

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

CMH Direct Run, Contract Provider & AFC/CFC Results
FY 2022

January 2023

FY22 Program Performance Indicators
St. Clair County CMH
ACT (Assertive Community Treatment) Team (74156)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of persons discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (7)	100% (6)	100% (5)	100% (8)	100% (26)
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% (1)	N/A	N/A	100% (1)	100% (2)
3	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to a psychiatric inpatient 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 #)	29% (2 of 7) POC Received	67% (4 of 6) POC Received	40% (2 of 5) POC Received	33% (2 of 6) POC Received	42% (10 of 24)
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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
7	Efficiency M-21	Timeliness of Service	Percentage and number of persons served who are seen within 24 hours of referral.	Program will calculate percentage based on numbers reported in a. & b.	95% (a. of b.)	100% (4)	100% (2)	100% (2)	100% (1)	100% (9)
			a. Number of person served seen within 24 hours of referral.		a. (#)	4	2	2	1	9
			b. Number of persons served.		b. (#)	4	2	2	1	9
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 Weekly	Sent Out & Reviewed Weekly

FY22 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
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of persons discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	Child N/A Adult 100% (1)	Child 100% (1) Adult 100% (3)	Child 100% (2) Adult 100% (2)	Child N/A Adult 100% (2)	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 N/A Adult 100% (2)	Child N/A Adult N/A	Child 62% (8 of 13) Adult 65% (17 of 26)	Child 74% (14 of 19) Adult 81% (17 of 21)	Child 69% (22 of 32) Adult 73% (36 of 49)
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 N/A	Child N/A Adult 1% (2 of 185)	Child N/A Adult 1% (3 of 202)	Child N/A Adult 1% (3 of 208)	Child N/A Adult 1% (8 of 595)
4	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to a psychiatric inpatient 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% (1)	Child 0% (1) Adult 25% (1 of 4) POC Received	Child 0% (2) Adult 0% (2)	Child N/A Adult N/A	Child 0% (3) Adult 14% (1 of 7)
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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%

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<p>FY22 Program Performance Indicators St. Clair County CMH Case Management/Supports Coordination DD (74145)</p>

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FY22 Program Performance Indicators
St. Clair County CMH
Central Intake Unit
Port Huron (74134) Capac (74173) Marine City (74175)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of persons discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (24)	94% (32 of 34) POC DC	100% (44)	95% (36 of 38)	97% (136 of 140)
2	Effectiveness M-2 (MDHHS #2A)	Improve Service Start Timelines	Percentage of new persons during the period starting 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	60% (413 of 691)	54% (433 of 806)	62% (368 of 593)	62% (494 of 801)	59% (1708 of 2891)
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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
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 #)	91% (519 of 569)	94% (553 of 587)	90% (486 of 540)	96% (483 of 503)	93% (2041 of 2199)
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.)	91% (189 of 208) POC Rec. DC	91% (193 of 212) POC Rec. DC	88% (184 of 210) POC Rec.DC	87% (186 of 215) POC Rec.DC	89%
			a. Number of persons served (children) who received a level of functioning assessment in the reporting period.		a. (#)	189	193	184	186	752
			b. Number of persons served (children) receiving an intake in the reporting period.		b. (#)	208	212	210	215	845

FY22 Program Performance Indicators
St. Clair County CMH
Community Integration Services (74165)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of persons discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	N/A	N/A	N/A
2	Effectiveness M-3 (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 a psychiatric inpatient 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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
7	Effectiveness M-22	Increase Community Integration	Percentage of persons served who attended a community outing that focused on either skill building or volunteering (based on an unduplicated count).	Program will calculate percentage based on numbers in a. & b.	% TBD (a. of b.)	100% (27)	96% (27 of 28)	97% (28 of 29)	97% (28 of 29)	97% (110 of 113)
				a. Number of persons served who attended a community outing that focused on either skill building or volunteering.	a. (#)	27	27	28	28	110
			Number of outings held within the community.	b. Number of persons served eligible to attend a community outing.	b. (#)	27	28	29	29	113
				Number of outings held within the community.	(#)	224	321	118	127	790

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<p>FY22 Program Performance Indicators St. Clair County CMH DBT (Dialectical Behavioral Treatment) Program (74108)</p>	
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FY22 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
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of persons discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (3)	80% (4 of 5) POC Received	100% (2)	100% (4)	93% (13 of 14)
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-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 #)	4% (4 of 90)	9% (6 of 68) POC Received	9% (6 of 67) POC Received	7% (4 of 56) POC Received DC	7% (20 of 281)
4	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to a psychiatric inpatient 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 #)	33% (1 of 3) POC Received	17% (1 of 6) POC Received	20% (1 of 5) POC Received	0% (3)	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
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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
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.	100%	50% (25 of 50) POC Received	54% (32 of 59) POC Received	TBD (In process of being changed)	TBD (In process of being changed)	52% (57 of 109)

FY22 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
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	26	20	19	18	21
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 #)	48% (40 of 84)	43% (30 of 70)	39% (31 of 80)	37% (31 of 84)	42% (132 of 318)
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 #)	85% (34 of 40)	83% (25 of 30)	77% (24 of 31)	87% (27 of 31)	83% (110 of 132)
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 #)	34% (23 of 67)	38% (15 of 40)	23% (20 of 86)	27% (21 of 77)	29% (79 of 270)
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	\$12.15	\$11.63	\$13.20	\$13.30	\$12.57
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	19.5	25	21	22

FY22 Program Performance Indicators
St. Clair County CMH
Marine City Children's (74932) & Marine City (74104)

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FY22 Program Performance Indicators
St. Clair County CMH
Mental Health Court (74981)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
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.)	78% (7 of 9) POC Received	100% (10)	100% (13)	86% (12 of 14)	92% (42 of 46)
				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. (#)	7	10	13	12	42
				b. Number of persons served who graduated a year ago from MHC.	b. (#)	9	10	13	14	46
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.)	#	1	0	1	1	3
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.)	97% (91 of 94)	95% (94 of 99)	97% (97 of 100)	96% (108 of 112)	96% (390 of 405)
				a. Number of persons served who continue to maintain a lifestyle free of criminal charges in the current quarter.	a. (#)	91	94	97	108	390
				b. Number of persons served currently in MHC.	b. (#)	94	99	100	112	405
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.)	82% (14 of 17)	80% (12 of 15)	80% (20 of 25)	61% (11 of 18) POC Received	76% (57 of 75)
				a. Number of persons served in the program who have successfully graduated this quarter.	a. (#)	14	12	20	11	57
				b. Number of persons served discharge from MHC this quarter.	b. (#)	17	15	25	18	75

