



Performance Metrics Report

Fiscal Year 19

Quarter 2 (October 2018-December 2018)



FY 19/Q2 Administration Performance Metrics

Quarter 2 (Oct 2018-Dec. 2018)

Effectiveness Measure-Goal=Financial reports by profit/cost center provided 2 business days after approval by Finance Committee

In Progress

Explanation

Responsibility turned over to Kristy, January still working a couple of issues with new P&L report

Efficiency Measure-Goal=Develop 3 (Three month) operating reserve (median monthly rate FY 18=\$392,000)-3 (three) month operating reserve of \$1,176,000

34.3%

Explanation

\$402,847.69 of \$1,176,00 goal in Money Markets

Service Access Measure -Goal=Reduction of Employee Turnover-Quarterly turnover less than 13%

13.5 %

Explanation

Poor recruitment

Satisfaction Measure-Goal=Maximize engagement and satisfaction of employees-2018 engagement survey results greater than 4.00

4.41

Explanation

Working on delegation of non-integral tasks in order to improve on-time performance and follow thru

Stakeholder Satisfaction Measure-Goal=FY19 stakeholder survey results greater than 4.00

N/A

Explanation-Survey in Development

FY 19/Q2 Behavioral Supports Performance Metrics

Quarter 2 (Oct. 2018-Dec. 2018)

Effectiveness Measure-Goal= Maximize achievement of Behavioral support outcomes-10% increase per quarter in replacement behavior from previous quarter
Not Met

Explanation

FY 19 Q1 random sample of five individuals mean replacement behavior completion = 63%. Same individuals FY19 Q2 replacement behavior completion = 66% a gain of 5%

Efficiency Measure-Goal=Maximize available billable hours-20 billable hours per week
Not Met

Explanation

Average 14 billable hours per week. Training dates negatively impacted the average.

Service Access Measure -Goal=Build relationships to assist with transitions from school to adult services-2 school contacts per quarter
Met

Explanation

Over 10 email correspondence. One IEP meeting attended and one meeting with special education personnel

Satisfaction Measure-Goal=Maximize person centered supports and satisfaction of persons supported enrolled in Behavioral Support Services-Survey Results
Not Met

Explanation

Survey not complete

Stakeholder Satisfaction Measure-
Goal=FY19 stakeholder survey results regarding Behavioral support services greater than 4.00
Not Met

Explanation

Survey not complete

FY 19/Q2 Community Employment Performance Metrics

Quarter 2 (Oct 2018-Dec. 2018)

Effectiveness Measure-Goal:Successful Placements Referrals reach 5th VR cycle by 6 months 180 day placement)-Quarterly 80%

16%

Explanation

3 meet the 5th VR cycle

Efficiency Measure-Goal=Maximize Billable Hours-72% Billable hours per staff monthly

59%

Explanation

Holidays many did not work full month in Nov and Dec

Efficiency Measure-Goal=To Meet or exceed revenue over expenses

Met

Explanation

Total Income \$ 55,608 Total Expense \$ 32,595= \$23,013

Service Access Measure -Goal=Maximize number of people supported in SE Successful referrals from GVRA-5 successful referrals Quarterly

0

Explanation

No Referrals due to VR Staffing issues

Satisfaction Measure-Goal=Maximize engagement and satisfaction of employees-2018 engagement survey results greater than 4.00

0

Explanation

Survey not completed 2nd Q

FY 19/Q2 Community Employment Performance Metrics

Stakeholder Satisfaction Measure-Goal=FY19 stakeholder survey results greater than 4.00

0

Explanation

Survey not completed 2nd Q

FY 19/Q2 Community Living Services (CLS) Performance Metrics

Quarter 2 (Oct 2018-Dec. 2018)

Effectiveness Measure-Goal=50% Percent of Service Plan outcomes achieved.

met

Explanation

80 percent of service outcomes were met

Effectiveness Measure-Goal=To have no more than 10% charting errors in CLS MARS.

not met

Explanation

had 32 percent charting errors, high percentage in December due to hospitalization.

Efficiency Measure-Goal=To Meet or exceed revenue over expenses

not met

Explanation

Have not received payment due to not receiving ARS PA's .

Service Access Measure -Goal=Maximize the number individuals in CLS homes-add one CLS Home before end of year

0

Explanation

Need to build my capacity to support more individuals

Satisfaction Measure-Goal=Maximize engagement and satisfaction of employees-2018 engagement survey results greater than 4.00

3.82

Explanation

Need to bring up the performance base pay percentage, looking at ways to increase Team leaders effectiveness and efficiency in staff development.

FY 19/Q2 Community Living Services (CLS) Performance Metrics

Q11 Satisfaction Measure-Goal=Maximize person centered supports and satisfaction of persons supported-Survey Results

Being developed

Q12 Explanation

Being developed

Q13 Stakeholder Satisfaction Measure-Goal=FY19 stakeholder survey results greater than 4.00

Being Developed

Q14 Explanation

Being developed

FY 19/Q2 Community Support Performance Metrics

Quarter 2 (Oct. 2018-Dec. 2018)

Effectiveness Measure-Goal=70% Percent of Service Plan outcomes achieved.

