22@100%) (3@0%) (3@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (4)	100% (11)	100% (3)	98% (11@100%) (1@75%) POC Received	99% (29@100%) (1@75%)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	92% (4@100%) (1@90%) (1@89) (2@78%) POC Received	100% (3)	97% (6@100%) (1@90%) (1@89%) (5@N/A) POC Received	90% (2@100%) (1@70%) POC Received	95% (15@100%) (2@90%) (2@89%) (2@78%) (1@70%) (5@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)	97% (2@100%) (1@90%) POC Received	100% (3)	76% (1@100%) (1@82%) (1@45%) POC Received	97% (2@100%) (1@91%) POC Received	92% (8@100%) (1@91%) (1@90%) (1@82%) (1@45%)
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 Received	Report Received	Report Received	Report Received	Report Received
7	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Flatrock Manor of Goodrich (74509) & Fenton (74556)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 Survey Not Reported	Customer Satisfaction Survey Not Reported	Customer Satisfaction Survey Not Reported	Customer/Guardian Satisfaction Survey 95% (75 of 79)	Customer/Guardian Satisfaction Survey 95% (75 of 79)
				Guardian Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.		Guardian Satisfaction Survey Not Reported	Guardian Satisfaction Survey Not Reported	Guardian Satisfaction Survey Not Reported	Customer/Guardian Satisfaction Survey 95% (75 of 79)	Customer/Guardian Satisfaction Survey 95% (75 of 79)
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	100% (29)	100% (23)	100% (8)	100% (31)	100% (91)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	98% (27@100%) (2@75%) POC Received	100% (23)	100% (8)	100% (31)	99% (89@100%) (2@75%)

4	Effectiveness M-40	Ensure Program Quality	<p>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".</p> <p>Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".</p>	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (37)	100% (18@100%) (4@N/A)	100% (23)	100% (8)	100% (86@100%) (4@N/A)
5	Effectiveness M-41	Ensure Program Quality	<p>Percentage of staff employed greater than one year who are current with ALL trainings, as specified on the "Training/Requirement Reporting Form".</p> <p>* ONLY report on a staff once per</p>	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% (3)	100% (3)	100% (12)
6	Effectiveness M-74	Ensure Program Quality	<p>Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.</p> <p>*Reference contract language for specific language needed in CCC report.</p>	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 Received	Report Received	Report Received	Report Received	Report Received
9	Security M-111	Securing Access Electronic Health Record	<p>Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).</p>	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Hope Network Behavioral Health Services
 River Valley 1 (74331), Westlake Cottage VIII (74316) & The Ridge (74685)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	100% (4)	78% (7@100%) (2@0%) POC Received	57% (4@100%) (3@0%) POC Received	50% (1@100%) (2@0%) (1@N/A) POC Received	70% (16@100%) (7@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% (4)	100% (9)	88% (3@100%) (3@80%) (1@75%) POC Received	85% (1@100%) (3@80%) POC Received	95% (17@100%) (6@80%) (1@75%)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (4)	77% (2@80%) (1@78%) (1@70) POC Received	90% (3@100%) (2@90%) (3@80%) (1@N/A) POC Received	73% (2@100%) (1@90%) (3@80%) (1@70%) (2@30%) POC Received	84% (9@100%) (3@90%) (8@80%) (1@78%) (2@70%) (2@30%) (1@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)	100% (3)	82% (1@100%) (1@64%) POC Received	94% (1@100%) (2@91%) POC Received	100% (2)	95% (7@100%) (2@91%) (1@64%)
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 Received	Report Received	Report Received	Report Received	Report Received

5	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24
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FY23 Program Performance Indicators