<p>FY22 Program Performance Indicators St. Clair County CMH Mobile Crisis Unit (74160)</p>	
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FY22 Program Performance Indicators
St. Clair County CMH
OBRA (74130, 74132)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit.	Program will forward ANNUALLY (4th Quarter) a brief summary of activities that have occurred.	Reported Annually (4th Qtr.)				Community Benefits Received	Community Benefits Received
2	Satisfaction M-8	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	Customer Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	Results Annually 90% (# of #)	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
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% (2)	100% (10)	100% (15)	100% (20)	100% (47)
4	Efficiency M-16	Increase Timelines of Service	Pre-authorization screening will be completed within 4 calendar days or referral.	Program will calculate percentage based on numbers reported in a. & b.	95% (a. of b.)	100% (0)	100% (2)	100% (1)	100% (0)	100% (3)
				a. Number of pre-authorization screenings completed within 4 calendar days or referral.	a. (#)	0	2	1	0	3
				b. Number of pre-authorizations screenings.	b. (#)	0	2	1	0	3
5	Effectiveness M-17	Increase Timelines of Service	Percentage and number of persons served within the quarter who met basic eligibility criteria and were screened for PAS within 4 days of being triggered.	Program will calculate the percentage based on the numbers reported in a. & b.	100% (a. of b.)	100% (0)	In process of change.	In process of change.	In process of change.	In process of change.
				a. Number of persons served within the quarter who met basic eligibility criteria and were screened for PAS.	a. (#)	0	In process of change.	In process of change.	In process of change.	In process of change.
				b. Number of person served witin the quarter who received a PAS witin 4 days of being triggered.	b. (#)	0	In process of change.	In process of change.	In process of change.	In process of change.

<p>FY22 Program Performance Indicators St. Clair County CMH Outpatient Services (74146)</p>	
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FY22 Program Performance Indicators
St. Clair County CMH
Residential Supports I (74118)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of persons discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	100% (2)	100% (1)	100% (2)
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% (1)	50% (1 of 2)	100% (1)	N/A	75% (3 of 4)
3	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to a psychiatric inpatient 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	0% (2)	N/A	0% (2)
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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
7	Effectiveness M-24	Increase Community Integration by Reducing Aggressive Behavior(s)	Number of Incident Reports that note physical intervention was needed.	Program will review Incident Reports and forward the number of aggressive behaviors that needed a physical intervention.	TBD (#)	None	None	None	None	None

[illegible]

FY22 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
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of persons discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	N/A	N/A	N/A	N/A	N/A
2	Effectiveness M-3 (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	100% (1)	100% (1)
3	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to a psychiatric inpatient 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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
7	Effectiveness M-24	Increase Community Integration by Reducing Aggressive Behavior(s)	Number of Incident Reports that note physical intervention was needed.	Program will review Incident Reports and forward the number of aggressive behaviors that needed a physical intervention.	TBD (#)	2	1	1	1	5
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)	#908057 DS (1) #031509 TG (1)	#904081 MG (3)	#324698 KJ (5) #902426 CE (1) #326035 DB (1) #906725 DU (2) #912394 FM (2)	#31509 TG (1) #324698 KJ (5) #328035 DB (1) #902426 CE (1) #904081 MG (4) #908725 DU (2) #908057 DS (1) #912394 FM (2)

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FY22 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
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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
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	28	29	25	105
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	35	45	55	41	176
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	11	8	5	10	34

<p>FY22 Program Performance Indicators St. Clair County CMH Children's Services Division DD (74120)</p>									
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FY22 Program Performance Indicators
St. Clair County CMH
Children's Services Home Based (74106)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of persons discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	80% (4 of 5) POC Received	100% (2)	N/A	N/A	86% (6 of 7)
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% (6)	100% (1)	79% (15 of 19)	79% (11 of 14)	83% (33 of 40)
3	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to a psychiatric inpatient 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% (5)	0% (2)	N/A	N/A	0% (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 Submitted	Community Benefits Submitted
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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
7	Effectiveness M-9.1	Increase in Psychological Functioning	Percentage and number of persons served (children) who demonstrate an increase in psychological functioning according to FAS data on Severe Impairments.	Program will calculate percentage of persons served (children) who demonstrated an increase in psychological functioning based on numbers reported in a. & b.	35% (a. of b.)	42% (27 of 65)	46% (25 of 54)	55% (36 of 65)	52% (33 of 64)	49% (121 of 248)

				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	27	25	36	33	121
				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	65	54	65	64	248
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.)	86% (56 of 65) POC Received	86% (66 of 77) POC Received	89% (86 of 97) POC Received	90% (81 of 90) POC Received	88% (289 of 329)
				a. Number of persons served (children) who received a minimum of 4 hours of service on a monthly basis.	a. (#)	56	66	86	81	289
				b. Number of persons served (children) receiving services.	b. (#)	65	77	97	90	329
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
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 #)	75% (41 of 55)	75% (38 of 51)	73% (46 of 63)	70% (49 of 70)	73% (174 of 239)
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 #)	69% (38 of 55)	67% (34 of 51)	51% (32 of 63)	69% (48 of 70)	64% (152 of 239)

<p>FY22 Program Performance Indicators St. Clair County CMH Children's Infant Mental Health (74121)</p>

[illegible]

FY22 Program Performance Indicators
St. Clair County CMH
Children's Services (74152)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1 (MDHHS #4A)	Increase Hospital Discharge Start Rates	The percentage of persons discharged from a psychiatric inpatient unit who are seen for follow-up care within 7 days.	Data will be collected via the OASIS Software System on Program Performance and reported quarterly.	95% (# of #)	100% (5)	100% (1)	100% (2)	100% (2)	100% (10)
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% (4 of 277)	1% (3 of 329)	1% (2 of 344)	1% (4 of 374)	1% (13 of 1324)
3	Efficiency M-5 (MDHHS #10)	Lower Hospital Recidivism	The percentage of readmissions of children and adults during the quarter to a psychiatric inpatient 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% (0)	0% (1)	0% (3)	0% (2)	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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
7	Effectiveness M-9.1	Increase in Psychological Functioning	Percentage and number of persons served (children) who demonstrate an increase in psychological functioning according to FAS data on Severe Impairments.	Program will calculate percentage of persons served (children) who demonstrated an increase in psychological functioning based on numbers reported in a. & b.	35% (a. of b.)	63% (99 of 157)	57% (108 of 190)	57% (118 of 207)	56% (117 of 209)	58% (442 of 763)
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	99	108	118	117	442
				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	157	190	207	209	763

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 #)	62% (133 of 213)	59% (158 of 266)	56% (172 of 307)	58% (192 of 331)	59% (655 of 1117)
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 #)	50% (106 of 213)	47% (124 of 266) POC Received	45% (137 of 307) POC Received	47% (157 of 331) POC Received	47% (524 of 1117)

<p>FY22 Program Performance Indicators St. Clair County CMH Children's Waiver (74139)</p>

[illegible]