Met 70%

Explanation

Met

Efficiency Measure-Goal=To Meet or exceed revenue over expenses

Exceeded

Explanation

Total Income\$145,538, Total Expense\$83,111=62,427

Service Access Measure -Goal=Maximize the number individuals supported-Add two individuals per quarter

Partial Met, 1 added

Explanation

One new person added

Satisfaction Measure-Goal=Maximize engagement and satisfaction of employees-2018 engagement survey results greater than 4.00

3.87

Explanation

Communication through staff meetings has increased.

Satisfaction Measure-Goal=Maximize person centered supports and satisfaction of persons supported-Survey Results

No results

Explanation

Live the life you love survey not completed 2nd quarter for results

Stakeholder Satisfaction Measure-Goal=FY19 stakeholder survey results greater than 4.00

See above

Explanation
Survey Not Completed

FY 19/Q2 Group Home Performance Metrics

Quarter 2 (Oct. 2018-Dec. 2018)

Effectiveness Measure-Goal=50% Percent of Service Plan outcomes achieved.

In progress 90% of outcomes achieved.

Explanation

90% of outcomes achieved due to better planning relative to things people enjoy doing.

Effectiveness Measure-Goal=To have no more than 10% charting errors in Group Home MARS.

1st Quarter had 18% charting errors. 2nd Quarter had 24% charting error

Explanation

We had some staff proficient with the use of computer. Other were not as proficient with computer. We also had went from paper MAR verses electronic which reveal bad habit of not signing off medication as they are administered. Dsp staff charting errors were 40%. Nursing staff charting errors were at 60% for 2nd quarter. This includes the addition of a new person supported with complex needs.

Efficiency Measure-Goal=To Meet or exceed revenue over expenses

Combination of all group homes operated at 47,571 revenue over expenses.

Explanation

60% of group homes operated at revenue over expenses. Due to not being at full capacity.

Service Access Measure -Goal=Maximize capacity of homes-95% Occupancy

In progress 78% occupancy for the 2nd Quarter.

Explanation

78% occupancy achieved due to 2 group homes not at full capacity. Reviewing referrals and transitions from the crisis home. Irwin house had vacancy. 20th street 4 bed capacity 3 bed vacancy. Due to 1 person in the crisis home and 2 rooms vacant.

Satisfaction Measure-Goal=Maximize engagement and satisfaction of employees-2018 engagement survey results greater than 4.00

Explanation:Survey needs to be developed.

FY 19/Q2 Group Home Performance Metrics

Q11 Satisfaction Measure-Gol=Maximize person centered supports and satisfaction of persons supported-Survey Results

Survey needs to be developed

Explanation:Survey needs to be developed.

Q13 Stakeholder Satisfaction Measure-Gol=FY19 stakeholder survey results greater than 4.00

Survey needs to be developed

Explanation:Survey needs to be developed.

FY 19/Q2 Host Host Contract Performance Metrics

Quarter 2 (Oct. 2018-Dec. 2018)

Effectiveness Measure-Goal=Maximize Person Centered Services of all persons Supported-Contract Fulfillment
Reviews completed 90% on time quarterly.

Not met

Explanation

30% completed in timeframe listed in HHLSP exceptions. Reformatted form and moved from completing reviews in a separate meeting to completing during home visits to ensure reviews are completed timely.

Effectiveness Measure-Goal=To have no more than 10% charting errors in Host HomeMARS.

Not Met

Explanation

Charting error were at 12% for second quarter which decreased from 20% last quarter. In the month of October 2 HHLSPs had no charting errors. In November and December 3 HHLSPs had no charting errors. Charting errors were consistently the same HHLSPs. Those providers were retrained, monitored, and HHLSP Manager modeled process. The common thread was providers were not creating a quiet space during medication administration or supervision and moved to another task prior to completing charting. HHLSPs who charted incorrectly were penalized. In the month of January HHLSP Manager will complete task analysis of each process, monitor, and demonstrate medication assistance to reduce charting errors.

Efficiency Measure-Goal=To Meet or exceed revenue over expenses

Exceed

Explanation

Revenue was more the expenses.

Service Access Measure -Goal=Maximize capacity-Add Four (4) New HHLSP in FY19

In progress

Explanation

1 new HHLSP is awaiting DCH approval. 1 new HHLSP has obtained DBHDD site inspection approval waiting to obtain DBHDD final approval to proceed to DCH application.

FY 19/Q2 Host Host Contract Performance Metrics

Satisfaction Measure-Goal=Maximize engagement and satisfaction of employees-2018 engagement survey results greater than 4.00

Not Met

Explanation

Need to develop survey.

Satisfaction Measure-Goal=Maximize person centered supports and satisfaction of persons supported-Survey Results

Not met

Explanation

Survey Develop in progress. Once final approval of survey will complete at Pre-ISP meetings. Those who Pre-ISP meeting have been completed in FY19 Qtr. 1 & 2 will be complete during home visits before the end of FY19 Qtr. 3

Stakeholder Satisfaction Measure-Goal=FY19 stakeholder survey results greater than 4.00

Not Met

Explanation

Need survey development.