St. Clair County CMH

IMPACT Residential: Belle River (74325), Charmwood (74324), Michigan (74330), Simpson (74321), Vine (74332), Wells (74438) &
Personal Care Community Living Supports (74547) IMPACT Specialized Adult Foster Care: Riverbend I (74552) & II (74547)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 Reported 100%	Customer Satisfaction Reported 100%
				Guardian Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.		Guardian Satisfaction Not Reported 1Q	Guardian Satisfaction Not Reported 2Q	Guardian Satisfaction Not Reported 3Q	Guardian Satisfaction Reported 100%	Guardian 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 new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	100% (6)	100% (3)	100% (4)	100% (8)	100% (21)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (6)	100% (3)	100% (4)	100% (8)	100% (21)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (7@100%) (1@N/A)	100% (6)	100% (3)	100% (4)	100% (20@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% (3)	97% (2@100%) (1@90%) POC Received	97% (2@100%) (1@90%) POC Received	100% (3)	98% (10@100%) (2@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 Received	Report Received	Report Received	Report Received	Report Received
7	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Innovative
 Abbotsford (74350), Hancock (74437), Hopps (74471), Liberty (74933), Lincoln (74344), Mayfield (74352),
 Oak (74342), Ponderosa (74353), Progression (74442), Ravenswood (74354), Roehl (74340), Scott (74355) & Stone Creek (74349)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average	
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 Rec. 1Q	Customer Satisfaction Not Rec. 2Q	Customer Satisfaction Survey 100%	Customer Satisfaction Survey 100%	Customer Satisfaction Survey 100%	
						Guardian Satisfaction Not Rec. 1Q	Guardian Satisfaction Not Rec. 2Q	Guardian Satisfaction Survey 100%	Guardian Satisfaction Survey 100%	Guardian Satisfaction Survey 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 new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.							
					a. Recipient Rights (Initial) (within 30 days of hire)	100% (# of #)	91% (20@100%) (2@0%) POC Received	100% (13)	100% (9)	100% (13)	96% (55@100%) (2@0%)
					b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	100% (# of #)	94% (18@100%) (3@75%) (1@50%) POC Received	100% (13)	100% (9)	100% (13)	98% (53@100%) (3@75%) (1@50%)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (14@100%) (3@N/A)	99% (18@100%) (3@90%) POC Received	100% (13@100%)	100% (8@100%) (1@N/A)	99% (53@100%) (3@90%) (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% (3)	100% (3)	100% (12)
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 Received	Report Received	Report Received	Report Received	Report Received
7	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Moriah Incorporated Eisenhower Center North Hall Adult Foster Care (74574)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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/A	New FY24
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 #)	N/A	N/A	N/A	N/A	New FY24
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.						
			a. Recipient Rights (Initial) (within 30 days of hire)	In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet. 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) *s/b submitted prev. qrt.	75% (3@100%) (1@0%) POC Received * Below Not Previously Reported	100% (7) * Below Not Previously Reported	100% (7)	85% (29@100%) (5@0%)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (1) *s/b submitted prev. qrt.	80% (8@100%) (2@0%) POC Received 79% (2@100%) (1@66%) (1@50%) POC Received	* Below Not Previously Reported 81% (3@100%) (4@66%) POC Received	* Below Not Previously Reported 100% (7)	79% (14@100%) (8@75%) (8@66%) (2@50%) (2@33%)

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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A"	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (1)	83% (5@100%) (3@90%) (2@30%) POC Received	83% (6@100%) (2@50%) (1@44%) POC Received	100% (7)	88% (19@100%) (3@90%) (2@50%) (1@44%) (2@30%)
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)	82% (2@100%) (1@45%) POC Received	100% (3)	0% (3) POC Received No Previous Dates	No Additional Staff to Report	61% (5@100%) (1@45%) (3@0%)
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 Received	Report Received	Report Received	Report Received	Report Received
7	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.	Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).	FY24 NEW	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
St. Clair County CMH
ResCare Premier (74xxxx) Reamer Meadows & Lawndale

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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.						
			a. Recipient Rights (Initial) (within 30 days of hire)	In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet. 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% (4)	100% (1)	100% (5)	100% (10)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	N/A	100% (4)	100% (1)	100% (5)	100% (10)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A"	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	N/A	N/A	97% (2@100%) (1@91%) (1@N/A) POC Received DC	100% (1)	98% (3@100%) (1@91%) (1@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)	N/A	100% (3) *See note	100% (1)	82% (1) POC Received	96% (4@100%) (1@82%)
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	N/A	Report Received	Report Received	Report Received	Report Received

5	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.	Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).	FY24 NEW	N/A	N/A	N/A	N/A	FY24 New
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FY23 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 Total/Average
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 Rec. 1Q	Customer Satisfaction Not Rec. 2Q	Customer Satisfaction Not Rec. 3Q	Customer Satisfaction Survey 100% (17)	Customer Satisfaction Survey 100% (17)
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	50% (1@100%) (1@50%) POC Received	100% (3)	No New Hires	100% (3)	94% (7@100%) (1@50%)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (2)	100% (3)	No New Hires	100% (3)	100% (8)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (4)	100% (2)	100% (2@100%) (1@N/A)	No New Hires Previous Quarter	100% (8@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% (3)	100% (3)	100% (3)	100% (3)	100% (12)

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	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 Received	Report Received	Report Received	Report Received	Report Received
8	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 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 Total/Average
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 Survey Not Reported FY23,1Q	Customer Satisfaction Survey Not Reported FY23,2Q	Customer Satisfaction Survey Not Reported FY23,3Q	Customer Satisfaction Survey Report Received	Customer Satisfaction Survey Report Received
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 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 Employed Greater than 1yr.	No Staff Employed Greater than 1yr.	No Staff Employed Greater than 1yr.	No Staff Employed Greater than 1yr.	No Staff Employed Greater than 1yr.

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%	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	Report Received	Report Received	Report Received	Report Received	Report Received
9	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Blue Water Developmental Housing
 Comprehensive Community Supports Services (CCSS)(74277) Community Living Supports (CLS)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 Survey Not Reported FY23,1Q	Customer Satisfaction Survey Not Reported FY23,2Q	Customer Satisfaction Survey Not Reported FY23,3Q	Customer Satisfaction Survey Report Received	Customer Satisfaction Survey Report Received
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	100% (4)	100% (1)	100% (1)	No New Hires	100% (6)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (4)	100% (1)	100% (1)	No New Hires	100% (6)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires Previous Quarter	100% (3@100%) (1@N/A)	100% (1)	100% (1)	100% (5@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% (3)	100% (3)	100% (3)	100% (3)	100% (12)