FY22 Program Performance Indicators
St. Clair County CMH
Children's Services Wraparound (74101)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	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 FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY21 (Sept.21) Satisfaction Survey 94%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%	Completed Annually FY22 (Sept. 22) Satisfaction Survey 97%
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.)	37% (6 of 16)	43% (3 of 7)	39% (7 of 18)	41% (14 of 34)	40% (30 of 75)
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	6	3	7	14	30
				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	16	7	18	34	75
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.)	80% (4 of 5) POC Received	100% (11)	100% (8)	100% (14)	97% (37 of 38)
				a. Number of initial meetings with family that occurred within 5 working days of referral acceptance.	a. (#)	4	11	8	14	37
				b. Number of initial meetings.	b. (#)	5	11	8	14	38
			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.)	100% (3)	100% (3)	100% (11)	100% (11)	100% (28)
				a. Number of third meetings that occurred within 30 days of the initial meeting to develop service plan.	a. (#)	3	3	11	11	28

				b. Number of third meetings.	b. (#)	3	3	11	11	28
			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% (16)	100% (30)	100% (26)	100% (34)	100% (106)
				a. Number of Child and Family Team meetings scheduled no more than 30 days apart.	a. (#)	16	30	26	34	106
				b. Number of Child and Family Team meetings.	b. (#)	16	30	26	34	106
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 #)	86% (18 of 21)	87% (26 of 30)	92% (24 of 26)	94% (32 of 34)	90% (100 of 111)
				Reduction in school truancy, suspensions & expulsions.	75% (# of #)	67% (14 of 21) POC Received	73% (22 of 30) POC Received	62% (16 of 26) POC Received	71% (24 of 34) POC Received	68% (76 of 111)
				Reduction in Juvenile Justice contacts (probation violations).	75% (# of #)	86% (18 of 21)	87% (26 of 30)	96% (25 of 26)	85% (29 of 34)	88% (98 of 111)
				Reduction in child welfare (CPS) contracts.	75% (# of #)	71% (15 of 21) POC Received	73% (22 of 30) POC Received	81% (21 of 26)	85% (29 of 34)	78% (87 of 111)
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 #)	90% (19 of 21) POC Received	100% (30)	100% (26)	76% (26 of 34) POC Received	91% (101 of 111)

[illegible]

FY22 Program Performance Indicators
St. Clair County CMH
All-Ways Care Services (74185)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit.	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 #)	Not Reported 1Q	Not Reported 2Q	Not Reported 3Q	Customer Satisfaction Survey 100%	Customer 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 #)	100% (1)	50% (1@100%) (1@0%) POC Received	80% (4@100%) (1@0%) (2@N/A) POC Received	75% (3@100%) (1@0%) POC Received	75% (9@100%) (3@0%) (2@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% (2)	100% (7)	100% (4)	100% (14)
4	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (2)	100% (1)	100% (2)	100% (5@100%) (2@N/A)	100% (10@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)	93% (2@100%) (1@78%) POC Received	100% (3)	100% (3)	98% (11@100%) (1@78%)

6	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%
7	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 Submitted	Report Submitted	Report Submitted 1	Report Submitted	Report Submitted

FY22 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
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% (12)	100% (6@100%) (2@N/A)	93% (14@100%) (1@0%) POC Received	100% (19)	98% (51@100%) (1@0%) (2@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	98% (11@100%) (1@80%) POC Received	100% (8)	100% (15)	100% (19)	99% (53@100%) (1@80%)
2	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (12)	100% (12)	100% (8)	95% (11@100%) (1@78%) (1@63%) (2@N/A) POC Received	99% (43@100%) (1@78%) (1@63%) (2@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)	100% (3)	100% (3)	100% (3)	100% (12)
4	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% (14)	79% (15 of 19) POC Received	100% (18)	88% (22 of 25) POC Received	91% (69 of 76)
			a. Number of 6-Month Assessments and Plans that have been submitted prior to current plan expiration for the reporting period.	a. (#)		14	15	18	22	69
			b. Number of 6-Month Assessments and Plans that are required to be completed in the reporting period.	b. (#)		14	19	18	25	76

FY22 Program Performance Indicators
St. Clair County CMH
Autism Systems LLC (74681)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the new hire is under the required 30 days, the 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)	86% (12@100%) (2@0%) (3@N/A) POC Received	100% (11@100%) (4@N/A)	93% (13@100%) (1@0%) (3@N/A) POC Received	94% (46@100%) (3@0%) (12@ N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (12)	100% (17)	100% (15)	100% (17)	100% (61)
2	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (11@100%) (10@N/A) *1 not rp. 4Q	100% (7@100%) (5@N/A)	100% (15@100%) (5@N/A)	100% (8@100%) (7@N/A)	100% (41@100%) (27@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)	53% (1@70%) (2@45%) POC Received	100% (3)	100% (3)	88% (9@100%) (1@70%) (2@45%)
4	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.)	91% (20 of 22) POC Received	74% (14 of 19) POC Received	73% (16 of 22) POC Received	92% (23 of 25) POC Received	83% (73 of 88)
			a. Number of 6-Month Assessments and Plans that have been submitted prior to current plan expiration for the reporting period.		a. (#)	20	14	16	23	73

FY22 Program Performance Indicators

St. Clair County CMH

Beacon Specialized Living Services Inc.

Anchor Point North (74519), Clarkston (74946), Carleton (74491), Battle Creek (74677), Dilley (74793), County Line (74514), Meadowland (74914), Spring Specialty Services (74663), Spring Home West (Specialty Services) (74915), Ypsilanti (74266), Lapeer (74695) & Hartfor (74998)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit.	Program will forward ANNUALLY (4th Quarter) a brief summary of activities that have occurred.	Reported Annually (4th Qtr.)				Community Benefits Received	Community Benefits Received
2	Satisfaction M-8	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	Customer Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	Results Annually 90% (# of #)	Customer Satisfaction Report Received	Customer Satisfaction In Process	Customer Satisfaction 95%	Customer Satisfaction In Process	Customer Satisfaction 95%
				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	Guardian Satisfaction In Process	Guardian Satisfaction 94%	Guardian Satisfaction In Process	Guardian Satisfaction 94%
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 #)	92% (12@100%) (1@0%) POC Received	100% (11)	100% (8)	73% (24@100%) (9@0%) (8@N/A) POC Received	85% (55@100%) (10@0%) (8@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	62% (8@100%) (5@0%) POC Received	100% (11)	88% (7@100%) (1@0%) POC Received	98% (41@100%) (1@0%) POC Received	91% (67@100%) (7@0%)
4	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	93% (10@100%) (11@90%) (1@60%) (4@N/A) POC Received	94% (8@100%) (9@90%) (1@80%) POC Received	89% (7@100%) (6@90%) (1@N/A) POC Received *3 Staff Not Previously Rp.	91% (1@100%) (7@90%) POC Received	94% (26@100%) (33@90%) (1@80%) (1@60%) (5@N/A)

FY22 Program Performance Indicators
St. Clair County CMH
(BHR) Behavioral Health Response

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
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 #)	80% (4 of 5) POC Received	50% (1 of 2) POC Received	75% (9 of 12) POC Received	67% (6 of 9) POC Received	71% (20 of 28)
2	Efficiency M-44	Maximize Service Provision	All calls will be answered within 15 seconds or less (on average).	Average time in which telephone calls are answered.	30 Sec. or Less	75.7 Sec. POC Received	82.8 Sec. POC Received	86.6 Sec. POC Received	84.5 Sec. POC Received	82.4
				Number of incoming telephone calls.	#	1644	1897	1818	2244	7603
3	Effectiveness M-72	Ensure Program Quality	Timely submission of contract required documents (per attachment D).	Agency will forward contract required documents.	100%	100%	100%	100%	100%	100%
4	Effectiveness M-73	Ensure Program Quality	Percentage of employed individuals who have completed the required Recipient Rights (Refresher) training. *RR Training completed via Genesee CMH Self-Study Test.	Agency will electronically forward the percentage & number (i.e. 90%, 9 of 10) of staff who have completed the Recipient Rights Refresher training course within the required timeframe. Training documentation MAY be requested by St. Clair County CMH QI Office as proof of course completion.	100% (# of #)	100% (3)	100% (11)	N/A	100% (9)	100% (23)

FY22 Program Performance Indicators
St. Clair County CMH
Blue Water Area Transportation

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit.	Program will forward ANNUALLY (4th Quarter) a brief summary of activities that have occurred.	Reported Annually (4th Qtr.)				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 #)	0% (5@0%) POC Received	33% (1@100%) (2@0%) POC Received	100% (6)	100% (6)	65% (13@100%) (7@0%)
3	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires Previous Quarter	100% (5)	89% (2@100%) (1@67%) POC Received	100% (6)	98% (13@100%) (1@67%)
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)	56% (2@67%) (1@33%) POC Received	0% (3) POC Received	55% (1@100%) (2@33%) POC Received	0% (3) POC Received	28% (1@100%) (2@67%) (3@33%) (6@0%)

FY22 Program Performance Indicators
St. Clair County CMH
Blue Water Developmental Housing
Children's Waiver (74267)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit.	Program will forward ANNUALLY (4th Quarter) a brief summary of activities that have occurred.	Reported Annually (4th Qtr.)				Community Benefits Received	Community Benefits Received
2	Satisfaction M-8	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	Customer Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	Results Annually 90% (# of #)	Submitted 4th Quarter	Submitted 4th Quarter	Submitted 4th Quarter	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. 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".	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.

FY22 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
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 #)	To be submitted 4th Quarter	To be submitted 4th Quarter	To be submitted 4th Quarter	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. 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)	No New Hires	N/A (1)	No New Hires	100% (1@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)	No New Hires	100% (1)	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".	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% (1)	No New Hires Previous Quarter	N/A (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)	96% (2@100%) (1@89%) POC Received	100% (3)	100% (3)	100% (3)	99% (11@100%) (1@89%)

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FY22 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
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 #)	To be submitted 4th Quarter	To be submitted 4th Quarter	To be submitted 4th Quarter	Customer Satisfaction Survey Received	Customer Satisfaction Survey Received
				Guardian Satisfaction Survey to be administered by either St. Clair County CMH QI Office per contract agency via contract requirements.		To be submitted 4th Quarter	To be submitted 4th Quarter	To be submitted 4th Quarter	Guardian Satisfaction Survey Received	Guardian 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. 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 #)	90% (9@100%) (1@0%) POC Received	78% (7@100%) (2@0%) POC Received	92% (12@100%) (1@0%) (2@N/A) POC Received	88% (7@100%) (1@0%) POC Received	88% (35@100%) (5@0%) (2@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (10)	100% (9)	95% (14@100%) (1@20%) POC Received	90% (7@100%) (1@20%) POC Received	96% (40@100%) (2@20%)
4	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	67% (1@67%) (2@N/A) POC Received	86% (4@100%) (3@80%) (1@50%) (2@N/A) POC Received	85% (2@100%) (3@89%) (2@80%) (1@71%) (1@70%) POC Received	90% (8@100%) (4@80%) (1@50%) (2@N/A) POC Received	87% (14@100%) (3@89%) (9@80%) (1@71%) (1@70%) (1@67%) (2@50%) (6@N/A)

FY22 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
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 #)	Submitted 4th Quarter	Submitted 4th Quarter	Submitted 4th Quarter	Satisfaction Survey Received	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. 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 #)	67% (2@100%) (1@0%) POC Received	100% (4)	100% (3)	100% (2)	92% (11@100%) (1@0%)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	93% (2@100%) (1@80%) POC Received	100% (4)	100% (3)	100% (2)	98% (11@100%) (1@80%)
4	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (4@100%) (2@N/A)	100% (3)	100% (4)	100% (3)	100% (14@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)	93% (2@100%) (1@80%) POC Received	100% (3)	100% (3)	98% (11@100%) (1@80%)

FY22 Program Performance Indicators
St. Clair County CMH
Community Enterprises of SCC (Community Supports 74662)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit.	Program will forward ANNUALLY (4th Quarter) a brief summary of activities that have occurred.	Reported Annually (4th Qtr.)				Community Benefits Received	Community Benefits Received
2	Satisfaction M-8	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	Customer Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	Results Annually 90% (# of #)	Customer Satisfaction not reported 1Q	Customer Satisfaction not reported 2Q	Customer Satisfaction not reported 3Q	100% (1)	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".	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

FY22 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
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	98% (40 of 41)	98% (40 of 41)
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 (#)	15	33	79	117	244
			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)	18.78 hrs.	16.34 hrs.	39.5 hrs.	51.2 hrs.	Annual Average 31.5 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.)	100% (25)	96% (53 of 55)	93% (27 of 29)	91% (31 of 34)	95% (136 of 143)
			a. Number of person served who attended a community outing (based on unduplicated count).		a. (#)	25	53	27	31	136
			b. Number of persons served who are eligible to attend a community outing (based on unduplicated count).		b. (#)	25	55	29	34	143
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)	No New Hires	100% (5)	100% (3)	100% (12)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (4)	No New Hires	100% (5)	100% (3)	100% (12)

5	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (1)	100% (3@100%) (1@N/A)	No New Hires Previous Quarter	100% (5)	100% (9@100%) (1@N/A)
6	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)
7	Effectiveness M-42.1	Staff Receive Supervision Regularly	All staff will receive supervision on regular (30 day) intervals. Supervision may be provided by phone and/or in person or at staff meetings. Training documentation MAY be requested by St. Clair CMH QI Office.	Program will maintain training records and provided documentation if requested.	100%	100%	100%	100%	100%	100%
8	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	Report Submitted	Report Submitted	Report Submitted	Report Submitted	Reort Submitted	Report Submitted

FY22 Program Performance Indicators
St. Clair County CMH
Community Enterprises of SCC
River District, ECL (74203)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit.	Program will forward ANNUALLY (4th Quarter) a brief summary of activities that have occurred.	Reported Annually (4th Qtr.)				Community Benefits Received	Community Benefits Received
2	Satisfaction M-8	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	Customer Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	Results Annually 90% (# of #)	Customer Satisfaction not reported 1Q	Customer Satisfaction not reported 2Q	Customer Satisfaction not reported 3Q	100% (12)	100% (12)
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".	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)	96% (1@100%) (1@91%) POC Received	No Additional Staff to Report	No Additional Staff to Report	98% (4@100%) (1@91%)

<p>FY22 Program Performance Indicators St. Clair County CMH Community Enterprises of SCC-Marysville Enriching Community Life ECL (74171)</p>

[illegible]

FY22 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
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 #)	N/A	Customer Satisfaction not reported 2Q	Customer Satisfaction not reported 3Q	100% (12)	100% (12)
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	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 #)	N/A	No New Hires	No New Hires	No New Hires	No New Hires
4	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	N/A	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)	N/A	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%	N/A	100%	100%	100%	100%