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	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 Received	Report Received	Report Received	Report Received	Report Received
8	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
St. Clair County CMH
Blue Water Developmental Housing
Supported Living Arrangement (74188)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 Survey Not Reported FY23,1Q	Customer Satisfaction Survey Not Reported FY23,2Q	Customer Satisfaction Survey Not Reported FY23,3Q	Customer Satisfaction Survey Report Received	Customer Satisfaction Survey Report Received
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	N/A (1)	100% (5)	100% (1)	100% (2)	100% (8@100%) (1@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (1)	100% (5)	100% (1)	100% (2)	100% (9@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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (2)	N/A (1)	100% (4@100%) (1@N/A)	100% (1)	100% (7@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% (3)	93% (2@100%) (1@80%) POC Received	100% (3)	98% (11@100%) (1@80%)

6	Effectiveness M-74	Ensure Program Quality	<p>Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.</p> <p>*Reference contract language for specific language needed in CCC report.</p>	<p>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.</p>	Report Submitted	Report Received	Report Received	Report Received	Report Received	Report Received
7	Security M-111	Securing Access Electronic Health Record	<p>Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).</p>	<p>Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.</p>	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
St. Clair County CMH
IMPACT

Enhanced Community Services: Comprehensive Community Supports Services (ECSS)- Community Living Supports (CLS) (74327)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 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 new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 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)	100% (2)	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	100% (2)

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	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 Received	Report Received	Report Received	Report Received	Report Received
8	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
St. Clair County CMH
IMPACT: Supported Living Arrangement (74199)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 Reported 100%	Customer Satisfaction Reported 100%
				Guardian Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.		Guardian Satisfaction Not Reported 1Q	Guardian Satisfaction Not Reported 2Q	Guardian Satisfaction Not Reported 3Q	Guardian Satisfaction Reported 100%	Guardian 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 new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	100% (1)	100% (1)	No New Hires	No New Hires	100% (2)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (1)	100% (1)	No New Hires	No New Hires	100% (2)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (1)	100% (1)	100% (1)	No New Hires Previous Quarter	100% (3)

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% (3)	100% (3)	100% (12)
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 Received	Report Received	Report Received	Report Received	Report Received
7	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 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 Total/Average
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 Rec. 1Q	Customer Satisfaction Not Rec. 2Q	Customer Satisfaction Not Rec. 3Q	Customer Satisfaction 100% (5)	Customer Satisfaction 100% (5)
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 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)	100% (3)	100% (3)	100% (1)	No Additional Staff to Report	100% (7)

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	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 Received	Report Received	Report Received	Report Received	Report Received
8	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Community Enterprises of SCC
 Port Huron (74201), MOVE (74581), 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 Total/Average
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 Survey 100% (10)	Customer Satisfaction Survey 100% (10)
3	Effectiveness M-36	Increase Community Integration (PI applies primarily to persons served receiving day services).	Number of outings held within the community.	Program will report number of outings held within the community.	# TBD (#)	144	109	106	115	474
			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)	56.1 Hrs.	51 Hrs.	55.9 Hrs.	63.7 Hrs.	56.7 Hrs.
			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.)	79% (26 of 33)	81% (25 of 31)	90% (27 of 30)	97% (28 of 29)	86% (106 of 123)
			a. Number of person served who attended a community outing (based on unduplicated count).		a. (#)	26	25	27	28	106
			b. Number of persons served who are eligible to attend a community outing (based on unduplicated count).		b. (#)	33	31	30	29	123
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 new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	100% (4)	100% (5@100%) (3@N/A)	89% (8@100%) (1@0%) (2@N/A) POC Received	100% (5@100%) (1@N/A)	96% (22@100%) (1@0%) (6@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (4)	100% (8)	100% (11)	100% (6)	100% (29)

5	Effectiveness M-40	Ensure Program Quality	<p>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".</p> <p>Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".</p>	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (2@100%) (1@N/A)	100% (3@100%) (1@N/A)	100% (4@100%) (4@N/A)	100% (7@100%) (3@N/A)	100% (16@100%) (9@N/A)
6	Effectiveness M-41	Ensure Program Quality	<p>Percentage of staff employed greater than one year who are current with ALL trainings, as specified on the "Training/Requirement Reporting Form".</p> <p>* ONLY report on a staff once per fiscal year.</p>	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)	100% (2)	100% (3)	100% (10)
7	Effectiveness M-42.1	Staff Receive Supervision Regularly	<p>All staff will receive supervision on regular (30 day) intervals. Supervision may be provided by phone and/or in person or at staff meetings.</p> <p>Training documentation MAY be requested by St. Clair CMH QI Office.</p>	Program will maintain training records and provided documentation if requested.	100%	100%	100%	100%	100%	100%
8	Effectiveness M-74	Ensure Program Quality	<p>Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.</p> <p>*Reference contract language for specific language needed in CCC report.</p>	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 Received	Report Received	Report Received	Report Received	Report Received
9	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 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 Total/Average
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 Survey 100% (1)	Customer Satisfaction Survey 100% (1)
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 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	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	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 Received	Report Received	Report Received	Report Received	Report Received
8	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
St. Clair County CMH
Community Enterprises of SCC
Supported Employment (IDD) (74205)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 Survey 100% (6)	Customer Satisfaction Survey 100% (6)
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 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	100% (1)	100% (1)	No Staff to Report	100% (2)