7	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	N/A	Report Submitted	Report Submitted	Report Submitted	Report Submitted
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.)	N/A	30% (3 of 10) POC Received	25% (1 of 4) POC Received	60% (3 of 5)	37% (7 of 19)
				a. Number of individuals employed in a minimum wage job working at least 15 hours per week.	a. (#)	N/A	3	1	3	7
				b. Number of individual open to the program.	b. (#)	N/A	10	4	5	19
9	M-92	Ensure Program Quality	<p>CE Supported Employment "Job Developers" will have a minimum of one of the following trainings/certifications:</p> <p>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)</p>	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.)	N/A	50% (1 of 2) POC Received	50% (1 of 2) POC Received	100% (2)	67% (4 of 6)
				a. Number of "Job Developers" providing services who have completed needed trainings/certifications.	a. (#)	N/A	1	1	2	4
				b. Number of Job Developers.	b. (#)	N/A	2	2	2	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	N/A	100% Met minimum of 2 contacts per Mo., per Indiv.	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 #)	N/A	Info. Not Reported	100% (4)	100% (5)	100% (9)
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 #)	N/A	Info. Not Reported	100% (1)	100% (3)	100% (4)

				a. Number of employers satisfied with the performance of the individual.	a. (#)	N/A	Info. Not Reported	1	3	4
				b. Number of employers.	b. (#)	N/A	Info. Not Reported	1	3	4
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.)	N/A	Info. Not Reported	100% (1)	100% (3)	100% (4)
				a. Number of individuals satisfied with their job.	a. (#)	N/A	Info. Not Reported	1	3	4
				b. Number of individuals employed.	b. (#)	N/A	Info. Not Reported	1	3	4
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	N/A	30 Days (3 Placements)	35 Days (1 Placement)	30 Days (3 Placements)	Annual Average 32 Days (7 Placements)

FY22 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
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 #)	None at this time.	None at this time.	None at this time.	90% Customer Satisfaction Survey	90% Customer Satisfaction Survey
				Guardian Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.		None at this time.	None at this time.	None at this time.	90% Guardian Satisfaction Survey	90% Guardian Satisfaction Survey
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% (20)	100% (20)	100% (18)	100% (30)	100% (88)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (20)	100% (20)	100% (18)	100% (30)	100% (88)
4	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (22)	100% (20)	100% (20)	100% (11@100%) (7@N/A)	100% (73@100%) (7@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% (4)	100% (4)	100% (3)	100% (3)	100% (14)

FY22 Program Performance Indicators
St. Clair County CMH
Goodwill Industries Work Opportunity Program (74245)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit.	Program will forward ANNUALLY (4th Quarter) a brief summary of activities that have occurred.	Reported Annually (4th Qtr.)				Community Benefits Received	Community Benefits Received
2	Satisfaction M-8	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	Customer Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	Results Annually 90% (# of #)	Customer Satisfaction Survey 100% (10)	Customer Satisfaction Survey 100% (12)	Customer Satisfaction Survey 100% (14)	Customer Satisfaction Survey 100% (12)	Customer Satisfaction Survey 100% (48)
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)	100% (3)	100% (1)	100% (6)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (1)	100% (1)	100% (3)	100% (1)	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".	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	N/A (1)	N/A (1)	100% (1@100%) (2@N/A)	100% (1@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)	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	100% (3)
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.)	1	2	2	1	6

FY22 Program Performance Indicators
St. Clair County CMH
Hope Network Behavioral Health Services
Harbor Point Lapeer (74157), Nunica (74719) & Westlake Cottage (74688)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-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 #)	57% (4@100%) (3@0%) (1@N/A) POC Received	100% (5)	63% (10@100%) (6@0%) POC DC	75% (3@100%) (1@0%) POC Received	69% (22@100%) (10@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% (8)	100% (5)	100% (16)	100% (4)	100% (33)
2	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	79% (2@100%) (4@90%) (4@80%) (1@60%) (2@70%) (1@50%) (1@40%) (1@N/A) POC Received	80% (1@100%) (2@90%) (1@80%) (2@70%) (1@60%) (1@N/A) POC Received	70% (1@100%) (1@80%) (1@70%) (2@50%) POC Received	86% (6@100%) (2@90%) (1@89%) (2@80%) (2@78%) (2@50%) (1@N/A) POC Received	81% (10@100%) (8@90%) (1@89%) (8@80%) (2@78%) (3@70%) (2@60%) (5@50%) (1@40%) (3@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)	97% (2@100%) (1@91%) POC Received	91% (1@100%) (1@91%) (1@82%) POC Received	70% (1@100%) (1@45%) POC Received	88% (1@100%) (2@82%) POC Received	88% (5@100%) (2@91%) (3@82%) (1@45%)
4	Effectiveness M-74	Ensure Program Quality	Program will submit quarterly a report of Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter. *Reference contract language for specific language needed in CCC report.	Agency will electronically forward a report. The submitted quarterly report will include any Corporate Compliance Complaints received and/or investigated by the contract agency within the reporting quarter.	N/A	Report/ Submitted	Report/ Submitted	Report/ Submitted	Report Submitted	Report Submitted

FY22 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
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 1Q	Customer Satisfaction Survey Not Reported 2Q	Customer Satisfaction Survey Not Reported 3Q	Customer Satisfaction Survey 100%	Customer 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 #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires
4	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the 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)	93% (2@100%) (1@80%) POC Received	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	93% (2@100%) (1@80%)

FY22 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
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 98%	Customer Satisfaction 98%
				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 97%	Guardian Satisfaction 97%
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 #)	86% (6@100%) (1@0%) POC Received	100% (6@100%) (1@N/A)	100% (7@100%) (1@N/A)	100% (8)	96% (27@100%) (1@0%) (2@N/A)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (7)	96% (6@100%) (1@75%) POC Received	100% (8)	94% (6@100%) (2@75%) POC Received	98% (27@100%) (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".	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%) (2@N/A)	100% (6@100%) (1@N/A)	95% (3@100%) (1@80%) (2@N/A) POC Received	100% (6)	99% (16@100%) (1@80%) (5@N/A)

FY22 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
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 100%	Customer Satisfaction 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 100%	Guardian Satisfaction 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)	No New Hires	No New Hires	100% (1)	100% (2)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (1)	No New Hires	No New Hires	100% (1)	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".	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)	No New Hires Previous Quarter	No New Hires Previous Quarter	100% (2)
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)	83% (2@90%) (1@70%) POC Received	100% (3)	100% (3)	97% (2@100%) (1@90%) POC Received	95% (8@100%) (3@90%) (1@70%)

FY22 Program Performance Indicators
St. Clair County CMH
Innovative Enhance Community Supports Services (74348)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit.	Program will forward ANNUALLY (4th Quarter) a brief summary of activities that have occurred.	Reported Annually (4th Qtr.)					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 #)	Satisfaction Survey Not Submitted 1Q	Satisfaction Survey Not Submitted 2Q	Satisfaction Survey Not Submitted 3Q	Customer Satisfaction Survey 100%	Customer 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 #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	No New Hires	No New Hires	No New Hires	No New Hires	No New Hires
4	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	N/A (1)	No New Hires Previous Quarter	No New Hires Previous Quarter	No New Hires Previous Quarter	N/A (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)	100% (3)	87% (1@100%) (1@90%) (1@70%) POC Received	97% (2@100%) (1@90%) POC Received	100% (3)	96% (9@100%) (2@90%) (1@70%)

FY22 Program Performance Indicators
St. Clair County CMH
Innovative
Abbottsford (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
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%	Customer Satisfaction Survey 100%	Customer Satisfaction Survey 100%	Customer Satisfaction Survey 100%	Customer Satisfaction Survey 100%
				Guardian Satisfaction Survey to be administered by either St.Clair County CMH QI Office or per contract agency via contract requirements.		Guardian Satisfaction Survey 100%	Guardian Satisfaction Survey 100%	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 #)	100% (4)	73% (8@100%) (3@0%) (1@N/A) POC Received	86% (12@100%) (2@0%) POC Received	94% (15@100%) (1@0%) POC Received	87% (39@100%) (6@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% (12)	100% (14)	98% (14@100%) (2@80%) POC Received	99% (44@100%) (2@80%)
4	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	99% (15@100%) (1@89%) POC Received	100% (4)	100% (10@100%) (2@N/A)	99% (10@100%) (1@89%) (3@N/A) POC Received	99% (39@100%) (2@89%) (5@N/A)

FY22 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
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 99% (69 of 70)	Customer Satisfaction Survey 99% (69 of 70)	Customer Satisfaction Survey 99% (69 of 70)	Customer Satisfaction Survey 99% (69 of 70)	Customer Satisfaction Survey 99% (69 of 70)
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 (#)	2,236	2,900	3,540	3,801	12477 Annual Total
			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)	74.46 hr.	95.45 hr.	120.41 hr.	129.52 hr.	104.96 hr. Annual Average
			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% (98)	100% (99)	100% (101)	100% (106)	100% (404)
			a. Number of person served who attended a community outing (based on unduplicated count).		a. (#)	98	99	101	106	404
			b. Number of persons served who are eligible to attend a community outing (based on unduplicated count).		b. (#)	98	99	101	106	404
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% (1)	100% (2@100%) (1@N/A)	60% (3@100%) (2@0%) (2@N/A) POC Received	100% (5) *1 Rp. Late	85% (11@100%) (2@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% (1)	100% (3)	100% (7)	100% (5) *1 Rp. Late	100% (16)

FY22 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
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% (16)	Reported Previous Quarter	Reported Previous Quarter	Reported Previous Quarter	Customer Satisfaction Survey 100% (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 #)	100% (1)	No New Hires	No New Hires	No New Hires	100% (1)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (1)	No New Hires	No New Hires	No New Hires	100% (1)
4	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires Previous Quarter	100% (1)	No New Hires Previous Quarter	No New Hires Previous Quarter	100% (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)	100% (3)	100% (1)	No Additional Staff to Report	No Additional Staff to Report	100% (4)

FY22 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
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.	100% (# of #)	100% (3)	33% (1@100%) (2@0%) POC Received	100% (7@100%) (2@N/A)	100% (3)	88% (14@100%) (2@0%) (2@N/A)
			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 #)	100% (3)	73% (1@100%) (2@60%) POC Received	100% (9)	100% (3)	96% (16@100%) (2@60%)
2	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (3@100%) (3@N/A)	100% (3)	100% (3)	100% (7@100%) (2@N/A)	100% (16@100%) (5@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% (4)	100% (1)	100% (1)	100% (3)	100% (9)
4	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)	100% (3)	75% (3 of 4) POC Received	100% (3)	92% (12 of 13)
			a. Number of 6-Month Assessments and Plans that have been submitted prior to current plan expiration for the reporting period.		a. (#)	3	3	3	3	12
			b. Number of 6-Month Assessments and Plans that are required to be completed in the reporting period.		b. (#)	3	3	4	3	13

FY22 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
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	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	93% (25 of 27)	100% (4)	91% (30 of 33)	70% (26 of 37)	84% (85 of 101)
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	N/A	3% (2 of 74)	3% (2 of 74)
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% (1)	N/A	0% (1)	0% (2)
5	Efficiency M-6	Improve Staff Productivity	Supervisors review per location and staff the unsigned document list exceeding 30 days from the date of creation.	Data will be collected via the OASIS Software System on Program Performance and reviewed weekly.	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
6	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 Survey 93% (40 of 43)	Customer Satisfaction Survey 92% (34 of 37)	Customer Satisfaction Survey 90% (29 of 32)	Customer Satisfaction Survey 90% (29 of 32)	Customer Satisfaction Survey 90% (29 of 32)
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.)	64% (9 of 14)	69% (11 of 16)	63% (5 of 8)	40% (8 of 20)	57% (33 of 58)

				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	9	11	5	8	33
				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	14	16	8	20	58
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.	#	21	23	8	20	72
			Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	95% (20 of 21) POC Received	100% (23)	100% (8)	100% (20)	99% (71 of 72)
			Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	0% (1) POC Received	N/A	N/A	N/A	0% (1)
			Annually	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	100% (3)	100% (1)	100% (4)	100% (6)	100% (14)
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 #)	100% (2)	100% (1)	100% (1)	100% (2)	100% (6)
			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	100% (# of #)	100% (2)	100% (1)	100% (1)	100% (2)	100% (6)
11	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (1)	100% (2)	100% (1)	N/A (1)	100% (4@100%) (1@N/A)

FY22 Program Performance Indicators
St. Clair County CMH
Norserv Group Ltd. School Success (74233)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Satisfaction M-8	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	Customer Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	Results Annually 90% (# of #)	Customer Satisfaction 92% (26 of 28)	Customer Satisfaction 86% (32 of 37) POC Received	Customer Satisfaction 60% (21 of 35) POC Received	Customer Satisfaction 92% (24 of 26)	Customer Satisfaction Survey Completed
2	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter.						
			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 #)	100% (1)	No New Hires	No New Hires	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 #)	100% (1)	No New Hires	No New Hires	100% (1)	100% (2)
3	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires Previous Quarter	N/A (1)	No New Hires Previous Quarter	No New Hires Previous Quarter	N/A (1)
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)	100% (3)	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	100% (3)

5	Access M-55	Promote Timely & Successful Prevention Interventions	Service interventions used to reduce the incidence of behavioral, emotional or cognitive dysfunction, resulting in a reduction of the need for individual mental health treatment.	Program will calculate percentage of referrals contacted within 3 business days of assessment based on the numbers reported in a. & b.	100% (a. of b.)	92% (26 of 28) POC Received	100% (37)	94% (33 of 35) POC Received	85% (22 of 26) POC Received	94% (118 of 126)
				a. Number of referrals contacted within 3 business days of the assessment.	a. (#)	26	37	33	22	118
				b. Number of referrals open to the program.	b. (#)	28	37	35	26	126
				Program will calculate percentage of families (persons served) seen within 5 business days of the truancy hearing based on the numbers reported in a. & b.	100% (a. of b.)	67% (19 of 28) POC Received	67% (25 of 37) POC Received	60% (21 of 35) POC Received	85% (22 of 26) POC Received	69% (87 of 126)
				a. The number of families (persons served) seen within 5 business days of the truancy hearing.	a. (#)	19	25	21	22	87
				b. Number of persons served open to the program.	b. (#)	28	37	35	26	126
				Program will calculate percentage of persons served referred to inpatient mental health service based on the numbers reported in a. & b.	15% or Less (a. of b.)	0% (28)	0% (37)	0% (35)	0% (26)	0% (126)
				a. Number of persons served that are referred to inpatient mental health services.	a. (#)	0	0	0	0	0
				b. Number of persons served open to the program.	b. (#)	28	37	35	26	126