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	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 Received	Report Received	Report Received	Report Received	Report Received
8	M-91	Ensure Program Quality	CE Supported Employment program will assist individual's to obtain at least 15 hours per week of minimum wage employment in an integrated community setting.	Program will electronically forward the percentage & number (i.e. 90%, 9 of 10) of individuals meeting the minimum requirement of at least 15 hours of employment in an integrated community setting.	50% (a. of b.)	40% (2 of 5) POC Received	11% (1 of 9) POC Received	33% (1 of 3) POC Received	100% (1)	Average 28% (5 of 18)
				a. Number of individuals employed in a minimum wage job working at least 15 hours per week.	a. (#)	2	1	1	1	5
				b. Number of individual open to the program.	b. (#)	5	9	3	1	18
9	M-92	Ensure Program Quality	CE Supported Employment "Job Developers" will have a minimum of one of the following trainings/certifications: 1. MRS "EOP" training 2. ACRE Basic Certificate of Achievement in Employment Services with emphasis on Customized Employment 3. CESP (National APSE Certified Employment Support Professional)	CE Supported Employment will electronically forward WHEN REQUESTED proof of completion of trainings/certification for staff in the role of "Job Developer".	100% (a. of b.)	100% (2)	100% (2)	100% (1)	100% (1)	100% (6)
				a. Number of "Job Developers" providing services who have completed needed trainings/certifications.	a. (#)	2	2	1	1	6
				b. Number of Job Developers.	b. (#)	2	2	1	1	6
10	M-93	Ensure Program Quality	Following individual's completion of job coaching, CE Supported Employment will make a minimum of two contacts per month (i.e. phone call, in person or virtual) to monitor individual's employment stability.	Program will provided proof (i.e. contact notes) IF REQUESTED of the minimum twice a month monitoring of employment stability.	Minimum 2 contact per month, per individual	100%	100%	100%	100%	100%

11	M-94	Ensure Program Quality	CE Supported Employment will follow up with individual regarding satisfaction with the job goal identified and support services planned?	Program will electronically forward the percentage & number (i.e. 90%, 9 of 10) of individuals satisfied with their job goal.	85% (# of #)	100% (5)	100% (1)	100% (3)	100% (3)	100% (12)
12	M-95	Ensure Program Quality	CE Supported Employment will follow up with employer regarding satisfaction with the job performance of the individual.	Program will electronically forward the percentage & number (i.e. 90%, 9 of 10) of employers satisfied with the performance of the individual.	85% (# of #)	100% (2)	100% (1)	100% (1)	100% (3)	100% (7)
				a. Number of employers satisfied with the performance of the individual.	a. (#)	2	1	1	3	7
				b. Number of employers.	b. (#)	2	1	1	3	7
13	M-96	Ensure Program Quality	CE Supported Employment will report the individual's satisfaction with their job.	Program will electronically forward the percentage & number (i.e. 90%, 9 of 10) of individuals satisfaction with their job.	50% (a. of b.)	50% (1 of 2)	100% (1)	100% (3)	100% (3)	89% (8 of 9)
				a. Number of individuals satisfied with their job.	a. (#)	1	1	3	3	8
				b. Number of individuals employed.	b. (#)	2	1	3	3	9
14	M-97	Ensure Program Quality	CE Supported Employment will provide the average length of time between an individual's referral and job placement.	Program will electronically forward the average length of time between an individuals referral and job placement.	TBD	30 Days 3 Placements	48 Days 1 Placement	30 Days 3 Placement	30 Days 1 Placement	35 Days 2 Placement
15	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 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 Total/Average
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 Survey 94% (15 of 16)	Customer Satisfaction Survey 94% (15 of 16)
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 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)	100% (3)	100% (2)	No Additional Staff to Report	No Additional Staff to Report	100% (5)

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	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%	100%	100%	100%	100%
8	Effectiveness M-49	Ensure Program Quality	Seventy-five percent of all ECL consumers in attendance will participate in classes in the community each day.	Community Enterprises will report quarterly.	75%	87%	72% POC Received	67% POC Received	75%	75%
9	Effectiveness M-50	Ensure Program Quality	Ninety-five percent of the ECL classes offered in the building will have a community member/professional attend 1 class per quarter.	Community Enterprises will report class speakers.	95%	100%	100%	100%	100%	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 Received	Report Received	Report Received	Report Received	Report Received
11	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 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 Total/Average
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 #)	100% (7)	100% (8)	100% (12)	100% (10)	100% (37)
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	100% (2)	No New Hires	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	100% (2)	No New Hires	100% (2)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (1)	No New Hires Previous Quarter	No New Hires Previous Quarter	100% (2)	100% (3)
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)	No Additional Staff to Report	100% (1) <small>*7/24/22 Change dc</small>	No Additional Staff to Report	100% (4)

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	2	2	1	7
				Program will report number of referrals to supported employment positions.	2 (Total Sup./Comp.)	1	0	0	1	2
7	Efficiency M-53	Minimize Lack of Work	1. 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% (62)	100% (64)	100% (63)	100% (62)	100% (251)
				a. Number of days or 1/2 days worked within the reporting period.	a. (#)	62	64	63	62	251
				b. Number of available work days within the reporting period.	b. (#)	62	64	63	62	251
			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	N/A	N/A	N/A	N/A
				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 Received	Report Received	Report Received	Report Received	Report Received
9	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Life Skills Center, Inc.
 Memory Care Services (74328)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 Results 100% (18)	No Customer Satisfaction Survey FY23,2Q	No Customer Satisfaction Survey FY23,3Q	No Customer Satisfaction Survey FY23,4Q	Customer Satisfaction Results 100% (18)
3	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	No New Hires	0% (1)	0% (1)
			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	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 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)	100% (3)	91% (1@91%) (1@90%) POC Received	100% (1)	No Staff to Report	97% (4@100%) (1@91%) (1@90%)

6	Effectiveness M-74	Ensure Program Quality	<p>Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.</p> <p>*Reference contract language for specific language needed in CCC report.</p>	<p>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.</p>	Report Submitted	Report Received	Report Received	Report Received	Report Received	Report Received
7	Security M-111	Securing Access Electronic Health Record	<p>Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).</p>	<p>Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.</p>	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Life Skills Center, Inc.
 Port Huron (74601) Capac (74602) Marine City (74603), MOVE (74283) & CLS (74189)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 Survey 100% (95)	Customer Satisfaction Survey 100% (95)	Customer Satisfaction Survey 100% (95)	Customer Satisfaction Survey 100% (95)	Customer Satisfaction Survey 100% (95)
3	Effectiveness M-36	Increase Community Integration (PI applies primarily to persons served receiving day services).	Number of outings held within the community.	Program will report number of outings held within the community.	# TBD (#)	3,475	3,799	4,408	4,284	15,966
			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)	108.77	116.23	149.64	145.40	130.01
			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% (107)	100% (111)	100% (110)	100% (117)	100% (445)
			a. Number of person served who attended a community outing (based on unduplicated count).		a. (#)	107	111	110	117	445
			b. Number of persons served who are eligible to attend a community outing (based on unduplicated count).		b. (#)	107	111	110	117	445
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 new hire is under the required 30 days, the scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	100% (4)	100% (5)	100% (3)	100% (4@100%) (1@N/A)	100% (16@100%) (1@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (4)	100% (5)	100% (3)	100% (5)	100% (17)

5	Effectiveness M-40	Ensure Program Quality	<p>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".</p> <p>Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".</p>	<p>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 results to the program and request a Plan of Correction if needed.</p>	100% (# of #)	100% (4)	100% (3@100%) (1@N/A)	100% (5)	100% (3)	100% (15@100%) (1@N/A)
6	Effectiveness M-41	Ensure Program Quality	<p>Percentage of staff employed greater than one year who are current with ALL trainings, as specified on the "Training/Requirement Reporting Form".</p> <p>* ONLY report on a staff once per fiscal year.</p>	<p>Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for 3 staff within the reporting quarter.</p>	100% (# of 3)	100% (2)	100% (3)	100% (2)	100% (3)	100% (10)
7	Effectiveness M-42.1	Staff Receive Supervision Regularly	<p>All staff will receive supervision on regular (30 day) intervals. Supervision may be provided by phone and/or in person or at staff meetings.</p> <p>Training documentation MAY be requested by St. Clair CMH QI Office.</p>	<p>Program will maintain training records and provided documentation if requested.</p>	100%	100%	100%	100%	100%	100%
8	Effectiveness M-74	Ensure Program Quality	<p>Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.</p> <p>*Reference contract language for specific language needed in CCC report.</p>	<p>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.</p>	Report Submitted	Report Received	Report Received	Report Received	Report Received	Report Received
9	Security M-111	Securing Access Electronic Health Record	<p>Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).</p>	<p>Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.</p>	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
St. Clair County CMH
New Oakland (74414)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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 #)	0% (2) POC Received *New Oakland was not notified by Hospital	N/A	N/A	N/A	0% (2)
2	Effectiveness M-3 (MDHHS #3)	Improve Service Start Timelines	The percentage of new persons during the period receiving a completed biopsychosocial assessment within 14 calendar days of a non-emergency request for service.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	80% (47 of 59)	88% (14 of 16) *Changed CMH AG Error	100% (1)	N/A	82% (62 of 76)
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% (2 of 90)	1% (1 of 77)	0% (50)	N/A	1% (3 of 217)
4	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	0% (1)	N/A	N/A	N/A	0% (1)
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 #)	90% (18 of 20)	93% (13 of 14)	89% (16 of 18) POC Received	93% (13 of 14)	91% (60 of 66)

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.)	57% (8 of 14)	76% (13 of 17)	88% (21 of 24)	48% (11 of 23)	68% (53 of 78)		
					a. (#)	8	13	21	11	53		
					b. (#)	14	17	24	23	78		
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.								
					Quarterly	Number of persons served (children) with open cases in the reporting period.	#	36	45	40	23	144
						Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	100% (36)	100% (45)	100% (40)	100% (23)	100% (144)
						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
						Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	100% (7)	100% (1)	100% (8)	100% (14)	100% (30)
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.								
					a. Recipient Rights (Initial) (within 30 days of hire)	In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet.	100% (# of #)	No New Hires	100% (5)	No New Hires	100% (2)	100% (7)
					b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	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% (5)	No New Hires	100% (2)	100% (7)