6	Effectiveness M-56	Increase School Attendance	Interventions will increase school attendance of persons served participating in program.	Program will calculate percentage of persons served open for greater than 1 month showing improved attendance based on numbers reported in a. & b.	90% (a. of b.)	88% (16 of 18) POC Received	75% (24 of 32) POC Received	79% (22 of 28) POC Received	35% (9 of 26) POC Received	68% (71 of 104)
				a. Number of persons served showing improved attendance.	a. (#)	16	24	22	9	71
				b. Number of persons served open for greater than 1 month.	b. (#)	18	32	28	26	104
7	Effectiveness M-57	Improve Academic Performance	Interventions will improve academic performance for students who participate in program.	Program will calculate academic performance improvement based on numbers reported in a. & b.	75% (a. of b.)	70% (7 of 10) POC Received	25% (3 of 12) POC Received	17% (3 of 18) POC Received	11% (2 of 18) POC Received	26% (15 of 58)
				a. Number of persons served (students) showing an improvement at discharge.	a. (#)	7	3	3	2	15
				b. Number of persons served (students) discharged.	b. (#)	10	12	18	18	58
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 Submitted	Report Submitted	Report Submitted	Report Submitted	Report Submitted
9	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	0	0	0

FY22 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
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% (1)	N/A	100% (3)	N/A	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	50% (1 of 2)	N/A	33% (1 of 3)	40% (4 of 10)	40% (6 of 15)
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	N/A	N/A	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 #)	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 #)	Customer Satisfaction Survey Not Reported 1Q	Customer Satisfaction Survey Not Reported 2Q	Customer Satisfaction Survey Not Reported 3Q	Customer Satisfaction Received	Customer Satisfaction Received
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.)	38% (5 of 13)	50% (6 of 12)	57% (8 of 14)	42% (5 of 12)	47% (24 of 51)
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	5	6	8	5	24

				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	13	12	14	12	51
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.	#	18	16	16	15	65
			Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	100% (8)	100% (11)	100% (10)	100% (10)	100% (39)
			Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	100% (3)	100% (3)	100% (2)	N/A	100% (8)
			Annually	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	100% (6)	100% (1)	10% (2)	100% (2)	100% (11)
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	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
11	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the 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

FY22 Program Performance Indicators
St. Clair County CMH
Professional Counseling Center Home-Based Program (74223 & 74232)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-1 (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 N/A 232 N/A	223 N/A 232 N/A	223 N/A 232 N/A	223 N/A 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 N/A 232 N/A	223 100% (1) 232 100% (5)	223 N/A 232 100% (2)	223 100% (1) 232 100% (8)
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 N/A 232 N/A	223 N/A 232 N/A	223 N/A 232 N/A	223 N/A 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 N/A 232 N/A	223 N/A 232 N/A	223 N/A 232 N/A	223 N/A 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	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 Received	Customer Satisfaction Received
7	Effectiveness M-9	Increase in Psychological Functioning	Percentage and number of persons served (children) who demonstrate an increase in psychological functioning.	Clinician will complete a level of functioning assessment as required (CAFAS/PECFAS). Program will calculate percentage of persons served (children) who demonstrated an increase in psychological functioning based on numbers reported in a. & b.	25% (a. of b.)	48% (13 of 27)	42% (11 of 26)	70% (16 of 23)	35% (8 of 23)	48% (48 of 99)
				a. Number of persons served (children) who demonstrate an increase in psychological functioning.	a. (#)	13	11	16	8	48

				b. Number of persons served (children) requiring a level of functioning assessment.	b. (#)	27	26	23	23	99
8	Efficiency M-11	Ensure Measurement of Level of Functioning	Percentage of person served (children) who received a level of functioning assessment (CAFAS/PECFAS) as required.	Certified clinician will completed a level of functioning assessment as required Quarterly, Discharge and Annually.						
				Number of persons served (children) with open cases in the reporting period.	#	34	32	29	28	123
			Quarterly	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required quarterly.	100% (# of #)	100% (19)	100% (21)	100% (20)	100% (18)	100% (78)
			Discharge	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required at discharge.	100% (# of #)	100% (5)	100% (8)	100% (4)	100% (2)	100% (19)
			Annually	Number of persons served (children) who receive a level of functioning assessment (CAFAS/PECFAS) as required annually.	100% (# of #)	100% (9)	100% (2)	100% (4)	100% (3)	100% (18)
9	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter.						
			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 #)	100% (1)	100% (2)	100% (1)	No New Hires	100% (4)
			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 #)	80% (1) POC Received	100% (2)	100% (1)	No New Hires	95% (3@100%) (1@80%)
10	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	100% (1)	100% (1)	100% (2)	100% (1)	100% (5)

FY22 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
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 POH 93% Customer Satisfaction PS 93%	Customer Satisfaction POH 93% Customer Satisfaction PS 93%	Customer Satisfaction POH 93% Customer Satisfaction PS 93%	Customer Satisfaction POH 93% Customer Satisfaction PS 93%	Customer Satisfaction POH 93% Customer Satisfaction PS 93%
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	50% (1@100%) (1@0%) POC Received	No New Hires	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.)	The QI Office will calculate the percentage and forward the final results to the program and request a Plan of Correction if needed.	100% (# of #)	N/A	N/A	N/A	N/A	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".	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% (2)	No New Hires Previous Quarter	100% (2)
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)	92% (2@100%) (1@75%) POC Received	100% (2)	No Additional Staff to Report	No Additional Staff to Report	95% (4@100%) (1@75%)
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.						

FY22 Program Performance Indicators
St. Clair County CMH
RESA-Early-On Program (74708)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. 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 #)	100% (5)	No New Hires	No New Hires	Contract Ended	100% (5)
			b. Items required to be completed prior to hire (e.g. "REQUIREMENTS": Background Check, Driver's License, etc.)		100% (# of #)	100% (5)	No New Hires	No New Hires	Contract Ended	100% (5)
2	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	No New Hires Previous Quarter <small>*Staff reported as New</small>	100% (5)	No New Hires Previous Quarter	Contract Ended	100% (5)
3	Effectiveness M-41	Ensure Program Quality	Percentage of staff employed greater than one year who are current with ALL trainings, as specified on the "Training/Requirement Reporting Form". * ONLY report on a staff once per fiscal year.	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for 3 staff within the reporting quarter.	100% (# of 3)	No Staff Employed Greater than 1Yr. <small>*Staff reported as New</small>	No Staff Employed Greater than 1Yr. <small>*Staff reported as New</small>	No Staff Employed Greater than 1Yr. <small>*Staff reported as New</small>	Contract Ended	No Staff Employed Greater than 1Yr. <small>*Staff reported as New</small>
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 Submitted	Report Submitted	Report Submitted	Contract Ended	Report Submitted
5	M-98	Ensure Program Quality	Percentage and number of all Early-On referrals (Medicaid & non Medicaid) received in the reporting quarter that met program criteria for services.	Program will calculate the percentage based on the numbers provided in a. & b.	% TBD (a. of b.)	17% (22 of 132)	16% (27 of 164)	21% (32 of 151)	Contract Ended	Annual Average 18% (81 of 447)
6			a. Number of all Early-On referrals (Medicaid and non Medicaid) that met program criteria for services and were opened to the Early-On program in the reporting quarter.	Program will forward the number of Early-On referrals (Medicaid and non Medicaid) that met program criteria for services and were opened to the Early-On program.	a. #	22	27	32	Contract Ended	81