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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or earlier.	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (2)	No New Hires Previous Quarter	100% (5)	No New Hires Previous Quarter	100% (7)
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)	100% (1)	100% (2)	100% (1) *DC	100% (3)	100% (7)
13	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 Received	Report Received	Report Received	Report Received	Report Received
14	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.	Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).	FY24 NEW	N/A	N/A	N/A	N/A	New FY24

FY23 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 Total/Average
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/A	New FY24
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 Survey 100% (27)	Customer Satisfaction Survey 98% (51 of 52)	Customer Satisfaction Survey 100% (49)	Customer Satisfaction Survey 100% (40)	Customer Satisfaction Survey 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.						
			a. Recipient Rights (Initial) (within 30 days of hire)	In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet.	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 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
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A"	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	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	<p>Percentage of staff employed greater than one year who are current with ALL trainings, as specified on the "Training/Requirement Reporting Form".</p> <p>* ONLY report on a staff once per fiscal year.</p>	<p>Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for 3 staff within the reporting quarter.</p>	100% (# of 3)	100% (2)	No Additional Staff Emp. Greater than 1 Yr.	No Additional Staff Emp. Greater than 1 Yr.	No Additional Staff Emp. Greater than 1 Yr.	100% (2)
6	Access M-55	Promote Timely & Successful Prevention Interventions	<p>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.</p>	<p>Program will calculate percentage of referrals contacted within 3 business days of assessment based on the numbers reported in a. & b.</p>	100% (a. of b.)	100% (16)	100% (30)	100% (7)	N/A No New Referrals	100% (53)
				<p>a. Number of referrals contacted within 3 business days of the assessment.</p>	a. (#)	16	30	7	N/A	53
				<p>b. Number of referrals open to the program.</p>	b. (#)	16	30	7	N/A	53
				<p>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.</p>	100% (a. of b.)	37% (10 of 27) POC Received	83% (43 of 52) POC Received	94% (46 of 49) POC Received	95% (38 of 40) POC Received	82% (137 of 168)
				<p>a. The number of families (persons served) seen within 5 business days of the truancy hearing.</p>	a. (#)	10	43	46	38	137
				<p>b. Number of persons served open to the program.</p>	b. (#)	27	52	49	40	168
				<p>Program will calculate percentage of persons served referred to inpatient mental health service based on the numbers reported in a. & b.</p>	15% or Less (a. of b.)	0% (27)	0% (52)	0% (49)	0% (40)	Total 0% (168)
				<p>a. Number of persons served that are referred to inpatient mental health services.</p>	a. (#)	0	0	0	0	0

10	Effectiveness M-110	Ensure Program Quality	School Success will provide the number of cases closed due to referrals made to the court for intervention.	Program will track the number of cases closed due to needed court intervention.	TBD	0	0	2	3	5
11	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.	Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).	FY24 NEW	N/A	N/A	N/A	N/A	N/A

FY23 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 Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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 #)	223 N/A 232 N/A	223 100% (1) 232 N/A	223 100% (2) 232 N/A	223 N/A 232 N/A	223 100% (3) 232 N/A
2	Effectiveness M-3 (MDHHS #3)	Improve Service Start Timelines	Percentage of new persons during the period starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	223 N/A 232 100% (1)	223 91% (10 of 11) 232 N/A	223 82% (9 of 11) 232 N/A	223 100% (2) 232 N/A	223 88% (21 of 24) 232 100% (1)
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 #)	223 N/A 232 N/A	223 4% (1 of 24) 232 N/A	223 5% (1 of 28) 232 N/A	223 N/A 232 N/A	223 4% (2 of 52) 232 N/A
4	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	223 N/A 232 N/A	223 0% (1) 232 N/A	223 N/A 232 N/A	223 N/A 232 N/A	223 0% (1) 232 N/A
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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction Survey 100% (33)	Customer Satisfaction Survey 100% (33)

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.)	58% (14 of 24)	52% (12 of 23)	57% (17 of 30)	65% (20 of 31)	58% (63 of 108)		
					a. (#)	14	12	17	20	63		
					b. (#)	24	23	30	31	108		
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.	#	26	35	30	36	127	
					Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	100% (19)	100% (15)	100% (18)	100% (23)	100% (75)
					Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	100% (6)	100% (5)	100% (11)	100% (8)	100% (30)
					Annually	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	100% (4)	100% (3)	100% (3)	100% (2)	100% (12)
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. In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.								
					a. Recipient Rights (Initial) (within 30 days of hire)	100% (# of #)	0% (1) POC Received	100% (2)	No New Hires	No New Hires	83% (2@100%) (1@0%)	
					b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)	100% (# of #)	100% (1)	100% (2)	No New Hires	No New Hires	100% (3)	

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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A"	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires Previous Quarter	100% (1)	100% (2)	No New Hires Previous Quarter	100% (3)
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)	100% (3)	100% (3)	96% (2@100%) (1@89%) POC Received	94% (1@100%) (1@87%) POC Received	98% (9@100%) (1@89%) (1@87%)
13	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 Received	Report Received	Report Received	Report Received	Report Received
14	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.	Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).	FY24 NEW	N/A	N/A	N/A	N/A	New FY24

FY23 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 Total/Average
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of discharges from a psychiatric inpatient unit during the quarter that were 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% (2)	N/A	100% (1)	100% (3)
2	Effectiveness M-3 (MDHHS #3)	Improve Service Start Timelines	Percentage of new persons during the period starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	TBD	67% (6 of 9)	86% (12 of 14) *CMH AG Error	50% (8 of 16)	44% (7 of 16)	60% (33 of 55)
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	N/A	2% (1 of 54)	2% (1 of 51)	2% (2 of 105)
4	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	15% or Less (# of #)	N/A	0% (2)	0% (1)	0% (1)	0% (4)
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 #)	Customer Satisfaction Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction Survey 100% (186)	Customer Satisfaction Survey 100% (186)
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% (8 of 15)	35% (6 of 17)	62% (16 of 26)	38% (8 of 21)	48% (38 of 79)
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	8	6	16	8	38

				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	15	17	26	21	79	
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.	#	23	32	26	26	107	
			Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	100% (11)	100% (14)	100% (21)	100% (17)	100% (63)	
			Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	100% (6)	100% (2)	10% (3)	100% (4)	100% (15)	
			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% (2)	N/A	100% (9)	
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.							
				a. Recipient Rights (Initial) (within 30 days of hire)	In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet. 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	0% (1) POC Received	100% (1) *Not Reported in Correct Quarter	No New Hires	50% (1@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	66% (1) POC Received	60% (1) POC Received *Not Reported in Correct Quarter	No New Hires	63% (1@66%) (1@60%)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A"	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires Previous Quarter	No New Hires Previous Quarter	100% (1)	82% (1@82%) POC Received	91% (1@100%) (1@82%)	

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)	95% (1@100%) (2@92%) POC Received	98% (2@100%) (1@93%) POC Received	90% (1@100%) (1@80%) POC Received	93% (1@93%) POC Received	94% (4@100%) (2@93%) (2@92%) (1@80%)
13	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 Received	Report Received	Report Received	Report Received	Report Received
14	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.	Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).	FY24 NEW	N/A	N/A	N/A	N/A	New FY24

FY23 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 Total/Average
1	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge.	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	N/A	82% (62 of 76)
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 100% (14)	Customer Satisfaction Survey 100% (14)	Customer Satisfaction Survey 92% (12 of 13)	N/A	Customer Satisfaction Survey Received
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. In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A"	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 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

7	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)	93% (1@100%) (2@90%) POC Received	No Additional Staff to Reort	No Additional Staff to Reort	97% (4@100%) (2@90%)
8	Effectiveness M-58	Maximize Quality of Life in the Area of Supported Employment/ Transitional Employment	1. 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.	75% (a. of b.)	60% (3 of 5) POC Received	86% (6 of 7)	89% (8 of 9)	100% (9)	87% (26 of 30)
				a. Number of persons served in Supported/Transitional Employment program employed 8 or more hours per week.	a. (#)	3	6	8	9	26
				b. Number of persons served in Supported/Transitional Employment program.	b. (#)	5	7	9	9	30
			2. 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% (5)	100% (7)	100% (9)	100% (9)	100% (30)
				a. Number of persons served in Supported/Transitional Employment program.	a. (#)	5	7	9	9	30
				b. Number of persons served in Supported/Transitional Employment program earning minimum wage or greater.	b. (#)	5	7	9	9	30
			3. Percentage of person served in Supported/Transitional Employment continuously employed for 6 months or longer (not including new individuals).	Program will calculate percentage based on numbers reported in a. & b.	70% (a. of b.)	100% (1)	100% (4)	100% (5)	100% (4)	100% (14)
				a. Number of persons served in Supported/Transitional Employment program employed continuously for 6 months or longer (not including new individuals).	a. (#)	1	4	5	4	14
				b. Number of persons served in Supported/Transitional Employment program.	b. (#)	1	4	5	4	14
			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	5	7	7	7	26

9	Effectiveness M-74	Ensure Program Quality	<p>Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.</p> <p>*Reference contract language for specific language needed in CCC report.</p>	<p>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.</p>	Report Submitted	Report Received	Report Received	Report Received	Report Received	Report Received
10	Security M-111	Securing Access Electronic Health Record	<p>Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.</p>	<p>Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).</p>	FY24 NEW	N/A	N/A	N/A	N/A	New FY24

FY23 Program Performance Indicators
 St. Clair County CMH
 Blue Water Developmental Housing
 Enriching Community Life (Classes) Living a Live in the Community (74275)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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/A	New FY24
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 Survey Not Reported FY23,1Q	Customer Satisfaction Survey Not Reported FY23,2Q	Customer Satisfaction Survey Not Reported FY23,3Q	Customer Satisfaction Survey Report Received	Customer Satisfaction Survey Report Received
3	Effectiveness M-45	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%	No Classes	No Classes	No Classes	No Classes	No Classes
4	Effectiveness M-46	Ensure Program Quality	Each ECL Class will have a curriculum specific community member/professional attend 1 class session for each class to present, train and/or interact with the class based on their expertise on the topic of the class.	The ECL Coordinator will randomly select 3 classes to review.	75%	No Classes	No Classes	No Classes	No Classes	No Classes
5	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%	No Classes	No Classes	No Classes	No Classes	No Classes
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 Received	Report Received	Report Received	Report Received	Report Received
7	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	FY24 New