7			b. Number of all Early-On referrals (Medicaid and non Medicaid) received in the reporting quarter.	Program will forward the number of Early-On referrals received in the reporting quarter.	b. #	132	164	151	Contract Ended	447
6	M-99	Ensure Program Quality	Percentage and numbers of persons (children 0-3) who show improvement based on the IDA-2 completed at discharge.	Program will report the percentage and numbers of persons (children 0-3) who showed improvement on their IDA-2 completed at discharge.	75% (a. of b.)	100% (1)	100% (1)	100% (3)	Contract Ended	100% (5)
			a. Number of persons (children 0-3) who showed improvement on their IDA-2 at the discharge assessment.	Program will report the number of persons (children 0-3) who showed improvement on their IDA-2 completed at discharge.	a. #	1	1	3	Contract Ended	5
			b. Number of persons (children 0-3) discharged from the Early-On program.	Program will report the number of persons (children 0-3) discharged from the Early-On program.	b. #	1	1	3	Contract Ended	5
7	M-100	Ensure Program Quality	All parents/guardians of persons served (children 0-3) open to the Early-On program will be included in an annual satisfaction survey.	Program will forward results of annual satisfaction survey once per fiscal year.	95% (#)	Satisfaction Survey Not Reported 1Q	Satisfaction Survey Not Reported 2Q	Satisfaction Survey Not Reported 3Q	Contract Ended	Contract Ended
8	M-101	Ensure Program Quality	Each person served (children 0-3) will receive a minimum of Family Training (S5111) services within the reporting quarter.	Early-On staff will enter services provided (i.e. Family Training (S5111) services into the OASIS System. The data department will provide the Early-On Program with data needed to review standard.	TBD	90%	85%	91%	Contract Ended	Annual Average 87%
9	M-102	Ensure Program Quality	Each person served (children 0-3) will receive a minimum of Targeted Case Management (T1017) services within the reporting quarter.	Early On staff will enter services provided (i.e. Targeted Case Management) (T1017) services into the OASIS System. The data department will provide the Early-On Program with data needed to review standard.	TBD	73%	98%	94%	Contract Ended	Annual Average 88%

FY22 Program Performance Indicators
St. Clair County CMH
Residential Opportunities Inc., The Great Lakes Center For Autism Treatment & Research (74242 & 74899) (Elaine Ave. 74905)

[illegible]

FY22 Program Performance Indicators
St. Clair County CMH
Touchstone (74295) Blue Water Clubhouse (Supported/Transitional Employment)

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Efficiency M-5 (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	Sent Out & Reviewed Weekly	Sent Out & Reviewed Weekly
3	Effectiveness M-7	CMH Supports & Encourages Community Partnerships	Program will submit ANNUALLY (4th Quarter) a list of activities it believes contributes to community benefit.	Program will forward ANNUALLY (4th Quarter) a brief summary of activities that have occurred.	Reported Annually (4th Qtr.)				Community Benefits Received	Community Benefits Received
4	Satisfaction M-8	Customer Satisfaction	Percentage of persons served, parents, family members and/or guardians who report satisfaction with services.	Customer Satisfaction Survey to be administered by either St. Clair County CMH QI Office or per contract agency via contract requirements.	Results Annually 90% (# of #)	Customer Satisfaction 100% (17)	Customer Satisfaction 100% (17)	Customer Satisfaction 100% (14)	Customer Satisfaction 100% (14)	Customer Satisfaction 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.						
			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 #)	100% (2)	100% (1)	No New Hires	No New Hires	100% (3)
			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 #)	100% (2)	100% (1)	No New Hires	No New Hires	100% (3)
6	Effectiveness M-40	Ensure Program Quality	Percentage of staff hired in the previous quarter who have completed all initial required trainings (required to be completed within 90 days) as specified on the "Training/Requirement Reporting Form".	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for all staff hired in the previous quarter. The QI Office will calculate the percentage and forward the results to the program and request a Plan of Correction if needed.	100% (# of #)	No New Staff Previous Hire	100% (2)	100% (1)	No New Staff Previous Hire	100% (3)

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)	97% (2@100%) (1@90%) POC Received	100% (2)	No Additional Staff to Report	No Additional Staff to Report	98% (4@100%) (1@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.	90% (a. of b.)	83% (5 of 6) POC Received	80% (4 of 5) POC Received	80% (4 of 5) POC Received	67% (4 of 6) POC Received	77% (17 of 22)
				a. Number of persons served in Supported/Transitional Employment program employed 10 or more hours per week.	a. (#)	5	4	4	4	17
				b. Number of persons served in Supported/Transitional Employment program.	b. (#)	6	5	5	6	22
			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% (6)	100% (5)	100% (5)	100% (6)	100% (22)
				a. Number of persons served in Supported/Transitional Employment program.	a. (#)	6	5	5	6	22
				b. Number of persons served in Supported/Transitional Employment program earning minimum wage or greater.	b. (#)	6	5	5	6	22
			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.)	80% (4 of 5)	100% (3)	100% (4)	100% (3)	93% (14 of 15)
				a. Number of persons served in Supported/Transitional Employment program employed continuously for 6 months or longer (not including new individuals).	a. (#)	4	3	4	3	14
				b. Number of persons served in Supported/Transitional Employment program.	b. (#)	5	3	4	3	15
			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	5	5	5	5

FY22 Program Performance Indicators
St. Clair County CMH
Berg Specialized Adult Foster Care Home

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	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".	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)	32% (1@36%) (1@27%)	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	32% (1@36%) (1@27%)
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	No Corporate Compliance Complaints	No Corporate Compliance Complaints	No Corporate Compliance Complaints	No Corporate Compliance Complaints	No Corporate Compliance Complaints

FY22 Program Performance Indicators
St. Clair County CMH
Joselyn Specialized Adult Foster Care Home

#	Domain (Master #)	Primary Objective	Performance Indicator	Data Collection/Methodology	PI Standard	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1	Effectiveness M-39	Ensure Program Quality	Percentage of new hires within the quarter who have completed: a. Recipient Rights (Initial) b. "REQUIREMENTS"	Program will electronically forward the "Training/Requirement Reporting Form" to the St. Clair County CMH QI Office for every new hire within the reporting quarter. If the 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".	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)	58% (1@64%) (2@55%)	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	58% (1@64%) (2@55%)
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	No Corporate Compliance Complaints	No Corporate Compliance Complaints	No Corporate Compliance Complaints	No Corporate Compliance Complaints	No Corporate Compliance Complaints

FY22 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
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".	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)	18% (1@18%)	No Additional Staff to Report	No Additional Staff to Report	No Additional Staff to Report	18% (1@18%)
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	No Corporate Compliance Complaints	No Corporate Compliance Complaints	No Corporate Compliance Complaints	No Corporate Compliance Complaints	No Corporate Compliance Complaints