FY23 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 Total/Average
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	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (3)	100% (4)	100% (3@100%) (1@N/A)	100% (7)	100% (17@100%) (1@N/A)
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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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 results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (6)	100% (2@100%) (1@N/A)	100% (3@100%) (1@N/A)	100% (1@100%) (3@N/A)	100% (12@100%) (5@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)	78% (1@100%) (2@67%) POC Received	89% (2@100%) (1@67%) POC Received	67% (3@67%) POC Received	89% (2@100%) (1@67%) POC Received	81% (5@100%) (7@67%)

FY23 Program Performance Indicators
 St. Clair County CMH
 Community Enterprises of SCC Port Huron
 Enriching Community Life ECL/Skill Building (74171 & 74201)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 Not Reported 1Q	Customer Satisfaction Not Reported 2Q	Customer Satisfaction Not Reported 3Q	Customer Satisfaction Survey 97% (77 of 79)	Customer Satisfaction Survey 97% (77 of 79)
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%	100%	100%	100%	100%
3	Effectiveness M-49	Ensure Program Quality	Seventy-five percent of all ECL consumers in attendance will participate in classes in the community each day.	Community Enterprises will report quarterly.	75%	81%	80%	84%	90%	84%
4	Effectiveness M-50	Ensure Program Quality	Ninety-five percent of the ECL classes offered in the building will have a community member/professional attend 1 class per quarter.	Community Enterprises will report class speakers.	95%	100%	100%	100%	100%	100%
5	Effectiveness M-50.1	Ensure Program Quality	At least three skill building classes will be offered per quarter.	Community Enterprises will report quarterly.	75%	100%	100%	100%	100%	100%
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 Received	Report Received	Report Received	Report Received	Report Received
7	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed or on leave of absence (LOA).	Agency will immediately report any staff no longer employed or on leave of absence (LOA). Agency completes an OASIS Enrollment Request form #08-0281 and forwards to SCCCMHA Help Desk.	Staff Reviewed & Current	N/A	N/A	N/A	N/A	New FY24

FY23 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 Total/Average
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 #)	No Customer Satisfaction Survey	No Customer Satisfaction Survey	No Customer Satisfaction Survey	Customer Satisfaction Survey Received	Customer Satisfaction Survey Received
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. In the event that the new hire has not been employed for 30 days, at the time the Training/Requirement Reporting Form is due, the scheduled RR training date needs to be added to the training sheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A"	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 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)	100% (3)	100% (3)	No Additional Staff to Report	No Additional Staff to Report	100% (6)
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 persons 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	34	36	34	31	135
				d. The number of persons served who attended each day who are enrolled in Medicaid.	~	30	33	32	28	123
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	14	14	13	12	53
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 Received	Report Received	Report Received	Report Received	Report Received
9	Security M-111	Securing Access Electronic Health Record	Agency will quarterly review staff access to Electronic Health Record. Agency will immediately report any staff no longer employed.	Data department will forward quarterly a report of agency staff with access to electronic health record for review. Agency will review report and report any and all needed changes (i.e. termination date, LOA).	FY24 NEW	N/A	N/A	N/A	N/A	FY24 New

FY23 Program Performance Indicators
St. Clair County CMH
ProtoCall (74xxx)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
1	Satisfaction M-8.1	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	Customer Satisfaction Survey to be administered by St. Clair County CMH QI Office.	Results Annually 90% (# of #)	N/A	SCCCMHA will add ProtoCall question to their FY23 survey.	SCCCMHA will add ProtoCall question to their FY23 survey.	SCCCMHA will add ProtoCall question to their FY23 survey.	SCCCMHA will add ProtoCall question to their FY23 survey.
2	Efficiency M-44	Maximize Service Provision	Average speed of answered call, 30 seconds or less.	Average speed of answered call.	30 Sec. or Less	N/A	22 Sec.	15 Sec.	10 Sec.	16 Sec.
				Number of incoming calls.	#	N/A	1,235	2,379	2,359	5,973
3	Effectiveness M-72	Ensure Program Quality	Timely submission of contract required documents (per attachment D).	Agency will forward contract required documents.	100%	N/A	100%	100%	N/A	100%
4	Effectiveness M-73	Ensure Program Quality	Percentage of employed individuals who have completed the required Recipient Rights (Refresher) training. *RR Training can be completed through any CMH in Michigan.	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 #)	N/A	87% (88 of 102) *Contract Effective 2/13/23	91% (52 of 57) POC Received	75% (82 of 110) POC Received	83% (222 of 269)

FY23 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 Total/Average
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 scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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)	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	18% (2)	18% (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	TBD	TBD	TBD	TBD	TBD

FY23 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 Total/Average
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 scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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)	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	55% (3)	55% (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	TBD	TBD	TBD	TBD	TBD

FY23 Program Performance Indicators
 St. Clair County CMH
 Leach Child Foster Care Home

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual Total/Average
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 scheduled training date must be noted on the worksheet. The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.						
			a. Recipient Rights (Initial) (within 30 days of hire)		100% (# of #)	No New Hires	No New Hires	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". Staff terminated for failure to complete required trainings within the allowed 90 days MUST be terminated on day 97 or sooner to receive "N/A".	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)	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	36% (1)	36% (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	TBD	TBD	TBD	TBD	TBD